

Maverick Family Nursing **SIMULATION CENTER**

 MINNESOTA STATE UNIVERSITY MANKATO

Policies and Procedures Manual Maverick Family Nursing Simulation Center

Table of Contents

1. General Information	
a. Mission.....	4
b. Vision.....	4
c. Governance	5
d. Decision-making Process.....	6
e. Hours of Operation	6
f. Simulation Center Glossary	7
g. Code of Conduct	8
h. Safe Learning Environment	8
i. Dress Code	9
j. Food and Drink Policy	9
k. Tobacco Policy.....	9
l. Medical Clearance	9
m. Disability.....	9
n. Discrimination, Harassment, and Retaliation	9
2. Administration Information	
a. Support Staff	10
b. Scope of Work	11
c. Organizational Chart.....	11
3. Simulation Instructors	
a. Equipment Utilization.....	11
4. Course Participants	
a. Simulation Preparation.....	12
b. Cell Phone Usage	12
5. Scheduling Simulations and Rooms	
a. Scheduling Process	12
b. Notifications.....	13
c. Priority of Use.....	13
d. Cancellation Policy	13
e. Recording of Schedule	13
f. Schedule Disputes	13
g. Severe Weather	13
6. Tours	
a. Requesting Tours	13
b. Tour Requirements.....	14
c. Tour Cancellations	14
7. Equipment	
a. Maintenance and Care of Equipment.....	14

b. Breakage and Repair Policy	15
8. Supplies	
a. Organization.....	15
b. Simulation Supplies and Equipment.....	15
c. Inventory	16
d. Usage and Re-usage	16
9. Scenarios	
a. Scenario Structure.....	16
b. Audio Visual Storage.....	17
c. Utilization Scenarios.....	17
d. Clinical Quality Assurance	18
e. Debriefing	18
f. Course Evaluation.....	18
10. Operations	
a. Utilization of Simulation Center Staff	18
b. Start up and Shut down.....	18
c. Security of Information.....	18
d. Simulator Maintenance	19
e. Simulation Preparation & Turnover.....	19
f. After-hours Access.....	19
11. Video Recording and Photo Release	
a. Confidentiality	20
b. Video Recording	20
c. Video Distribution	20
d. Video Destruction	21
12. Dispute Resolution	
a. Problem or concern	21
b. Oral or written complaint.....	21
c. Resolution Review	21
d. Formal Appeal	21
13. Safety and Security	
a. Emergencies	22
b. Security	22
c. Identification Badges	22
14. Biohazard Material	
a. Clean Needle Stick Policy	22
b. Handwashing.....	23
15. References.....	24

1. General Information

This policy and procedure manual complements policies and procedures of Minnesota State University, Mankato. In addition to University policies, each administrative division of the University also develops and administers policies that guide the actions and decisions of its units. Divisional policies also serve as institutional expectations of practice partners.

All learners must know and practice within safety guidelines at all times while using the Simulation Center. Failure to adhere to guidelines will result in disciplinary action. This manual will be available in the Simulation Center and participants will receive a copy during their simulation orientation. All learners must read this policy and procedure guide, and view the orientation video (currently in production) before entering the Simulation Center.

