

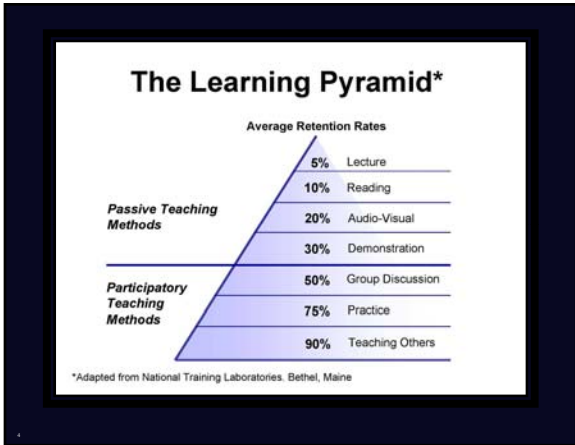
**FACILITATING SIMULATION EXPERIENCES IN ADULT ACUTE CARE:**  
*Getting it Just Right*

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**WakeMed**  
 Center for Innovative Learning  
 Raleigh, North Carolina



*I hear and I forget.  
 I see and I remember.  
 I do and I understand.*  
 Confucius




**ADULT LEARNERS**

- Autonomous
- Self directed
- Practical
- Goal-oriented
- Life-experiences
- Knowledge

**LEARNING STYLES**

- Visual learners
- Auditory learners
- Kinesthetic learners
- Environmental learners


*Simulation has something for everyone.*



### FOUR CRITICAL ELEMENTS TO ENSURE LEARNING


- Motivation
- Reinforcement
- Retention
- Transference

*Simulation is a method whereby an artificial or hypothetical experience is created that engages the learner in an activity that reflects real-life conditions but without the risk-taking consequences of an actual situation.*  
 Rystedt & Lindstrom, 2001



### SIMULATION


- Pre-brief
- Scenario
- Debrief
- Redo!



### LEARNING DURING DEBRIEFING

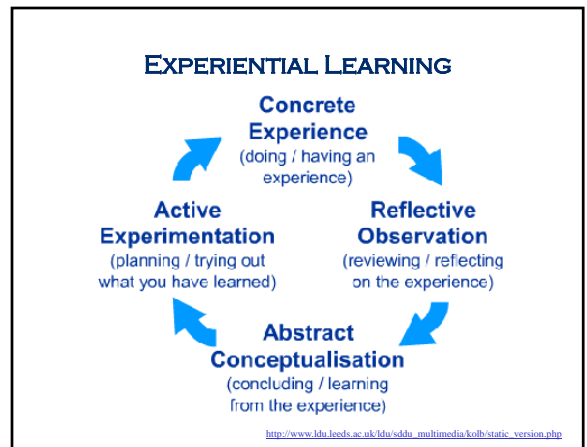
- Recognize and release emotions
- Help participants see the big picture
- Clarify information
- Compare different perspectives
- Reflective learning

Judy Johnson-Russell Ed.D., RN HPSN 08



### LEARNING DURING DEBRIEFING

- Focus on performance, not performer
- May do individual feedback one-on-one



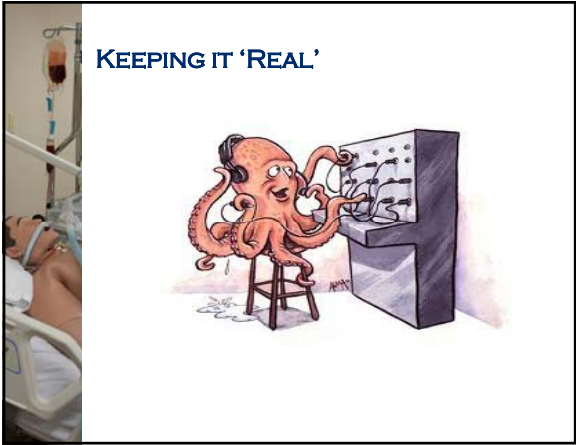
*“Without reflection one will continue to repeat their mistakes”*  
Kolb. 1984

*All humans make mistakes.  
Healthcare workers are human.  
Healthcare workers make mistakes.*  
Dr. Meera Kelley

