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Effectiveness of simulation-based interprofessional education on teamwork and communication skills in neonatal resuscitation

Shinhye Chae^{1,2} and Soonyoung Shon^{1*}

Abstract

Background The role of effective interprofessional teamwork is especially vital in the Neonatal Intensive Care Unit (NICU) where infants facing emergency situations are admitted. Proper neonatal resuscitation, facilitated by comprehensive resuscitation training, can significantly decrease the mortality rates associated with neonatal asphyxia and respiratory failure. This study aimed to develop a simulation-based interprofessional education (IPE) programme for medical staff working in a nursery and NICU and to assess its effectiveness on teamwork, communication skills, clinical performance, clinical judgement, interprofessional attitudes, and education satisfaction.

Methods Through a demand survey, neonatal resuscitation was selected as the theme, and an IPE team comprised of one doctor and two nurses was formed. The education programme consisted of three sessions lasting a total of 140 min: two simulation exercises and one theoretical education session. Data were collected from 18 nurses working in the nursery and NICU and 9 doctors working in the paediatrics department.

Results A comparison of the metrics before and after applying simulation-based IPE programmes revealed teamwork ($Z^2=2.67, p=.008$), communication skills ($Z^2=2.68, p=.007$), clinical performance ($Z^2=2.52, p=.012$), clinical judgement ($Z^2=4.52, p<.001$), and interprofessional attitude ($Z^2=3.64, p<.001$) to have significantly improved. Education satisfaction scores were 4.73 points on average out of a maximum of 5. The simulation-based IPE programme was effective in improving the teamwork, communication, and clinical performance of resuscitation teams, individual clinical judgement, and interprofessional attitude.

Conclusions Simulation-based IPE is effective for enhancing teamwork, team communication, clinical judgement skills, and clinical performance in neonatal resuscitation. This programme has the potential to contribute to the improvement of patient safety and the quality of neonatal care. Additional studies are needed to longitudinally examine the effects of the programme on patient safety and quality of neonatal care.

Keywords Interprofessional education, Simulation, Neonate resuscitation, Nursing education

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Communication And Teamwork Focused Simulation Based

**Jennifer Calzada, Amy Nakajima, Jamie
M. Robertson**

Communication And Teamwork Focused Simulation Based:

The Wiley Blackwell Handbook of the Psychology of Team Working and Collaborative Processes Eduardo Salas, Ramon Rico, Jonathan Passmore, 2020-04-06 A state of the art psychological perspective on team working and collaborative organizational processes This handbook makes a unique contribution to organizational psychology and HRM by providing comprehensive international coverage of the contemporary field of team working and collaborative organizational processes It provides critical reviews of key topics related to teams including design diversity leadership trust processes and performance measurement drawing on the work of leading thinkers including Linda Argote Neal Ashkanasy Robert Kraut Floor Rink and Daan van Knippenberg

Comprehensive Healthcare Simulation: Educating Providers to Care for a Diverse Patient Population Jennifer Calzada, Amy Nakajima, Jamie M. Robertson, 2026-01-01 This practical book is designed to be a hands on guide for healthcare simulation personnel to both understand the context of Equity Diversity and Inclusion EDI in healthcare education and how to bring those concepts to life in simulation training The first section of this guidebook grounds the readers in the concepts of EDI in contemporary culture and specifically within healthcare education The second section gives practical tips and ideas on setting up a simulation program that is grounded in EDI principles This section covers areas related to staff recruiting faculty representation appropriate manikin and moulage diversity creating patient scenarios inclusive debriefing and more topics The final section brings EDI in practice to life with real examples from around the world Simulation examples concepts and principles that focus on a diverse range of patients and their needs This includes patients of various races religions nationalities abilities and even scenarios of bias from a patient to healthcare provider This book ensures the next generation of healthcare professionals are trained not only in an equitable and inclusive manner but that they are prepared to approach all of their future patients that way

