Should High Fidelity Simulation be part of the National Physician Associate (PA) Curriculum?

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Background

- Evidence shows that high fidelity simulation enables the safe development of technical and non-technical skills [1,2]
- High fidelity simulation is not currently included within the national PA curriculum[3], so student exposure to simulation is limited.
- We created a 'sim' curriculum focusing on the assessment and management of acutely ill patients.

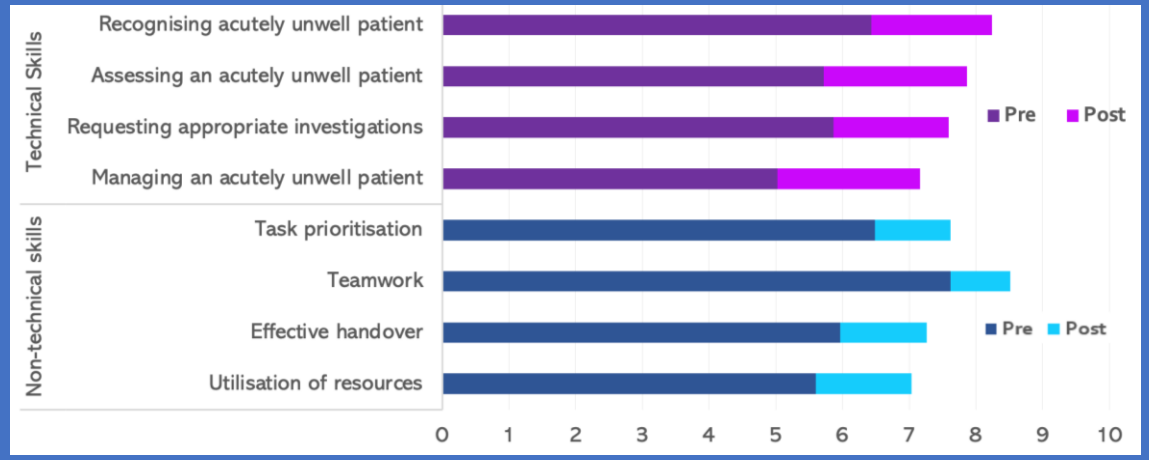
Aim

- To determine whether high fidelity simulation improved PA students' confidence in technical and non-technical skills.

Methods

- Over 18 months, 11 sessions were held for PA students in 1st and 2nd year from three universities.
- Each session involved three or four scenarios based on common presenting complaints.
- Students completed pre- and post- simulation questionnaires comprising of 10-point Likert scales to record perceptions of their abilities and their assessment of session quality.
- Students could also provide feedback in the form of free text boxes.
- The data was collated and analysed on Microsoft Excel.

Results



Of those who answered the question,

100%

requested future sessions

"(Simulation is an) amazing, realistic situation forcing me to take responsibility and put knowledge to the test, debrief about what went well and what didn't and get closure on a patients' journey"

- 56 questionnaires were reviewed
- 8 students had previous experience of high fidelity simulation
- Students perceived their ability at technical skills to be an average of 5.8/10 prior to the session and 7.7/10 following the session – a difference of 33%.
- For non-technical skills, pre- and post- simulation scores were 6.6 out of 10 and 7.8 respectively - an 18% increase.

9.4/10 average score for 'simulation sessions were interesting'

9.5/10 average score for 'value of debrief'.

9.3/10 average score for 'appropriate level of content'

Conclusion

This data shows that high fidelity simulation improves PA student confidence in assessing and managing the acutely unwell patient. It also indicates that students perceived these sessions to be of a high quality. Our Trust will continue to provide simulation for PA students, aiming to equip them with the skills to provide excellent clinical care post qualification. By continuing to collect data, we hope to build a body of evidence that encourages the integration of high fidelity simulation into the national PA curriculum.

References

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