Acquisition of Pharmaceutical Skills: Simulation, Serious Games, Innovative Approaches

Abstract submission opening: December 15, 2014
  Only abstracts related to the theme will be considered for review
Abstract submission deadline: March 10, 2015
Registration opening: December 15, 2014
  Early bird registration deadline: March 5, 2015

Limited to 150 participants
Simulation in health consists of using a tool or device (such as full-body mannequins, part-task trainers, human simulated patients and/or computer-generated representations) to mimic clinical care.

Clinical Pharmacy simulations could have four main purposes:
- education
- assessment
- research
- and health system integration in facilitating patient safety

Simulations add to our understanding of human behavior in the true-to-life settings in which professionals operate.

The link that ties together all these activities is the act of imitating or representing some situation or process from the simple to the very complex.

Healthcare simulation is a range of activities that share a broad, similar purpose — to improve the safety, effectiveness, and efficiency of healthcare services.

Working in a simulated environment allows learners to make mistakes without the need for intervention by experts to stop patient harm.

By seeing the outcome of their mistakes, learners gain powerful insight into the consequences of their actions and the need to “get it right”.

The simulation can contribute to more reliable work activities because practices are re-interviewed rethought. It allows to make the first professional steps in improved safety conditions.

Professional associations such as ESCP and SFPC seek to identify simulation methods which can support training to meet agreed clinical pharmacy priorities; the Nice workshop aims to enable us to be innovative and forward thinking towards this goal.

Simulation is attractive to our pharmacy schools for initial or continuing education.

The Nice workshop will encourage discussion among participants on how simulation can be used within the curriculum of pharmacy to improve student learning, within hospital and community settings to improve competencies of technicians, residents and pharmacists to ultimately improve patient care.
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<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>8:00</td>
<td>Registration</td>
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<tr>
<td>9:00</td>
<td>Welcome and Introduction by ESCP President and SFPC Vice President</td>
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<tr>
<td>9:30</td>
<td><strong>PLENARY LECTURE 1</strong>&lt;br&gt;Place of Simulation in healthcare in 2015&lt;br&gt;Dr Antoine Tesniere, Sofrasims / Director of Ilumens Simulation Center&lt;br&gt;Université Paris Descartes, Sorbonne Paris Cité</td>
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<td>10:15</td>
<td>Coffee Break, Poster Viewing and Exhibition</td>
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<td>10:45</td>
<td>Parallel Sessions Workshops, part 1</td>
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<td>12:15</td>
<td>Lunch, Poster Viewing and Exhibition</td>
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<td>13:30</td>
<td>Parallel Sessions Workshops, part 2</td>
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<td>15:00</td>
<td>Coffee Break, Poster Viewing and Exhibition</td>
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<td>15:30</td>
<td><strong>Oral Communications I</strong></td>
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<td>16:15</td>
<td><strong>PLENARY LECTURE 2</strong>&lt;br&gt;Simulation in healthcare and clinical pharmacy&lt;br&gt;Pr Stephen Chapman, School of Pharmacy and Department of Medicines Management, Keele University, UK</td>
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<td>17:00-17:10</td>
<td>Closing First Day</td>
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<td>17:10-21:00</td>
<td>Visit of the Nice simulation center&lt;br&gt;Welcome reception</td>
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<td>8:45</td>
<td>Summary of First Day</td>
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<td>9:00</td>
<td><strong>PLENARY LECTURE 3</strong>&lt;br&gt;Serious games for health: what use&lt;br&gt;David Crookall, Université de Nice Sophia Antipolis, France</td>
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<td><strong>PLENARY LECTURE 4</strong>&lt;br&gt;Simulation and patient safety: can pharmacists learn from experience of anaesthetists?&lt;br&gt;Dr Giuseppe Chiaramonte anaesthetist and Director of the ISMET Simulation Centre Fiandaca Foundation, Italy</td>
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<td>11:00</td>
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<td>15:30</td>
<td><strong>Oral Communications II</strong></td>
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<td>16:15</td>
<td>Wrap up &amp; Conclusions by President of the Workshop</td>
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<td>17:00-18:00</td>
<td>Farewell Drink</td>
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**Parallel sessions workshops**

Each participant will be able to register for one workshop on the 22nd of June and one workshop on the 23rd of June.

Each workshop is in two parts (first part before lunch, second part after lunch) each day.

The 5 workshops will be run both days.

