



Exploring an Innovative approach to Preventing Skills Decay in Remote and Rural Communities

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Preventing Skills Decay in Remote and Rural Communities

At the end of the workshop participants will be able to:

- Identify problems for health care practitioners in preventing skills decay in remote and rural practices
- Participate in use of "rip and mix" tool to develop potential innovative solutions

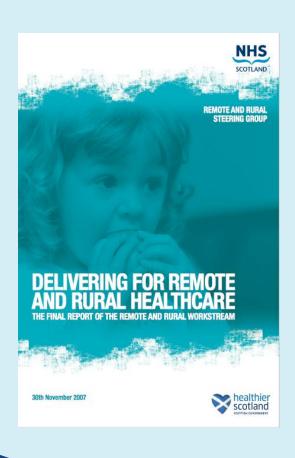
Plan of Workshop



- Welcome, Plan and Background Context
- Small group work 1
 - Identifying challenges for health care practitioners in preventing skill decay in remote and rural practice
- Small group work 2
 - Rip and Mix approach to developing solutions
- Feedback from groups

Remote and Rural Practice





- Suicide rates
- Incidence of alcohol related disease
- Accidents
- Palliative care
- Seasonal population changes



What is skill decay?

"Loss or deterioration of trained or acquired skills or knowledge after periods of non-use"

Arthur W., Bennett W., Factors that influence skill decay and retention Human Performance 1998, 11 (1) 57-101

Influences on Skill Decay



Major Factors

- Degree of overlearning
- Task characteristics
- Length of retention interval
- Methods of testing
- Conditions of retrieval
- Instructional strategies

Skill Decay and Over-Learning



- Role of Deliberate Practice
 - Principles of acquisition of expertise
 - Learner engagement in
 - Repetitive performance
 - Rigorous skills assessment
 - Specific feedback
 - Enhanced skills performance

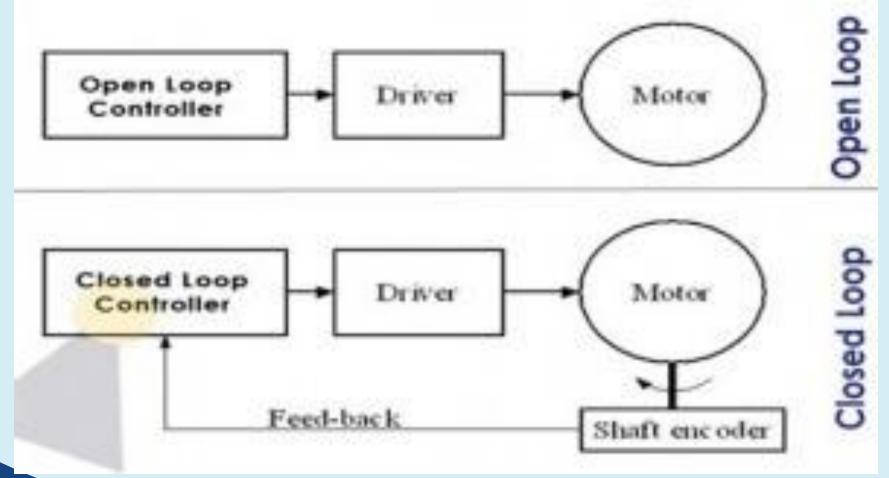
Ericsson 2004, Issenberg 2005,





Skill Decay Task Characteristics





Skill Decay Task Characteristics





VS



Cognitive skills

Physical Skills

Skill Decay Task Characteristics





VS



Prevention of Skill Decay



- Cognitive diagnostic skills
 - (Weaver, Newman-Toker, Rosen 2012)
- Refresher interventions (RI)
 - (Kluge and Frank 2014)
- Role of symbolic rehearsal and retentivity
 - (Kluge, Frank, Maafi, Kuzmanovska 2016)
- Spaced learning
 - (Price, Kerfoot 2015)

Benefits of Simulation in Prevention of Skill Decay



Benefits to Patients

- Risks of harm to patients avoided
- Undesired interference is reduced

Benefits to Learners

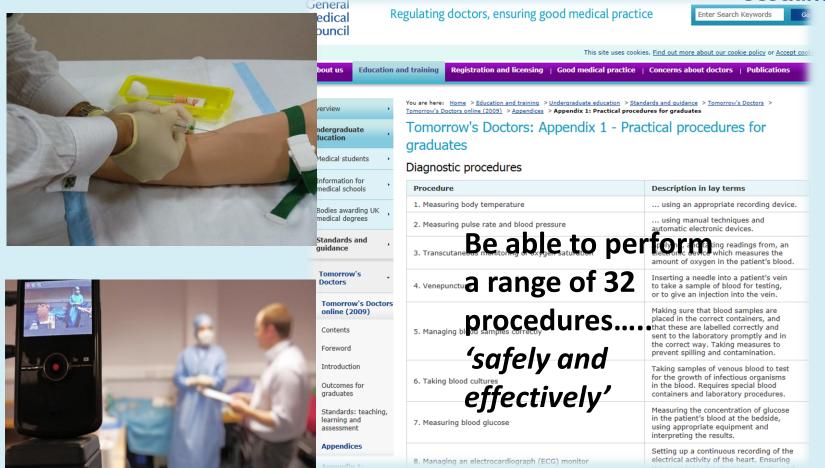
- Skills can be practised repeatedly (simple to complex)
- Training can be tailored to individuals and teams
- Can provide effective feedback to individuals and teams and organisations

