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comprehensive virtual presentation, brief virtual report, or either

## **BEST PRACTICES**

# Enhancing High Risk Procedural Skills Training through Active Learning, Emerging Technology & Simulation

#### **Purpose / Problem Statement**

The educational series integrates evidence-based procedure training with a review of applicable anatomy to fit a variety of learners, promote competency and improve confidence by embracing active learning principles, emerging technologies, and simulation.

#### Approach

Each session includes a didactic, skills workshop, and simulation experience. An evidence-based didactic covering the anatomy and procedure ensures learners begin with a similar foundation. Surgical donor skill stations are integrated with a variety of modalities for reviewing related anatomy (VR, AR, prosection). Skills workshops provide a low stress environment for immediate feedback with a competency rating form. Various modalities of high-fidelity simulation and debriefing provide a clear understanding of actions and the opportunity for reflection to enhance future clinical performance. Pre- and post-surveys assess perceived confidence, experience and ability to perform the procedure. Need-based sessions delivered include lumbar puncture, central line cannulation, airway management, paracentesis, thoracentesis, and upper extremity, knee, and hip injections.

### **Findings**

All participants demonstrated competency. Surveys show participants found the simulation valid and transferable to patient care, felt more prepared and confident to perform the skill, and preferred learning through this teaching model.

#### **Discussion**

Surgical donor skill stations were successfully integrated with anatomical resources and simulation to provide a learning environment well reviewed by learners that improved their perceived confidence and ability to perform the procedure.

## **Barriers / Facilitations**

Baseline levels were not established with the competency checklist. Future research includes a planned longitudinal study with Family Medicine Residents to show an improvement in competency from baseline.

Impact/Relevance to the advancement of the field of CME/CPD