Using simulation as a method to improve pediatric nurses skills in assisting circumcision procedure.
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Introduction
Due to many reasons related to cost effectiveness, increase waiting time, operational issues and insurance coverage, the circumcision procedure was moved from Day Surgery to Pediatric Unit. Although pediatric nurses deals with children, however none of the staff have experience in assisting in circumcision procedure. Literature review shows many benefits of using simulation in improving staff knowledge, skills, attitude, satisfaction, self-confidence and patient safety.

Purpose
The purpose of this presentation is to share results of study on using Low Fidelity simulation as a way to improve pediatric nurses skills in assisting circumcision

Method
Descriptive design used, the study was conducted in pediatric unit in one government hospital in UAE. A convenient sample included pediatric nurses, physicians and managers. Several meeting were conducted to arrange the project commencement, consumable resources and staff scheduling were arranged. Instructional material, video and competencies were sent to staff, and 8 hours Low-Fidelity Simulation was used to assess staff knowledge, skill and attitude. After simulation, pediatric staff were supervised by Operating Theatre nurse for two procedures and later on pediatric staff were conducting the procedure alone. Feedback collected from nurses, manager and doctors by using open ended questions.

Result
The following themes were generated from open ended questions,

nurses’ feedback before simulation: overwhelmed, physician refusal and fear.
After simulation: confident, have enough time to practice, physician approval

Nurse Manager Feedback:
before simulation: overtime concern and resources issues. After simulation: satisfied

Physicians’ feedback: before simulation: Hesitancy and time consuming. After simulation: satisfied and procedure managed on time.

Conclusion
Simulation helped in moving circumcision procedure from day surgery to pediatric unit. The process was successful in pediatric unit although there was many concerns at the beginning of the project from multidisciplinary team, however, after use of simulation, staff, physicians and manager were satisfied. The project has resulted in creation of training plan with competencies and list of resources outside the day surgery unit.

References

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