University of North Carolina Wilmington

Simulation Learning Program

Faculty Handbook

POLICIES & PROCEDURES

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University of North Carolina Wilmington
Simulation Learning Center

The Simulation Learning Center (SLC) is used by undergraduate and graduate students from programs in UNCW School of Nursing (SON) and College of Health and Human Services (CHHS) and other academic institutions. The Simulation Learning Center (SLC) is a 10,000-square foot state-of-the art learning center comprised of six specialty labs, one five-room Home Care Lab and one Outpatient Clinic. It is a safe environment where students can practice beginning and advanced clinical skills to develop increasing proficiency.

Simulation scenarios, combined with the use of human patient simulators, simulated patients, and other simulation technology, create a realistic environment to promote cognitive, affective, physical, social, and professional development of the student. Simulation is “an educational strategy in which a particular set of conditions are created

or replicated to resemble authentic situations that are possible in real life" (INACSL Standards Committee, 2021, p. 62).

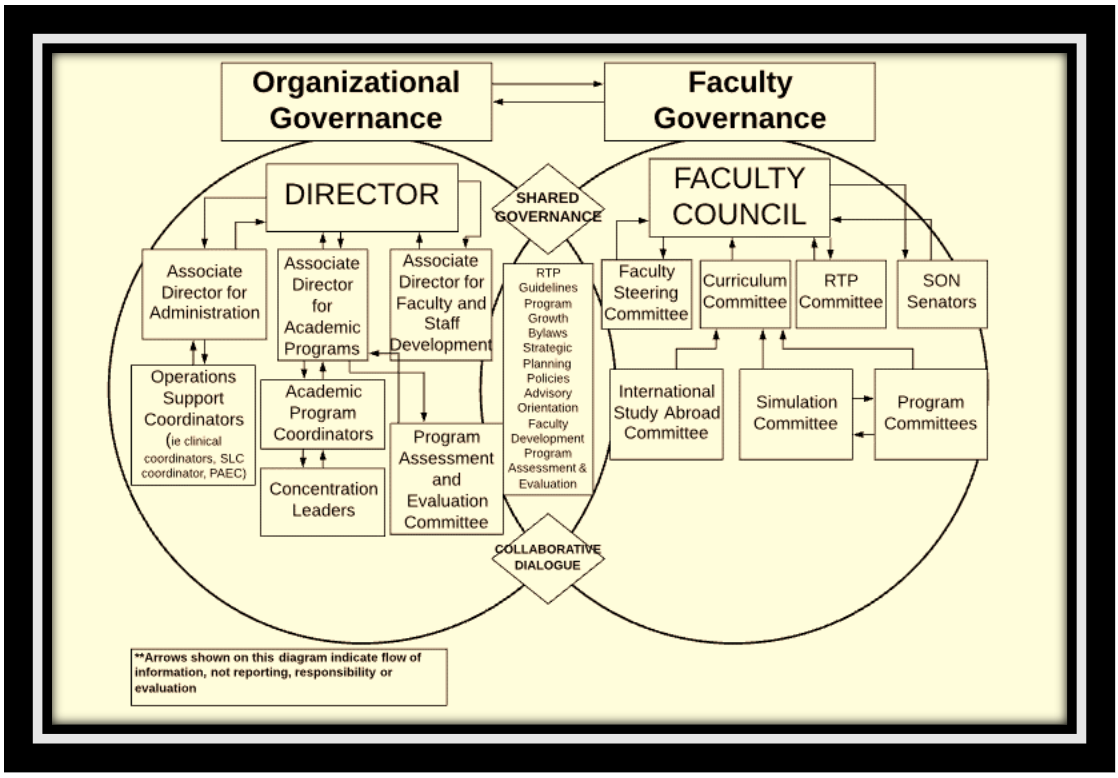
The overall goal of each skills practice or simulated activity is to meet the designated course objectives and student learning outcomes.

The **Vision** of our center is to improve healthcare outcomes through applied simulation learning.

The **Mission** of our center is to prepare healthcare professionals through excellence in applied simulation learning to develop critical thinking and clinical reasoning for safe healthcare.

