

IN PRACTICE

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A NOVEL IMMERSIVE LEARNING EXPERIENCE FOR MANAGING SUDDEN UNEXPECTED DEATH IN INFANCY IN NORTHERN IRELAND

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Introduction: Sudden Unexpected Death in Infancy (SUDI) is a traumatic scenario for the professionals involved. A unique set of skills are required to manage this effectively and due to its uncommon nature, professionals may be dealing with this tragedy for the first time. The first NI Multi-Agency SUDI Protocol outlining expectations of staff is being developed on following recommendations in the Kennedy Report [1]. Despite all this, comprehensive training does not currently exist in Northern Ireland. An innovative simulation-based course with multi-agency involvement and parental involvement was designed to address this gap in training with specific focus on delivering family-centred care and conducive multi-professional working.

Methods: An immersive simulation-based course was designed to align with the goals of both the 2023 Interim Protocol and the draft Multi-Agency Protocol. It was piloted on 25th April 2024 in Craigavon Area Hospital Simulation Suite and delivered to 8 senior doctors/higher-specialty trainees within Paediatrics and Emergency Medicine. A robust faculty made up of consultants with SUDI expertise, paramedics, senior police, a Coroner, clinical psychology, actors - as well as the voice of a parent's experience via a surrogate - allowed for invaluable insight. Directors of the Public Health Agency (PHA) Child Death Programme observed with interest for Protocol influence. High-fidelity simulations focused on futile resuscitation and delivering compassionate family care. The unique role of the police and Coroner as well as clinical psychology to promote staff wellbeing was delivered via interactive sessions. Pre- and post-questionnaires were completed.

Results: The course had significant impact on participants, faculty and members of PHA. Of the 8 participants, 62% had never dealt with a SUDI scenario, 78% lacked confidence in management and 100% lacked a good understanding of the role of the medical team and other agencies in the investigation of these deaths. 100% of participants reported improved confidence and understanding across all domains. Awareness of where to seek personal mental health support also improved from 0% to 100%. The effect of actors was described as 'invaluable' and 'hauntingly accurate'. Faculty feedback was overwhelmingly positive.

Discussion: Simulation-based training for SUDI is emotionally charged and can be difficult but there is a desire for such training and the benefits are enormous as evident in the feedback. There is significant interest from PHA and other stakeholders to roll this out as a regional initiative and redesign to target police participants in a multi-professional approach similar to other parts of the UK.

Ethics statement: Authors confirm that all relevant ethical standards for research conduct and dissemination have been met. The submitting author confirms that relevant ethical approval was granted, if applicable.

REFERENCES

1. Sudden unexpected death in infancy and childhood Multi-agency guidelines for care and investigation The Royal College of Pathologists Pathology: the science behind the cure [Internet]. 2016. Available from: <https://www.rcpath.org/static/874ae50e-c754-4933-995a804e0ef728a4/Sudden-unexpected-death-in-infancy-and-childhood-2e.pdf>.