**Workshop 1**
- Simulation & assessment of students’ performance and clinical skills: the OSCE (Objective Structured Clinical Examination) illustration
- Dr Vera Bernhardt, Dr Saskia Bruderer, Pr Kurt E. Hersberger (Department of Pharmaceutical Sciences, University of Basel, Switzerland) & Dr Pierrick Bedouch (Department of Clinical Pharmacy, Grenoble university Hospital, France)

**Workshop 2**
- Simulation to understand human factors contributing to medication errors: from research to practice
- Pr Pascal Bonnabry (Geneva university hospital, Switzerland) & Dr Remy Collomp (Department of Pharmacy, Nice Hospital, France)

**Workshop 3**
- Experiential learning in pharmacotherapy problem solving: Focus on debriefing
- Dr David Crookall (Université de Nice Sophia Antipolis, France) & Pr Bertrand Décaudin (Université Lille 2, France)

**Workshop 4**
- Multidisciplinary interaction: interprofessional simulation learning in clinical pharmacy
- Dr Giuseppe Chiaramonte (Renato Fiandaca Simulation Center, Ismett, Palermo, Italy), Dr Anna Carollo, (Clinical Pharmacy, Ismett, Palermo, Italy), Dr Daniela Scala, (AORN Cardarelli, Naples, Italy)

**Workshop 5**
- Pharmacist – Patient Communication: simulation methods to develop competency
- Mrs Amanda Lovatt & Pr Stephen Chapman (School of Pharmacy and Department of Medicines Management, Keele University, UK)
Venue

- Université Nice Sophia Antipolis
  Faculté de Médecine
- Centre de simulation
  28, avenue Valombrose
  06107 Nice Cedex 2
- Tram line T1 station « Pont Michel »
  http://portail.unice.fr/medecine/faculte/acces
Websites to visit

- http://portail.unice.fr/medecine/faculte/departements/centredesimulationmedicale

- http://www.has-sante.fr/portail/jcms/c_930641/fr/simulation-en-sante

- www.escpweb.org

- www.sfpc.eu
ESCP International Workshop 2015 In Collaboration with SFPC  
22 – 23 June 2015, Nice, France

Fees

- ESCP/SFPC member, early bird (deadline March 5) • 450 €
- ESCP/SFPC member, normal fee (deadline April 30) • 550 €
- ESCP/SFPC member, early bird (after 1 May) • 650 €
- Non-member, early bird (deadline March 5) • 550 €
- Non-member, normal fee (deadline April 30) • 650 €
- Non-member, late and on-site (after 1 May) • 750 €

Early bird registration deadline for accepted abstract submitters April 30

Registration

http://escp-sfpcworkshop2015.insight-outside.fr/
escp-sfpcworkshop2015@insight-outsight.fr
Delegates are expected to take care of accommodations matters.

There are many hotels in Nice city center; reservations in advance are recommended since June is peak tourist season.

From Nice city center to the University, it takes 20 minutes by tram line T1 from station « Opéra vielle ville » to the station « Pont Michel » and 7 minutes walk.

Some Hotels:

- Hôtel Massena ****
  - 58 Rue Gioffredo

- Hôtel Nice Riviera****
  - 45 Rue Pastorelli

- Hôtel Crillon ***
  - 44 Rue Pastorelli

- Hôtel Lafayette***
  - 32 Rue de l'Hôtel des Postes
Workshop Président
- Olivier Bourdon vice-president@escpweb.org

Scientific Committee
- Benoit Allenet (FR) SFPC CHAIR
- Bertrand Decaudin (FR) SFPC
- Pierrick Bedouch (FR) SFPC
- Brigitte Bonan (FR) SFPC
- Pascal Bonnabry (CH)
- Jean Claude Granry (FR) Président SoFraSimS
- Mara Pereira Guerreiro (PT) ESCP ResCom
- Marie-Caroline Husson (FR) ESCP ComCom
- Moira Kinnear (UK) ESCP SIG Council
- Vera Jordan-von Gunten (CH) ESCP Edcom
- Daniela Scala (IT) ESCP GC

Organizing Committee
- Rémy Collomp (FR) SFPC CHAIR
- Jean Paul Fournier (FR) Director of Nice Simulation Center
- Julien Duquesne (FR)
- Valérie Chedru (FR) SFPC
- Olivier Bourdon (FR) SFPC ESCP GC
- Erik Gerbrands (NL) ESCP IO
- Edwin van Aalten (NL) ESCP IO
Stand Information Request

We will be happy to give you further information concerning your participation:

- Booth spaces
- Prices
- Communication tools

Your sales contact:

Remy Collomp
collomp.r@chu-nice.fr
&
Olivier Bourdon
olivier.bourdon@parisdescartes.fr
0033671046781

Or
info@escpweb.org
• The **European Society of Clinical Pharmacy (ESCP)** is an international association founded in 1979 by clinical practitioners, researchers and educators from several European countries.

