|  |  |  |  |
| --- | --- | --- | --- |
| KUSM-W Simulation Faculty are dedicated to high quality simulation activities. Thus, the following core elements are to be included when developing/facilitating an activity in the Simulation Center. The simulation faculty will assist with developing the timeline for the session. | | | |
| **Time** | **Who/Item** | **Activity** | **Designated lead person** |
| At least 2 weeks prior to the scheduled simulation session | Simulation faculty, content faculty, simulation technician, etc. | * Plan the details of the simulation session – use one of the Sim Center templates   + All simulations will be planned to be interprofessional; this is not always possible but that should be the goal   + All simulations will include patient and family interaction |  |
| At least one day prior | Simulation personnel, faculty, standardized patients (s), simulation technician, etc. | * “Pilot” or “run through” the activity |  |
| At least 30 minutes prior to the event | Faculty Arrive | * Confirm, review, or make any changes in the activity for the day. |  |
|  | Learners arrive | * Learners gather in the classroom/outer room of lab * Sign in |  |
| 15 – 20 minutes | Introduction to session | * **Welcome to the Simulation Lab** * **The Agenda for the Day** * **Introductions** of faculty and learners – consider more than just names. Include something additional to “break the ice”. For example:   + If interprofessional, learner give their names, professions, and perhaps states something that they do in their respective profession; or consider having interprofessional learners pair up and then introduce each other.   + Have learners share something about themselves – something light, fun, i.e., your favorite dessert, your favorite travel spot (or travel wish), etc. * The **Agenda** for the day * **Learning Objectives for the session** * **The Basic Assumption:**   + ***“We believe everyone participating is intelligent, well-trained, cares about doing their best, and wants to improve”*** * **The “Safe Container” Environment during the session:**    + Mutual Respect among all   + Learning involves risk taking   + Role of feedback – all are here to learn; feedback will be given (Appreciative Inquiry techniques are useful and helpful)   + “Fictional Contract” (“This is simulation but we expect that you will treat this and participate as if this is real”)   + Confidentiality of the simulation |  |
| 15 minutes | Meet patient and family | **Introduction to the Sim Room and Manikin and or Standardized Patient and Family**   1. Meet the “patient” (manikin with voice or standardized patient) in a normal state; meet the “family” with the patient 2. Demonstrate what the manikin can and cannot do. Have learners feel pulses, listen to heart and lung sounds, etc. 3. Show the equipment in the room that will be used in the scenario and how it works. |  |
| 15 – 20 minutes | Content Review | Return to gathering room to review any needed content – **this should not be new knowledge and should be limited to 15-20 minutes.** |  |
| 15 – 20 minutes | Scenario 1 |  |  |
| 20 minutes | Debriefing | Entire group in sim lab – or return to outer room.  Format:   * Description – How did it feel? * Analysis – what worked? What didn’t? What may be better? * Application – What did I learn? What will I change in how I care for my patient? Does this transfer to the workplace? |  |
| Follow with additional scenarios/debriefing as desired |  |  |  |
| 15 minutes | Final session debriefing  Evaluation instructions |  |  |