Benefits to Health Care Organisations

- Tasks/scenarios can be created to demand and aligned to policy
- Retention and accuracy are increased
- Provide "pre-trained" novice
- Transfer of training from classroom to real situation is enhanced
- Systems redesign
- Standards against which to evaluate performance and diagnose educational needs are enhanced

Prevention of Skill Decay





McLeod et al 2014

BASICS Scotland Tele-education – Skills Training







Recent Analysis



- < 50% do not take part in live sessions
 - Due to timing
- Course uptake is much greater than on-line course by a factor of 50
- Accessing recordings
 - average of 1.5 accesses per recording
 - 58% access after 7pm.

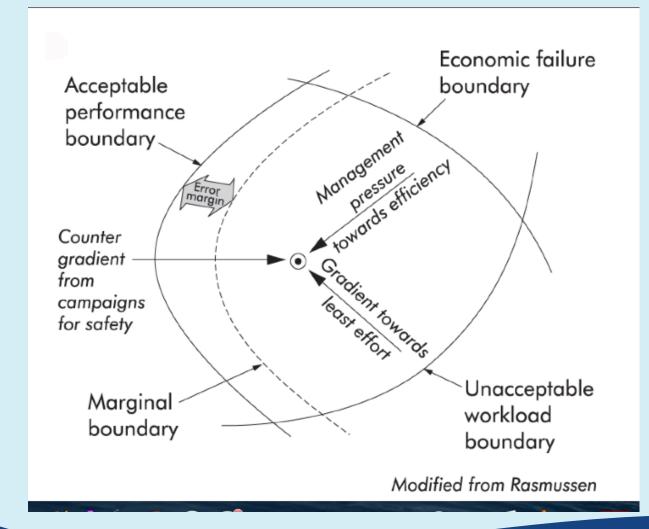
Results & Benefits



- 775 Places since 2011
- 49 Skills
- 50 + Sandpiper Bag Checks
- 2 nights accommodation, 2 days locum, travel
 - = Saving £920,000









Prevention of Skill Decay in Remote and Rural Setting







	Figures based on comevaluation forms	pleted	2010	2011	2012	2013	2014
	Total Number of Evalu Forms Completed	ation	498	442	150	276	452
	Allied Health Profession	nals	1%	6%	8%	6%	4%
	Community		7%	17%	9%	17%	21%
	Dentistry		4%	3%	0%	3%	1%
S	Emergency Services		14%	7%	10%	7%	5%
	G eneral Practitioners		5%	2%	1%	2%	7%
	Healthcare Science		0%	0%	0%	0%	0%
	Medical		4%	3%	0%	3%	5%
	Nursing & Midwifery		40%	31%	39%	31%	25%
	Information Not Compl	eted	25%	31%	33%	31%	32%



Key Challenges to Preventing Skills Decay in Remote and Rural Settings

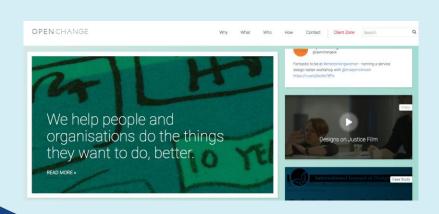


- Frequency of visits of mobile unit
- Coordinating initiatives
- Release of trainers to develop and deliver a programme of training
- Release of health professionals to attend training
- Health professionals attending training in own time due to financial constraints on budgets





- Apply lateral thinking to problem areas in your professional practice
- Enables your team to think about how existing issues can be transformed



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Rip and Mix Method



- Analyse own problem/challenge
- Take pleasurable or successful product/service
- Analyse
 - Its function
 - The stakeholders
 - How it makes users feel
- Develop new product service

	Pleasurable service /product	Painful product/service	New product or service
Product or service	Bingo	BLS Skill decay on hillside	Bingo BLS in the wilds App
Function	First to complete a line of numbers to win a prize	CPR performance to guidelines/contacting help	Provide algorithm based on location/available communication /resources. Create own winning line Algorithm
Stakeholders	Caller of numbers players in game	Patient /practitioner/SAS	All HCPS in R and R and public
Infrastructure/ resources	Bingo Cards/pens/ audio system /venue/prizes	No access to bag or face mask No access to defib / limited or no communication signal	App algorithm Experts in IT education BLS and R and R to write and update
Physical form or steps/components of service	Advertising/ multiple quick games	Physical resilience to carry out prolonged CPR	Linked to BLS training and R and R training
Emotional	Enthusiasm feeing of	Fear of failure and of	Builds confidence

Small Group Work 1



- What additional challenges/problems do you face in your practice in preventing skills decay?
- Analyse this problem using the headings provided in column 2 of the "Rip and Mix" tool



Plan of Workshop



- Welcome, Plan and Background Context
- Small group work 1
 - Identifying any additional challenges for health care practitioners in preventing skill decay
 - Complete Column 2 of rip and mix sheet
- Small group work 2
 - "Rip and mix" approach to developing solutions Columns 1+3
- Feedback from groups

