nurses are not always well prepared for it and can present a lack of knowledge and skills. Simulation could be an effective pedagogical method for improving these skills.

Methods: This randomised controlled trial is aimed at assessing the impact of a high-fidelity simulation-based learning in trauma management on self-efficacy, knowledge and initial assessment skills. Last year, nursing students were randomised to a training-group (TG, n = 25) or to a waiting-list-group (WLG, n = 22). TG received a pre-briefing with two prehospital trauma assessment videos, followed by a 2-hour high-fidelity simulation. WLG participated in the usual course implying a 1-hour theoretical course and a 1-hour skills lab. Before (T1) and after (T2) training, nursing students were assessed with questionnaires and a prehospital trauma high-fidelity simulation. Their skills during simulation were rated with the National Registry of Emergency Medical Technicians (NREMT) trauma patient assessment checklist. Questionnaires were used to assess knowledge, self-efficacy and self-reported stress.

Results: Repeated measures ANOVA revealed a difference of evolution from groups over the time on prehospital assessment skills (P < 0.001), self-efficacy (P = 0.001) and knowledge (P = 0.03). TG improved skills by 248% whereas WLG improved these by only 68%.

Conclusions: A short simulation-based learning has the potential to significantly improve pre-hospital assessment skills. These results advocate the interest of such training in nursing curriculum.

Keywords: simulation-based learning; high-fidelity; trauma-patients; prehospital assessment

A20 - European Project SimuCarePro-CRM: simulation in healthcare and crisis resource management to increase the efficiency of multidisciplinary teams in initial training

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Archives of Public Health 2019, 77(Suppl 1):A20

Background: In Europe, 8 to 12% of patients suffer adverse events, 70% of which have a non-technical origin (diagnosis error, inefficient communication, etc.). Consequences of those communication errors can be a worsening clinical state, appearance or worsening of irreversible sequela, a longer stay at the hospital, etc. International organisations recommend developing in healthcare professionals’ initial training non-technical skills, gathered under the term “Crisis Resource Management” (CRM).

Methods: SimuCarePro-CRM is an Erasmus+ project led by Helmo Paramedical Department, and funded by the European Union gathering training organisations from Belgium, France, Portugal and Romania. It is aimed at developing a European training program for non-technical skills addressed to medicine and nursing care students. Two educational methods will be used: e-learning and clinical simulation. The project will last for two years and will include six steps: 1) current situation of the concept of CRM and CRM training; 2) development of an e-learning platform; 3) creation of an e-learning-based training module; 4) production and validation of CRM-focused scenarios; 5) implementation of the training activity and 6) evaluation and formulation of recommendations.

Results: A digital and interactive theoretical training in CRM will be freely accessible to teachers, students and healthcare professionals. The simulation scenarios specific to each CRM component will be available in open access. The added value of multidisciplinary CRM learning will be tested using evaluation grids for non-technical skills and satisfaction questionnaires submitted to students from four countries.

Conclusions: This innovative European project aims to develop and implement a CRM training. It should help improve future healthcare professionals’ skills and, eventually, patients’ safety. The efficiency of the project will be monitored by self-efficacy and satisfaction questionnaires as well as competency assessment.

Keywords: CRM, training, skills

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