Programs Served: Prelicensure Nursing, Doctor of Nursing Practice (4 tracks), Respiratory Therapy, Recreation Therapy, Athletic Training, Social Work, and any program in the College of Health and Human Services that requests services.

School of Nursing Organizational Structure



SLC Organizational Structure

Simulation Program Committee

- **Purpose:** To plan, implement, and evaluate simulation curriculum including all simulation teaching modalities and make recommendations to the Curriculum Committee. To oversee research/scholarship related to simulation.

- **Duties and Responsibilities**:

  i. Ensure consistency among simulation program policies, procedures and curriculum with INACSL Healthcare Simulation Standards of Best Practice, the mission and vision of the SON, student learning outcomes, conceptual framework of the SON, and policies and procedures of the college and university, and national accreditation standards.
  ii. Develop, revise, and recommend simulation pedagogy for curriculum and submits recommendations to the Curriculum Committee for review and approval
  iii. Ensure effective integration of simulation pedagogy, applied learning, and research/scholarship in support of program and student learning outcomes
  iv. Ensure consistency with INACSL research priorities for simulation program and submits report of priorities prior to the last SON Curriculum Committee meeting for the following academic year
  v. Review simulation policy and procedures and collaborate with Simulation Program Coordinator to establish new policies and procedures when indicated
  vi. Advocates for simulation resources based on program and curricular needs

- **Membership**

  - A total of 7 elected, voting members; candidates or those running for office should reflect faculty who have an interest in or teach in programs using simulation or have a program of research/scholarship in simulation.

  - Members will serve two-year terms and may serve consecutive terms. Terms will be staggered.

  - Chair will be elected by the committee at the first meeting of the academic year. The chair of the committee will be a faculty with simulation experience; a certified healthcare simulation educator (CHSE) is preferred..

  - Meetings: Minimum of two per semester

Ethical Standards

The Simulation Progam adheres to the Healthcare Simulationist Code of Ethics published by the Society for Simulation in Healthcare (SSH). The Code values are integrity, transparency, mutual respect, professionalism, accountability, and results orientation.

Simulation Program Human Resources

Simulation Program Coordinator

The Simulation Program Coordinator is responsible for the day-to-day operation of the UNCW Simulation Learning Center (SLC). The Simulation Coordinator is the main point of contact for all internal and external users of SLC facilities and coordinates scheduling of laboratory space, resources, and Standardized Patients. The Simulation Coordinator overseas the preparation, maintenance, inventory, and operation of all simulation equipment and supplies and makes recommendations for purchase of new equipment. The Simulation Coordinator collaborates with faculty to design, plan, implement, and schedule simulation educational and research activities across nursing programs and other academic programs in the College of Health and Human Services (CHHS). The Simulation Coordinator ensures adherence to program policies, course objectives, program outcomes, and current simulation best practices and safety measures.

Simulation Operations Specialist

The Simulation Operations Specialist provides technical support for clinical faculty to operate simulation equipment and oversees set-up and breakdown of simulation laboratory equipment for all simulation learning activities. The Operation Specialist oversees regular maintenance and repair of all simulation equipment and communicates with manufacturers regarding maintenance, repair, updates, and technology upgrades. The Operation Specialist maintains inventory of simulation supplies and submits purchase orders for additional supplies each semester as needed. The Operation Specialist assists with coordination of lab activities and supervises the student laboratory assistants.

Simulation Technology Specialist

The Simulation Technology Specialist is responsible for providing technical and mechanical support for all simulations, skill labs, and other lab activities. Support functions include management, operation, and maintenance of mannequins, audiovisual equipment, medical equipment, automated medication dispensing systems, and software programs. Additional responsibilities include hardware charging, operation and maintenance of AV equipment for recording and streaming, and vendor maintenance scheduling and oversight. The Simulation Technology Specialist will troubleshoot equipment malfunction and communicate issues with the Simulation Program Coordinator, Simulation Operations Specialist, vendors, and University maintenance as needed.