• The **French Society of Clinical Pharmacy (SFPC)** was founded in 1984.

• The overall mission of these Societies is to develop and promote the rational and appropriate use of medicines, medical products and devices by the individual and by society.

• ESCP's over 400 individual members include clinical pharmacists, hospital pharmacists, community pharmacists, researchers and educators from 53 countries. SFPC is 300 individual members.

• Pharmacists, pharmacy students or other healthcare professionals working in the community, hospital, academic setting, industry or any other healthcare setting are eligible to become members of ESCP and SFPC.
• Workshop mené en collaboration avec la Société Francophone de Simulation en Santé - SoFraSimS

• Workshop conducted in collaboration with the Société Francophone de Simulation en Santé - SoFraSimS
Parallel sessions workshops

Each day
180 minutes
In two parts of 90 minutes
Workshop 1

Outline Workshop OSCE (Objective Structured Clinical Examination) for pharmacy students

Moderators
Dr Vera Bernhardt, PhD, senior lecturer and project leader at University of Basel for examination of pharmacy students with an experience in the design of > 50 OSCE stations.
Dr Saskia Bruderer, PhD and Bachelor in Medicine; lecturer and examiner in clinical pharmacy
Pr Kurt E. Hersberger, Head Pharmaceutical care Research Group and coordinator of all patient directed teaching activities at the Department of Pharmaceutical Sciences in Basel.
Dr Pierrick Bedouch (Department of Clinical Pharmacy, Grenoble university Hospital, France)

Aims
Participants know the concept, advantages and drawbacks of an OSCE as an option to test clinical skill performance and competence in patient oriented care skills such as communication, prescription evaluation, and interpretation of results.
Participants gain first experiences in designing an OSCE examination and its evaluation.

Background
According to its latest definition, "Pharmaceutical Care" is the pharmacist's contribution to the care of individuals in order to optimize medicines use and improve health outcomes (www.pcne.org). In health care, notably in medical care, OSCE became gold standard for assessment of students' performance and their clinical skills. In Switzerland, since 2011 the final federal examination comprises an OSCE with 10 different tasks. Pharmacy students were increasingly trained to provide appropriate patient care by solving real world case studies, acting as pharmacist in role-playing with educated pharmacists playing the patients, and getting feedback from experts.

The experience from over 1000 exams will be used to design a OSCE station.

Introduction:
What is an OSCE / aims / scope / procedures / pros & cons
Experience from medicine
Moderated work in small groups with 3-6 participants:
Development of a scenario for one OSCE station including the according evaluation form
Plenary discussion of key issues amended with experiences from the moderators
Workshop 2

Simulation to understand human factors contributing to medication errors: from research to practice

Moderators Pr Pascal Bonnabry, Geneva University Hospitals, Switzerland and Dr Remy Collomp Pharmacie CHU Nice, France

Background: Human factors are an important source of medication errors at every step of the medication process (prescription, dispensing, administration). The reliability of humans in cognitive tasks is limited and error rates are significant in many daily activities, like calculation, selection of products or control steps. To progress, it is important to lead research projects aiming at better understand the reliability of specific tasks and the interindividual variability between different healthcare workers. Based on the results of such studies, it is possible to redesign processes and to implement organizational or technical actions in the practice to progressively improve the safety.

Aim: The aim of the workshop will be to concretely illustrate how research projects can be design to bring answers to questions related to human factors in the medication process. It will highlight how simple these studies can be and their usefulness for practice improvement.

Learning Objectives:
• to recognize the interest of simulation to understand the role of human factors in the occurrence of medication errors
• to design a simulation study to answer to a research hypothesis related to medication errors

Content and Structure:

The workshop will be organized in two parts.
Part I
  Introduction to human factors and presentation of the interest of simulation in research projects dedicated to medication errors
  Work in small groups: design of an experimental study involving simulation to answer to a specific question related to human factors in the medication process

Part II
  Presentation and discussion of the working groups proposals
  Synthesis and take home messages
Workshop 3

Experiential learning in pharmacotherapy problem solving: Focus on debriefing

Moderators: David Crookall (Université de Nice Sophia Antipolis, France) and Bertrand Décaudin (Université Lille 2, France)

Background: The use of simulation/gaming in training in health and medicine is developing – both quantitatively and qualitatively. Quantity is not a problem; however, much work is needed to develop quality tools. Several pharmaceutical schools, in France and abroad, have developed simulation/games (sometimes called serious games) for training, both initial and continuous, in pharmaceutical skills. The main objective today seems to focus on increasing the quality of these instruments, which will in turn make it easier to increase the number of quality tools.

