CITY COLLEGE

MONTANA STATE UNIVERSITY BILLINGS

Nursing Program

Simulation Program Policy and Procedures Manual

Table of Contents

INTRODUCTION & GENERAL SIMULATION PROGRAM POLICIES

A. Introduction/Philosophy

The MSUB City College Nursing Program has expanded its use of simulation as a means of preparing nurses for safe, effective, and efficient practice in an increasingly complex healthcare environment. Simulation helps students develop and hone knowledge, skills and abilities and bridges the gap between classroom and real-life clinical practice. It is a valuable tool for providing students with exposure to diversity, high-risk, low-volume events and interprofessional learning experiences. The Department of Nursing is committed to providing the necessary infrastructure for ensuring quality evidence-based simulation education.

B. Simulation Standards

MSUB City College Nursing Simulation program strives to follow the standards of best practices set forth by the International Nursing Association for Clinical Simulation and Learning (INACSL) and Society for Simulation in Healthcare (SSH). These standards address safety, simulation design, outcomes and objectives, facilitation, debriefing, participant evaluation, professional integrity, simulation - enhanced interprofessional education and simulation terminology.

C. Accreditation

MSUB City College Nursing Simulation program guided by the Department of Labor grant requirements will maintain a Simulation Professor with a Certified Healthcare Simulation Educator (CHSE) certification as lead of the simulation program. This certification will be obtained and maintained through the Society for Simulation in Healthcare (SSH).

D. Simulation Integration within Curriculum

Simulation-based learning is an integral part of the nursing curriculum and is embedded into clinical courses where appropriate. Simulation based learning is introduced to students in their second semester with Pharmacology lab and Fundamentals lab and is integrated throughout the curriculum culminating in the final course NURS 260 Adult III lab. As students' progress through the curriculum, the level of complexity of simulated cases increases incrementally to align with course content and the expected level of knowledge, skills and abilities of the student nurse.

E. Simulation Lab Guidelines

To minimize risk to participants and equipment, all individuals using the MSUB City College Nursing Simulation and Skill Labs are expected to adhere to and sign the Simulation Contract and Confidentiality Agreement.

The Simulation Labs provides a learning resource for nursing students and other learners participating in interprofessional learning opportunities. They are intended to simulate a clinical environment to provide the level of realism/fidelity required to promote experiential learning. The equipment in the labs is fragile, expensive and must be protected from damage. The labs expose students to hazards that may be encountered in the clinical settings, such as sharp instruments and glass ampules.

F. Simulation Policy and Procedure Development, Revision and Approval

The Policy and Procedure Manual is reviewed annually by the Nursing Faculty for necessary revisions and updates.

Simulation Lab Policies & Procedures

A. Physical Description

Location – The facility is located on the second floor of Health Sciences (HCST) Building Room 265, 243 and 247 at the City College Campus.

Hours of Operation and After Hours Access – The Simulation Lab is open to student and faculty use by appointment. After hours and weekend access must be approved in advance by the Simulation Professor and the Nursing Program Director before a simulation event can be scheduled. After hours use of the Simulation Lab is limited to individuals and groups actively participating in a program approved by the Department of Nursing. Students must be supervised by a faculty member when using the Simulation Lab.

B. Equipment and Supply Inventory

It is the policy of MSUB City College to maintain and update facilities and equipment based on an inventory of usage. The Simulation Professor replenishes equipment and supplies as necessary to meet the needs of users. The Simulation Professor orders software, equipment, medical supplies, etc., maintains proper functioning of equipment, and trouble shoots and resolves technical issues.

The Simulation Professor restocks supplies at the beginning of each semester and as needed during semesters. When supplies are running low, the Simulation Educators notify the Simulation Professor in a timely manner to allow for restocking or ordering. The simulation Professor must be notified of any damage, malfunctioning, or missing equipment/furniture/supplies.

Supplies needed for each simulation are provided to students. Personal clinical supplies such as stethoscope, penlight, and calculator are the responsibility of the student and are not routinely provided. It is the expectation of the students and faculty that all supplies are returned to their designated storage area, that unless

soiled, all linens should be refolded and placed back in the cabinet and that all soiled linens should be placed in the linen hamper for cleaning. Also, students and faculty are expected to restock reusable supplies, and refrain from reusing needles/sharps under any circumstances.