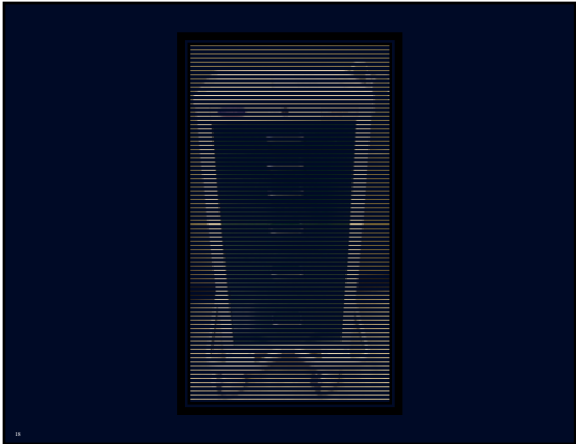
**TIME BREAKDOWN**

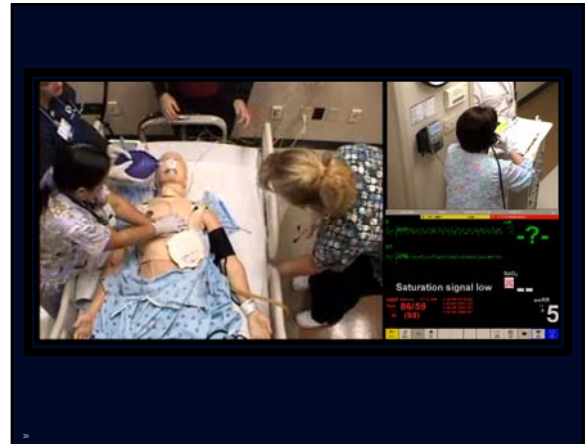
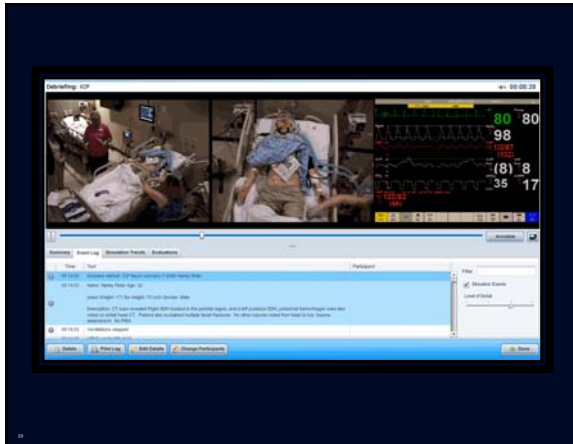
- 2 hour sessions
  - Time allowed for introductions
  - Hands-on orientation to simulator
  - Orientation to lab setting
  - Pre-brief
  - Scenario
  - Bulk of time reserved for debrief
  - Redo!

**KEEPING IT 'REAL'**



**BREAKER 19**





## CREATING A COMFORTABLE ENVIRONMENT/ TEAMWORK

Medical Simulation Center WakeMed

### CONFIDENTIALITY & EQUIPMENT USE AGREEMENT

During your participation in a simulation, you are asked to consent and hold strictly confidential all information regarding the performance of other individuals in emergency medical events. Your mission is to learn, understand, and improve your performance through this simulation and training. Confidentiality is essential to ensure that your performance and learning objectives are not compromised. Furthermore, the information that is used to design, monitor, evaluate, and improve a simulation course and the educational program must be kept confidential and proprietary information.

During your participation in these activities, in whatever role, you are asked to consent and hold strictly confidential all information regarding the performance of other individuals in emergency medical events. Your mission is to learn, understand, and improve your performance through this simulation and training. Confidentiality is essential to ensure that your performance and learning objectives are not compromised. Furthermore, the information that is used to design, monitor, evaluate, and improve a simulation course and the educational program must be kept confidential and proprietary information.

- The signee to maintain the greatest confidentiality about any individual's performance and to hold confidential all information regarding the performance of other individuals in emergency medical events.
- The signee to agree that the Confidential Information obtained by you, as a participant in a simulation course is not to be disclosed to the general public or to the media without the prior written consent of the Center for Innovative Learning and Simulation.
- The signee to agree not to disclose Confidential Information, either directly or indirectly, under any circumstances to the general public, the media, or any other individual, organization, or entity without the prior written consent of the Center for Innovative Learning and Simulation.
- The signee to agree to hold the patient simulators that are to be used with respect and to be treated as if they were the patients. The Center for Innovative Learning and Simulation will not be responsible for any damage to the simulators and the participants are responsible to hold the simulators in the highest of respect.
- The signee to agree to use appropriate PPE at all times.