a. Mission

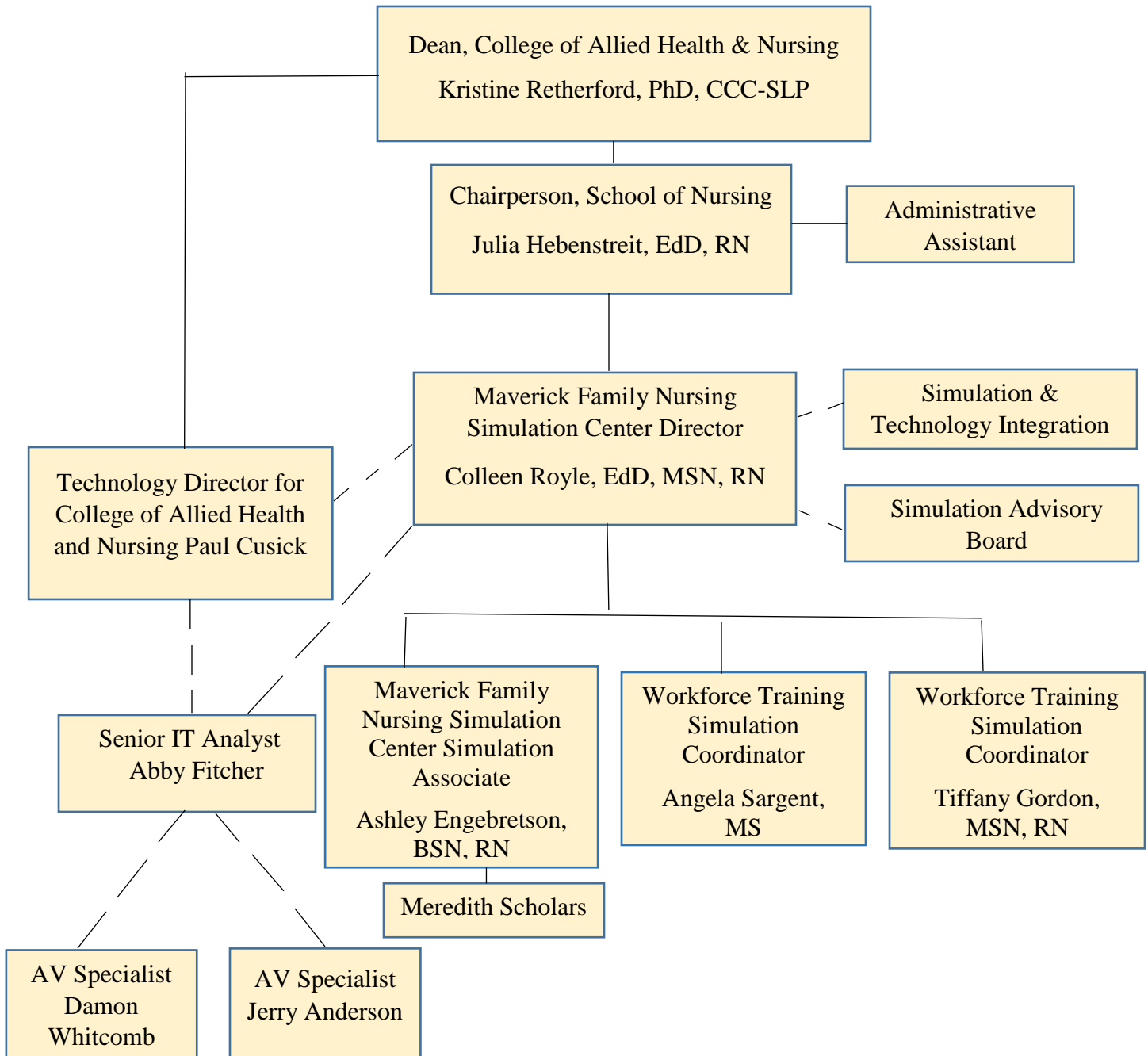
Provide evidence-based simulation education for students, faculty and members of the professional community. The Center aims to promote critical thinking and clinical reasoning using established teaching and learning strategies in the simulation environment. Through the participant experience, the Center aims to enhance healthcare outcomes for the individual & family, and for society.

b. Vision

The Maverick Family Nursing Simulation Center strives for innovation and excellence within simulation-based education and scholarship while focusing on family and societal nursing.

c. Governance – Organizational Chart:

Maverick Family Nursing Simulation Center Organizational Chart



d. Decision-making Process:

The SCD provides details to the SAB (which includes the Dean of CAHN) and the STIC committee regarding operational concerns/needs on a bi-weekly basis or as needed if necessary. The SCD is responsible for decisions regarding what activities will occur in the Center as well as what resources will be used for those activities. The SCD collaborates with the CAHN Technology Director regarding any technology considerations for the operation of the Center.

The SAB will be responsible for writing the strategic plan for the Center. The SCD is a member of the SAB. The Dean of CAHN discusses and approves large budgetary requests for major equipment purchases. The Dean also provides the link to the university administration and provides guidance to the SCD.

The STIC committee assists in the review of policies and procedures written for the Center. The STIC committee is a standing committee of the SON and reports are shared monthly to the SON Faculty regarding the Center.

e. Hours of Operation

The Simulation Center operates from 8 a.m. to 5 p.m., Monday through Friday. The Simulation Center Director must approve after hours and weekend laboratory use in order to schedule the event and personnel to assist with the simulation. The Simulation Center follows the MSU – Mankato Academic Calendar.

f. Simulation Center Glossary

The Simulation Center follows the 2016 INACSL Standards of Best Practice: SimulationSM Simulation Glossary.

What is simulation?

An educational strategy in which a particular set of conditions are created or replicated to resemble authentic situations that are possible in real life. Simulation can incorporate one or more modalities to promote, improve, or validate a participant's performance.

Partial Simulation Glossary

Competence:

Demonstrates the ability to perform a specific role or skill based on standardized criteria. Individuals having the state or quality of being adequately or well qualified to do a job properly.

Cues:

Information provided that helps the participant(s) process and progress through the scenario to achieve stated objectives.

Critical Thinking:

A disciplined process that requires validation of data, including any assumptions that may influence thoughts and actions and then careful reflection on the entire process while evaluating the effectiveness of what has been determined as the necessary action(s) to take. This process entails purposeful, goal-directed thinking and is based on scientific principles and methods (evidence) rather than assumptions or conjecture.

Debriefing:

A reflective process immediately following the simulation-based experiences (SBE) that is led by a trained facilitator using an evidence-based debriefing model.

Facilitator:

A trained individual who provides guidance, support, and structure at some or all stages of simulation-based learning including pre-briefing, simulation, and/or debriefing.

Participant:

One who engages in a simulation-based activity for the purpose of gaining or demonstrating mastery of knowledge, skills, and attitudes or professional practice.

Pre-briefing:

An information or orientation session immediately prior to the start of an SBE in which instructions or preparatory information is given to the participants. The purpose of pre-briefing is to establish a psychologically safe environment for participants.