C. University Purchasing of Equipment and Supplies

Ongoing supply needs are budgeted and procured by the Simulation Professor and the director of the Nursing Program on an annual basis. The Simulation Program maintains an inventory database which includes date of purchase, date of repairs, maintenance contract expiration dates, and completion dates of scheduled maintenance. Simulation equipment/technology life cycle estimates are based on age of the equipment, hours of use, and serviceability and are used to project the need for equipment/technology replacement, refurbishment, and/or retirement. The Simulation Professor and the Nursing Program Director maintain an ongoing prioritized list of equipment to be purchased. Major equipment purchases are made after a reasonable evaluation of available products. At a minimum, the Simulation Professor and educators who will be using the equipment evaluate potential products for purchase. Simulation Educators and the Simulation Professor select products to evaluate based on information provided by vendors. Once equipment and supply purchases are approved, the Simulation Professor is responsible for coordinating the purchase, delivery, and setting up of the new equipment. Simulation Educators and the Simulation Professor arrange training on new equipment with vendors, as necessary.

The MSUB City College Nursing Program seeks outside sources of potential funding such as grants for equipment purchases exceeding budget limits.

D. Storage and Maintenance of Simulation Equipment & Supplies

The Simulation Professor is responsible for the storage and maintenance of all simulation equipment and supplies:

AFTER EACH USE:

- Wipes down all manikins and low fidelity skills trainers to remove all adhesives, moulage and markings.
- Drains all fluids and flushes the tubing system. Tops off all fluids as needed.
- Cleans and disinfects all equipment as per directions and equipment instructions.
- Assesses all task trainers, manikins and medical equipment for obvious damage, leaks, necessary part replacements, and cleanliness. If not in use or scheduled to be used, once wiped, drained and dried, stores in appropriate area.

- Checks supply of sheets replaces as needed. Changes dirty/wet linen and clothing.
- Returns unused disposables to storage.
- Powers off simulators, PC's and patient monitors.

WEEKLY:

- Cleans and inspects all equipment.
- Wipes down skin/covers. Removes any adhesive, moulage or markings left on skin.
- Calibrates all sensors and monitors (including audio/visual systems).
- Drains all fluids and flushes tubing systems. Tops of fluids as needed. Adds anti-fungal agent or other protective solutions as needed.
- Changes dirty/wet linen and clothing.

MONTHLY:

- Inspects (and if needed replaces) all disposable parts.
- Assesses for wear and tear that might need major work or factory service.

ANNUALLY:

- Schedules and coordinates preventive maintenance of equipment through respective vendors.

AS NEEDED:

- Contacts vendor for onsite maintenance or verbal/written guidance if equipment issue is unable to be successfully resolved.

STORAGE:

- Access to simulation labs and supply and equipment areas are restricted. Equipment and supply storage areas remain locked, and access is restricted to the Nursing Faculty and building manager. Simulation labs are locked after hours and when nursing faculty or educator supervision are not available.

E. Use of Simulators and Equipment by Outside Entities

It is the policy of the Nursing Program that simulators must be operated only by trained operators. Departments outside the Nursing Program requesting use of simulators are required, at a minimum, to employ the simulation Professor or a

Simulation Educator. Reimbursement is also required for supplies and any expenses that may be incurred because of damage to the equipment.

PROCEDURE:

1. Requests shall include:
    a. The date(s) and time(s) simulator is requested for use
    b. The person conducting the simulation
    c. The type of simulation to be conducted
    d. The training level of students and educators involved.
    e. Mutually agreed upon commitment from and compensation for Simulation staff and/or Simulation Educators
2. Permission is granted or denied depending on the availability of the Simulation Lab, simulator and the simulator operator with respect to the Nursing Program's teaching/learning needs.
3. Entities outside of MSUB/City College requesting use of simulators and/or the simulation laboratory will be evaluated for appropriateness by the Nursing program director and/or the Simulation Professor.

F. Use of Outside Presenters/Instructors

Simulation Educators using outside presenters/instructors must inform and receive approval from the Simulation Professor and/or the Nursing Program Director PRIOR to engaging the outside presenter/instructor.