Upon the completion of the simulation course, you will release promptly to the Center of Confidential Information in whatever form that may be in your possession or control, under your control, the information that the signatory will hold in this agreement. The Center for Innovative Learning and Simulation will not be responsible for any damage to the simulators and the participants are responsible to hold the simulators in the highest of respect.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_  
 Instructor: \_\_\_\_\_ Center: \_\_\_\_\_

Check One:  WakeMed  UNC  WakeTech  
 Wake  Duke  Other (Please describe): \_\_\_\_\_

Confidentiality Agreement from Medical Simulation Center Oct 26, 2020

## PREPARING A SAFE LEARNING ENVIRONMENT

- Recording for educational purposes
- Confidentiality
- Mistakes are OK
- Critical thinking

## CREATING A COMFORTABLE ENVIRONMENT/ TEAMWORK

- Participants instructed to come in scrubs and with typical work gear (steth, badge, etc) to 'normalize' the experience
- Divisional Resource Facilitates programming in conjunction with Ctr for Innovative Learning Staff (No one involved in their evals or discipline)
- Setting Clear Expectations before

## Welcome to Simulation

WakeMed Raleigh Adult Acute Care  
Division

Annie Brito, RN, BSN, CCRN

## Examples of Simulation in Other Industries



## Adult Education: Retention

### Lecture-Based Class

- < 20 % of information is retained beyond a few hours

### Performance-Based Class with Integrated Psycho-Motor Content

- >75% of information is retained.
- Participants show increased confidence with skills
- Participants demonstrate higher likelihood of correct performance of skills / application of content

## Simulation Sessions

### What it is

- A safe learning environment
- An opportunity to learn or practice skills & hone performance
- A part of organizational improvement
- A barometer for educational needs within our division

### What it is not

- A test
- An evaluation

## Scenarios

- Real situations and / or compilations of events
- Organizational transparency
- 'Just Culture'
- Opportunity to assess what happened and see if it could happen again
- Promote safe practice for us and safe care for our patients.

## What Do You Do With Your "Take-Aways"?

- Reflect on them
- Discuss them with your co-workers
- Incorporate them into your practice
- Develop learning project for your unit (PRPN)

## What Do I Do With My “Take-Aways”?

- Look for trends
- Generate process changes (Phenergan)
- Recognize educational needs & work to close the gaps

## How Does This Work?

- Communicate with one another just as you would on your unit
- Care for the patients just as you would on your unit (assessment, meds, teamwork, etc)
- You are the team today....no RRT or Code Blue team will respond although you may have the opportunity to practice calling them
- Single phone number for all your needs

## FeedBack

- SIM lab sessions are recorded for our review
- We will give each other feedback on our performance
- You will evaluate the session today. This info is used to develop future programming.
- You will be asked to evaluate the session in 90 days




## DURING THE DEBRIEF:

- Sit down with participants.....don't stand as if to lecture
- Open with an invitation of feedback to me "How was that for you? Was the scenario realistic? Could that have happened where you work?"
- Ask "How do you think you did" of each participant
- Refresh expectation before video review.....will acknowledge the things we did well and our OFIs, we will all participate in evaluating the event

## WORD CHOICES TO ELICIT FEEDBACK FROM PARTICIPANTS

- "Tell me what you saw here"
- "What did you notice about...."
- "What would you have liked to see happen here?"
- "Is this how you usually.....?"
- "What else could we have done....?" WE is important to emphasize inclusion of facilitator in the learning group



## EVALUATION

- Anonymous Evaluation
- 90 day follow-up
- Facilitator Evaluations



## RESOURCES

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Davies, C. S. (2010). *Kolb Learning Cycle Tutorial*. Retrieved 2011, from University of Leeds: [http://www.ldu.leeds.ac.uk/ldu/sddu\\_multimedia/kolb/static\\_version.php](http://www.ldu.leeds.ac.uk/ldu/sddu_multimedia/kolb/static_version.php)

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Kolb, D. (1984). *Experiential Learning experience as a source of learning and development*. Prentice Hall.

Lieb, S. (1991). *Principles of Adult Learning*. Retrieved 2011, from University of Hawaii Honolulu Community College <http://honolulu.hawaii.edu/intranet/committees/FacDevCom/guidebk/teac> <http://adults-2.htm>



## CENTER FOR INNOVATIVE LEARNING

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 WakeMed Health & Hospitals  
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