Safe Learning Environment:

The emotional climate that is created through the interaction among all participants (including facilitators). In this positive emotional climate, all participants feel at ease taking risks, making mistakes, or extending themselves beyond their comfort zone. Awareness of the of the psychological aspects of learning, the effects of unintentional bias, cultural differences, and attentiveness to one's own state of mind helps to effectively create a safe environment.

g. Simulation Center Code of Conduct

This Code of Conduct is provided to all faculty at their simulation faculty orientation. A copy of this Code of Conduct is displayed on a wall in each simulation suite and multi-bed skills lab. Violations of the Code of Conduct are handled at the discretion of the Simulation Director.

The Maverick Family Nursing Simulation Center is committed to providing a safe, realistic learning environment. To facilitate a safe, realistic learning environment, participants should:

- *Demonstrate academic and professional integrity*
- *Be respectful to self, others, and simulation resources*
- *Maintain confidentiality of patient, family, and simulation scenario*
- *Uphold the realistic simulation environment*
- *Dress appropriately*
- *Be punctual and prepared*
- *Preserve a no cell phone environment*

The MSU, Mankato Statement of Student Responsibilities will also be followed which is available electronically: http://www.mnsu.edu/conduct/pdfs/2017-2018_ssr.pdf

h. Safe Learning Environment

The Maverick Family Nursing Simulation Center staff are aware that the nature of simulation can be stressful to participants, standardized patients, and facilitators. There are physiological and psychological stressors evoked throughout the simulation process. For this reason, it is important for facilitators to pre-brief the participants prior to each simulation experience. Facilitators will encourage participants to maintain confidentiality, offer moral support, and give constructive feedback to others. Simulation is a safe learning environment where participants can make mistakes without harming a real patient. When mistakes are made, the entire group of participants will learn what may have been done differently through a debriefing session. Following the simulation scenario, the entire group of participants converge in a debrief room where the art of reflection encourages participants to consider the meaning and implication of an action while considering knowledge, skills, and attitudes from their pre-existing knowledge (INACSL Standards of Best Practice: SimulationSM Debriefing, 2016). The debriefing is critical for highlighting the appropriate action and allowing participants to discuss their emotions.

In the event that a participant becomes threatened by the simulation, the simulation educator will be responsible for determining the appropriate course of action including continuing or stopping the simulation. The simulation director will be responsible for following up with the participant.

If a participant's physical safety is compromised, the simulation educator or simulation center staff will stop the simulation, assess the participant, activate the emergency medical response system (if warranted), and then notify the Simulation Center Director.

i. Dress Code

Participants will adhere to the following dress code policies:

- i. Participants are required at all times to have: close toed shoes, and visible school/employer ID badge.
- ii. Participants should wear professional attire suitable for a clinical setting
 1. Business casual: Black slacks and polo shirt (if in community setting or home simulation suite)
 2. Simulation Center: School uniform, scrubs, OR lab coat.
- iii. Instructors/staff should wear business casual attire or scrubs and ID badge.

- iv. One set of earrings in the ears. All other visible piercings must be removed or covered.
- v. No visible tattoos. These should be covered with clothing or bandage.

j. Food and Drink Policy

NO food or drink is allowed in the simulation suites, laboratory, or integration stations. Participants may have food or drink in the debrief rooms or skills demo classroom. All drinks must have lids. It is expected that all garbage will be thrown away and the area left clean. Participants should report any unexpected spills to simulation staff immediately.

k. Tobacco Use

The Maverick Family Nursing Simulation Center prohibits smoking, tobacco use and e-cigarette use.

l. Medical Clearance

Participants shall report any physical limitations to their facilitators as soon as possible so necessary precautions may be taken. A medical clearance is required before participants with physical injuries, illness, surgery, pregnancy, or communicable disease will be allowed to practice or return demonstration in the Simulation Center. It is the responsibility of the faculty to determine whether a participants with physical limitations is capable of safely performing the necessary skills.

m. Disability

Every attempt will be made to accommodate qualified students with disabilities. If you are a student with a documented disability, please see the instructors as early in the semester as possible to discuss the necessary accommodations, and/or contact the Disability Services Office at (507) 389-1819.

n. Discrimination, Harassment, and Retaliation

Harassment includes, but is not limited to, unwelcome verbal abuse such as offensive racial, ethnic, or sexual threats or comments, physical conduct such as touching, rude gestures, or any type of pressure to engage in sexual activity.

Sexual harassment is a form of sex discrimination. It is defined as unwelcome sexual advances directed at a member of the opposite sex or the same sex, and other verbal, physical, or visual conduct of a sexual nature when such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

Sexual harassment includes, but is not limited to, unwelcome comments, jokes, pictures, remarks, or questions whether oral, in writing, or sent via email that are sexual in nature or content. Making obscene or lewd remarks or gestures can also be sexual harassment. This kind of conduct is improper even if there is no intent to offend someone. This conduct should not occur in the Simulation Center or the workplace.

Any incident of harassment should be reported to the Simulation Center Director and course faculty.

