

## LITERATURE REVIEW

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**THE ROLE OF SIMULATION IN THE EDUCATION OF PRIMARY CAREGIVERS FOR CHILDREN AND YOUNG PEOPLE WITH CHRONIC ILLNESSES**

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**Introduction:** Currently, 1.7 million CYP are living with chronic illness in the UK [1]. The growing pressures on the National Health Service (NHS) call for a rethink in the planning and delivery of healthcare to foster inclusivity and empowerment of both healthcare professionals (HPs) and primary caregivers (PCGs). Empowering PCGs to initiate lifesaving interventions in emergencies in the community could lessen the burden on the NHS primary care, ensure optimum outcomes, and facilitate Patient and Family-Centred Care (PFCC) for these children and young people (CYP).

Simulation-based education (SBE) as a modality for medical education has immense benefits but the evidence is skewed towards HP [2, 3]. This position paper explores the potential role of simulation in enhancing the education of PCGs for CYP with chronic illnesses by highlighting its benefits, challenges, and future implications. It proposes that PCGs being adult learners like HPs could experience similar benefits from SBE if learning activities are appropriate.

**Methods:** This paper evaluates the benefits and drawbacks of using SBE for PCGs education under three educational outcomes: Knowledge Acquisition for early detection of clinical deterioration; Technical Skills Acquisition for confidence to initiate home management; and Non-Technical Skills Acquisition for management in the community.

Based on these outcomes, a literature review was conducted across three online databases (PubMed, University of Edinburgh Library [DiscoverED], and Google scholar). Relevant articles were explored under these outcomes and conclusive opinions were drawn. Anticipated challenges to this intervention were highlighted and recommendations for implementation were proffered.

**Results:** In the context of CYP, 6 studies demonstrated increment in knowledge acquisition for PCGs following SBE whilst 1 study showed no difference in this regard.

For Technical Skills Acquisition and Confidence, 5 studies showed positive impact and no study was found of contrary opinion. Unfortunately, no study was found that explored Non-Technical Skills Acquisition in this context. Proposed challenges for SBE implementation in PCGs education included funding, fidelity logistics, and psychological safety concerns.

**Discussion:** Despite the paucity of evidence in this regard, available evidence showed that the experiential learning opportunities provided by SBE can equip PCGs with the knowledge, skills, and confidence needed to deliver high-quality care in diverse community settings. Additional benefits of SBE in this context include reduction of parental anxiety management, interprofessional collaborations, and peer-to-peer learning.

Successful implementation of this intervention requires cross-organizational partnerships and a robust funding scheme. This Investment in PCG education would decrease healthcare system pressures, drive PFCC, and improve outcomes for these CYP.

**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

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