Methods: Reflective pieces completed by MSWs one month in to post, alongside two probing questionnaires, highlighted the demand for communication training. A local Community Theatre, with prior experience of working with migrants, refugees, and vulnerable groups, was contacted. The Community Theatre met with both current and former MSWs to further identify development needs. Subsequently four two-hour workshops, with specific focuses, were designed:

- Session 1: Informal conversation, talking about yourself
- Session 2: Voicing opinions and interpretations, acknowledging mistakes
- Session 3: Talk about yourself, interview practice, body language
- Session 4: Public speaking, dealing with conflict

Workshops consisted mostly of games and small group activities with an element of performance. The programme was evaluated using a feedback form, consisting largely of Likert scale questions, completed after the 4th session.

Results: Communication, social skills or cultural change were highlighted as the biggest challenges by MSWs (64%). Confidence in tasks that involved speaking in front of groups, dealing with conflict, or speaking to relatives was low (13.6-22%). Only 52% of MSWs felt confident speaking to colleagues. The sessions were well received with 100% of respondents reporting both to have enjoyed the sessions and that they would recommend the sessions to other MSWs.

Results showed improvements in confidence, specifically with regards to: conversing with colleagues (94%), informal conversation (87.5%), public speaking (88%), raising concerns (100%) and offering opinions (100%).

Conclusion: This novel locally developed communication training addresses some of the unique learning needs of MSWs and improves communication skills in a range of areas. The programme is being considered for expansion to international nurses and IMGs at NBT.

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.

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EDUCATION

A34	**DESIGNING AND IMPLEMENTING A NATIONAL SIMULATION FACULTY DEVELOPMENT PROGRAMME FOR WALES (SIM FD WALES)**

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Background and aim: Simulation faculty should be trained and competent [1, 2]. A strategic objective of the Health Education and Improvement Wales (HEIW) Simulation team is to provide equitable access to a standardized simulation faculty development programme across Wales.

Methods: A consultation process involving meetings, focussed discussions and webinars with key stakeholders, educators and clinicians from a range of professional backgrounds was carried out. The following priority areas were identified:

- development of a tiered programme supporting a competency-based approach
- to develop educational skills, knowledge and behaviours required to deliver high quality simulation-based education and training (SBET) in safe learning environments
- to promote interprofessional SBET and offer flexible and accessible faculty training opportunities.

A tiered programme framework consisting of 3 standalone courses (essential, advanced and expert) comprising 4 blended learning modules each, was designed collaboratively and informed by the literature [2,3].

Following content mapping and creation by experts, the Essential Course was launched in October 2022. It entails 5 hours of self-directed e-learning followed by a 5-hour facilitated (virtually or face to face) session, fully funded by HEIW.

Advanced Course content is under development, due to commence in March 2024.

Results: Thirty-eight participants completed the essential course between October 2022 and February 2023, $n = 28$ undertaking face to face sessions and $n = 10$ a virtual session. Learners were asked to rate the usefulness of each e-learning module on a Likert scale, with 1 equating to 'not at all' and 5 to 'very much'. The number of participants that evaluated each module and reported them ≥4 is as follows: 'Introduction to simulation' $n = 35/37$ (95%), 'Human factors' $n = 24/26$ (92%), 'Designing and Facilitating Simulation' $n = 23/24$ (96%) and 'Debriefing' $n = 20/20$ (100%) (see Figure 1-A34).
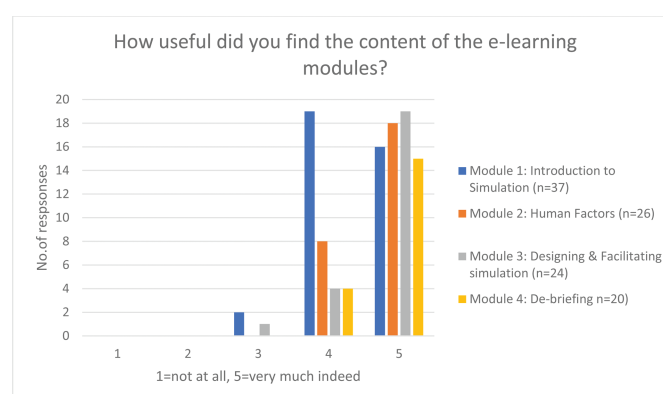
Figure 1-A34: Evaluation of the essential course e-learning modules

Response rate to the evaluation of the face-to-face sessions was 24/28 (86%) and 8/10 (80%) for the virtual session. All responders 32/32 (100%) rated the face to face and virtual sessions ≥4 regarding relevance and usefulness, with 31/32 (97%) agreeing that the learning objectives were met. Common themes identified as 'most useful' were the ability

to practise running a scenario and opportunity to practise debriefing and gain feedback.

Conclusion: The Essential Course of the Sim FD Wales Programme has been well received and evaluated so far. Uptake has been high, with demand outstripping places available. Further evaluation is required to determine the effectiveness and impact of each course and the programme as a whole.