Graduate Medical Education in Pediatrics Heather McPhillips, Patricia Poitevien, Joanna Lewis, Rebecca Blankenburg, 2026-03-22 This book is a wide ranging and comprehensive overview of pediatric residency education including specific administrative and educational best practices As programs navigate new accreditation rules evolving recruitment practices including signaling and changes in assessment and program evaluation pediatric residency leaders are confronting a period of extraordinary change This book brings together national leaders in medical education to offer essential guidance and actionable solutions that help programs adapt innovate and excel The volume provides a thorough guide to designing implementing and advancing pediatric residency programs Covering foundational structures program design recruitment curriculum development assessment and resident support it equips educators with practical strategies to develop a high performance program The final sections explore faculty development and future innovations making this a vital resource for shaping the next generation of pediatric residency programs Graduate Medical Education in Pediatrics From Basic Processes to True Innovation is an invaluable resource for pediatric residency program directors faculty clinic and hospital managers residency coordinators hospital

leadership department and medical school leadership and resident physicians who are interested in pursuing a career in pediatric education In addition much of this book will be of interest to pediatric fellowship directors and combined training directors such as med peds program directors Simulation in Surgical Training and Practice, An Issue of Surgical Clinics Kimberly M. Brown,2015-07-29 Simulation in Surgical Training and Practice is reviewed extensively in this important Surgical Clinics of North America issue Articles include Applying Educational Theory to Simulation Based Training and Assessment in Surgery Figuring out Team Simulation Training Faculty Development for Simulation Training The Evolving Role of Simulation in Teaching Surgery in Undergraduate Medical Education Using Simulation in Inter Professional Education Current Status of Simulation Based Training in Graduate Medical Education National Simulation based Training of Fellows The Vascular Surgery Example Paying For it Funding Models for Simulation Centers Surgical Simulation Centers as Educational Homes for Practicing Surgeons Better Assessment Advanced Engineering Technology for Measuring Performance In and Out of the Simulation Lab Moving the Needle Simulation s Impact on Patient Outcomes Human Factors Engineering and Effective Simulation Partners for Improved Patient Safety Simulation for the Assessment and Improvement of Teamwork and Communication in the Operating Room Using Simulation to Improve Systems Simulation for Maintenance of Certification and more **Opportunities and Challenges of Interprofessional Collaboration and Education** Jill

Thistlethwaite,Peter Musaeus,Martina Mueller-Schilling,Sophie Schlosser,2024-04-01 Interprofessional collaboration is essential in meeting today s health challenges which demand high flexibility and innovation Many health organizations including the World Health Organization WHO demand that interprofessional collaboration should be taught and learned globally Even so interprofessional education tools have not yet been widely implemented in the curricula of medical professions incl physicians nurses pharmacists physiotherapists etc this training usually takes place separately Collaboration is necessary in health professions education as it can allow professionals to increase their skills and help them achieve more than they would at an individual level Collaboration also allows for more open minded approaches when facing new ways of thinking When knowledge is shared healthcare employees are more encouraged to share their own ideas and concerns These achievements of interprofessionalism within health profession education not only benefit the student and employee but also optimize patient care and increase patient safety Productivity can also be increased and therefore reduce costs overall

Comprehensive Healthcare Simulation: Emergency Medicine Christopher Strother,Yasuharu Okuda,Nelson Wong,Steven McLaughlin,2021-02-11 This is a practical guide to the use of simulation in emergency medicine training and evaluation It covers scenario building debriefing and feedback and it discusses the use of simulation for different purposes including education crisis resource management and interdisciplinary team training Divided into five sections the book begins with the historical foundations of emergency medicine as well as education and learning theory In order to effectively relay different simulation modalities and technologies subsequent chapters feature an extensive number of practical scenarios to allow

readers to build a curriculum. These simulations include pediatric emergency medicine, trauma, disaster medicine, and ultrasound. Chapters are also organized to meet the needs of readers who are in different stages of their education ranging from undergraduate students to medical directors. The book then concludes with a discussion on the future and projected developments of simulation training.

Comprehensive Healthcare Simulation: Emergency Medicine is an invaluable resource for a variety of learners from medical students, residents, and practicing emergency physicians to emergency medical technicians and health-related professionals.

