

IN-PRO-SIM

**Is there such a thing as
interprofessional
communication?
And if there is - can it be
improved?**

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Introduction



A steady increase of case numbers in rescue services and inpatient care calls for a coordinated, continuous organisational structure between rescue and emergency services. The growing complexity in medicine and care, the rise in multifactorial and geriatric diseases, as well as the increased awareness for patient safety and (pre-) clinical risk management present challenges for interdisciplinary cooperation.

Aim

Competence development of participants in interprofessional simulation training (IN-PRO-SIM®) through:

- Combining the experiences gained from simulation for rescue services and clinical settings
- Simulated, realistic decision-making situations
- Interdisciplinary cooperation and communication
- Reflected action and communication processes
- Improvement of operational safety and teamwork



Methods

- One year project supported by an inter- disciplinary group of experts
- 6 training sessions from 09/2016 to 09/2017
 - Student paramedics (n=16), students of emergency nursing (n=16) and medical students (n=10) involved
 - Mixed method approach and KODE® method were used to develop the competence observation sheets
 - 6 competencies out of 64 defined partial competencies were selected in a consensus process

Tab. 1 meta-competence field/basic skills (comp.. Erpenbeck & Rosenstiel, 2007)

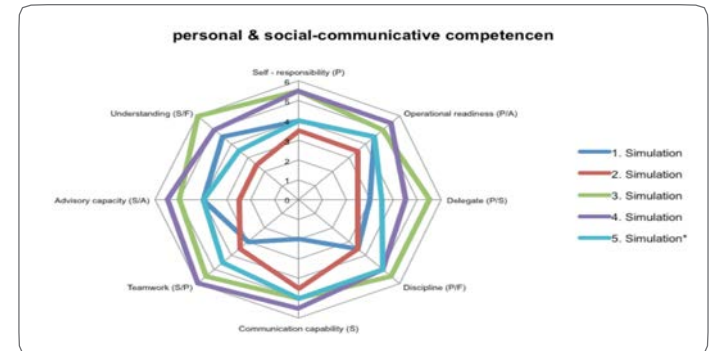
- P -	Personal competence: Ability to be self-wise and critical, to develop productive attitude, values and ideals
- A -	activity- und practical competence: Ability to implement all knowledge and skills, all the results of social communication, all personal values and ideals, in a truly willing and active manner
- F -	Technical and methodical competence: Ability to deal creatively with professional and methodological knowledge, to cope with almost unsolvable problems creatively
- S -	Social-communicative competence: Ability to coalesce, interact, and communicate creatively with others

Tab. 2 Partial competences in IN-PRO-SIM – observation sheet on the basis of KODE®-competence-atlas (comp.. Erpenbeck & Rosenstiel, 2007)

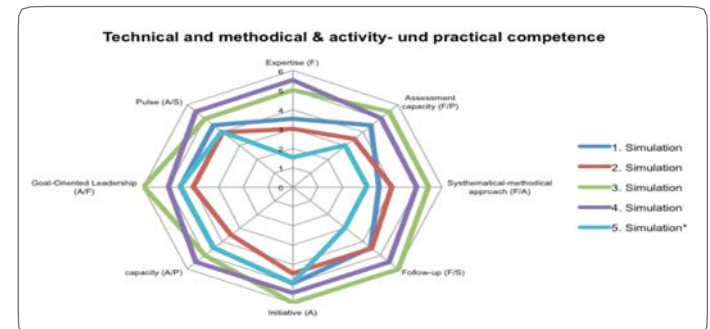
<p>Personal competence:</p> <ul style="list-style-type: none"> • Self-responsibility (P) Ability to act independently • Preparedness (P/A) - Ability to act with full commitment • Delegate (P / S) Ability to distribute tasks appropriately • Discipline (P / F) Ability to act reliably 	<p>Activity- und practical competence:</p> <ul style="list-style-type: none"> • Initiative (A) - Ability to start actions • Load capacity (A / P) Ability to act under external and internal stress • Pulsing (A / S) Ability to mediate other actions • Goal-oriented leadership (A / F) - Ability to orient others towards goals
<p>Technical and methodical competence:</p> <ul style="list-style-type: none"> • Expertise (F) - Ability to stay up-to-date • Assessment ability (F / P) -Ability to assess facts correctly • Systematic-methodical approach (F / A) - Ability to pursue action objectives systematically-methodically • Follow-up (F / S) Ability to predict the implications of decisions 	<p>Social-communicative competence:</p> <ul style="list-style-type: none"> • Communication ability (S) - Ability to communicate successfully with others • Team ability (S / P) Ability to work successfully in and with teams • Advisory capacity (S / A) - Ability to advise others • Understanding (S / F) - Ability to understand others and to make themselves understood

Results

- First interim results indicate that inter-professional simulation training enables the development of social and communication competence as well as activity and practical competence between and within the professional groups (Fig. 1 and 2)
- Particularly noteworthy is the gradual development of the ability to communicate and to team up in the course of the individual sequences within one session (Fig. 1)
- The evaluation of the acceptance and the learning effect so far shows that 100% of the participants are satisfied with the simulation training and 98% stated that the training helped to improve interface communication in interdisciplinary teams



*5. Simulation (roll swap), 0 = Weakly pronounced / 6 = Strongly pronounced



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Conclusio

- Strengthening the interlinkage between preclinical and inpatient care is just as important as cross-occupational cooperation and information sharing among all stakeholders.
- This is possible only through continuous training, further development of individual areas of competence and intensified inter- disciplinary cooperation.
- Interprofessional simulation training (IN-PRO-SIM®) is the answer.

