PRESENTER:
NIDHI SUBRAMANIAM

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SIMULATION EDUCATOR TRAINING FOR NURSING FACULTY: INSIGHTS FROM PRONTO'S PROGRAM IN INDIA

Nidhi Subramaniam, BSc, MSW* [1]; Divya Vincent, BSc, MBA[1]; Seema Handu, PhD[1]; Susanna R Cohen, DNP, CNM, FAAN, FACNM[2]; Dilys Walker, MD, FACOG[3]
[1]PRONTO India Foundation, Delhi, India; [2]Department of Obstetrics and Gynecology, ASCENT Center, University of Utah, Salt Lake City, US; [3]Department of Obstetrics, Gynecology and Reproductive Sciences, Bixby Center for Global Reproductive Health, University of California San Francisco, San Francisco, US

Introduction

Objective: To evaluate the impact of PRONTO's Simulation Educator Training (SET) on bridging the gap in faculty skills and confidence in simulation facilitation and debriefing, to support incorporation of simulation into their programs as specified in the Indian Nursing Council guidelines (INC).

Methods

❑ **Participants:** In 2023, 150 nursing educators from 40 nursing schools across India participated in a total of 4 trainings.

❑ **Hybrid training design:**
  • **Virtual:** 2 days, 4 hrs/day
  • **Self-study:** 8 videos + quizzes
  • **In-person:** 3 days, 8 hrs/day

❑ **Training Curriculum and Data:**
  • Pre-post knowledge assessments including clinical (intrapartum and post-partum), non-clinical (simulation, debriefing, teamwork, communication techniques, adult learning principles, soft-skills) and RMC.
  • Training Assessment.

Results

❑ **Average Knowledge Score (clinical + non-clinical) improved:** Pre 60% → Post 80% *(Figure 1)*.

❑ **Average Response to the SET:** Nearly all participants strongly agreed or agreed that simulation-based training is highly valuable and effective *(Figure 2)*.

❑ **Faculty feedback:**
  • Hands-on practice critical.
  • Provides safe environment to learn.
  • Valuable for decision-making & teamwork.
  • Built confidence to integrate simulation into learning activities.

❑ **Challenges:** Mentorship needs, resource limitations, curriculum scheduling.

❑ **Future Requests:** More clinical topics, refresher trainings, simulation hubs.

PRONTO's Hybrid Training Model

Virtual Training → PRONTO's Self-study → In-Person Training

Figure 1. Average Knowledge Score (Pre vs Post Training)

Pre-Training: 60%
Post-Training: 80%

Figure 2. Average Response to the SET

	Strongly Agree (%)	Agree (%)	Neither Agree nor Disagree (%)
Simulation training is important in my health facilities	85	16	
Simulation scenarios were similar to real clinical situations	78	20	3
Simulation is an effective way to prepare for real clinical emergencies	88	10	3
I will use the facilitation techniques I learned in my everyday work	62	36	2
I will use the teamwork concepts in my practice	80	20	
I plan on facilitating simulations in the future	63	32	4

■ Strongly Agree (%) ■ Agree (%) ■ Neither Agree nor Disagree (%)
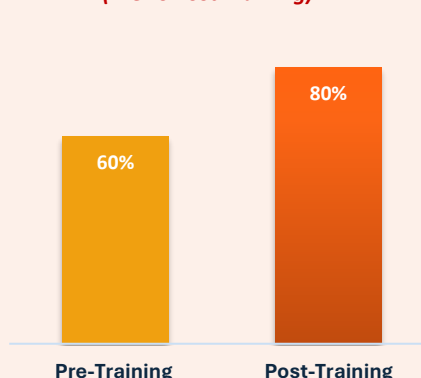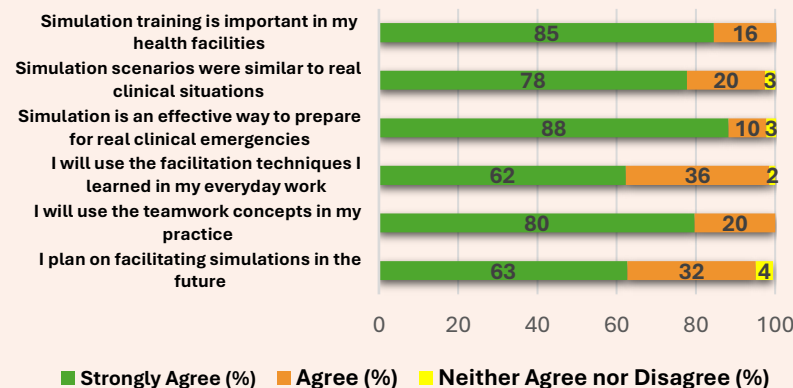
Conclusion

❑ PRONTO SET successfully bridges the **"know–do gap"** in nursing education by enhancing both technical and interpersonal teaching skills.

❑ Prepares faculty to facilitate and debrief **real-life obstetric and neonatal emergency scenarios** in a structured way.

❑ Strengthens clinical teaching by providing **students with hands-on skills** in a safe learning environment before clinical exposure.

❑ Builds a cadre of **simulation educators** aligned with INC guidelines, supporting sustainable integration of simulation into nursing curricula.

Implications for Practice:

❑ Scaling SET can enhance the **quality of pre-service nursing education** across **India**.

❑ Simulation-based approaches can directly contribute **to improved maternal and newborn outcomes** by ensuring graduates enter the workforce with enhanced **confidence and competence.**

❑ Need for **structured simulation training, continuous** mentorship, access to **simulation resource centers**, and additional clinical topics.