Retaliation against anyone for reporting discrimination or harassment, assisting in making a discrimination or harassment complaint, cooperating in a discrimination or harassment investigation is prohibited. Retaliation activities should be reported to Simulation Center Director.

2. Administrative Information

a. Support Staff and Contact Information

Name	Position	Phone Numbers
Colleen Royle, EdD,MSN, RN	Simulation Center Director	(507) 389-2506
Ashley Engebretson, BS, RN	Simulation Associate	(507) 389-2506
Angela Sargent, MS	Workforce Training Simulation Coordinator	(507) 389-1031
Tiffany Gordon, MS, RN	Workforce Training Simulation Coordinator	(507) 389-1031
Paul Cusick	Technology Director for College of Allied Health & Nursing	(507) 389-1504
Abby Fitcher	Senior IT Analyst	(507) 389-1501
Jerry Anderson	AV Specialist	Ext. 3221
Damon Whitcomb	AV Specialist	Ext. 3221

b. Scope of Work

i. Maverick Simulation Center Director

The Simulation Center Director oversees the day-to-day operations of the Simulation Center to ensure authentic experiential learning events. The Director serves as a simulation pedagogy expert resource for faculty and students and advances inter-professional collaboration in simulation activities. The learning resource lab and simulation suites provide students with a state of the art multimedia education learning center which includes computer

based learning programs, simulation mannequins, and other technology enhanced learning aids for independent and small-group learning.

ii. Maverick Simulation Center Simulation Associate

Implement simulation-based learning activities to facilitate student learning. Collaborate with Simulation Center Director (SCD) and faculty to design, develop, and plan for new simulation scenarios. Provide clinical laboratory education activities in collaboration with the SCD. Assist the SCD with operation of the Simulation Center.

iii. Workforce Training Simulation Coordinator

The Simulation Coordinator for Workforce Training will implement simulation-based learning activities to facilitate workforce trainings and development. This position will be responsible for establishing relationships with practice partners and guiding them to include simulation into their workforce development plans by providing evidence-based practice regarding simulation. This coordinator collaborates with Simulation Center Director and industry partners to design, develop, plan, and implement new simulation scenarios. This includes working with practice partners to determine learning objectives, directions and outcomes to meet their workforce development needs. This coordinator will develop relationships between practice partners and faculty to advance nursing practice. They will work with the Director to ensure efficient operation of the Simulation Center including scheduling simulation activities, set up of supplies and equipment for laboratory content and simulation scenarios.

c. Organizational chart

See Maverick Family Nursing Simulation Center organizational chart in Section 1.c

3. Simulation Instructors

a. Equipment Utilization

- i.** DO NOT use equipment for any purpose other than specified use
- ii.** DO NOT use ink pens, felt-tipped markers, iodine or betadine near the manikins or task trainers. These items will PERMANENTLY stain the equipment.
- iii.** DO NOT use water soluble lubricants with manikins. Use an appropriate manikin lubricant spray per manufacturer.
- iv.** DO NOT use food coloring or any product with food coloring on manikins or plastic equipment.
- v.** All equipment should be properly shut down after use.
- vi.** Proper hand washing or use of hand sanitizers will be part of the practice in all aspects of simulation education. This helps to keep manikins and equipment clean
- vii.** All equipment should be used only after participant is given training and permission by simulation staff.

4. Simulation Center Participants

a. Simulation Preparation

- i. Participants are expected to come to lab/simulation prepared by having read any scheduled lab objectives and assignments prior to the start of the simulation. Pre-class assignments will be given to students by the instructor. Students must have necessary equipment and supplies in their possession.
- ii. Participants are expected to be on time. Participants that are late will be admitted to the simulation learning experience at the discretion of the Simulation Center staff and the course instructor.
- iii. Participants should inform their instructors if they are unable to attend class or have not completed class requirements. Alternate accommodations will be discussed.
- iv. Participants should be knowledgeable in the care, handling and proper use of equipment prior to using it in the Simulation Center. Equipment and supplies are to be used safely and for their designated purpose. Equipment is only used if instructed to do so.
- v. No loitering, running or yelling in hallways. Minimize all unnecessary conversations in hallways to minimize disruptions to learning while in the Simulation Center.

b. Cell Phone Usage

- i. The use of cell phones is prohibited during classes and simulations. Prior arrangements must be made with the instructor or simulation center staff for expected incoming critical calls such as physician, child daycare due to illness, etc...
- ii. All personal use of cell phones should be conducted outside of the Simulation Center
- iii. Cell phones may not be used for the purpose of video recordings or taking pictures during any simulation activities including the live feed or taped debriefing.

