

Structured Education for Key Practical Skills in the Emergency Department

BACKGROUND

There are numerous practical procedures that are required to be completed by **all staff groups** in the Emergency Department. We also have procedures that are **time critical** but infrequently carried out.

While some staff members were more confident than others, it was felt that a departmental training programme would allow all staff to **increase their level of competence** regardless of the procedure.

AIMS

To provide a bespoke **bookable training package** that will allow staff to target their learning needs and **increase confidence** in carrying out these procedures and skills.



METHODOLOGY

We developed a list of key procedures for the Emergency Department that have been highlighted; either from the DATIX system, or directly from members of staff. We then **filmed the procedures** using best practice and local guidelines.

These **videos were freely distributed** to staff via our medical education website #EM3, and through social media (YouTube, Twitter and Facebook). We have started to introduce a teaching program where staff have a **bookable hands-on teaching** opportunity.

Staff will be able to book into sessions through the #EM3 website, which are dedicated to teaching these procedures.

METHODOLOGY

The sessions will be delivered in our **in situ simulation bay** by the Education team. Staff will have to opportunity to be reassessed and refreshed on these skills by booking into future sessions.

RESULTS

While we are still implementing the project, we have released a number of videos that are **freely accessible**. The videos are being used for staff induction and study days. **Staff feedback has been favourable** with many staff feeling more confident in completing key procedures.



CONCLUSIONS

The next stage is setting up the bookable aspect of the project, and getting **staff to engage** with that process. This project will require time to review if this method of education is accessible to all staff, and if it is useful in **retaining skills** taught. If this method is effective for training infrequent skills then it will be a **cost effective** method for improving patient safety.

