

# Use of Simulation Based Education to prepare an Inpatient Psychiatric Unit for the Covid-19 pandemic

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## INTRODUCTION

The outbreak of a novel coronavirus has impacted all healthcare settings across the world. Psychiatry facilities had to adapt and change in order to protect patients, staff and services. Within SHSCT it was acknowledged that significant and rapid changes to standard operating procedures (SOPs) were required within the psychiatric inpatient unit. The aim of this project was to produce SOPs for the management of COVID-19 in an acute psychiatric unit and engage staff in simulation based education to improve both patient and staff safety.

## METHOD

Sim sessions were led by the authors and were designed using the NISHFN model of Simulation Based Education. Sessions were initially run once per day, increasing to twice per day over a period of 3 weeks for 3 scenarios: New onset of possible Covid-19 symptoms, management of an acutely unwell Covid-19 patient and management of a palliative Covid-19 patient.



Phase 1 aim to refine SOP, identify latent safety threats and equipment issues.

**Issues identified:**  
Broken thermometers  
Multiple runs needed for equipment  
Donning and doffing technique variable

Phase 2 aim to familiarise staff with SOP, reduce variation, and manage anxiety

**Solutions:**  
Use Tempadots  
“Covid Box” developed and need for “runner”  
Step by step guides in donning/doffing rooms

## FEEDBACK

Survey Monkey sent to all staff, 16 responses from medical and nursing staff.



“Sessions reinforced staff safety throughout” “Excellent way to help...prepare”

Concerns raised about social distancing reduced by expanding to all wards and using ECT suite with small numbers.

## DISCUSSION

Simulations are a useful way to test new care pathways and can identify latent safety threats, engage staff in improvement and provide a forum for raising concerns and managing anxiety. Following the success of these sessions the SOPs were amended to extend the simulation sessions to the associated dementia assessment unit. Additional sessions were offered out of hours to ensure accessibility for night staff.