

An Emergency Medicine Simulation Strategy for Scotland

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CLINICAL PRESSURES

GEOGRAPHICAL VARIATION

THE CHALLENGES

Identified by training leads and historical trainee survey data (2)

Reduction in "downtime" meaning fewer useful shopfloor, small group or 1:1 teaching opportunities

Difficult to provide equitable opportunities to all Scottish HSTs

THE SOLUTION

A national simulaton strategy consisting of five skills days. Sim-based mastery learning (SBML) in combination with cadaveric work, immersive simulation and skills workshops. Delivered by skilled EM and specialty faculty





● Lateral Canthotomy **SBML** ● Major Facial Haemorrhage ●

• Facial Nerve Blocks Cadaveric Workshop •

 \bullet Emergency Front of Neck Access **SBML** \bullet Mandible Reduction Workshop \bullet

OBSTETRIC AND NEONATAL EMERGENCIES ST4-5

ullet Neonatal Resuscitation Workshop ullet Precipitous Labour Workshop ullet

● Resuscitative Hysterotomy **SBML** ● Obstetric Haemorrhage ●



for

Scotland

CADAVERIC RESUSCITATIVE THORACOTOMY

Expert-led Cadaveric Resuscitative Thoracotomy Workshop
Cadaveric Resuscitative Thoracotomy SBML

Learning opportunities maximised by use of cadavars for workshop then closing thorax for SBML session.

Workshop led by experienced cardiothoracic surgeons.

'Maybe unrivalled opportunity to practice' 'Multidisciplinary faculty very useful…'

oyal College of Emergency Medicine Curriculum 2021. (2021). https://rcem.ac.uk/wp-content/uploads/2023/03/RCEM_Curriculum_2021_Master-Version-1.5-2023.pdf EMTA State of Training Report 2023. (2023) https://www.emta.co.uk/_files/ugd/1e1e19_6680cec6e4ae434b904105ea12fac2a1.pdf