A Simulation-Based Multidisciplinary De-escalation **Training for Psychiatry Residents Improves Confidence**

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INTRODUCTION: Background

- A majority of healthcare providers report being verbally and physically assaulted at work which can have both physical and emotional impacts.¹
- Particularly at risk are those working in psychiatric or substance use focused units.¹
- Training and de-escalation simulation encounters provide an opportunity to practice techniques to manage agitated patients and improve safety.²
- Based on positive feedback from previous de-escalation trainings, a similar simulation was developed for psychiatry residents.³

AIM/PURPOSE/OBJECTIVES

The goal of this study was to evaluate if a simulation based multidisciplinary de-escalation training for psychiatry residents increased their confidence in managing agitated patients

METHODS: Interventions/Changes

Subjects: Selection, Recruitment

- OhioHealth psychiatry residents in all levels of training (over the course of 2 years)
- Additional support staff (nursing and protective services) Interventions
- 90 minute intervention (30 minute lecture, 10 minute simulation, 50 minute debriefing.)
- Objectives of the education:
 - Provide a culture of dignity and respect for the patient
 - Provide emotional safety for agitated patients
 - Use a framework to approach agitated patients
 - Distinguish each team member's role in caring for agitated patients

METHODS: Measures/Metrics

Return on Investment in Learning (ROL)

- Standard evaluation used for all simulation activities to evaluate above metrics.
- Used to measure:
- Reactions to the education
- 2. Knowledge gained as a result of the education
- 3. Application of knowledge and skills

Likert Based Scale

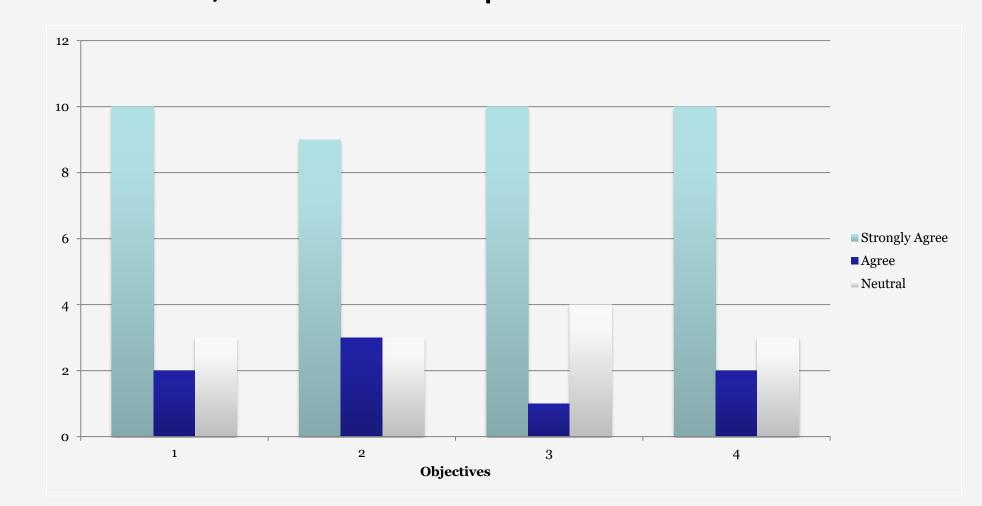
- Modified Likert style 5-point scale, answers ranged from strongly agree to strongly disagree
- Participants could also add comments and suggestions not covered in the initial question set

IRB Submission

This project was reviewed by the OhioHealth Institutional Review Board and did not meet criteria for human subjects research but was considered a quality improvement project.

RESULTS

- 100% of residents completed the initial reaction survey
- In response to their confidence to perform the objectives of the education, residents responded:



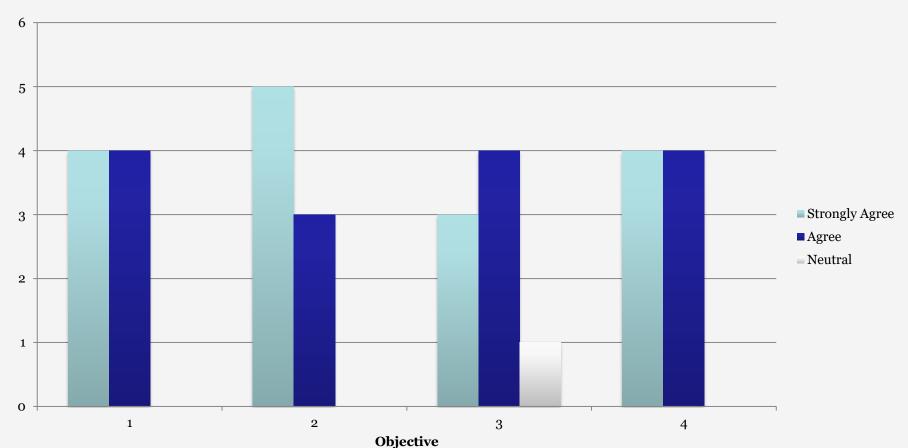
- In addition, residents agreed/strongly agreed with the following statements:
 - This training was relevant to my work (100%)
- I intend to use what I learned from this training (93%)
- This training provided me with new information or clarified existing information (80%)





RESULTS

- 8 of a possible 12 current residents completed the follow-up survey (6-17 months after the training)
- In response to their confidence to perform the objectives of the education, residents responded:



- Residents felt supported to use their knowledge and skills by:
- -"my colleagues and peers" (6/8)
- -"my confidence with the concepts" (5/8)
- Residents felt what deterred them most from using their knowledge and skills:
 - "lack of opportunity to use the skills" (4/8)

DISCUSSION: Barriers & Strategies

Key Findings

- The intervention improved residents' confidence in managing agitation
- The simulation was thought to be relevant by the residents Limitations

- Limited number of participants
- Lower than expected number of responses in follow up survey **Next Steps and Sustainability**

Investigate confidence levels of other residency specialties

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