Trauma Team Dynamics Lawrence Marshall Gillman, Sandy Widder, 2025-09-12. The majority of medical errors are non-technical in nature, stemming from faulty decision making, asynchronous information gathering, lack of situational awareness, and ineffective communication and team leadership. Reviews of accidents from other high-risk industries, including the airline industry, have had similar findings. This led the National Aeronautics and Space Administration (NASA) and the airline industry to develop crew resource management (CRM) training. These team-based training strategies address non-technical skills to counteract human error and improve team and patient safety. Medicine has begun adapting this training, especially within the realms of anesthesia and critical care. Trauma surgery has been slower to utilize this work, however, simulation-based training is increasing in popularity. The first edition of *Trauma Team Dynamics* was a revolutionary book in the field of trauma care. It was the first text that integrated the complexities of trauma care but illustrated how these could be streamlined and improved through a team-based focus and training. CRM and team-based training has grown substantially in the past six years since this text was conceived, and there have been significant developments both in the breadth of the training as well as refinement in the topics covered, teaching methods utilized, and strategies employed to overcome the multitude of challenges still faced in this area. The second edition of this text expands greatly on the initial CRM topics covered in the opening section of the book. Hot topics in CRM training, including the concepts of followership and conflict resolution, and highlights strategies such as mindfulness and others to manage stress and reduce burnout, are discussed. The text also expands into novel areas of trauma care, including less-invasive bedside endovascular treatments such as REBOA (Resuscitative Endovascular Balloon Occlusion of the Aorta) and a more in-depth discussion of teleresuscitation and trauma care in austere environments. Featuring 28 new chapters, the second edition of *Trauma Team Dynamics* is written by experts in trauma, critical care, emergency medicine, nursing, respiratory therapy, and pre-hospital care, and includes NASA and United States military-affiliated experts. It is intended for use as both a day-to-day clinical resource and a reference text, and includes self-assessment questions as well as guidance on CRM curriculum design and implementation.

Simulation-based Lean Six-Sigma and Design for Six-Sigma Basem El-Haik, Raid Al-Aomar, 2006-09-29. This book includes DFSS (Design for Six Sigma), design of Experiment (Qulaitiy Function Deployment), QFD (Process Mapping), Discrete Event Simulation (DES), Value Stream Mapping (VSM), Lean Techniques including JIT, SMED, TPM, and others.

The Unfavorable Result in Plastic Surgery Mimis N. Cohen, Seth R.

Thaller, 2018-03-21 Highly Commended by the BMA Medical Book Awards for Surgery The Unfavorable Result in Plastic Surgery has been lauded as a classic text in plastic surgery described by reviewers as an unforgettable masterpiece an invaluable companion text and a vast resource Mimis Cohen co authored the widely acclaimed third edition with the late Robert Goldwyn Along with his esteemed coeditors and a cadre of prominent plastic surgeons Dr Cohen has produced an illuminating fourth edition Embracing the book's original philosophy Mistakes are often the best teachers the updated text and videos are remarkable in their candor yielding a vast number of lessons typically not shared in the literature In the first three sections top experts discuss topics connected with plastic surgery complications including patient dissatisfaction psychological aspects of cosmetic plastic surgery legal safety issues the management of scars redo surgery infections and wound management Sections four through nine detail the treatment of specific procedural complications challenges secondary surgery and avoidance of suboptimal outcomes Experts in their respective subspecialties discuss alternative approaches and considerations in aesthetic plastic surgery breast surgery pediatric craniofacial surgery reconstructive plastic surgery for head neck body lower extremity hand upper extremity and burns Key Highlights Concise easy to cross reference text evidence based clinical pearls and case presentations provide in depth understanding on the prevention recognition and management of unfavorable results Preoperative intraoperative and postoperative surgical complications and risks Updated in full color with more than 3 200 illustrations including a bespoke outstanding artwork program More than 100 technical video clips posted in the Thieme MediaCenter deliver additional educational insights The Unfavorable Result in Plastic Surgery Avoidance and Management Fourth Edition is an essential reference for all plastic aesthetic and reconstructive surgeons and residents It expands on the masterful legacy of the original and is certain to become a go to indispensable source of learning for future generations of plastic surgeons