Simulation Faculty

Simulation faculty support the mission, purpose, and goals of the UNCW Simulation Program by working collaboratively with the Simulation Program Coordinator, leadership, faculty, and staff across the School of Nursing (SON) and the College of Health and Human Services (CHHS) to ensure evidence-based clinical standards and simulation best practices are reflected in all simulation activities. Simulation faculty collaborate with course clinical coordinators to design, implement, facilitate, and debrief simulations using various simulation modalities. Simulation faculty collaborate with the Simulation Program Coordinator to design and facilitate simulation professional development activities and training for faculty of CHHS.

Clinical Coordinators

Clinical coordinators for each clinical course in the academic programs of the SON and CHHS provide Simulation Program Director and simulation faculty with student

learning objectives to meet curricular needs for their assigned courses. These objectives are the basis for designing applied learning activities that offer students an opportunity to use clinical judgment through application of classroom concepts in simulated patient care. Clinical coordinators may serve as content experts in the design and implementation of simulation scenarios.

Clinical Instructors
Clinical Instructors participate in the assessment of student learning activities to ensure students are meeting student learning obectives. Clinical instructors may serve as content experts in the design and implementation of simulation scenarios.

Researchers
Researchers are faculty who initiate and engage in simulation research and dissemination as primary investigators or co-investigators. Other research team members may include faculty, staff, or students who serve as consultants, research assisants, statisticians, or other roles.

Standardized Patients
The Simulation Program has a dedicated group of volunteer and paid actors who function as simulated (standardized) patients (SPs) or simulated participants (i.e., family members). SPs are individuals "trained to consistently portray a patient or other individual in a scripted scenario for the purposes of instruction, practice, or evaluation" (INACSL Standards Committee, 2021, p. 62). Simulation experiences with an SP can encourage realistic communication and complex critical thinking.

Clinical Course Coordinator Responsibilities

Clinical coordinators must submit the Simulation Center Request Form each semester for the following semester. Summer and Fall requests are due no later than March15 and Spring requests are due no later than October 15. For each requested activity, the course coordinators must provide information on number of students and instructors, type of mannequins or trainers requested, and simulation faculty and staff needs. Also indicate if you are requesting Standardized Patients (SPs) and the number of SPs needed.

The simulation calendar for the following semester will be shared with the clinical course coordinators before the end of each semester. It is the expectation that all clinical course coordinators will review the calendar for accuracy of dates. Rooms and times for some activities may differ from the initial request based on availability and prioritization (See scheduling and allocation of simulation resources).

***Course Coordinators are expected to*:**

1. Review Lab Set-Up Sheets or the Simulation Master Template and revise as appropriate each semester.

2. Post revised set-up sheets for skill labs or revised templates for simulation in OneDrive several weeks prior to the scheduled lab or simulation. ***(Failure to***

provide revisions in a timely manner may result in the inability of the Simulation Program to accommodate your request).

3. Submit set-up sheets and schedules for boot camps or skill labs that will be held within the first three weeks of each semester to OneDrive prior to the end of the previous semester.

4. Provide a complete schedule of the skills/simulation day in OneDrive at least two weeks prior to the experience.

The Simulation Program faculty or staff will initiate a meeting each semester with Course Coordinators to discuss planned revisions in current labs/scenarios and to generate ideas for new simulation experiences

Electronic Health Record Software

Clinical coordinators are responsible for creating their course in the electronic health record prior to the first lab of the semester and ensure students are enrolled in the course. They are also responsible for creating activities within their course to correspond to the skill labs and simulations. If applicable, clinical course coordinators must create groups so charts.

Scheduling and Allocation of Simulation Resources

Clinical Coordinators should submit the completed Simulation Center Request Form for skill and simulation activities by March 15 and October 15 to reserve Simulation Learning Center space and equipment for the upcoming semester.

The faculty request form is available on the Simulation webpage of the UNCW website.

