Codes, Clues, and Clinical Skills: Building a Psychiatric Escape Room

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Introduction:

Undergraduate medical curricula are constantly evolving, shifting from rigid didactic teaching approaches to adaptive and competency-based frameworks, with the help of artificial intelligence, virtual reality and simulation. These creative approaches help to encapsulate some of the complexities and uncertainties seen within psychiatric practice and help provide a realistic experience of working within this speciality of medicine (Fides-Valero et al., 2025).

Escape rooms are increasingly used as active learning tools within other areas of undergraduate medical education. This gamification approach, coupled with experiential learning, allow students to be immersed within a simulated scenario, providing invaluable experiences (Khera et al., 2025).

This approach is a first of a kind, which couples the principles of an education focused escape room with the basics of psychiatry. This psychiatry themed escape room was offered on a pilot basis to fourth year medical students based at Bushey Fields hospital from September 2025 – Mar 2026. The aim of this psychiatric escape is to foster consolidation of clinical knowledge regarding basic principles of psychiatry, and encouraging collaborative problem-solving amongst students.

Results & Discussion:

A mixed methods approach was undertaken for this study. A total of 18 students participated within this escape room session over 4 iterations. 16 students completed the pre-session questionnaire, and 18 students completed the post-session questionnaire.

Figure 2: Word cloud of the qualitative data gathered from the post session questionnaire

100% of students reported that they found this escape room session educational. 94% of students agreed that this psychiatry themed escape room should be offered to future students.
Inductively analysing the qualitative data provided by students, suggests the students found the psychiatric escape room 'engaging' and 'fun' and 'educational' – ask shown by Figure 2.

A global improvement in confidence was reported in all domains after students partook in the psychiatric escape room, as shown by Figure 3.

Particular improvement in confidence was noted with regards to assessing risk (pre session mean score= 3.19; Post session mean score = 4.06) and when formulating a management plan (pre session mean score= 2.81; Post session mean score = 3.84), after students had undertaken the psychiatric escape room.

Figure 3: Difference in confidence scores after students undertook the psychiatry themed escape room

Methodology:

A novel psychiatry escape room was designed and created for an escape room lasting up to 1 hour (Figure 1).

Students were welcomed to the session and introduced to the escape room and informed that this escape room consists of five tasks, which need to be solved in a sequential manner and asked to complete a pre session questionnaire.

SCENARIO BRIEF : Students were informed that they have been called by the ward, and told that a patient – Alex Taylor, has absconded and staff are unsure of what to do next. Staff inform the students that they only have Alex Taylor's paper file, and Alex's partly locked backpack to hand.

Task 1 consisted of students using the materials available (within folder + backpack) to fill in a history taking proforma, later discussing their findings and discussing possible differentials.

Task 2 is hidden within a zipped compartment of the backpack, and students were asked to match and arrange various statements (included within an envelope) to gather the findings of a mental state examination (MSE). Findings of this MSE were discussed and the role and purpose of MSE was discussed further, with the students.

To progress to Task 3, students needed to work out the code to the padlock (attached to the bottom compartment of the backpack). Task 3 asked students to complete a risk assessment using all the information they have gathered about Alex, later discussing the importance of formulating a good risk history.

Upon completion of Task 3, a nurse (facilitator) interrupts and reports that the biochemistry lab has reported that Alex's blood test results are deranged - Task 4. Students were given Alex's blood test results, and his drug chart, and are asked to work together as a team to identify any errors. The drug chart includes drug errors, and the blood tests show a derangement in various electrolytes, later leading to further discussion.

For Task 5, students are informed that Alex has been found by the police and brought back to ward, and have been asked to assess Alex (using electronic records) and formulate a management plan. Students considered both pharmacological (anti-psychotics) and nonpharmacological interventions; role of Mental Health Act was discussed. Students were encouraged to ask any further questions at the end of the session, leading to further discussion.

The pre and post session questionnaires asked students to record their confidence (using likert scales) regarding management of psychiatric situations, assessing risk, formulating differentials and management plans were distributed. Further qualitative data was gathered from students regarding their learning and experiences regarding the psychiatry-themed escape room.

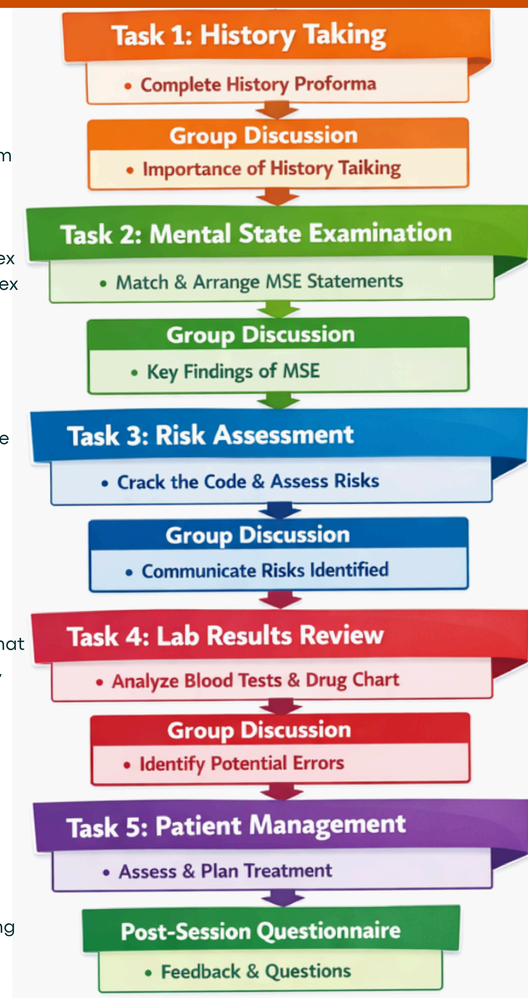

Figure 1: Flow chart diagram outlining the tasks within the escape room

Limitations:

This study shows that student appreciate an interactive approach to psychiatric education. However this study was labour intensive at time, and required through planning and foresight. Additionally students reported that this escape room worked well with 3-5 students, and if upscaled could include multiple groups racing each other to solve the puzzles.

Conclusion:

Using a psychiatric escape room within undergraduate medical education allowed students to consolidate their psychiatric knowledge in a safe environment. Students reported a greater appreciate for the basics of psychiatry, leading to resident doctors being well equipped with key psychiatric principles, improvement in practice and patient care. This escape room will be offered at other sites within the Trust, and future work includes possible expansion to resident doctors early within their training based locally.

Acknowledgements and References:

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