International Conference on Intelligent and Cooperative Information Systems, May 12-14, 1993, Rotterdam, the Netherlands Michael N. Huhns, M. Papazoglou, Gunter Schlageter, 1993

Cardiac Surgery in the Adult 5/e Lawrence H. Cohn, David H. Adams, 2017-09-08

The most comprehensive and current full color cardiac surgery resource updated by leading surgeons A Doody's Core Title for 2024 2022 In Cardiac Surgery in the Adult Fifth Edition the world's foremost cardiovascular surgeons deliver thorough up to date coverage of operative strategy decision making technique and pre and post operative management for treating the adult cardiac patient Unmatched in both scope and clinical rigor this classic text contains 63 chapters that highlight every important topic in cardiovascular surgery Presented in full color Cardiac Surgery in the Adult takes readers through the optimal treatment of congenital acquired infectious and traumatic diseases of the heart and great vessels The book opens with a history of cardiac surgery and basic cardiac science then moves into all types of cardiac surgery providing both practicing surgeons and residents with insight into the very latest surgical protocols Cardiac Surgery in the Adult is logically divided into ten sections Basics includes history anatomy physiology pharmacology computed tomography risk assessment

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Virtual Design Team: Using Computers to Model Information Processing and Communication in Organizations Stanford University. Center for Integrated Facility Engineering, 1992 **Transactions - The Society of Naval Architects and Marine Engineers** Society of Naval Architects and Marine Engineers (U.S.), 1996 List of members in vols 1 24 38 54 57 **Simulation and Gaming Yearbook**, 1993 **The High-risk Neonate** M. Terese Verklan, 2009 The last issue of a two part series devoted entirely to neonatal critical care nursing this text discusses topics such as retinopathy of prematurity the near term infant endocrine issues nutrition in the 1000g neonate safety issues and issues of informed consent in the NICU **BMJ**, 2005 Practical Health Care Simulations Gary E. Loyd, Carol L. Lake, Ruth B. Greenberg, 2004 Here is the first book to respond to the growing movement towards clinical simulations in health care education It provides all of the guidance needed to make an informed decision about whether to begin using patient simulators describes how to develop and operate a simulation center and discusses how to design educational and assessment simulations that reflect specific educational curricula Features the expertise of three authorities who have extensive experience in working with the University of Louisville School of Medicine s Dr John M and Dorothy Paris Simulation Center one of the leading medical simulation centers in the world Explains the value of simulation for a variety of healthcare disciplines and discusses which types of simulations are most relevant for each field Discusses the resources space personnel equipment needed to establish a simulation program Evaluates the specific simulation products that are currently available Details the nuts and bolts of preparing relevant patients and scenarios Describes applications for assessment certification and re certification Presents an overview of future trends in simulation such as virtual reality simulations and discusses issues related to planning for simulation center growth With 29 additional contributors

Rudolph's Pediatrics, 24th Edition Mark W. Kline, Jordan S. Orange, Angelo P. Giardino, Mahesh M. Rathore, Z Leah Harris, Antonio Cabrera, 2026-01-30 The landmark pediatrics reference updated with timely new content and more clinically relevant than ever Rudolph s Pediatrics has virtually defined the pediatric field for over a century becoming one of the most important and well respected pediatrics texts ever published Renowned for its balance of clinical features and treatment of disease with underlying biological principles this classic sourcebook has helped generations of pediatricians optimize their care of infants children and adolescents This twenty fourth edition of Rudolph s Pediatrics continues a long tradition of adapting its content to changes in our understanding of children s health and disease providing an up to date in depth survey of pediatric medicine unmatched by any other text With its algorithmic approach to pediatric systems the book facilitates the

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Trans I MarE., 1996 *Clinical Monitoring* Carol L. Lake, Roberta L. Hines, Casey D. Blitt, 2001

Drs Carol L Lake Roberta L Hines and Casey D Blitt three highly regarded experts in the field team up to produce this comprehensive state of the art resource on the current practices and equipment used in monitoring in clinical anesthesia and intensive care units today This reference focuses on all aspects of clinical monitoring including all major monitoring modalities integrates information on pediatric monitoring into each chapter employs a user friendly organization by types of monitors including cardiac neuroanesthesia and obstetric and much more

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