The use of a high-fidelity simulation-based course to prepare for the transition to a medical registrar

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Aims

To create, deliver and evaluate a 1-day medical registrar introductory course, 'Med Reg Ready', to CT2s and ST3s, which includes high-fidelity simulations as well as more traditional small-group workshops and lectures, to prepare them for a much more senior role.

Methods

Participants were asked to fill out a pre-course questionnaire; 67% (n=18) stated that they were not ready to become a medical registrar. Participants were CT2s and ST3s (n=33) from six differing trusts who voluntarily signed up to the course. The course has been done four times thus far in two differing sites with changes in faculty. The course consisted of traditional lectures, small-group workshops and simulation-based sessions. The simulation scenarios aimed to challenge the candidate clinically, as well as from a human factors perspective. Each candidate participated in one scenario that was projected to a different room for the rest of the cohort to observe. Debrief was aimed to be collaborative, with the primary focus on human factor elements as well as a review of the clinical guidelines.

Results

Of the 33 participants, 91% (n=30) 'strongly agreed' or 'agreed' that they felt more prepared about starting as a medical registrar after the completing the course. Only 6% (n=2) answered 'neutral' to this question and were both from the same course date. 91% (n=30) scored the simulation sessions either 4 or 5 out of 5, where 5 was equivalent to excellent. From this group, 73% (n=22) scored it 5 out of 5 and 27% (n=8) scored it 4 out of 5. Participants were also asked to state which part of the course they found the most useful; 58% (n=19) stated that the simulation sessions were the most the most useful. 70% (n=23) 'strongly agreed' or 'agreed' that simulation sessions increased their clinical knowledge of the subject area. 82% (n=27) either 'strongly agreed' or 'agreed' that the simulation session increased their awareness of the importance of human factors in managing a medical emergency.

Conclusions

Simulation-based medical education has a vital role in the training of any physician. The course has shown that it has a pivotal role in the transition from CT2 to a medical registrar; it has helped to prepare CT2s that have completed the course. There is potential for further development with continuous simulations through medical training. The course will now be delivered by three different sites, in hopes of extending it to all trusts within the deanery.

Conflict of interest statement

None.

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