Once requests are submitted, the Simulation Program Coordinator will schedule the labs based on number of students, type of lab activity, and lab availability. Regular weekly use of simulation facilities in undergraduate programs will be scheduled first. Then all other courses will be scheduled. When making prioritization decisions, the Program Coordinator takes into account learning objectives of each activity. Priority will be based on lowering student to mannequin ratio, allocating resources according to the activity, and providing the best environment and equipment for an activity. If conflicts for space, equipment, or lab personnel arise, the Program Coordinator will work with course coordinators to schedule activities at alternate times, find alternative spaces, or rotate students if possible.

All approved requests are entered into the SLC calendar for the following semester. The calendar will be sent out to course coordinators at the end of each semester for the following semester. It is the responsibility of the course coordinator to check the calendar for room assignments and time frames for activities prior to posting student schedules in the Learning Management System course shells

Simulation Program Communication

Internal Users
All communications regarding the Simulation Program, such as requests for development of simulation activities, use of lab space, supplemental instruction, concerns or complaints, tour requests, training needs, and purchase requests will be sent to the Simulation Program Coordinator. If an individual believes a concern or complaint has not been resolved satisfactorily, the concern or complaint may then be brought to the Simulation Learning Committee.

Planning Meetings
Each semester the Simulation Program Coordinator will initiate a planning meeting with clinical coordinators to collaborate and plan the next semester's skill labs and simulation activities. Clinical coordinators and the Simulation Program Coordinator will review clinical learning objectives for each course to ensure the simulation activities are meeting student learning needs.

Simulation Program Supplemental Instruction Form
Simulation faculty is available to facilitate students who may require additional practice to become proficient at a skill or may need remediation to demonstrate clinical competence. Faculty may request skill remediation or other supplemental instruction for students with or without an action plan. In addition, students may self-refer for skill remediation or supplemental instruction. Please use the Supplemental Instruction Form to request this service. E-mail the completed form to the Simulation Program Coordinator and copy the student or clinical faculty on the e-mail.

Faculty Feedback
Clinical Coordinators and clinical faculty are encouraged to submit the Faculty Feedback Form to the Simulation Program Coordinator for each skill lab and simulation activity. The Simulation Program Coordinator will use the information provided to plan and improve Simulation Program services the following semester.

Fiction Contract
Simulation Program faculty and staff strive to provide a realistic environment for simulation activities. Students must do their part in suspending disbelief to ensure the best possible learning experience. All students are required to sign a Fiction Contract to show their commitment to active engagement in realism.

Confidentiality and Audiovisual Release
Students are counseled on confidentiality related to the simulation scenarios and participant performance. They are also informed that simulation activites may be recorded for debriefing, instructor review, educational purposes, or research. Each student must sign the confidentiality and audiovisual release form as evidence of their understanding of these policies.

Professional Development and Role Expectations

As simulation in healthcare is focused on evidence-based practices, the pedagogy of this teaching strategy continues to evolve, requiring specialized professional development. Ongoing professional development in simulation best practices is required to participate in clinical laboratory and simulation experiences in the Simulation Program. This is necessary to meet the standards of accrediting bodies and professional organizations:

- The North Carolina Board of Nursing
- The International Nursing Association for Clinical Simulation and Learning (INACSL) Healthcare Simulation Standards of Best Practice
- Society for Simulation in Healthcare (SSIH) Accreditation Standards
- The Association of Standardized Patient Educators (ASPE)
- The National Council of State Boards of Nursing (2016). *NCSBN simulation guidelines for prelicensure nursing education programs.* Retrieved from https://www.ncsbn.org/public-files/16_Simulation_Guidelines.pdf

Simulationists' roles and responsibilities vary based on the needs and the resources of the organization. Each simulationist will participate in professional development activities to improve skills that align with their roles and responsibilities in simulation.

A general faculty and staff orientation to the Simulation Program can be found in the School of Nursing Faculty and Staff Orientation Development Shell in the Canvas Learning Management System. Additionally, all clinical faculty who teach in the Simulation Learning Center will receive an orientation to the simulation spaces and equipment by simulation faculty or staff.

All clinical faculty are expected to access the simulated electronic health record program to evaluate student submissions of simulated documentation. One-on-one training is provided by the vendor of this program at the convenience of each faculty member.

