

'patient experience' have focused on putting the learner into the patient's position and mimicking health conditions [2]. Empathic Simulation (ES) is a novel simulation design which focuses on healthcare students thinking of ways to improve the patient experience whilst a simulated patient (SP) wears an audio-visual headset recording device. This allows for an immersive video-assisted debrief session where students see how they are perceived through the eyes of the patient, promoting self-reflection and behavioural awareness to a higher degree compared to previous techniques [3].

**Methods:** In March 2023, ES was trialled by 36 3rd year medical students during a 'Patient Experience Week' whilst on placement at a District General Hospital. The simulation focused on an SP wanting to self-discharge due to an accumulation of poor experiences during their hospital stay. Students were encouraged to determine and resolve these issues using the resources available to them in a simulation suite. Throughout the simulation, the SP wore a Microsoft HoloLens to record the scenario from their viewpoint. Afterwards, the recording was used to stimulate discussion during an immersive debrief session.

Students provided pre and post-simulation feedback using an online polling software. This included rating their confidence with various scenarios, e.g. discussing with patients who wish to self-discharge the reasoning behind their thoughts. Further feedback was also collected via a follow-up survey.

**Results:** 28/36 students provided feedback at the end of their 'Patient Experience Week'. There was an average of 24% increase in confidence across all scenarios (average rating of 3.1 vs 4.3) and a 16% increase in confidence in the ability to empathize with patients experiencing long-term health conditions (see [Figure 1-A26](#)). In a follow-up survey, 9/10 students believed that they were more empathetic towards patients because of the ES session and learnt more about themselves compared to usual simulation debriefs. Moreover, 10/10 students felt their communication skills had improved following the session.

**Conclusion:** Empathic Simulation may be an effective simulation design to improve empathy and insight into the patient experience as well as situational and self-awareness in healthcare students. Research into the effectiveness of this novel simulation will be explored in the future.

**Ethics statement:** Authors confirm that all relevant ethical standards for research conduct and dissemination have been met. The submitting author confirms that relevant ethical approval was granted, if applicable.

## REFERENCES

1. Bearman, M., Palermo, C., ClaiAllen, NutriDiet, L. & Williams, B. (2015) Learning Empathy Through Simulation: A Systematic Literature Review. *Simulation in Healthcare: The Journal of the Society for Simulation in Healthcare* 10(5), p 308-319
2. Medland, J., Nolan, K. & McDonagh, A. (2020) Raising the Bar: Using Simulation to Advance Staff Competency Regarding the Patient Experience, *Journal for Nurses in Professional Development*, September/October, Volume 36 Number 5, p. 294
3. Zhang, H., Mörelius, E., Goh, S.H.L. & Wang, W. (2019) Effectiveness of Video-Assisted Debriefing in Simulation-Based Health Professions Education: A Systematic Review of Quantitative Evidence. *Nurse Educ.* May/Jun;44(3), E1-E6

## QUALITY

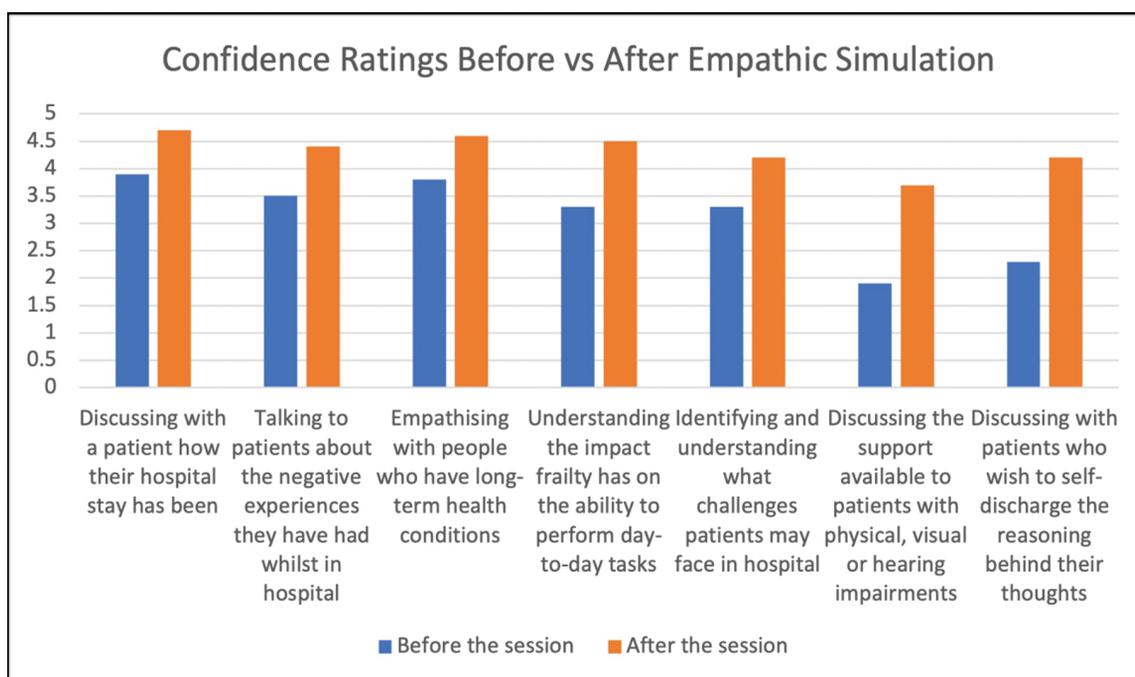
A27

### SUSTAINABLE SIMULATION: FINDINGS FROM AUDITS ASSESSING THE ENVIRONMENTAL IMPACT OF CLINICAL SKILLS EDUCATION AND PERCEPTIONS OF SOLUTIONS FOR AWARENESS AND ACTION

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**Figure 1-A26:** Average confidence ratings reflecting various scenarios were gathered from students before and after the 'Patient Experience Week' in March 2023. This figure demonstrates the average confidence ratings for scenarios related to Empathic Simulation before vs after the session.

