

Montana State University College of Nursing

Policy C-2 Use of Simulation to Enhance Learning Procedure

Purpose: This procedure provides guidelines for simulation and the use of simulation labs.

Definitions

Simulation: A pedagogy using one or more typologies to promote, improve, or validate a participant's progression from novice to expert (Benner, 1984; Decker, 2007).

Low Fidelity: Experiences such as case studies, role playing, using partial task trainers or static mannequins to immerse students or professionals in a clinical situation or practice of a specific skill (NLN-SIRC, 2013).

Moderate or Midlevel Fidelity: Experiences that are more technologically sophisticated such as computer based self-directed learning systems simulation in which the participant relies on a two dimensional focused experience to problem solve, perform a skill and make decisions or the use of mannequins more realistic than static low fidelity ones, having breath sounds, heart sounds and/or pulses (NLN-SIRC, 2013).

High Fidelity: Experiences using full scale computerized patient simulators, virtual reality or standardized patients that are extremely realistic and provide a high level of interactivity and realism for the learner (NLN-SIRC, 2013).

General Guidelines

1. For the purposes of these guidelines, "simulation" will refer only to Moderate and High Level Fidelity Simulations as defined above.
2. MSU-CON Policy #C-2 provides the foundation for these guidelines.
3. All simulation activities within MSU-CON will adhere to the International Nursing Association for Clinical Simulation and Learning (INACSL) Standards of Best Practice: Simulation (2013). (www.inacsl.org) (Appendix A)

General Simulation Guidelines

1. All users of the simulation labs are expected to display courteous and professional conduct.
2. There is absolutely no food or beverages allowed in the *patient care area* of the Simulation Labs.

Role of Campus Simulation Coordinator (CSC)

1. The CSC will be identified by the Campus Director. Specific role expectations will be discussed and agreed upon by the CSC and Campus Director.
2. CSC duties may include but are not limited to:

- a. Development and update of individual campus simulation policies, procedures, and guidelines, within the parameters of MSU CON Policy C-2
- b. Mentoring
- c. Serving as a member/participating on the Simulation Ad-Hoc committee
- d. Conducting routine in-service education/orientation for new faculty of the simulation lab and techniques.
- e. Conducting routine cleaning of the manikins, rooms, and supplies utilized in the simulation lab.

Faculty Responsibilities

1. Faculty using simulation in their courses will:
 - a. Provide proof of completion of the Center for Health Sciences Inter-professional Education (CHSIE) 100 and 200 level learning modules from the University of Washington.
<https://collaborate.uw.edu/e-learning/simulation/>
 - b. Complete debriefing education through INASCL resources and CSC guidance.
 - c. Complete the NLN Simulation Design Template 2015 (Appendix B) for each simulation scenario they anticipate using.
 - i. Submit to the CSC prior to implementation of scenario.
 - ii. Update templates as needed, and submit to CSC for review prior to implementation.
 - d. Prepare necessary equipment for each scenario and conduct scenarios as outlined on the template.
 - e. Hold a pre-brief routine that clearly identifies objectives for each simulation and ensure students have reviewed these prior to their simulation experience.
 - f. Conduct a debrief routine that utilizes INASCL debriefing techniques for each simulation.
 - g. Record and maintain documentation to include but not limited to simulation confidentiality agreement (Appendix C), audio visual consent (Appendix D), and log of simulation activities (Appendix E).
2. Faculty who have not previously used simulation or are not familiar with simulation equipment will complete all items listed above in Faculty Responsibilities and will schedule a time with the CSC for orientation to simulation at MSU CON.
3. After each use of the simulation lab, faculty are expected to:
 - a. Clean the manikin to remove all adhesives, moulage and markings.
 - b. Drain all fluids and flush tubing systems if used.
 - c. Power off manikin, PCs, wall monitors, and air compressors.
 - d. Tidy the simulation lab making sure to remove all extra equipment, return medications, props, etc to the correct storage area. Upon exiting the simulation lab, the manikin shall be sexless (if applicable) and the room shall be tidy.
 - e. Lock rooms to simulation equipment.
 - f. Complete SIM Use Log prior to exiting the lab (Appendix E).
4. Schedule simulation observation and assessment of debrief skills with CSC annually. Faculty on each campus will be trained in the “Debriefing Assessment for Simulation in

Healthcare” (DASH) method. They will review and provide feedback to all faculty utilizing sim annually.