The main area in which quality is achievable with reasonable cost (in terms of investment-learning) is in the protocols use for debriefing. One way to see debriefing is the processing of experience to turn it into learning. Trainers are increasingly ready to accept the idea that the major learning takes place in the debriefing, not in the game. Thus, our session will focus primarily on the debriefing part.

Aim: This workshop has three interrelated aims:

– To outline the concept of debriefing;
– To demonstrate one possible debriefing format / procedure;
– To enable participants to explore their own ideas for debriefing a variety of simulation/games.

Learning Objectives: In addition to the above aims, we wish to:

Help participants feel comfortable with the idea of debriefing;
To provide participants with a short experience of debriefing;
To give participants some confidence in their own skills in developing debriefing protocols.

Content and Structure:

Part 1
Overview. Provide an overview of the importance and types of debriefing, in training in general and in health care and medicine more particularly.
Participation. Participate in a simple pharmaceutical training role-play.
Start of debriefing

Part 2
Individual debriefing. Participants follow a structure and write down their thoughts.
Group discussion. Participants meet in groups, first in their observation groups, then across groups.
Summarise key learning points for future
Workshop 4

Multidisciplinary interaction: interprofessional simulation learning in clinical pharmacy

Moderators: G. Chiaramonte, Renato Fiandaca Simulation Center, Ismett, Palermo, Italy  A. Carollo, Clinical Pharmacy, Ismett, Palermo, Italy  D. Scala, AORN Cardarelli, Naples, Italy

Background: Health care practitioners need opportunities in their education to practice interprofessional collaboration skills. Physicians, pharmacists, and nurses are groups of health professionals that must learn to work together, as their collaboration is necessary for the provision of optimal patient care. Common competencies for interprofessional education include team organization/function, assessment and enhancement of team performance, intra team communication, leadership, conflict resolution and consensus building, and setting common patient care goals. A one approach to achieve these interprofessional competencies in a clinical team is through simulation exercises.

Aim: The workshop will provide participants with the ability to share skill and knowledge among health professionals and allow for a better understanding, shared values, and respect for the roles of other healthcare professionals. The focus will be on developing an interprofessional, team-based, collaborative approach that improves patient outcomes and safety.

Learning Objectives:
• Determine roles and responsibilities of an interprofessional healthcare team member in a simulated clinical environment,
• Demonstrate effective teamwork skills in an interprofessional clinical environment,
• Deliver appropriate care to patient within an interprofessional healthcare team.

Content and Structure:
The workshop will be organized in two parts.

Part I
Introduction to learning concepts of interprofessional healthcare teams, collaborative patient-centered care (with the use of videos, and clinical cases)
Work in small group: discussion about videos and clinical cases

Part II
Work in small groups to design a scenario to meet specific learning needs
Run the scenarios using role play
Discussion/Feedback
Synthesis and take home messages
Workshop 5

Pharmacist – Patient Communication: simulation methods to develop competency

Moderators:
Pr Stephen Chapman, Professor of Prescribing Studies/Head of School of Pharmacy and Department of Medicines Management, Keele University
s.r.chapman@keele.ac.uk
http://www.keele.ac.uk/pharmacy/vp/
Mrs Amanda Lovatt, Lecturer in Pharmacy Practice, Keele University

Background:
Effective communication is essential in the practice of pharmacy. Interpersonal relationships between pharmacists and patients and between pharmacists and healthcare professionals influence the optimisation of medicines use and the quality of healthcare received by patients. Traditionally, education in Pharmaceutical care focused on use of case studies, both paper based and in ‘real’ patients. Although these methods helped to develop problem solving skills, they did not necessarily facilitate the development of communication skills which are now an integral part of the pharmacy curriculum. Different learning methods have been used to support skills development including role play, real patients, simulated patients (actors) and more recently computer generated simulations through avatar technology.

Aim: The aim of this workshop is to explore the use of different methods in the education and training of communication skills, describe the advantages of different techniques to allow participants to select appropriate methods to meet specific learning outcomes.

Learning Objectives
To describe the advantages and disadvantages of different simulation methods in the development and assessment of competence in pharmacist – patient/healthcare professional communication skills
To design and test a scenario to support the learning and assessment of performance of communication skills in pharmacists/pharmacy students

Content & Structure
Part 1
Introduction – pros and cons of different methods/techniques
Work in small groups to design a scenario to meet specific learning needs
Part 2
Run the scenarios using role play
Discussion/Feedback
Summarise key learning points for future
See you soon in Nice!

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