Simulation Research

Simulation research can help identify the best ways to integrate simulation into health care programs for optimal learning. Simulation researchers contribute to knowledge regarding effective uses of simulation to improve clinical skills and clinical judgement for safer patient care.

All simulation research proposals must be submitted to an Institutional Review Board (IRB), such as the UNCW Online Sponsored Programs & Research Enterprise System (OSPREY). Research that qualifies for exemption or expedited review should submit proposals to the IRB at least 10 days prior to the anticipated start date for research. Research requiring a full board review must be submitted by the deadlines published on the UNCW Research webpage: https://uncw.edu/myuncw/research/

The IRB determines when it is required to obtain additional consent from students for use of data collected in simulation research and investigators are required to comply with the IRB determination.

Researchers must notify the Simulation Program Coordinator at least one week in advance of simulation research that requires videotaping of a simulation activity. The Simulation Program Coordinator will store audiovisual recordings and share them with researchers for the duration of the study. The Simulation Program Coordinator will destroy the recordings upon student graduation or the end of the study, whichever is later.

Professional Standards

In order to count simulation as a substitute for clinical hours, the Simulation Learning Program strives to follow the INACSL Healthcare Simulation Standards of Best Practice. Currently, there are 11 standards for evidence-based simulation practice.

Standards:

- Professional Development
- Prebriefing: Preparation and Briefing
- Simulation Design
- Facilitation
- The Debriefing Process
- Operations
- Outcomes and Objectives
- Professional Integrity
- Simulation-Enhanced Interprofessional Education
- Evaluation of Learning and Performance
- Simulation Glossary

The most recent standards can be viewed at the INACSL website at:
https://www.inacsl.org/healthcare-simulation-standards

The Simulation Program also uses simulated (standardized) patients or SPs and strives to adhere to the standards of the Association of Standardized Patient Educators (ASPE). This international association has created standards for simulated patients, to ensure safe and appropriate practice. The UNCW Simulation Program incorporates the five key values and five domains of best practice set forth by The Association of Standardized Patient Educators (ASPE) to guide the training and utilization of its standardized patients.

- Safe Work Environment
- Case Development
- SP Training
- Program Management

- Professional Development

The 5 key values are: Safety, Quality, Professionalism, Accountability, and Collaboration

The most recent standards can be viewed at the ASPE website at: www.aspeducators.org

Other Simulation Resources

Internationally Nursing Association for Clinical Simulation and Learning (INACSL) **--** "Promoting the art and science of healthcare simulation through excellence in nursing education, practice, and research." https://www.inacsl.org/

National League for Nursing (NLN) Simulation and Innovation Resource Center (SIRC)—"To develop a community of nurse educators who can effectivelyuse simulation to promote and evaluate student learning": http://sirc.nln.org/

Society for Simulation Healthcare Goal of the society is to increase ***safe*** patient care http://www.ssih.org/

SimGhosts **--** "dedicated to supporting individuals and institutions operating medical simulation technology and spaces" https://www.simghosts.org/sim/default.asp

NCNA Simulation Council—"To promote networking that supports the standards of best practice in simulation to develop sound clinical judgment for nursing practice." https://ncnurses.org/networking/councils-and-commissions/simulation-council/

SLC Labs, Simulators and Equipment

The SLC was built in 2010; it has 10 labs totaling 10,000 square feet. All rooms are equipped with cameras and microphones for audiovisual capability.

Laboratory Spaces

McNeill Hall

Room 2004

- 7 hospital beds
- 6 large tables in center of the room
- Wall mounted Welch Allen ophthalmoscopes and otoscopes
- Computer and video monitor

Room 2006 – Storage

- Simulated medication

- Injection and IV supplies
- Mannequin parts
- Miscellaneous equipment

Room 2007
- 9 hospital beds
- 2 Pyxis Medstations
- 2 groups of large tables in center of the room
- Linen cart with linens

Room 2010
- 3 separate private rooms, each with a observation/control room with audio/video capabilities
- Central lobby has Pyxis Medstation, medication cart, and a video monitor

Room 2014
- One adult hospital bed, one pediatric bed, a crib and isolette for infants
- 4 large tables in center of the room
- Pediatric Broselow cart
- Observation/control room with audio/video capabilities
- Video monitor