G. Visiting Tours

Requests for tours/demonstrations of the Simulation Lab are coordinated with the Nursing Program Director and/or the Simulation Professor.

H. Equipment and Supply Loans

Requests for equipment and supply loans must be approved by the Nursing Program Director and coordinated with the Simulation Professor. Due to the expense and fragility of the technology equipment and supply loans will be determined on an individual basis and approval is limited.

Responsibilities & Accountability

A. Simulation Program Educators and Simulation Professor

Simulation Program Educators include the Faculty in the Nursing program who teach in courses which contain a simulation component. The Simulation Professor performs coordination, technologist and simulation program director duties as outlined in this policy and procedures manual.

B. Simulation Professor Responsibilities

Duties include, but are not limited to:

- Collaborate with educators to determine student requirements and correlate those requirements with course objectives to assist in the development of appropriate and effective healthcare simulation sessions.
- Coordinate and collaborate in the development of student summative assignments and evaluations with course instructors.
- Provide support for students and educators to improve competencies and skills in meeting course objectives.
- Maintain and update facilities and equipment inventory.
- Promote the use of the Simulation Lab and schedule and coordinate training sessions to provide for interprofessional education.
- Obtain and Maintain a Certification in Healthcare Simulation Education (CHSE).
- Schedule room usage and equipment needed.

C. Simulation Educator Orientation

New simulation educators are oriented to the Simulation Program, Simulation Lab, supply and equipment usage and storage, and simulation policy and procedures through a directed orientation and mentorship model. A needs assessment is used to determine the need for additional simulation pedagogy education on an individual basis.

D. Simulation-related Education & Certification

The MSUB City College Nursing Simulation Program is committed to ongoing Simulation Educator development related to simulation. The Simulation Professor and Nursing Faculty are encouraged to attend national, regional and local simulation conferences and educational activities as the budget allows in accordance with travel policies for the college. The Simulation Professor is required to attain and maintain simulation certification.

E. Simulation Program Educator Responsibilities

The responsibilities of the Simulation Educators include, but are not limited to:

- Adherent to simulation standards of best practice
- Maintain a psychologically safe and engaging learning environment
- Utilize best practices in the development, design and evaluation of simulated scenarios and sim lab activities
- Participate in personal development of simulation-related knowledge, skills and competencies
- Coordinate needed lab hours and supplies for scenarios with Simulation Professor
- Ensure students leave labs clean and in order prior to departing

- Ensure students are not left in Simulation Labs unattended, unless otherwise prearranged
- Provide ongoing input and feedback to the Simulation Professor for continuous quality improvement and quality assurance

F. Student Responsibilities

Students are expected to arrive prior to the start time of their session as determined by the instructor and abide by the following requirements:

- Participates in a Simulation Lab orientation provided by a Simulation Educator and/or Simulation Professor
- Read and acknowledge the Fiction Contract, Sim Lab Guidelines and confidentiality agreement.
- Complete assignments as outlined by the Simulation instructor and/or syllabus for the corresponding course
- Gather and return equipment used for skill performance
- Approach situations and scenarios as if they are actual patient interactions
- Maintain safe practice
- Maintain cleanliness of the area
- Dispose of sharps appropriately
- Display professional courteous conduct showing respect and consideration for self and others

G. Confidentiality, Distribution, and Retention of Simulation Data

All simulation scenario practice sessions, video recordings and student records are considered confidential and are the property of MSUB City College. All interactions with simulators should be treated as real client experiences. Discussion of scenario or information outside of these parameters is considered a violation of the Fiction Contract/Confidentiality Agreement. Simulation Educators, staff and students are expected to adhere to the Fiction Contract and uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws requiring confidentiality. Students should report any violations to the Simulation Educator or Professor. Simulation Educator/Professor should report any violations to the Program Director.

All simulation data, video recordings, electronic and non-electronic documents are stored in secured location and are retained in accordance with university policy governing student evaluation data. Video recordings used solely for teaching purposes during debriefing and peer review are deleted after use. Access to any retained records is restricted to the appropriate Nursing Faculty.

