TITLE: USE OF SIMULATION TO ENHANCE LEARNING

POLICY: The College of Nursing supports the use of simulation in all its forms to enhance the education of nursing students. In conjunction with the Campus Director, the individual faculty member is responsible for determining how to best incorporate simulation into his or her class to maximize learning outcomes. Simulation should not be used to wholly replace traditional patient clinical experiences in clinical courses, and courses with designated clinical lab hours must continue to dedicate the majority of hours to direct patient care.

RATIONALE: Emerging evidence suggests that human patient simulation is an effective teaching strategy in nursing education. To date, however, little evidence exists and no formal recommendations have been made regarding appropriate amount of time to be spent in simulation, nor the appropriate ratio of simulation to traditional clinical hours.

PROCEDURE:

1. Course coordinator
   a. Reviews course MRO and determines which learning outcomes may be effectively achieved using simulation.
   b. Plans implementation of simulation or delegates planning to appropriate team member. See Attachment 1 for general considerations related to planning.
   c. Designates specific team members (e.g., GTA, self) to run the simulation.
   d. Informs Campus Director of planned use of simulation, including purpose and total hours.
   e. Evaluates use of simulation for effectiveness in achieving desired outcomes.
   f. Reports equipment problems immediately to Campus Director or designee.

2. Campus Director
   a. Provides input and oversight for the appropriate use of simulation within a course.
   b. Oversees or appoints a designee to oversee lab operations, coordination of simulation lab schedule, supply acquisition, and manikin maintenance.

Reviewed/Approved by:
Level I: UAAC (April, 2011)
Level II: Associate Dean for Undergraduate Programs (April, 2011)
The following items may warrant consideration when planning and conducting simulation:

1. Which course or clinical objectives will simulation assist the student to achieve?

2. Which tools are needed for conducting the simulation experience?
   a. Simulation scenarios (on-the-fly vs. prepackaged)
   b. Manikins vs. live actors/standardized patients
   c. AV equipment and editing capabilities

3. What preparation is needed to conduct the simulation?
   a. What preparations are needed by faculty?
      i. Patient ‘charts’, medications, manikin moulage, etc.
   b. What preparations are needed by students?

4. How will simulation be conducted?
   a. What will the faculty role be in simulation? (e.g., patient voice, control of vital signs, videotaping, etc.)
   b. How will students be incorporated?
      i. One at a time vs. in teams or groups
      ii. Will all students participate in each scenario?
   c. Will student performance be videotaped or live streamed?
      i. Confidentiality agreements and student permission are required for taping and streaming
      ii. How will data be stored?

5. How will debriefing occur?
   a. Literature suggests that debriefing is the single most important aspect to effective simulation experiences.

6. How will evaluation occur?
   a. Will student performance in simulation experience be formally assessed or evaluated?
   b. Use of student performance for portfolio?