Room 2015
- Two birthing beds
- Infant overbed warmer
- Bassinettes (2)
- One isolette
- 4 large tables in center of the room
- Observation/control room with audio/video capabilities
-

Room 2016 – Work Room
- Task trainers
- Moulage supplies
- Wheelchairs

Room 2019
- Stretchers
- Ante room with surgical scrub sink, clear surgical cabinets
- Tower head wall: O2, gloves, sharps, suction
- Observation/control room with audio/video capabilities

Room 3002 – Clinic
- Central “waiting room” desk, computer, and chairs
- 3 exam rooms with exam tables that contain:
    - Microscope, gloves, sink, sharps containers, otoscopes, opthalmoscopes

LAB 3006- Home Apartment
- Open den and kitchen with furnishings

- Handicap accessible bathroom
- Bedroom with twin bed
- Panoramic observation/control room with audio/video capabilities

SLC Simulation Conference Room 2058
- Use requires approval and scheduling by the Simulation Program Coordinator

Supply Closet
- Mobility Aids
- Student Skill Pack Supplies

Simulators/Equipment

High Fidelity
- CAE: Lucina birthing manikin
- Gaumard: Adult Hal- Caucasian male
- Gaumard: Adult Hal- medium brown skin male
- Gaumard: 5 year old Pediatric Hal
- Gaumard: Super Tory
- Laerdal: Sim Man 3G
- Laerdal: Sim Man Essential

Mid-Fidelity (unilateral pulse, no pupillary response or chest rise)
- Laerdal: Nursing Anne Simulator - 13
- Laerdal: Vital Sim manikins - 10
- Laerdal: Vital Sim manikin: Postpartum Annie
- Laerdal: Vital Sim Joseph
- Laerdal: Vital Sim baby

Task Trainers and Other Major Equipment
- Noelle manikin with Leopold belly
- 2 Ventilators
- 1 year old male/female heart & lung sounds manikins
- Assorted pelvic models
- IV trainers
- Isolation cart
- Medication carts
- Three pyxis stations
- Computer carts with laptops

Inventory, Storage, Repair, & Borrowing

Inventory Tracking*:* Simulation Operations Specialist employs an Excel spreadsheet to track inventory and determine supplies needed for each semester.
Storage*:* Two storage rooms are allocated to simulation; simulated equipment and supplies are clearly labeled for simulation only use.

Equipment Repair & Maintenance: The Simulation Operations Specialist keeps a digital log of repair and maintenance performed on mannequins and other equipment. Mannequins are sent to manufacturer for routine maintenance and for repairs as needed. Simulation Program faculty and staff will inspect equipment after each use and perform cleaning and routine maintenance as needed. Non-operating equipment will be tagged by Simulation Program faculty or staff to prevent continued use.
Checking Out Equipment: Some equipment and teaching materials are available for check-out by students or faculty. The form for requesting these materials is available on the Simulation webpage of the UNCW website. All requests must be received at least 7 days prior to the date needed. The Simulation Operations Specialist will inform the borrower of the date and time for pick-up and drop-off of requested items.

Student Software and Skill Packs

Electronic Health Record Software

The Simulation Learning Program uses a simulated electronic health record (EHR) software. Students use their personal computers to access the software. Scanners are provided for students to use with their personal computers for medication administration.

Student Skill Packs

Every newly admitted prelicensure nursing student is required to purchase a Skill Pack prior to the start of the first semester in the SON.

The Simulation Learning Program staff determines the type and amount of supplies for the Student Skill Pack each semester, based on projected student needs. Skill packs are distributed to students during the first week of class. If a student does not bring required equipment from the Skill Pack to lab, the student will be given supplies from the Simulation Program stock. The student is required to return the supplies from the individual Skill Pack to Simulation Program staff to replace the stock.

Clinical Laboratory Policies

Access to the Labs

The Simulation Learning Center is a limited access area. All users must contact the Simulation Program team to gain access to any area of the center. Designated administrative staff and assistants may also provide access when necessary. Faculty, staff, and students are allowed access to the Simulation Learning Center only when engaged in simulation learning activities.