In some situations, confidentiality may be limited. These include instances of unsatisfactory performances, collection of data for research studies, internal review and quality improvement purposes or when continuing education credits are awarded for course participation. In the event of unsatisfactory performance, evaluation data may be reported to the appropriate faculty and administrators within the Nursing Program. When research is conducted, investigators conducting studies are required to obtain IRB approval. Student anonymity and confidentiality will be protected. When continuing education credits are awarded for course participation the release of the participant roster to the accrediting body may be required.

H. Scheduling and Cancellation Procedures

Currently all simulation events are coordinated between simulation educators, the simulation professor and the nursing program director.

I. Simulation Educator Orientation

All new Simulation Educators will receive a department level orientation to simulation. A more specific course level simulation orientation will be individually tailored to each Simulation Educator based on their role with simulation within their respective course. The nursing program director is responsible for facilitating the department level orientation to simulation.

J. Student Orientation

Students receive an orientation to the Simulation Program prior to their Simulation Lab experience or on their first day of participation prior to a sim event. Orientation includes, but is not limited to, the Fiction Contract, the Simulation Policy and Procedure manual, confidentiality expectations, and the simulated environment (equipment, manikins, and supplies). A simulation prebreifing is conducted prior to scenarios. A well-designed and executed prebreifing sets the tone for the scenario and debriefing. Prebreifing activities include, but are not limited to, clarifying expectations, review of scenario objectives, and orientation to the simulated environment.

K. Psychological Safety

The Nursing Program is committed to ensuring a psychologically safe and engaging learning environment. In the event of psychological concern or distress during any phase of the simulation experience, Simulation Educators offer first-line support or assistance to students. If additional assistance or resources are needed, the student is referred to the University's counseling services.

L. Faculty and Student Evaluation of Simulation Activities

The Nursing Program utilizes a variety of methods for collecting evaluation data on simulation activities. Data collected includes but is not limited to, Simulation

Educator and student surveys of simulation scenarios, annual learning surveys, student participation in annual focus groups, and student representation on various departmental committees. Data collected are analyzed by the Simulation Professor, nursing faculty, and nursing program director for direct consideration of quality improvement and curriculum design.

Simulation Program Evaluation and Quality Improvement Plan

In accordance with the MSUB City College's Simulation Lab's mission to improve patient safety and clinical outcomes using healthcare simulation, the program actively contributes to quality improvement (QI) initiatives identified by the Nursing Program. To contribute to the QI process, the nursing faculty participate in departmental committees and develop simulation-based education to support proposed initiatives.

The Nursing Program believes that learner and instructor feedback provide the best means to identify areas for opportunity and potential improvement. To encourage this type of dialogue survey tools will be administered annually to nursing faculty and after each simulation event for students. Faculty meetings, clinical course meetings, end of course evaluations, and community stakeholder forums are other means by which the Simulation Educators, Simulation Professor and Nursing Program Director can review and discuss current practices and receive feedback from key stakeholders.

All complaints and suggestions are taken seriously and continue to be discussed in nursing faculty meetings until a successful resolution is reached. Utilization of learner feedback enables the Simulation Program to identify ways to improve course planning, debriefing, student enrollment and access to course materials.

Finally, providing centralized access to current simulation lab policies, schedule, and information is essential in the ongoing process to improve quality.

Scenario Development, Implementation, & Resources

A. Scenario Development and Equipment Integration

The Simulation Program has a designated standardized scenario template for use with scenario development. The use of a standardized template helps to ensure scenario cases encompass critical components including pertinent physiology of the patient, supplies, equipment, and necessary case information.

The Simulation Program is committed to making the simulated setting as realistic as possible. The Simulation Professor works with the Simulation Educators to identify appropriate equipment and supplies for creating a realistic simulated setting for each case scenario. Newly developed scenarios are piloted for one semester to evaluate feasibility, appropriateness, and contribution to achieving objectives for the simulation experience. Revision of scenarios is systematic and ongoing.

When an instructor wants to develop a new scenario, they need to fill out a scenario builder template and submit it to the Simulation Professor. (See Simulation Design Template) This tool will facilitate the creation of a standardized scenario template. The faculty and Sim Professor will then collaborate to finalize the scenario. Programing of the manikin and creation of the simulation faculty guide will be the responsibility of the Simulation Professor. Scenario faculty guides are laminated and stored in a central location within the simulation lab. They must not be copied in order to preserve the academic integrity of each scenario across semesters, similar to the handling of academic tests.