5. Scheduling and Prioritization of Simulation Resources

a. Scheduling Process

Scheduling requests are electronically submitted to the Simulation Center Director. The Simulation Center Director utilizes Outlook calendar to enter reservations for Simulation Center rooms. Requests are taken into consideration, but final approval is based on number and type of participants, facility space availability, specific simulation suite availability, educators availability, availability of facilitators, and specific scenario availability for request. Additional resource needs are also considered such as equipment, IT support, and the use of standardized patients. In January of 2018, a B-Line upgrade will enhance the scheduling process by allowing reservations to be made through B-Line Scheduler.

b. Notifications

Individuals who schedule a room through the Outlook calendar will be notified electronically after the reservation has been considered by the Simulation Director using criteria listed in 6.a.

c. Priority of Use

Nursing students are given first priority for simulation space and resources. This is a guiding directive from the Simulation Advisory Board. Interprofessional student use is given next priority for scheduling. Workforce training is primarily scheduled during periods when academic simulations are not scheduled (nights, weekends, and summer).

d. Cancellation Policy

A 48 hour notice is required for all scheduled simulation cancellations. The instructor is responsible for informing both the Simulation Center Director and the participants of the cancellation.

e. Recording of Schedules

The Simulation Center keeps an accurate record of course using the center, dates of the simulation experiences, the number of participants, and departments involved. Records are currently kept in paper format, however, in spring of 2018 these records will be kept electronically through B-Line Scheduler.

f. Schedule Disputes

All efforts will be made to accommodate scheduling requests. In the event of a dispute, the Simulation Center Director has final authority when scheduling conflicts occur. Complaints related to scheduling should be addressed through the Simulation Center Director.

g. Severe Weather

The Simulation Center will follow Minnesota State University, Mankato policy for closures due to severe weather. If participants are unable to attend due to severe weather and the university has not been officially closed for severe weather, it is the participants' responsibility to notify their instructor.

6. Tours**a. Requesting Tours**

Tour requests should be submitted to the Simulation Center Director through email (colleen.royle@mnsu.edu). Emails should include information regarding visiting audience (number of visitors, where are they from), specific areas of interest for the visit, and the requested date and time for the tour. Requests should be submitted at least two (2) weeks prior to the requested tour date. Priority is given to academic or workforce training simulation activities. Tour groups are not allowed to observe simulation activities without the participants' consent. Recording or photographing of simulation activities during touring is prohibited.

b. Tour Requirements

Tours can be scheduled Monday-Friday during operating hours, 8:00 am to 5:00 p.m. The Simulation Center Director must approve all tours outside of standard operating hours.

c. Tour Cancellations

Tours must be cancelled at least 48 hours prior to the scheduled tour.

7. Equipment**a. Maintenance and Care of Equipment**

Proper maintenance of all equipment is essential to the operations of the Simulation Center. The Simulation Associate, Workforce Training Simulation Coordinators, and IT support staff are responsible for preventative maintenance of all task trainers as well as high-fidelity manikins that do not have a maintenance and support agreement. Manufacturer recommendations for proper care are followed for every use.

i. Cleaning and Disinfecting manikins

1. Do not submerge manikins in water.
2. Do not use anything with acetone to clean the manikin. This will remove outer clear coat on the skin and any painting.
3. Do not use bleach on the manikin skin.
4. Begin cleaning with mild dish soap and water. Dry with soft towel and allow to air dry.
5. Use Clorox ® wipes to clean the manikin if soap and water are not available. These wipes do not contain bleach.
6. Use Isopropyl alcohol on a washcloth or 4x4 to clean manikins.

ii. Equipment Guidelines

Manikin user guides are available online at manufacturer's link provided in table in section 11.d. General equipment user guides are kept in a file cabinet in the Simulation Center Director's office (CSB223).

iii. Routine Maintenance Schedule**1. Weekly**

- a. Flush out all IV lines and internal mannequin fluid reservoirs
- b. Remove all tape glue from manikins
- c. Wipe all equipment with damp cloth including manikins, crash carts, and touch screen monitors.
- d. Wipe down all tables and counters in Simulation Center with disinfectant spray
- e. Clean all Simulation Center whiteboards with EXPO spray cleaner.
- f. Change linens on all beds
- g. Check and stock supplies in simulation suites, medication carts, and crash carts

2. Monthly

- a. IT support staff will check for software and hardware updates on manikins, Haptic IV devices, B-Line servers, and laptops
- b. Run a medication use report for Med Dispense systems.
- c. Check that defibrillator and AEDs are running properly

3. Yearly

- a. Replace any damaged or worn IV veins and/or skin
- b. Schedule maintenance of manikins and equipment with vendors

b. Breakage and Repair Policy

Damage to equipment needs to be reported immediately to the Simulation Center Director through email (colleen.royle@mnsu.edu) or calling (507) 389-2506.

Information should be provided detailing how the equipment broke to help in identifying trends if equipment is breaking on a regular basis. The Simulation Center Director is responsible for contacting appropriate person for the repair (e.g. equipment under warranty or maintenance agreements).