Student Responsibilities

1. Nursing uniforms and/or professional dress are required for all activities in the simulation lab including name tags
2. Wash hands prior to entering the lab space
3. Do not use or bring into the lab markers, pens, pencils or betadine. These items can cause damage to the manikins
4. Students are expected to sign the confidentiality agreement and A/V agreement prior to participating in simulation, and to conduct themselves in a professional manner as outlined in the ANA code of ethics (2015). This includes confidentiality of all simulation activity.

References and Resources

Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice*. Boston, MA: Addison-Wesley.

Decker, S. (2007). *Simulation as an educational strategy*. Unpublished dissertation, Texas Women's University, Denton, TX.

INACSL. (2013). Standards of best practice: simulation. *Clinical Simulation in Nursing*, 9, Sii-Siii.

Appendix A

INACSL Standards

STANDARDS OF BEST PRACTICE: SIMULATION

The International Nursing Association for Clinical Simulation and Learning (INACSL) has developed the INACSL Standards of Best Practice: SimulationSM. The INACSL Standards of Best Practice: Simulation were designed to advance the science of simulation, share best practices, and provide evidence based guidelines for implementation and training.

INACSL provides a detailed process for evaluating and improving simulation operating procedures and delivery methods that every simulation team will benefit from. Adoption of the INACSL Standards of Best Practice: Simulation demonstrate a commitment to quality and implementation of rigorous evidence based practices in healthcare education to improve patient care by complying with practice standards in the following areas:

- **Standard I** - Terminology
- **Standard II** - Professional Integrity of Participant(s)
- **Standard III** - Participant Objectives
- **Standard IV** - Facilitation
- **Standard V** - Facilitator
- **Standard VI** - Debriefing Process
- **Standard VII** - Participant Assessment and Evaluation
- **Standard VIII** - Simulation Enhanced Interprofessional Education (Sim-IPE) (June 2015)
- **Standard IX** - Simulation Design (June 2015)

Appendix B

NLN Simulation Design Template

Date:	File Name:
Discipline:	Student Level:
Expected Simulation Run Time:	Guided Reflection Time:
Location:	Location for Reflection:

Admission Date: | Today's Date:

Brief Description of Client

Name:

Gender: Age: Race: Weight: Height:

Religion:

Major Support: Support Phone:

Allergies: Immunizations:

Primary Care Provider/Team:

Past Medical History:

History of Present Illness:

Social History:

Primary Medical Diagnosis:

Surgeries/Procedures & Dates:

Nursing Diagnoses:

Psychomotor Skills Required Prior to Simulation:

Cognitive Activities Required Prior to Simulation:

[i.e. independent reading (R), video review (V), computer simulations (CS), lecture (L)]

Simulation Learning Objectives

General Objectives:

Simulation Scenario Objectives:

References, Evidence-Based Practice Guidelines, Protocols, or Algorithms Used for This Scenario:

Fidelity (choose all that apply to this simulation)

Setting/Environment:

- ER
- Med-Surg
- Peds
- ICU
- OR / PACU
- Women's Center
- Behavioral Health
- Home Health
- Pre-Hospital
- Other:

Simulator Manikin/s Needed:

Props:

Equipment Attached to Manikin:

- IV tubing with primary line fluids running at mL/hr
- Secondary IV line running at mL/hr
- IV pump
- Foley catheter mL output
- PCA pump running
- IVPB with running at mL/hr
- O2
- Monitor attached
- ID band
- Other:

Equipment Available in Room:

- Bedpan/Urinal
- Foley kit
- Straight Catheter Kit
- Incentive Spirometer
- Fluids
- IV start kit
- IV tubing
- IVPB Tubing
- IV Pump
- Feeding Pump

Medications and Fluids: (see chart)

- IV Fluids
- Oral Meds
- IVPB
- IV Push
- IM or SC

Diagnostics Available: (see chart)

- Labs
- X-rays (Images)
- 12-Lead EKG
- Other:

Documentation Forms:

- Provider Orders
- Admit Orders
- Flow sheet
- Medication Administration Record
- Graphic Record
- Shift Assessment
- Triage Forms
- Code Record
- Anesthesia / PACU Record
- Standing (Protocol) Orders
- Transfer Orders
- Other:

Recommended Mode for Simulation:

(i.e. manual, programmed, etc.)