B. Scenario Authorship and Ownership

Simulation scenarios and associated products developed by the Simulation Professor and the Simulation Educators are the intellectual property of the MSUB City College Nursing Program.

C. Simulation Scenario Preparation and Set-up

It is expected that the Simulation Educator will review the scenarios thoroughly prior to class and work with the Simulation Professor to obtain supplies and equipment as needed.

D. Debriefing

In accordance with the INACSL Standards of Best Practice: Simulation Debriefing (INACLSL, 2021), all simulation -based learning experiences will include a planned debriefing session using reflective practices to ensure the best possible learning outcomes and improve future performance. It is the philosophy of the Nursing Program that debriefing is a critical component of the simulation exercise. Debriefing provides immediate feedback after the simulated experience and is a reflective critical thinking analysis and communication tool for participants for the simulation event. Participants have time to reflect on their performance and receive constructive feedback from the Simulation Educator and/or peers. Debriefings will be facilitated in a psychologically safe learning environment by Simulation Educators who possess debriefing skills.

E. Scenario Use

It is the responsibility of the Simulation Professor to ensure that all cases include current acceptable best practices and standards of care.

F. Recording Simulation and Debriefing Activities

Simulated scenarios and debriefing activities may be recorded. Participants are notified of intent to record in advance and consent is signed at the start of each semester. Recordings may be used for:

- Providing feedback to students during debriefing
- Assessing performance
- Internal review and quality improvement purposes
- Evaluation and improvement of teaching and assessment processes

Video recordings are deleted after use with debriefing unless retained for one of the aforementioned reasons. All audio/video recordings are stored in a way to restrict access to the appropriate nursing Simulation educators, staff and administrators. Any copying, duplication, or other form of distribution of audio or video footage of students and/or faculty is prohibited. Violation of this policy may result in student dismissal or educator/staff disciplinary actions.

Safety Procedures

A. Emergency Procedures

All educators are to ensure that lab rooms are secure and safe when using the rooms. Doors should be locked when not in use. It is the responsibility of the educators and students to be aware of the location of emergency exits on each floor of the Health Sciences Building. Maps are posted near exits and elevators marking the evacuation route and the Designated Rescue Area. Students who need assistance should identify themselves to the Simulation Educator. In case of a fire, all people are expected to evacuate the building. Fire extinguishers are located throughout the building each hallway and close to the stairwells of each floor. In the event of a fire, auditory alarms will sound, and visual alarms will be displayed.

B. Required Identification

Unless otherwise instructed, students performing clinical skills are expected to wear clinical attire while in the Simulation Lab. Students should adhere to the same requirements as in the clinical setting.

C. General Safety

All students are instructed on safe handling techniques prior to practice and demonstration. Students should use caution when practicing lifting skills and should not lift a manikin or heavy object without assistance. The wheels of all

equipment (beds, wheelchairs, stretchers, etc.) are to be locked during practice and after use. Any accident or injury needs to be reported immediately to the Simulation Educator and or Simulation Professor. An incident report is completed for all accidents/injuries.

D. Hazordous Waste/Sharps Policy

All sharps used in the Simulation Lab should be disposed of in the approved receptacle (sharps containers). Sharps containers are readily available in all Simulation Labs. Full sharps containers are reported to Simulation Educators.

E. Defibrillation

Defibrillators used in the simulation lab are real (not simulated) defibrillators. To ensure participant safety when defibrillators are used, the maximum electric output allowed is 20 joules. Users are required to maintain all recommended safety precautions for defibrillators. "I'm clear, you're clear, we are all clear" must be stated prior to each shock to ensure safety. Before delivering a shock, users must PAUSE and visually look around to make sure team members are not touching the bed and/or the simulator.

F. Medications

Labeling for all medications, both simulated and real, indicate that they are for simulated use only.

G. Latex Policy

Students and Simulation Educators are informed that some of the equipment in the Simulation Lab contains latex. Those with a known sensitivity/allergy to latex are required to contact Simulation Professor PRIOR to engaging in any activity in the lab. Every effort will be made to replace equipment with latex-free substitutions. All users who suffer from latex allergies should take precautions while using or handling latex equipment by wearing non-latex gloves.

