

IN PRACTICE

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**DEVELOPMENT OF A SIMULATION-BASED
PAEDIATRIC EDUCATION COURSE IN A
CHILDREN'S EMERGENCY DEPARTMENT**

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[10.54531/YUKN3000](#)

Introduction: Our busy children's emergency department sees a high turnover of Resident Doctors from a range of training pathways, many of whom have had limited exposure to paediatrics in their careers to date. In addition, there has been a growing nursing team over recent years and the department hosts a number of student nurses from local universities. Simulation has an ever-growing presence in many aspects of medical education, providing a safe environment for learners to build confidence and competence, particularly in high-stakes emergency scenarios [1]. Short, low fidelity simulation sessions were already regularly used in our department and we therefore elected to build on this premise to create a bespoke simulation-based study day aimed at junior colleagues to further enhance clinical practice.

Methods: With support from our simulation and education nurses, we created a simulation study day aimed primarily at junior medical and nursing staff. We aimed to cover a range of paediatric emergencies with medical and trauma

presentations across a range of ages. Scenarios were either written specifically for the course or adapted from other locally used resources. The sessions were delivered in the hospital's dedicated simulation suite using high fidelity child and infant simulators (Gaumard: Paediatric HAL and Super TORY). The scenarios can also be easily adapted to use lower fidelity mannequins in other centres. We ran the study day twice per six-month medical rotation from March 2024–March 2025 in order to maximise attendance opportunities. The course was adapted in response to feedback after each iteration.

Results: We have had approximately 25 candidates attend the course thus far with questionnaires completed by 22 learners. The responses reflect the mix of attendees: 8 were from doctors working at 'Senior House Officer' level; 8 nurses (Band 5 and above); 3 healthcare assistants/associate practitioners (Band 4 and below); and 3 student nurses. Feedback was overwhelmingly positive: 20/22 (90.9%) reported their confidence improved following the course. Qualitative feedback identified key themes including a supportive learning environment, effective debriefs and a good range of scenarios covered.

Discussion: We have been pleased with the reception of our new course and have taken steps to ensure the project's longevity by ensuring permanent senior staff members in the department are involved in its ongoing organisation and delivery. We also plan to make our resources available as a free package for use in other emergency departments in the region or further afield.

Ethics Statement: As the submitting author, I can confirm that all relevant ethical standards of research and dissemination have been met. Additionally, I can confirm that the necessary ethical approval has been obtained, where applicable.

REFERENCES

1. Clerihew L, Rowney D, Ker J. Simulation in paediatric training. *Archives of Disease in Childhood - Education and Practice* 2016;101:8–14.

Acknowledgements/Funding Declaration: We would like to thank the following colleagues for their support with the project: Ehmendip Dulay, Marvi Kesinro & Aidan Wilson.