EMT/Paramedic Training using VR









General Focus Area



The status of EMS in India





75.8%

of EMTs working in ambulance services had personal experience of mental health problems

- **11%** for post-traumatic stress disorder
- **15%** for depression
- **15%** for anxiety
- **27%** for general psychological distress

EMTs who experienced burnout were four times as likely to plan to quit their jobs within one year. Thus, EMTs require situational training to better deal with high stress situations.

The Need for effective EMS

Ambulance personnel estimated rates of

67%

of EMTs contemplated leaving their job due to the stress of working on-field.





Understanding the Arena

We created a mindmap detailing out the users and stakeholders of the system, the current training practices and curriculum of EMTs, the skills expected from the EMTs, the kinds of situations they face at work, the emotional response and traumatic experiences caused.

• A lot of stakeholder are affected by EMT's job including doctors, the patient and their family.

• Current EMT training does not include a holistic training for expected skills such as observational, interpersonal, problem solving, composure and confidence.











User Research

The Determined EMT



Age: 30 Work: Hospital Paramedic Family: Parents, spouse & children Location: Mumbai

Personality



Alert	Strong-W	l
and the second second		

Goals

1. To quickly asses the field situation and be able to make quick calls on tough situations

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Persereving

- 2. Quickly administer the required treatment with adequate coordination from team members
- 3. Be able to efficiently handle the patient's family and close ones to provide emotional support and try maintain normalcy if hindrances are created

Frustrations

- 1. Longer and stressful working hours
- 2. Experience extreme pressure and expectations from patient's family members and doctors in the emergency ward to provide the correct first course of treatment
- 3. Less time to spend with family and friends

Thoughts about EMS

They feel extremely conscious of themselves due to not getting the respect they feel they deserve as they form such a crucial link of the medical process. They receive training however they believe even after the procedural training real adeptness and confidence in the profession comes only after being in that environment multiple times. That sense of urgency and responsibility felt in the moment is something that can only be eased through multiple attempts manuals cannot prepare them for it. They think being on the spot is very stressful and always attempt to do their best for the patient.

EMS Priorities

Vitals Maintained

Quick Commute Time

Accurate Reporting of Scene

Crucial First Treatment Given

Quote

"The condition of some of the victims of accidents witnessed have been extremely disturbing and stressful"

Motivation

Empathy for Patients

Sense of Fulfilment

Appreciation from People





Synthesized User Insights





Training institutes do not cover a **realistic understanding of the situational and sensory factors** of working on the field. Lack of training among the EMTs is directly proportional to **increase in workload and stress** among doctors.



People think that they are incapable of performing procedures, escalated by the **lack of communication skills** on their part.

EMTs can help save doctors' crucial time as they cannot be available on field and **increase the chances of patients survival.**









Being in an Ambulance provokes panic as it is a proof that loved one is in urgent trouble.





If EMTs does not c**ommunicate well** with the family it causes doubt in the minds of the family.



Relevance of VR





Realistic training scenarios & environments Faster acquisition of knowledge





Improve safety & reduce risk

Tangible & Intangible elements of curriculum

Clear Safety Procedures



Problem Statement



training provided.

and confidence in emergency situations.

EMTs suffer from **psychological stress** as they are **unprepared** for on field crucial procedures due to a lack of situational

This can be resolved by training to provide a sense of control



Our Intervention



EMT's get exposure to the field as a prospective and accessible profession

Enter training institutes for the 3 month EMT training course

Provided with theoritical training of protocols, medical procedures, identifying symptoms, caring for people, etc

Followed by practical training of being given set of instructions to follow with feedback administered on mannequins

The EMT starts the psychological and situational training using VR and to learn application of theory and practical execution in stressful scenarios

The EMT completes training and is finally appointed for working on the field with ambulatory services



Visual Wall

We mapped the sensory factors of sight, sound and visual experienced by the EMTs to understand how each trigger is processed by them. The key components charted were-

- Self Doubt and Exhaustion
- Gory and overwhelming environmental factors and working through all the sensory overload
- After effects of being unable to perform on site due to all these factors



Final Concept Guiding through Reinforcement



Experience Design

- Task Call & Kit Selection
- On-site assessment
- First Course Treatment
- Report to doctor



Skills Tested

- Situational awareness
- Problem solving
- Interpersonal skills



Sensory Engagement

Environmental Sound scape (crowd, family, etc)
Visual Scape (blood, people, etc)



Evaluation Strategy

- Focus on patient rather than environment
- Fact Analysis
- Decision making in the situation provided

Design Strategy



Confidence: Self Image

Spreading their 'light' everywhere they go to signify their power in the situation



Instructional Design

Creating experience to enhance Analysis, Implementation and Decision Making skills



Social Feedback

Words of encouragement by the characters in the scene upon taking correct decisions



Performance Evaluation

Deconstructing the journey and understanding their strengths and weakness

Task Flow

PHASE 1

Introduction & Task call

The EMT is on-boarded initiating him to start with basic level of communication in the staff room, where he receives a task call. As it is a primary level user receives minimum options in order to assess his interpersonal skills.