H. Food/Drink Policy

Food is not permitted in Simulation Labs. Food and beverages are permitted in the prebrief/debrief area only.

I. Incident Reporting

Incident reports will be completed per the direction of the Nursing Program Director and will be directed to proper administrative personnel within MSUB City College.

References

National Council State Boards of Nursing (NCSBN) Simulation Guidelines for Prelicensure Nursing Programs

https://www.ncsbn.org/11494.htm

International Nursing Association for Clinical Simulation and Learning (INACSL) Healthcare Simulation Standards of Best Practice

https://www.inacsl.org/healthcare-simulation-standards

Healthcare Simulation Dictionary

https://www.ssih.org/Dictionary

Healthcare Simulation Code of Ethics

https://www.ssih.org/SSH-Resources/Code-of-Ethics

Confidentiality Agreement

The MSUB City College Nursing program incorporates simulated experiences throughout the curriculum to prepare students for actual patient situations. The roles of patients, family, and the inter-professional team are carried out by students, faculty, staff, and/or mannequins. I will be expected to conduct myself during this learning experience as if I am in a real clinical situation and treat everyone involved, including the mannequins, in a professional and realistic manner.

I understand the significance of confidentiality as it pertains to information concerning simulated patients and students. I also understand that the content of these simulations is to be kept confidential to maintain the integrity of the learning experience for myself and other students. I will be witnessing other students' performances, and I understand that it is unethical for me to share information in any format (verbal, written, electronic, social media) regarding student performance with persons outside the laboratory or classroom. I acknowledge that I fully understand that unauthorized sharing, distribution, or mishandling of confidential information is prohibited, and could result in serious consequences. I understand that if simulation is used as a means to evaluate performance, evaluation data may be reported to the appropriate personnel with the nursing program.

I will uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal or state laws regarding confidentiality.

I agree to adhere to the following:

- I understand that the simulation mannequins are to be considered live patients and treated professionally and with respect.
- I understand that all patient information, either simulated or real, is confidential, and discussion or disclosure of this information outside of the simulation experience is a violation of MSUB City College Nursing Program Policy. This may also constitute a violation of HIPAA.
- I understand that simulation debriefing sessions may be recorded and I agree to keep all information secure and confidential.
- I understand that I am not to remove, release, share or discuss any observed, written, or electronic information that may be provided to me as part of my educational experience in the MSUB City College Simulation Lab.

NAME

DATE

Simulation Contract and Confidentiality Agreement

YES – I understand that I must uphold all the guidelines and stipulations outlined in the MSUB City College Nursing Simulation Fiction Contract and Confidentiality Agreement as a requirement for progressing successfully in the nursing program. I understand that and consent to the recording of my participation in the Simulation Lab. I understand that this will be used for educational and instructional purposes only withing the MSUB City College Nursing Program.

Fiction Contract

The purpose of simulation-based healthcare training is for you to develop skills, including judgment and reasoning, for the care of real patients. Using patient simulators and simulation teaching techniques, your instructors will recreate realistic patient care situations. The realism of each simulation may vary depending on the learning goals for the scenario. The simulated environment and patient have certain limitations in their ability to mirror real life.

When participating in the simulations, your role is to assume all aspects of a practicing healthcare provider's professional behavior. Additionally, when a gap occurs between simulated reality and actual reality, it is expected that you try to understand the goals of the learning session and behave accordingly.

Learner Responsibilities:

- Suspend judgment of realism for any given simulation in exchange for the promise of learning new knowledge and skills.
- PARTICIPATE FULLY – treat others with respect – everyone feels vulnerable.
- Maintain confidentiality after the simulation – helps to ensure everyone gets the same learning opportunity "**What happens in the sim lab STAYS in the sim lab**."
- Mistakes are acceptable! The goal is learning not perfection.
- Corrections are not personal attacks. Corrections are made in the interest of patient safety and your growth as a nurse.
- Say out loud everything you are doing and thinking.
- Do the action. Do not pretend anything.
- Help each other. Nursing is a team sport. We rarely do things in isolation.
- Maintain professional behavior – treat the simulated patient with the same care & respect due an actual patient.
- The instructor never tricks the learners. What you see on the monitor/mannequin is what is happening
- The instructor begins and ends the scenario.