Dress Code

UNCW students are required to wear the course clinical uniform and adhere to all dress code policies when participating in clinical labs or simulation. When simulating a clinical skill that would require personal protective equipment (PPE) in the clinical setting, it is expected that the students wear PPE in simulation.

Personal Belongings

Users should bring only necessary resources (books, laptops, Skill Packs, etc) to the Simultion Learning Center. Cubbies for personal items are available in Room 2011.

Use of the Lab

- Students are not allowed to bring food, beverages, or gum into the lab spaces.
- Faculty may have a drink in a covered container stored away from simulators and other electrical equipment.
- All users should perform hand washing before handling equipment and mannequins. This helps to keep equipment and mannequins clean, reinforces the crucial habit of hand hygiene, and decreases the chance of cross-contamination.
- Students under the supervision of course faculty are expected to clean up following lab or simulation activities and to return all equipment to its original location.
- No students or visitors may access the Simulation Learning Center without a designated faculty or staff member present. No unauthorized children or animals are allowed.
- Every effort should be made to restrict hallway traffic by other than CHHS students and faculty during learning activities in the Simulation Learning Center.

Use of the Equipment

- Any equipment malfunction or damage must be reported IMMEDIATELY to the Simulation Learning Program faculty or staff. **DO NOT ATTEMPT** to repair simulators or equipment.
- All users are expected to handle mannequins with care and to interact with all mannequins as they would actual patients/people.
  - Manikins may **NOT** be moved unless instructed to do so and only after receiving training on proper handling.
  - **ABSOLUTELY NO** ink pens, felt-tipped markers, betadine products or K-Y jelly may be in use near the mannequins as these items may permanently stain the mannequins.

Emergency Procedures: Please report any illness or injury of an individual in the Simulation Learning Center to simulation faculty or staff immediately. Faculty or staff will assess the situation and call emergency services if needed. Otherwise, the individual may seek care at the Student Health Center, a personal health care provider, urgent care, or emergency department at the individual's discretion. Faculty should not advise or provide health care to ill or injured persons, other than to keep them from further harm until health care personnel arrive. Simulation faculty or staff will complete an Incident Report Form describing the situation and its resolution.

POLICIES FOR SPECIAL CIRCUMSTANCES

Invasive Procedure

- *Definition*: Any procedure in which an object is inserted into the skin or into a body cavity. (ex: nasogastric intubation, urinary catheterization, injection, IV insertion)

- *Purpose*: To provide a safe learning environment and to prevent injury or infection to students and/or faculty.

- *Policy:* The Simulation Learning Center is a non-invasive learning environment. Any invasive procedure will be demonstrated, practiced and checked-off using mannequins, task trainers, and/or high fidelity simulators. At no time are students or faculty to demonstrate, practice or check-off invasive procedures on another student or faculty.

Medication

- *Definition*: Any product considered a drug by the Food and Drug Administration. (FDA)

- *Purpose:* To provide a safe learning environment and to prevent accidental drug ingestion.

- *Policy*: All forms of medication used in the Simulation Learning Center are simulated medications. No authentic medications are to be stored or utilized for demonstration, practice or check-off in the Center. All simulated medications are to be so marked and are not to be ingested by or injected into students or faculty.

Sharps

- *Definition*: Any item capable of piercing or injuring the skin. (ex: needle, ampule, scalpel)

- *Purpose*: To provide a safe learning environment and to prevent a sharps injury to students and/or faculty.

- *Policy*: All sharps are to be stored in a secured location in the Simulation Learning Center. No sharps are to be removed from the Center. Sterile sharps are to be used for all practice and check-off lab activities. Used sharps are to be discarded in a sharps box and are not to be reused in future labs. Should a student stick themselves or another person, the student must report this immediately to the faculty and the sharp is to be discarded. An Incident Report Form will be completed by simulation faculty or staff.