**Background and aim:** Simulation and clinical skills teaching are core elements of University programmes to underpin authentic practice learning for healthcare professionals. It is estimated that 1 bag of (non-infected) 'clinical waste' is produced per student group at each skills session for students in one year for the adult nursing programme at one University (504 bags) and increases when other programmes are included in the calculation. As the health sector is one of the largest emitters of carbon dioxide equivalents to the atmosphere [1], embedding environmental sustainability into professional healthcare education works towards the NHS England target of a NetZero health service by 2040 [2].

Waste from teaching sessions includes plastic gloves, aprons, dressing packs, syringes, solution vials and associated outer packaging etc., depending on the skills simulated. Most of this is not clinically infected although it is discarded in this way. Methods for the identification of interventions to reduce waste and procure services to enable recycling and reuse of waste elements are needed to raise awareness of the problem and potential solutions, thereby reducing the carbon footprint of clinical education. The aim of the presentation is to report a collaboration between Universities to increase sustainable practice in skills education through sharing experiences of teaching practice, whilst maintaining the authenticity of educational practice.

**Activity:** Project methods include audits of the quantity and nature of clinical waste from taught sessions to identify waste reduction targets and explore alternative climate-friendly solutions; use of a Climate café to enhance collaboration with relevant stakeholder groups to raise awareness and action; and carbon foot printing analysis to identify points of action and measure change, drawing from the Sustainable quality improvement framework [3].

**Findings:** Clinical waste audit findings will be described highlighting the carbon footprint impact and where sustainable improvements could be made. Key items that could be recycled, reused or managed through different disposal pathways will be identified with lessons for teaching and learning. Climate café qualitative data provide the perspectives of clinical skills teachers and simulation facilitators as well as student representatives. Potential cost savings will be estimated.

**Conclusion:** Environmental sustainability is an emergency that needs prompt attention. The identification of the nature and amount of clinical waste from simulated education aids the strategic application of solutions to reduce, reuse and recycle key resources whilst maintaining the authenticity of clinical learning for students.

**Ethics statement:** Authors confirm that all relevant ethical standards for research conduct and dissemination have been met. The submitting author confirms that relevant ethical approval was granted, if applicable.

## REFERENCES

1. Watts N, Amann M, Arnell N et al. The 2019 report of the Lancet countdown on health and climate change: ensuring the health of a child born today is not defined by a changing climate. *Lancet*. 2019; 394 (10211): 1836-1878. doi:10.1016/S0140-6736 (19)32596-6
2. NHS England and NHS Improvement. Delivering a NetZero National Health Service 2022. Accessed April 4, <https://www.england.nhs.uk/greenernhs/publication/delivering-a-net-zero-national-health-service/>
3. Centre for Sustainable Healthcare The SusQI (Sustainability in Quality Improvement) Programme 2023. Accessed April 4, <https://www.susqi.org/>

## DESIGN

A28

### DEVELOPING AND DELIVERING A TELEPHONE SKILLS SIMULATION TRAINING FOR NON-REGISTERED NHS MENTAL HEALTH CALL-HANDLERS

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**Background and aim:** Registered healthcare professionals undertake a wide range of mental health work, sometimes with little preparation and training [1]. Increasingly non-registered staff take on mental health call-handler roles, having conversations with vulnerable individuals over the phone; these staff often lack the training to effectively communicate with callers. The aim of this initiative was to design and deliver a telephone skills training program for non-registered NHS mental health call-handlers, with the hypothesis that such training would improve their communication skills and overall job performance. Studies have shown that receiving training in having supportive mental health conversations over the phone increases staff confidence and changes their attitudes [2] and has the potential to benefit staff retention.

**Methods:** A mixed-methods approach was used in the design, incorporating both qualitative and quantitative data collection and based on the needs and feedback of the call-handlers themselves. Evidence shows that involving simulated patients (SPs) can be effective in telephone studies [3]; leading us to train experienced SPs in their roles as members of the community phoning the help line. All was face to face, although conducted over the phone with the SP hidden. Active participants, the SP and the observing participants all became involved in the debrief. The content covered active listening, empathy, signposting and options in handling the challenging situations. Developed over a month, the programme was delivered as part of an overall training for their roles.

**Results:** The evaluation of the session indicated significant self-rated confidence in having calls with members of the public. The scenarios increased in intensity, covering topics ranging from bullying, domestic violence, gambling addiction and intent to take life. Qualitative feedback from the call-handlers showed that they felt more confident and prepared in their roles, and were better equipped to handle challenging situations. The involvement of SPs was also found to be authentic and highly beneficial by the call-handlers. Participants requested frequent practice sessions, face to face or online.

**Conclusion:** Investing in providing targeted training and support for non-registered NHS mental health call-handlers, can have a positive impact on their communication skills, overall job performance and likely staff retention. This can ultimately lead to improved quality of care and patient outcomes in the mental health sector. The involvement of SPs can provide a valuable learning experience, both in role and in the debrief, for call-handlers, and help to prepare them for real-life scenarios.