MANNEQUIN CONSIDERATIONS:

no fluids

no pens

listening/operations considerations

monitor placement

Simulation Design Template

[insert name of patient] Simulation

Brief Description of Patient

Name:	**Pronouns:**	
Date of Birth:	**Age:**	
Sex Assigned at Birth:	**Gender Identity:**	
Sexual Orientation:	**Marital Status:**	
Weight:	**Height:**	
Racial Group:	**Language:**	**Religion:**
Employment Status:	**Insurance Status:**	**Veteran Status:**
Support Person:	**Support Phone:**	
Allergies:	**Immunizations:**	
Attending Provider/Team:		
Past Medical History:		
History of Present Illness:		
Social History:		
Primary Medical Diagnosis:		
Surgeries/Procedures & Dates:		

Psychomotor Skills Required of Participants Prior to Simulation

(list skills)

Cognitive Activities Required of Participants Prior to Simulation

(textbooks, lecture notes, articles, websites, etc.)

Simulation Learning Objectives

General Objectives (Note: The objectives listed below are general in nature and once learners have been exposed to the content, they are expected to maintain competency in these areas. Not every simulation will include all the objectives listed.)

1. Practice standard precautions.
2. Employ strategies to reduce risk of harm to the patient.
3. Conduct assessments appropriate for care of patient in an organized and systematic manner.
4. Perform priority nursing actions based on assessment and clinical data.
5. Reassess/monitor patient status following nursing interventions.
6. Communicate with patient and family in a manner that illustrates caring, reflects cultural awareness, and addresses psychosocial needs.
7. Communicate appropriately with other health care team members in a timely, organized, patient-specific manner.
8. Make clinical judgments and decisions that are evidence-based.
9. Practice within nursing scope of practice.
10. Demonstrate knowledge of legal and ethical obligations.

Simulation Scenario Objectives (limit to 3 or 4)

1.

Faculty Reference

(references, evidence-based practice guidelines, protocols, or algorithms used for this scenario, etc.)

The Healthcare Simulation Standards of Best Practice™
https://www.inacsl.org/healthcare-simulation-standards

Setting/Environment

☐ Emergency Department	☐ ICU
☐ Medical-Surgical Unit	☐ OR / PACU
☐ Pediatric Unit	☐ Rehabilitation Unit
☐ Maternity Unit	☐ Home
☐ Behavioral Health Unit	☐ Outpatient Clinic
	☐ Other:

Equipment/Supplies (choose all that apply to this simulation)

Simulated Patient/Manikin(s) Needed:

Recommended Mode for Simulator:
(e.g. manual, programmed, etc.)

Other Props & Moulage:

Equipment Attached to Manikin/Simulated Patient:	**Equipment Available in Room:**
☐ ID band	☐ Bedpan/urinal
☐ IV tubing with primary line fluids running at __ mL/hr	☐ 02 delivery device (type)
☐ Secondary IV line running at __ mL/hr	☐ Foley kit
☐ IVPB with __ running at mL/hr	☐ Straight catheter kit
☐ IV pump	☐ Incentive spirometer
☐ PCA pump	☐ Fluids
☐ Foley catheter with __mL output	☐ IV start kit
☐ 02	☐ IV tubing
☐ Monitor attached	☐ IVPB tubing
☐ Other:	☐ IV pump
	☐ Feeding pump
Other Essential Equipment:	☐ Crash cart with airway devices and emergency medications
Medications and Fluids:	☐ Defibrillator/pacer
☐ Oral Meds:	☐ Suction
☐ IV Fluids:	☐ Other:
☐ IVPB:	
☐ IV Push:	
☐ IM or SC:	

Roles

☐ Nurse 1	☐ Observer(s)
☐ Nurse 2	☐ Recorder(s)
☐ Nurse 3	☐ Family member #1
☐ Provider (physician/advanced practice nurse)	☐ Family member #2
☐ Other healthcare professionals: (pharmacist, respiratory therapist, etc.)	☐ Clergy
	☐ Unlicensed assistive personnel
	☐ Other:

Guidelines/Information Related to Roles

Learners in role of nurse should determine which assessments and interventions each will be responsible for, or facilitator can assign nurse 1 and nurse 2 roles with related responsibilities.