8. Supplies**a. Organization**

The Simulation Center has two primary storage areas

i. Space Saving Moveable Storage – Clinical Sciences Building #259:

1. Static Manikins (5)
2. Task trainers
3. Multi-bed skills supplies and equipment
 - a. IV supplies
 - b. Medication supplies
 - c. Respiratory supplies
 - d. Catheter and ostomy supplies
 - e. Wound care supplies
 - f. Personal protective equipment

ii. Moulage Storage – Clinical Sciences Building #239:

1. Simulation Supplies
 - a. Medication supplies
 - b. Wound care supplies
 - c. Obstetric simulation supplies
 - d. Human Performance simulation supplies
 - e. Community Health performance supplies
2. Manikin Supplies
 - a. Clothing
 - b. Moulage supplies
 - i. Make up
 - ii. Jewelry/Eyeglasses
 - iii. Shoes
 - iv. Wigs

v. Other props

b. Simulation Supplies and Equipment

The Maverick Family Nursing Simulation Center is housed in an academic building on the campus of Minnesota State University, Mankato, Minnesota. There are no patient services provided in the Maverick Family Nursing Simulation Center located in the Clinical Sciences Building. The center is utilized for academic learning for nursing students and workforce development trainings. The Maverick Family Nursing Simulation Center ensures that the proper safety protocols are followed at all times. All liquid vials and intravenous medications (sodium chloride or sterile water) are labeled with a neon orange sticker “Simulation Use Only”. These supplies are kept in a locked storage room in the Simulation Center that only specific staff have access to. All mock medications are also appropriately labeled for simulation purposes only so that students, faculty, staff and visitors know it is not a real medication being distributed. All AED’s and defibrillators in the Simulation Center are task trainers only.

c. Inventory

The Simulation Center utilizes FileMaker electronic software for a supply inventory database. FileMaker combines inventory from all storage areas. Inventory reports are printed on a quarterly basis. The Simulation Director should be notified when inventory supplies are low.

d. Usage and Re-Usage

Efforts will be made to re-use supplies when possible, while still maintaining learning objectives. Examples of reusable supplies include oxygen delivery devices, nasogastric tubes, and intravenous tubing. Needles or sharps SHOULD NOT be reused under any circumstances, and should be disposed of properly in the sharps container.

9. Scenarios

a. Scenario Structure

Scenarios developed for use within the Simulation Center follow the INACSL Standards of Best Practice: SimulationSM Simulation Design (2016) and utilize a modified (includes family nursing component) NLN Simulation Design Template.

- i. Title/Diagnosis
- ii. Scenario Information (e.g.: discipline, run time, student level, family constructs, and nursing actions)
- iii. Brief Description of the Client
 1. Patient information (e.g.: patient name, gender, age, weight, height)
 2. Patient photograph and first person monologue
 3. Past medical history
 4. History of present illness
 5. Primary medical diagnosis
- iv. Psychomotor skills required prior to simulation
- v. Cognitive activities requires prior to simulation

- vi. Simulation learning objectives
- vii. Pre Quiz
- viii. Fidelity
 - 1. Setting
 - 2. Simulator type
 - 3. Equipment
 - 4. Supplies
 - 5. Medications
 - 6. Roles
- ix. References
- x. Report to be Given Prior to Simulation
- xi. Scenario Progression Outline
- xii. Provider Orders
- xiii. Student SBAR to Begin Scenario
- xiv. Family Cue Card
- xii. Debriefing/Guided Reflection Questions

(National League for Nursing, 2015)

b. Audio Visual Storage

Storage of recorded files exists on a virtual server with redundancy to physical servers located in the ITS server room.

- i. These servers are maintained and backed up by our IT systems experts and is monitored continuously throughout the year.
- ii. Recorded videos are stored on the capture recorders until the recording is complete, then it is immediately uploaded to the storage server.
- iii. Videos are kept on the storage server for 3 years as the students are only in the program for 2 years and we keep the video for one extra year to allow for recovery if needed in their career paths
- iv. Once removed from the server the file is permanently deleted and cannot be recovered for security reasons

c. Utilization of Scenarios

It is the responsibility of the authors of scenarios and the simulation educators to ensure that the scenario follows current evidence-based best practice. Sources used to develop scenarios must be cited.

d. Clinical Quality Assurance

The Simulation Center evaluates simulation scenarios on a continuous basis to ensure evidence-based best practice is followed. As practice standards change, scenarios are updated to align with current standards.

e. Debriefing

Debriefing enhances simulation-based learning by allowing for reflection following the completion of simulation activities to increase participants self-awareness and self-efficacy. Debriefing encourages meaningful conversation between all simulation participants to promote understanding and the application of knowledge in a real-world

setting. If beneficial to the learning process, the Simulation Center has the capability to offer video-assisted debriefing. (INACSL, 2016)

f. Evaluation Policy

Participants are asked to complete an evaluation of the simulation scenario following completion of the specific scenario, using the Simulation Effectiveness Tool – Modified (SET-M) (Leighton, K., Ravert, P., Mudra, V., & Macintosh, C., 2015). This is completed prior to leaving the Simulation Center. A Qualtrics online survey tool is emailed to all participants following each simulation completion. This survey evaluates the Simulation Center, participant experience, and if the simulation met the educational objectives.

