

IPE PLACEMENTS ABSTRACT

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TITLE: IPE FALLS SIMULATION

BACKGROUND

The impetus for the development of a level 5 (year 2) interprofessional falls simulation arose from the need to increase opportunities for interprofessional simulation in undergraduate healthcare programmes (HEIW, 2020). Interprofessional simulation improves team performance and communication skills (Blackmore et al., 2020). Every year in Wales between 230,000 and 460,000 older people fall (Age Cymru, 2021). The WHO (2021) state older women and younger children are especially prone to falls and increased injury severity. Falls was identified as a common curricular component for all healthcare professions.

AIM

To present the key evaluation findings from the interprofessional falls simulation.

METHOD

A one hour falls simulation scenario including a facilitator and student guide was designed by an interprofessional working group with champions from healthcare professions of the targeted learners (INASCL 2021). Staff training was delivered to support the facilitation and debrief. Sessions were co-facilitated and debriefed by two facilitators from different professions (Kumar et al., 2021). A student evaluation form was developed using JISC surveys incorporating the SPICE-R tool (Zorek et al. 2014) for IPE. A separate online evaluation form was created and completed by facilitators post session.

RESULTS

The falls scenario was successfully implemented and evaluated across seven undergraduate programmes between September-November 2023. Of the 306 students that attended, n= 210 (69%) completed the evaluation survey. Ninety percent agreed/strongly agreed the session was relevant to their practice and enhanced their future ability to work on an interprofessional team and 86%-91% that it was useful, well facilitated and met the learning objectives. Qualitative feedback regarding what was most useful included, 'practicing a real-life scenario and getting feedback', and understanding 'how to work as a team with other health care professionals when fall occurs' and 'what each role does'. The least useful aspects included 'having it only for 1 hour'. Facilitator feedback included; 'It was a good IPE for staff too!' and 'good to work with another member of staff from a different profession as we each had valuable insights we could add'.

CONCLUSION

Students benefitted from this experience and enjoyed working with other health professionals. Importantly, it introduced students to interprofessional team working in a simulated environment pre-registration. The session will be lengthened in response to the evaluation feedback. Facilitators felt the co-debrief was valuable in role modelling interprofessional working. In conclusion, it was a successful first run of this simulation for healthcare students.

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