THE NIGHTMARES COURSE AT QUEEN’S UNIVERSITY: A MULTIDISCIPLINARY SIMULATION-BASED CURRICULUM FOR TRAINING AND ASSESSMENT OF COMPETENCE IN RESUSCITATION.

Reference to paper:

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Description of Innovation:
The Nightmares Course at Queen’s University is a novel, competency-based curriculum in resuscitation medicine that employs distributed and deliberate practice using high-fidelity simulation over a six-month period. We provide frequent formative feedback as well as a summative assessment. A remediation period is built into the course for residents not meeting our competency threshold.

The Entrustable Professional Activity (EPA) that the course is designed to teach and assess is “recognizes an acutely unwell floor patient, calls for appropriate help, and initiates a basic assessment and management plan”. This EPA is common to junior postgraduate trainees from several specialties.
The Course runs from August until December and is offered to residents at the Foundations of Discipline level of training (PGY-1). Currently, 42 residents from Internal Medicine, Orthopedic Surgery, General Surgery, Anesthesiology, Obstetrics and Gynecology, Urology, Ophthalmology, and Neurology participate in the course. Residents self-schedule using an online sign-up sheet for one session every month. Sessions are taught by attending physicians from Emergency Medicine, Internal Medicine, Critical Care, General Surgery, and Anesthesiology. Each session involves three simulated cases that highlight a common “floor call” for an acutely unwell patient (ie. “altered level of consciousness” or “shortness of breath”).

Residents receive formative feedback following each simulated case: we use a “resuscitation assessment tool” to inform an entrustment decision (see appendix 1). We hold a multi-station OSCE in December in order to provide a summative assessment of the course EPA. Residents not meeting the predefined competency threshold in the OSCE are required to attend additional training sessions from January to April in hopes of improving resuscitation competency.

The Nightmares Course is unique and offers several advantages as Postgraduate Medicine in Canada moves towards CBME. Firstly, it recognizes the importance of deliberate practice distributed over time, a key ingredient to adult learning. Secondly, it provides a summative assessment of an EPA common to the majority of junior residents. This interdisciplinary model is very attractive to programs that acknowledge the importance of this EPA, thus rather than designing a course de novo within each program, the Nightmares Course serves to teach, assess and remediate the entire cohort. Thirdly, remediation is built into the curriculum by design, with the infrastructure in place to continue weekly remedial sessions following the summative OSCE.

References