

## Simulation for learning; How successful is it?

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At the University of Huddersfield through an enthusiastic team and supportive management that has invested in simulation as a teaching and learning strategy, particularly in the development of sophisticated clinical simulation rooms (Prescott and Garside, 2009). Simulation takes many forms; the ethos at Huddersfield is that ‘Simulation is the development of understanding through *doing*’. Simulation allows the learner to practise repeatedly if necessary, in a safe environment.

Technological developments and changes in healthcare placements have led to the increasing use of simulation in healthcare education and training (Alinier *et al*, 2006). Simulation for our students at Huddersfield begins in week one of the pre registration programme, with task and procedural approaches to develop psychomotor skills e.g. injections, hand washing. As the students develop a variety of teaching aids are used for example each other, actors and low, intermediate and Hi-fidelity manikins. Fidelity – refers to the extent in which the manikin reflects reality. The sessions are delivered using realistic clinical scenarios and students as a team use a problem solving approach to assess and manage the situations.

The medium fidelity manikin can mimic human physiology with breath sounds, pulses, heart sounds, and measurements such as BP Oxygen saturations. The Intermediate fidelity manikins, require the facilitator to alter parameters, in response to patient deterioration or treatment. The hi-fidelity manikin also has these abilities but in addition it automatically responds to treatments given by the students, for e.g. if the scenario has a hypovolaemic patient, the manikin will respond if the students administers fluids but will deteriorate automatically if not treated, as would a real patient.

This paper, the second in the plenary session engages the audience through a paper about the practical aspects of teaching nursing skills at a range of levels in a fully equipped modern skills laboratory through simulation. Although resource intense, demonstrated here through visual footage are the benefits to this approach for both student and patient revealing the effectiveness of partnership working in a skills laboratory now condoned by the Nursing and Midwifery Council in the UK (NMC 2007).

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