10. Operations

a. Utilization of Simulation Center Staff

Simulation Center staff are present to support the efficient operation of the Simulation Center, as well as to support the learning of simulation participants. Each staff member has different roles within the Simulation Center as described in Section 2.b.

b. Start up and Shut Down

Only trained simulation staff will be allowed to open the Simulation Center, this includes unlocking doors as well as turning on electronic equipment. All simulation equipment including manikins and AV equipment, should be tested prior to the start of a simulation. This process will be completed by IT support staff and/or simulation staff. End of day procedures such as cleaning manikins and equipment, shutting down computers/monitors/AV equipment, and manikins are the responsibility of the simulation staff. Securing the Simulation Center at the end of the day is completed by the simulation staff present at the time.

c. Security of Information

All printed materials associated with simulation activities are kept in the locked Control Room (CSB 228). The Simulation Director, Simulation Associate, Workforce Training Simulation Coordinator, and the Senior IT Analyst are the only staff with access to this room. Paper data collected from participants is kept in a locked file cabinet in the Simulation Center Director's office (CSB223). Storage of recorded simulation files exists on a virtual server with redundancy to physical servers located in the ITS server room.

d. Simulator Maintenance

Simulator and task trainer maintenance is performed by simulation staff, as suggested by the manufacturer user guides listed below.

Manikin	Manufacturer	Link to Manufacturer User Guide
Noelle Birthing Manikin	Gaumard	https://s3.amazonaws.com/gaumard2.0-downloads/manuals/S550.100.pdf
Victoria Birthing Manikin	Gaumard	http://www.gaumard.com/pdf/manuals/VictoriaUserGuide.17.7.1.pdf
Tory Newborn	Gaumard	http://www.gaumard.com/pdf/S2210-Tory-UserGuide.pdf
Hal Newborn	Gaumard	https://s3.amazonaws.com/gaumard2.0-downloads/manuals/42_S3010.pdf
Nursing Anne	Laerdal	http://laerdalcdn.blob.core.windows.net/downloads/f2446/130321_DFU_Nursing_Anne.pdf
Nursing Baby	Laerdal	http://cdn.laerdal.com/downloads/f3490/Nursing_Baby_Directions_for_Use_-_English.pdf
SimBaby	Laerdal	http://cdn.laerdal.com/downloads/f3157/dfu_simbaby_(contains_ipi).pdf
SimMan Classic	Laerdal	http://laerdalcdn.blob.core.windows.net/downloads/f426/SimMan_DFU_Rev_E-426.pdf
SimMan 3G	Laerdal	http://cdn.laerdal.com/downloads/f3111/user_guide_simman_3g_english.pdf
Sim Junior	Laerdal	http://laerdalcdn.blob.core.windows.net/downloads/f2136/120608_DFU_SimJunior.pdf
Vital Sim	Laerdal	http://laerdalcdn.blob.core.windows.net/downloads/f331/VitalSim_DFU_6885_Rev_D-331.PDF

e. Simulation Preparation & Turnover

Individualized scenario specific set up checklists are available for each simulation. These checklists provide specific instructions on equipment needed, props, IV rate settings, moulage to apply, etc... The checklist also contains information regarding turnover steps between simulation scenarios. These checklists can be found in the Simulation Set Up Binder located in the Control Room CSB 228. It is the responsibility of the Simulation Associate or Workforce Training Simulation Coordinator to ensure checklists are completed prior to simulation. Course educators are asked to provide student rosters prior to the simulation to ensure secured access into the B-line system for those that were involved in the specific simulation scenario.

f. After-hours Access

After-hours access is granted on a case-by-case basis at the discretion of the Simulation Center Director. Activities considered for after-hours access include customized training and tours. Simulation staff must be present to lock down the Simulation Center following completion of the after-hours activity.

11. Video Recording and Photo Release

a. Confidentiality

In order to preserve the realistic nature of the scenarios as well as the integrity of the experiential learning event used in the Simulation Center, and to provide an equitable learning experience for each participant, anyone using the Simulation Center will be required to sign a confidentiality agreement. With their signature on the confidentiality form, the participant agrees to:

- Maintain strict confidentiality regarding both my performance as well as the performance of others, whether witnessed in real time or on media;
- Observe strict simulated patient and peer confidentiality about the details of the scenario, team member actions, and the debriefing discussions, at all times in which I am both directly and indirectly exposed;
- Engage in and participate in the simulation fully as a professional and treat it as a realistic patient care experience.

Participants are expected to uphold all requirements of the Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA). Participants will agree to report any violations to the Simulation Center Director. At the beginning of each semester, students are required to sign a confidentiality form. The importance of maintaining HIPAA standards with our manikin patients is stressed to all participants including workforce training participants, faculty, and standardized patients.

b. Video Recording

- i. Nursing students at MSU are given the Photo, Video, and Audio Release form upon admission to the nursing program. The consent is fully explained to the students and they are asked to sign and date the form.
- ii. The Photo, Video, and Audio Release form is used for interprofessional simulation participants such as Athletic Training, Dietetics, Communication Disorders, Family Practice Residency, and all workforce training practice partners involved in a simulated learning experience at the Simulation Center. Each of these participants are given an explanation of the form and ample time to review and complete the form with signature and date.
- iii. Videotaping of others is highly sensitive and the simulation team will protect and respect the privacy of the recordings. All videotaped recordings will be stored in the B-Line online storage and will be password protected. Only those granted access to a given video will be allowed to view the simulation.