Student Information Needed Prior to Scenario:

- Has been oriented to simulator
- Understands guidelines /expectations for scenario
- Has accomplished all pre-simulation requirements
- All participants understand their assigned roles
- Has been given time frame expectations
- Other:

- Pressure Bag
- O2 delivery device (type)
- Crash cart with airway devices and emergency medications
- Defibrillator/Pacer
- Suction
- Other:

Roles/Guidelines for Roles:

Important Information Related to Roles:

- Primary Nurse
- Secondary Nurse
- Clinical Instructor
- Family Member #1
- Family Member #2
- Observer/s
- Recorder
- Physician/Advanced Practice Nurse
- Respiratory Therapy
- Anesthesia
- Pharmacy
- Lab
- Imaging
- Social Services
- Clergy
- Unlicensed Assistive Personnel
- Code Team
- Other:

Report Students Will Receive Before Simulation

Time:



Significant Lab Values: refer to chart

Provider Orders: refer to chart

Home Medications: refer to chart

Scenario Progression Outline

Timing (approx.)	Manikin/SP Actions	Expected Interventions	May Use the Following Cues
0-5 min			Role member providing cue: Cue:
5-10 min			Role member providing cue: Cue:
10-15 min			Role member providing cue: Cue:
15-20 min			Role member providing cue: Cue:

Debriefing/Guided Reflection Questions for This Simulation

(Remember to identify important concepts or curricular threads that are specific to your program)

1. How did you feel throughout the simulation experience?
2. Describe the objectives you were able to achieve.
3. Which ones were you unable to achieve (if any)?
4. Did you have the knowledge and skills to meet objectives?
5. Were you satisfied with your ability to work through the simulation?
6. To Observer: Could the nurses have handled any aspects of the simulation differently?
7. If you were able to do this again, how could you have handled the situation differently?
8. What did the group do well?
9. What did the team feel was the primary nursing diagnosis?
10. How were physical and mental health aspects interrelated in this case?
11. What were the key assessments and interventions?
12. Is there anything else you would like to discuss?

Complexity – Simple to Complex

Suggestions for Changing the Complexity of This Scenario to Adapt to Different Levels of Learners

APPENDIX C

MSU Simulation Confidentiality Agreement

*Montana State University
College of Nursing
Simulation Confidentiality Agreement*

As a participant in the simulation lab I understand the significance of confidentiality with respect to information concerning patients, real or simulated, and other participants including, but not limited to, MSU CON students, instructors, and staff. I will uphold the Health Insurance Portability and Accountability Act (HIPPA) and all other federal or state laws regarding confidentiality. Further, I agree to adhere to the stipulations stated below, and I agree to report any violations of confidentiality that I become aware of to my facilitator or instructor.

- All patient and student information is confidential regardless of format: electronic, written, overheard, or observed- and any inappropriate viewing, discussion, or disclosure of this information is a violation of MSU CON confidentiality policy
- The simulation lab is a learning environment. All scenarios, regardless of outcome, should be treated in a professional manner. Situations simulated in the lab are to be used as a learning tool and everyone will be treated with respect.
- No students are allowed in the Simulation Lab without Faculty/ Instructor present.
- I will dress in the same attire they would wear for clinical day including uniform and name badge.
- I will not touch any equipment in the simulation lab except for equipment with which I am directly working.
- I will be held responsible for damage to the equipment as a result of not following simulation lab policy, procedure, and guidelines.
- Misuse of any equipment by any student will result in my dismissal of from the Simulation Lab.
- I am permitted in the computer control area.

I will maintain confidentiality regarding the performance of other students in the simulation lab.

Students must sign two (2) forms prior to participation in simulation.

- Confidentiality Agreement
- Audio/ Visual Consent

Signature: _____ Printed Name: _____

Date: _____

APPENDIX D

MSU CON Simulation AV Consent

*Montana State University
College of Nursing
Audio Visual Consent*

I grant permission to MSU CON, its employees and agents, to take and use visual/ audio images of me. Visual/ audio images are any type of recording, including but not limited to photographs, digital images, drawings, renderings, voices, sounds, video recordings, audio clips, or accompanying written descriptions. MSU will not materially alter the original images. I agree that MSU owns the images and all rights related to them. The images may be used in any manner or media without notifying me, such as university-sponsored websites, publications, promotions, broadcasts, advertisements, posters, and theatre slides, as well as for non-university use. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them, or to be compensated for them. I release MSU CON and its employees and agents, including any firm authorized to publish and/or distribute a finished product containing the images, from any claims, damages or liability which I may ever have in connection with the taking of use of the images or printed material used with the images.

I am at least 18 years of age and competent to sign this release. I have read this release before signing, I understand its contents, meaning, and impact, and I freely accept the terms.

Signature: _____ Printed Name: _____

Date: _____

