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78 SIMULATION INTEGRATING DELIBERATE PRACTICE METHOD FOR DEVELOPING ASSESORS OF COMPETENCE

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Background: In response to COVID-19, our organization expanded the critical care beds capacity; however, the number of critical care nurses was insufficient to meet expansion demands. Therefore, non-critical care nurses were deployed to COVID-19 critical care units. The deployed nurses lacked experience and training in critical care. To ensure patient safety, the nurses were assigned to assessors who evaluated their fitness to practice after receiving upskilling training through simulation-based education (SBE). However, due to the massive expansion and rapid deployment process, there was a shortage of competency assessors, highlighting an urgent need to use SBE to develop more assessors. We developed additional competency assessors through simulation embedding deliberate practice and rigorous assessment. Deliberate practice in simulation is described as progressive learning, which includes repetitive performance and rigorous assessment [1].
Aim: The aim of the study was to explore the effectiveness of simulation embedding deliberate practice in developing nurse competency assessors.
Method: Eleven assessor candidates were asked to perform competency assessments under simulated conditions. During the simulation, simulated participant (SP) roles were assigned as a bedside nurse and patient relative; the patient was a high-fidelity patient simulator. The assessor candidates were asked to perform a competency assessment of the bedside nurse who should perform the required critical care skills on the patient in the presence of the patient's relative. The candidates used a valid observation rubric to complete the assessment. Using deliberate practice strategies, after each competency assessment, a debriefing session was conducted in which the SPs provided constructive feedback on the assessor's performance. The assessor repeated the competency assessment under the same simulation conditions and attended debriefing sessions until they mastered the competency assessment process. Post simulation evaluation collected data to evaluate the candidates' perception of the training.
Results: Eleven nurses completed the simulation developmental programme and were assessed as competent to become assessors. The questionnaire findings revealed that all nurses perceived themselves as competent assessors; however, 90% reported the need for frequent exposure to the competency assessment process over time, in the clinical setting, to enhance their competence and confidence levels.
Implications for practice: The hybrid simulation modality of SP and patient simulator embedding deliberate practice method was deemed to be an effective fast track method to develop competency assessors. However, practice of competency assessment in real clinical settings is essential to confirm competence.

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109 PERCEPTIONS OF VIRTUAL SIMULATIONS BY INTER-PROFESSIONAL SIMULATION FACILITATORS

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Background: The COVID-19 pandemic has necessitated pedagogical change with many events virtual or hybrid in nature. Simulation events are particularly affected due to their hands-on quality. In addition, requirement for virtual facilitators may be increased compared with in-person counterparts. Virtual simulation education must be as high quality as in-person efforts and facilitator training is key. Some principles of virtual facilitation differ from in-person, for example, in relation to debriefing [1]. Effective education should be tailored to address these differences.
Aim: The aim of the study was to deliver virtual facilitator education addressing the format, objectives, expectations and strategies for virtual IP simulations.
Method: The traditional in-person Facilitator Training and Inter-professional Education (IPE) Event Training Design course our university-affiliated program delivers was adapted based on a local needs assessment to the virtual Facilitating Virtual Simulations Crash Course. This was delivered as required as small-group Zoom-based teaching, outlining educational theory, practice and principles of virtual simulation facilitation.
Results: Sixteen virtual inter-professional simulations have been delivered for students in 19 professions within our Office of IPE since September 2020 with 33 inter-professional facilitators from 4 institutions. To determine the efficacy of our novel virtual facilitation, training facilitators were surveyed. The majority had facilitated one to five simulations (in-person 58%, virtual 70%). In addition to the Office of IPE training, 30% of facilitators had received external education on in-person simulation facilitation compared with 6% for virtual facilitation. The majority of facilitators strongly agreed/agreed that they were as effective a facilitator in virtual simulations (80%), as confident facilitating virtually (70%), as psychologically safe in virtual debriefings (75%), and that virtual simulations will continue in their practice after the pandemic (100%). Most (95%) facilitators strongly agreed/agreed that students were as engaged with virtual simulations as with in-person and 80% felt virtual simulations were a good learning experience for students. The majority (88%) of facilitators strongly agreed/agreed that the virtual crash course provided the knowledge and practice to help them effectively facilitate virtually, and 75% strongly agreed/agreed that the crash course made them appreciate and foster IP relationships in their daily work. These results are comparable to evaluation of in-person training delivered before the pandemic.
Implications for practice: Virtual simulation events require specific facilitation strategies, and virtual education is useful to improve the knowledge and confidence of facilitators. Facilitators value the virtual simulation experience for