c. Video Distribution

Access into the B-line system is only procured by being added to an Active Directory group that is modified at the start of every semester

- i. This group includes students, staff, and faculty
- ii. Live stream can be seen by anyone with access

- iii. Recordings can only be viewed by those that were added to the simulation during the setup
 - 1. Before starting any recording, a setup screen requires the administrator to select 4 cameras out of the multitude of options, select the simulator so that diagnostic data can be attached to the recording, select the class and scenario, and select the correct personnel that will have viewing access to see the recording.
 - 2. This viewing access can be modified by administrators but typically includes those who are included in the simulation or the entire class and can be restricted to either
- iv. Access to download the video off the server can only be done or granted by administrators in the system
- v. This system can be accessed on and off campus with the appropriate access and credentials and this is done to allow students to review their simulations as well as giving our faculty and staff access to support these teachable moments. At no point can an individual access any video that they have not been given permission.

d. Video Destruction

- i. Videos are kept on the storage server for 2 years as the students are only in the program for 2 years.
- ii. Once removed from the server the file is permanently deleted and cannot be recovered for security reasons.

12. Dispute Resolution

- a. When a problem or concern arises, students, simulation educators, standardized patients, clinical partnering agencies and staff are encouraged to seek assistance from Maverick Family Nursing Simulation Center staff to take the proper steps to reporting the concern or complaint. The individual(s) who reports the concern then has three options for proceeding:
 - i. Take no further action
 - ii. Make comments or suggestions to improve the concern
 - iii. Make a complaint
- b. Any complaint made (oral or written) to the Maverick Family Nursing Simulation Center staff will be brought to the Simulation Center Director for resolution. **The majority of complaints and concerns are resolved successfully during this step.**
- c. Individuals who feel that their complaint has not been resolved appropriately can then request a review by the Maverick Family Nursing Simulation Center Advisory Board. The Advisory Board will review the complaint and either support the original resolution or work to find an alternative resolution.
- d. If by this step, the individual still does not feel satisfied with the resolution, a formal appeal can be made to the School of Nursing Department Chair and/or Dean of College of Allied Health and Nursing to render a final decision based on the evidence presented. The decision made by the School of Nursing Department Chair and/or Dean of College of Allied Health and Nursing will be final.

13. Safety and Security

a. Emergencies

- i. Medical: In case of medical emergency, 911 can dialed from any phone in the Simulation Center. Campus security should also be notified by dialing 2111. If possible, someone should meet EMS outside of the Clinical Sciences Building to direct them to the emergency. Following the event, Simulation Center staff will fill out an incident report.
- ii. Non-Medical: For all non-medical emergencies, security should be contacted by calling 2111. MSU, Mankato emergency policies should be followed.
- iii. AED Locations: AEDs are located on the first floor of the Clinical Sciences Building in the entryway of the building, and in the Dental Clinic where patients are seen. In addition, security also has an AED that they bring when called to medical emergencies.

b. Security

All simulation suites are locked unless occupied by faculty, staff and/or participants. Any breach of security must be reported immediately to the simulation staff or Campus Security by calling 2111. No unsupervised learners are allowed in any of the labs unless prior approval is given by simulation staff or faculty. Unsafe behavior will not be tolerated and should be reported immediately to faculty or simulation staff. No children or unauthorized personnel allowed in the Simulation Center at any time.

c. Identification badges

Participants are required to wear a school/employer identification badge at all times while in the Simulation Center.

14. Biohazard Material

Minnesota State University, Mankato's Office of Environmental Health & Safety (EHS) and Risk Management follows Biohazardous Protocols according to OSHA's Bloodborne Pathogens standard (29 CFR 1910.1030) and any additional regulations from the Minnesota Pollution Control Agency. The Maverick Family Nursing Simulation Center follows these protocols also. All sharps must be disposed of in a designated sharps container. Sharps containers are at each bedside in the multi-bed skills lab. In the simulation suites, sharps boxes are secured to the wall. When a container is full, EHS picks up the container for proper final disposal by a Biohazardous Waste Service.

a. "Clean" Needle Stick Policy

All needles or sharps should be disposed of properly in the sharps containers provided throughout the Simulation Center. In the event a "clean" needle stick occurs, simulation staff should be notified immediately. First aid should be provided as needed. Incident reports are kept in the Simulation Center Director's office and should be completed by the person reporting the needle stick. Incident reports are kept on file in the Simulation Center Director's office. Education should be provided regarding complications from a

“clean” needle stick include bleeding, tenderness, and infection. The Simulation Center Director should be notified if serious complications develop.

b. Handwashing

Proper hand washing or use of hand sanitizers will be a part of the practice in all aspects of simulation education. This keeps manikins and equipment clean, reinforces the habit of hand washing, especially with standardized patients, and decreases the chance of cross-contamination. There are hand sanitizer units attached to the wall in each simulation suite, and by each bedside in the Multi-bed skills lab. Utilize gloves as you would in a real clinical environment.

References

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