Real simulation

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Abstract
The use of simulation is gaining momentum in nurse education across the UK. The Nursing and Midwifery Council (NMC) has recently investigated the use of simulation in pre-registration nursing.

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WHERE IS HUDDERSFIELD?
Yorkshire People

- “Friendly” folk and considerate.
- “Down to earth” and straight talking.
- “Where tha’s muck tha’s brass”.
- Language of their own.
Yorkshire Dialect

• “Eh-bah-gum mi lug-oil’s gin mi sum rheyt jip. Tha neyd’s a rheyt gud cleyn aht”.

• “Ah’s full o snot wi this cowd, ah seem t’ev skitters n’ ah’m fair jiggered”.

Yorkshire Dialect

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The use of simulation is gaining momentum in nurse education across the UK. The Nursing and Midwifery Council (NMC) has recently investigated the use of simulation in pre-registration nursing.
• The NMC called for universities to submit ideas for using clinical skills laboratories (CSLs) to teach student nurses nursing skills and to evaluate this teaching experience.
At Huddersfield, we decided some time ago that there was an urgent need to liberate nurse education from traditional models of teaching and learning, to one where students can be active participants in their own learning.
According to Medley and Horne (2005), pre-registration nursing has only just begun to realize the potential of simulation in undergraduate programmes.
Nursing simulation can be considered as the use of a device or scenario to emulate a real patient situation for the purposes of:

1. Education
2. Evaluation
3. Research.
At Huddersfield, we have invested heavily in developing our clinical skills laboratories to depict ward areas.

We have modern simulators that replicate and respond to interventions with great realism.
According to Wilford & Doyle (2006); simulation is most effective when ‘micro worlds’ are created and relate to the learner’s workplace.

The more realistic the environment is to the learners own area of work – the more successful the learning will be.
WE CAN TURN THIS
AND BETTER STILL – THE FOLLOWING
Several studies have demonstrated that when the realism is suspended, learners are able to develop their critical-thinking skills, decision-making skills and communication skills (Vandrey and Whitman, 2001; Gordon et al, 2004; Peteani, 2004).

By making simulation as ‘real’ as possible and by developing multiple complex scenarios – we believe that we are providing learners with the optimum environment to develop such skills.
‘On this simulation day I really did feel like a nurse, I solved problems myself’.

‘One week after the experience since returning to my placement, I have had more compliments about my practice than ever before. I feel that the experience has contributed to my practice in a huge way’.
Simulation is a technique, not a technology, used to replace real experiences and it is our favoured strategy over other pedagogical approaches because it focuses on developing student’s critical thinking and problem solving skills.
• WE WOULD NOW LIKE TO SHARE WITH YOU AN EXAMPLE OF A REAL SIMULATION SCENARIO
References

• Nursing and Midwifery Council (2005) Consultation on proposals arising from a review of fitness for practice at the point of registration. NMC Circular 31/2005, 10th October, NMC London.