Tasks

- Reply to call & report to scene
- Select Medical Kit to treat

Skills Tested Interpersonal skills

PHASE 2

On-site assessment

EMT needs to gaze at the scene to note information on site safety, people hurt and point of contact present. Based on this situational awareness is evaluated, and communication skills with victims family member.

Tasks

- Scene Assessment
- Talk to Patient's family
- Patient assessment

Skills Tested

Interpersonal skills, problem solving & situational awareness

PHASE 3

Transporting and handover

This phase has assessment of patient vitals, signs & symptoms. Inside the ambulance the first course of treatment is evaluated for problem-solving & patient stabilization. EMT needs to report the scene acurately to doctor.

Tasks

- First course of treatment
- Brief the doctor on the case

Skills Tested

Interpersonal skills, problem solving & situational awareness

PHASE 4

Result evaluation of all skills

This is a concluding phase where the tasks from previous phases are listed along with skills summary evaluation score and further improvements mentioned

Tasks

• Read through the performance assessments

Skills Reviewed

Interpersonal skills, problem solving & situational awareness



Building the VR environment Stage 1: Translating the taskflow into storyboard visuals









Stage 2: Translating the 2D storyboard into 360 virtual enviroment







Stage 3: Mapping virtual objects across the environments

Virtual Objects around the Scene



Stage 3: Mapping auditory elements across the environments

On field ground Onboarding. Valceover 8 Traffic Sounds (Case Companions and Honking) audio. Sound of Ambulance Siren Family Member crying 47 2 Ambulanc Whispering Dispat EMT U Birds Chirpleg ey.

Auditory Elements



Stage 3: Mapping UI elements across the environments

On field Patient Assessment Task Options Suggestion-Priority of Treatments Patient Vitals First course treatment atient symp **Task Options** Task Options Task Options Suggestion-Be more Patient Background prepared Onboarding Task Task Options Options regestion-Gather more information Signifier We have been Reticle to help navigate world -47 +47 Whispering autho

UI Elements



Low-Fi Prototype: Accident Site



Low-Fi Prototype: Inside Ambulance





Low-Fi Prototype: Hospital Staff office





Assets & Elements of the Scene: Hospital Staff office









Scene: Debriefing



Characters: Doctor



Lighting: Indoor lighting with focus on the interaction object



Interaction Objects: Doctor Character

Assets & Elements of the Scene: Accident Site





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Scene: Site & patient assessment





Characters: Patient, Patient's Wife and Passer-by Crowd

Interaction Objects: Patient itself

Assets & Elements of the Scene: Inside Ambulance





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Scene: First course of treatment





Characters: Patient and Patient's Wife

Interaction Objects: Patient itself

UI design

lcons



Sub-Options

ן Yes I will report immediately

2

Could you tell me a bit more about the emergency to prepare better?

Highlighted Options

CPR

First Aid for cuts



1 We will handle this Ma'am **2** Dont worry ma'am, we will handle. Could you give us a few more details about the incident?

Support wrist injury

UI design & Interactions

UI Element		Interaction	Feedback
	lcons	Reticle expands when hovers over the UI icon	On gaze options and relevant audios are triggered
l Yes I will report immediately	Sub Options	O Reticle expands when hovers over an active option	On gaze relevant audios and animations are triggered. Affects the final assessment
CPR	Highlighted Options	Reticle expands when selecting the options in order	Highlights based in the order of selected that triggers an animation

Sound Design



Focus & Out of Focus

UI elements coded to increase environmental sound when focus is not on the patient.



Sounds designed specific for each of the environments as 3D surround sound.

Surround Sound



Character Dialogues

Experience guided by a narrator, family member and the doctor character.

Instructional Design Pivot Points & Iterations



Bridge between the theory and practical training

Activate existing knowledge of the learner; aiding them connect previous knowledge with the new one

Breaking down aspects of complex tasks

Engage with smaller different activities that recall, utilize, and evaluate knowledge with immediate feedback.



Effect of decisions: positive and negative consequences

Demonstrate the knowledge (visually and through story telling) to help them practice and learn from their mistakes

User Testing



What worked?

- 1 User felt the immersion of being in the high stress environment due to the sound and visual design
- 2

User could understand the flow of events and activities to be performed









Future Scope

Building more scenarios for the EMTs to work with and understand the nuances of. Adding more evaluation aspects and complexity by testing skills such as teamwork, etc.

Impact



Strengthening the medical community by training the first responders (EMTs)



First step towards catering to the mental health of medical professionals (high stress job)





Addition of activities with more user based actions pertaining to different cases.



Accustom to practices and beliefs of different cultures and areas in the world