



As simulation further augments clinical learning, efforts should be made to modify the curricular and bedside factors that facilitate transfer of skills from simulation to practice settings” Mema and Harris (2016).

Abstract:

PHENOMENON: Ultrasound (US) guided Central Venous Line (CVL) insertion is currently the standard of care. Randomized Controlled Trials (RCTs) and systematic reviews show that simulation is superior to apprenticeship training. The purpose of this study is to explore, from the perspectives of participants in a simulation-training program, the factors that help or hinder the transfer of skills from simulation to practice.

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APPROACH: Purposeful sampling was used to select and study the experience and perspective of novice fellows after they had completed simulation training and then performed US guided CVL in practice. Seven novice Pediatric Intensive Care Unit (PICU) fellows and six supervising faculty in a university-affiliated academic centre in a large urban city, were recruited between September 2012 and January 2013. We conducted a qualitative study using semi-structured interviews as our data source, employing a constructivist,

grounded theory methodology.

FINDINGS: Both curricular and real-life factors influence the transfer of skills from simulation to practice and the overall performance of trainees. Clear instructions, the opportunity to practice to mastery, one-on-one observation with feedback, supervision and further real-life experiences were perceived as factors that facilitated the transfer of skills. Concern for patient welfare, live trouble shooting, complexity of the ICU environment and the procedure itself were perceived as real-life factors that hindered the transfer of skills. **Insights:** As more studies confirm the superiority of simulation training versus apprenticeship training for initial student learning, the faculty should gain insight into factors that facilitate and hinder the transfer of skills from simulation to bedside settings and impact learners' performances. As simulation further augments clinical learning, efforts should be made to modify the curricular and bedside factors that facilitate transfer of skills from simulation to practice settings.

Reference:

Mema, B. and Harris, I. (2016) The Barriers and Facilitators to Transfer of Ultrasound-Guided Central Venous Line Skills from Simulation to Practice: Exploring Perceptions of Learners and Supervisors. Teaching and learning in Medicine. February 5th. .

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