Latex Allergy

- *Definition*: Latex allergy is a reaction to certain proteins in latex rubber. The amount of latex exposure needed to produce sensitization or an allergic reaction is unknown. Increasing the exposure to latex proteins increases the risk of developing allergic symptoms. In sensitized persons, symptoms usually begin within minutes of exposure; but they can occur hours later and can be quite varied. Mild reactions to latex involve skin redness, rash, hives, or itching. More severe reactions may involve respiratory symptoms such as runny nose, sneezing, itchy eyes, scratchy throat, asthma, difficulty breathing, coughing spells, or wheezing.

- *Purpose*: To provide a safe learning environment and to prevent a latex allergy reaction.

- *Policy*: Students or faculty with known sensitivity or allergy to latex must inform the Simulation Learning Program Coordinator after consultation with a health care provider about allergy risks and treatments. Latex free gloves are stocked as standard in the Simulation Learning Center. The Simulation Learning Center is latex free except for some manikin parts. If there is an emergency dial 9-911. Should any type of latex allergy reaction occur, an Incident Report Form will be completed by simulation faculty or staff.

Simulation Design and Implementation

In order to adhere to simulation professional standards, the following criteria are essential for simulation to most effectively meet student learning outcomes:

SCENARIO DESIGN:
- Conduct a needs assessment to determine the most appropriate scenarios to fill curricular or clinical gaps
- Simulations are designed through collaboration with content expert and simulation faculty to ensure best practices are employed
- Pilot test each new or revised simulation scenario with a content expert and simulation faculty
- New and/or revised scenarios should be finalized at least two to four weeks before implementation to allow the Simulation Learning Program staff time to create props and order appropriate supplies.
- All medications in simulation (medication packaging, MAR's, charts, etc.) will be generic. All IV medications will be mixed in pharmacist approved dilutions.

SCENARIO PREPARATION:
- Simulation documents and required preparation should be published on the Learning Management System for students at least 1 week prior to the activity.
- Clinical coordinators or faculty should meet with the Simulation Program faculty and staff prior to the simulation to clarify roles within the simulation control room (patient voice, mannequin operation, student observation, etc.)

SCENARIO IMPLEMENTATION & FACILITATION:
- Use of template to maintain consistency for simulation scenario delivery: prebrief, scenario implementation, and debrief
- Simulation faculty will facilitate implementation of the simulation experience
- Content expert will be present whenever possible to assist simulation faculty
- Cover all items on the Prebrief Checklist with students and answer any questions.
- Gross safety violations within a scenario require stopping the scenario, providing appropriate coaching, and restarting the scenario.

SCENARIO DEBRIEFING:
- Faculty debrief & correct any unsafe care practices immediately following a simulation scenario (in scenario room or separate debrief room)

- Use a debriefing model to reinforce student understanding of content pertinent to the simulation scenario.
- Faculty may use selected video as appropriate for student learning and reflection

SCENARIO EVALUATION:

- Faculty will require students to complete the Simulation Program post-simulation survey prior to dismissal from the scheduled simulation day.
- Clinical coordinators and faculty should evaluate each simulation activity using the Faculty Feedback Form to aid the Simulation Program faculty and staff in activity revision and program quality improvement.

Public Relations

Tours

Healthcare simulation is an exciting and innovative teaching and learning strategy. As such, the Simulation Program Coordinator receives frequent requests for tours of the Simulation Learning Center. Every effort is made to accommodate these requests, but the Simulation Program Coordinator reserves the right to refuse a tour based on servicing student needs. Tours will be conducted by Simulation Program faculty or staff assigned by the Simulation Program Coordinator. Tour participants should not handle simulation equipment or supplies unless directed to do so by the tour guide. If simulation activities are in progress during the tour, tour participants may not photograph or videotape simulation participants.

Social Media

Photographing or videotaping of simulation activities by students is strictly prohibited. Students should refrain from posting photographs or recordings of simulation activities, and comments or information about simulation learning experiences on social media. This will ensure adherence to the confidentiality agreement.

References

INACSL Health Care Simulation Standards of Best Practice (2021). *Clinical Simulation in Nursing.* DOI: https://doi.org/10.1016/j.ecns.2021.08.006