Information on behaviors, emotional tone, and what cues are permitted should be clearly communicated for each role. A script may be created from Scenario Progression Outline.

Pre-briefing/Briefing

Prior to report, participants will need pre-briefing/briefing. During this time, faculty/facilitators should establish a safe container for learning, discuss the fiction contract and confidentiality, and orient participants to the environment, roles, time allotment, and objectives.

For a comprehensive checklist and information on its development, go to http://www.nln.org/sirc/sirc-resources/sirc-tools-and-tips#simtemplate.

Report Students Will Receive Before Simulation

(Use SBAR format.)

Time:

Person providing report:

Situation:

Background:

Assessment:

Recommendation:

Scenario Progression Outline

Patient Name: **Date of Birth:**

Timing (approx.)	Manikin/SP Actions	Expected Interventions	May Use the Following Cues
0-5 min	(Verbal information provided by manikin or SP should be in quotes so a script can be created for individuals in those roles.)	**Learners should begin by:** • Performing hand hygiene • Introducing selves • Confirming patient ID	**Role member providing cue:** **Cue:**
5-10 min		**Learners are expected to:**	**Role member providing cue:** **Cue:**
10-15 min		**Learners are expected to:**	**Role member providing cue:** **Cue:**
15-20 min		**Learners are expected to:**	**Role member providing cue:** **Cue:**

Debriefing/Guided Reflection

Note to Faculty

We recognize that faculty will implement the materials we have provided in many ways and venues. Some may use them exactly as written and others will adapt and modify extensively. Some may choose to implement materials and initiate relevant discussions around this content in the classroom or clinical setting in addition to providing a simulation experience. We have designed this scenario to provide an enriching experiential learning encounter that will allow learners to accomplish the listed objectives and spark rich discussion during debriefing. There are a few main themes that we hope learners will bring up during debriefing, but if they do not, we encourage you to introduce them.

Themes for this scenario:

-
-
-

We do not expect you to introduce all of the questions listed below. The questions are presented only to suggest topics that may inspire the learning conversation. Learner actions and responses observed by the debriefer should be specifically addressed using a theory-based debriefing methodology (e.g., Debriefing with Good Judgment, Debriefing for Meaningful Learning, PEARLS). The debriefing questions for consideration are organized into the phases of debriefing, as recommended by the Healthcare Simulation Standard of Best Practice™ The Debriefing Process. The following phases are included below: Reactions/Defuse, Analysis/Discovery and Summary/Application. Remember to also identify important concepts or curricular threads that are specific to your program.

Debriefing Phase	Debriefing Questions for Consideration
Reactions/ Defuse	How did you feel throughout the simulation experience?
	Give a brief summary of this patient and what happened in the simulation.
	What were the main problems that you identified?
Analysis/ Discovery	Discuss the knowledge guiding your thinking surrounding these main problems.
	What were the key assessment and interventions for this patient?
	Discuss how you identified these key assessments and interventions.
	Discuss the information resources you used to assess this patient. How did this guide your care planning?
	Discuss the clinical manifestations evidenced during your assessment. How would you explain these manifestations?
	Explain the nursing management considerations for this patient. Discuss the knowledge guiding your thinking.
	What information and information management tools did you use to monitor this patient's outcomes? Explain your thinking.
	How did you communicate with the patient?

	What specific issues would you want to take into consideration to provide for this patient's unique care needs?
	Discuss the safety issues you considered when implementing care for this patient.
	What measures did you implement to ensure safe patient care?
	What other members of the care team should you consider important to achieving good care outcomes?
	How would you assess the quality of care provided?
	What could you do improve the quality of care for this patient?
Summary/ Application	If you were able to do this again, how would you handle the situation differently?
	What did you learn from this experience?
	How will you apply what you learned today to your clinical practice?
	Is there anything else you would like to discuss?

Guided Debriefing Tool

The NLN created a Guided Debriefing Tool to provide structure from which facilitator observations can make objective notes of learner behaviors in simulation in direct relationship to the learning outcomes. Download the NLN Guided Debriefing Tool.