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.

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DESIGN

A35 — SIMULATED UNDERGRADUATE INTERPROFESSIONAL TRAINING WARD – IMPROVING SELF-CONFIDENCE AND ATTITUDES TO INTERPROFESSIONAL WORKING PRIOR TO TRANSITION TO CLINICAL PRACTICE

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Background and aim: Research suggests that interprofessional training wards (ITW) enhance student learning and patient satisfaction [1] but are resource intensive from governance and faculty training points of view. Given NHS pressures, we developed a simulated ITW to meet training needs of healthcare undergraduates and improve attitudes and confidence regarding interprofessional working prior to qualification.

Methods: The session simulated a typical ward day, with nursing handover, ward-round, board-round, communication scenarios, and an acutely deteriorating patient. Final year medical, nursing and physiotherapy students attended, and formed interprofessional teams. After each scenario an interprofessional debrief took place. Students completed the readiness for interprofessional learning scale (RIPLS) [2] pre and post, also providing feedback using Likert scales and qualitative comments.

Results: 35 students participated, all completing RIPLS, and 32 completing Likert and qualitative feedback. Despite the small dataset, we demonstrated significant change (p<0.05) in 9 of the RIPLS statements, indicating a positive change in attitudes toward interprofessional learning.

All students felt the session met their learning requirements. Likert feedback across professions demonstrated increased understanding and valuing of multi-disciplinary teams (MDT)
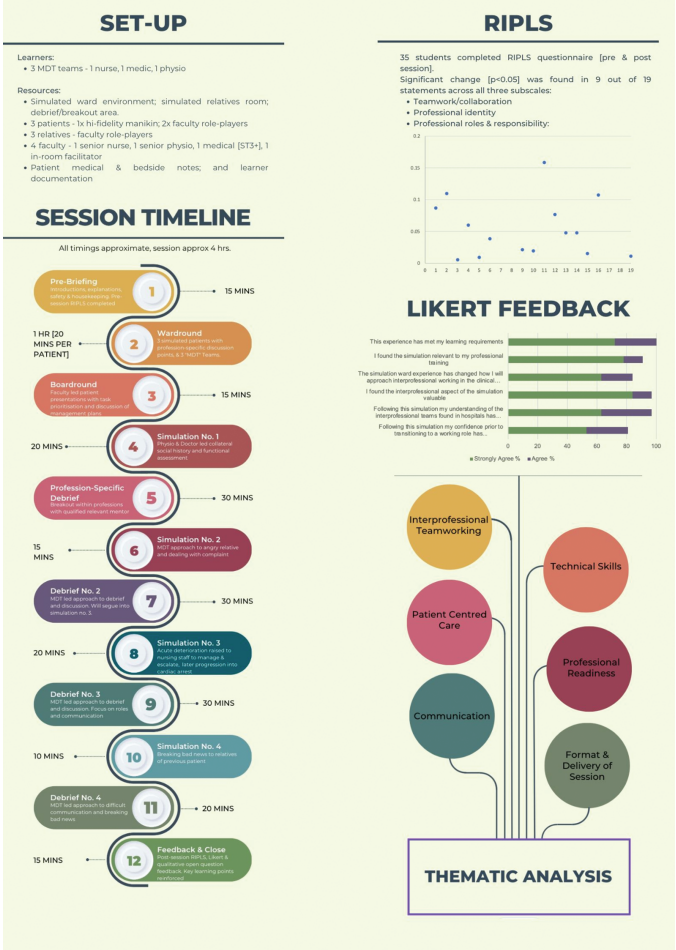

Figure 1-A35: Summary of infographic for SUIT ward

(97%); appreciation of the relevance of multi-disciplinary working to their training (91%); belief that it would change their approach to MDT work (84%); and increased confidence prior to transitioning to a working role (81%). Profession-specific breakdown demonstrated highest confidence and increased understanding for physiotherapists, however they (alongside nurses) found the content more challenging. Thematic analysis highlighted several key themes: Interprofessional teamworking, patient-centred care, communication, professional readiness, technical skills, and satisfaction with session format and delivery. Interprofessional teamworking, patient-centred care, and communication bridged the categories of 'valued aspects' and 'take-home messages', demonstrating uptake of key learning points, and reinforcing the changes in the RIPLS data. While the feedback regarding the 'suggested improvements' category reiterated the challenges of catering to all learners, this category's comments were overwhelmingly positive, with appreciation and importance of this learning event appearing frequently. One wrote, 'I feel incredibly lucky to have had the opportunity to take part… and strongly believe every single healthcare student should have the chance to attend a similar session'.

Conclusion: Our pilot program suggests that using simulated ITWs offers multiple benefits to students. The simulated ITW environment improved confidence and understanding of interprofessional roles in clinical practice; and was valuable and relevant to learners with early signs of improving attitudes towards interprofessional learning. A full study is needed to fully assess the learning benefits and cost-effectiveness of simulated ITW environments.