

UPSTATE
University of South Carolina

MARY BLACK
**SCHOOL OF
NURSING**

Simulation Center for Teaching Excellence: Policy and Procedure Manual

This Policy and Procedure Manual is intended for students, faculty, and staff in the Mary Black School of Nursing. The manual is not a substitute for other policies, but a complement to other policies, procedures, and codes held by the Mary Black School of Nursing, which regulates the behaviors of students, faculty, and staff of the Simulation Center for Teaching Excellence.

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Mission, Vision, and Goals

The mission, vision, and goals of the Simulation Center for Teaching Excellence (Simulation Center) align with the mission, vision, and goals of the Mary Black School of Nursing (MBSN) and the University of South Carolina Upstate (USC Upstate).

- **MBSN Mission**

- The Mary Black School of Nursing provides innovative and high-quality nursing education to Upstate South Carolina and beyond. We strive for excellence in teaching, service, and scholarship; embrace diversity and inclusion; and establish meaningful partnerships needed to graduate nursing students of choice who are prepared to serve as leaders and change agents in promoting health within the community.

- **MBSN Vision**

- The Mary Black School of Nursing will be recognized as a leader in nursing education, service, and scholarship that prepares practice-ready nurses from diverse backgrounds who promote health and wellness.

- **MBSN Goals with Simulation Action Items**

- MBSN Strategic Goal #1: Support Student Success
 - Simulation Center Action Items:
 - provide high-quality clinical skills practice opportunities that promote critical reasoning
 - provide simulation experiences based on best evidence and practice standards
- MBSN Strategic Goal #2: Design High-Quality Academic Programs
 - Simulation Center Action Items:
 - incorporate simulation experiences into all clinical nursing courses
 - facilitate inclusion of simulation experiences in any non-clinical nursing courses as applicable
 - utilize evidence-based simulation scenarios and materials in accordance with best practice standards
 - earn recognition as certified simulation program
- MBSN Strategic Goal #3: Support the Development, Recruitment, and Retention of Diverse, Qualified Faculty
 - Simulation Center Action Items:
 - promote diversity within Simulation Task Force
 - provide simulation training to faculty
 - provide adequate resources to successfully implement simulation experiences

- MBSON Strategic Goal #4: Cultivate an Inclusive Environment of Equity and Civility
 - Simulation Center Action Items:
 - promote environment that fosters equity and inclusivity among students, faculty, staff, and simulated clients
 - provide simulation experiences that develop cultural awareness, cultural humility, and cultural competence
 - cultivate civility during simulation experiences

- MBSON Strategic Goal #5: Expand Visibility and Partnerships
 - Simulation Center Action Items:
 - promote interprofessional relationships with community partners to enhance simulation
 - coordinate community access to Simulation Center to broaden exposure to nursing resources
 - collaborate with Director of Research in Nursing for support in exploring scholarship opportunities

General Information

- **Overview**

- The Simulation Center helps nursing students in the MBSON at USC Upstate to meet the goals and objectives toward earning the Bachelor of Science and Master of Science degrees. Through the use of state-of-the-art technology, the Simulation Center utilizes clinical case scenarios and faculty guidance to facilitate critical reasoning and decision making in nursing practice. These resources help to create an innovative learning environment that enriches the educational experience for students, faculty, and practicing nurses in the community.
- Our objectives include:
 - providing students with the highest level of simulation instruction
 - grounding students and faculty in the latest research and best practices in the profession of nursing through the use of simulation
 - providing leadership in simulated learning using resources to develop a diverse and culturally competent workforce
 - encouraging collaborative partnerships in simulated learning between USC Upstate and the surrounding community
 - providing consultative services in simulation to students, faculty, and the community

- **Location**

- Physical Address: Simulation Center for Teaching Excellence
First floor of the Health Education Complex building at the University of South Carolina Upstate
250 North Campus Boulevard
Spartanburg, SC 29303
- Simulation Lab Coordinator: Mrs. Logan Camp-Spivey, MSN, RN
- Telephone: (864) 503-5460
- Fax: (864) 503-5405
- E-mail: camplj@uscupstate.edu
- Website: <https://www.uscupstate.edu/academics/mary-black-school-of-nursing/about/simulation-center-for-teaching-excellence/>

- **Simulation Center Guidelines**

- During the COVID-19 pandemic, masks or face shields are required in the Simulation Center at all times.
- During the COVID-19 pandemic, temperature checks are required prior to entering the Simulation Center.
- Sign in before entering the Simulation Center.
- No food or drink in the Simulation Center rooms.
- Treat equipment and supplies with care and respect.
- Straighten up and clean work areas before leaving. If special cleaning supplies are needed, these will be provided by the Simulation Lab Coordinator. Beds are to be remade if used.
- Come prepared for learning activities. Faculty will advise students of specific requirements.
- Follow dress code set forth by faculty when attending course and clinical learning experiences in the Simulation Center. There is no designated dress code for independent skills practice in the Simulation Center.
- Show respect for Simulation Center faculty, instructors, and peers.

- **Simulation Center Hours**

- Simulation Center hours are updated weekly and located in the Mary Black School of Nursing Students' Blackboard page under the Simulation Center tab.

- **Room Reservations and Supply Requests**

- Faculty – Please e-mail Mrs. Camp-Spivey at campjlj@uscupstate.edu to reserve rooms and request supplies in the Simulation Center. Please include what the rooms will be used for, how many students will be in the rooms, and what supplies are needed. For simulation purposes, please include information on the simulation scenarios that will be used.
- Students – If you are planning to come to the Simulation Center to practice skills independently, please click on the Practice Information Link that is located in the Mary Black School of Nursing Students Blackboard page under the Simulation Center tab. This information is not a reservation, but allows Mrs. Camp-Spivey to anticipate how many students to expect in the Simulation Center and what skills students will be practicing for supply needs.

- **Accidents or Emergencies**

- Students – In the event of any accidents or emergencies, students should immediately notify their supervising faculty. If the accident or emergency occurs during independent skills practice, students should immediately notify Mrs. Camp-Spivey. If the accident or emergency is severe, call 911 first.
- Faculty – In the event of any accidents or emergencies, there is a red folder on the sign in table with information on how to handle different accidents and emergencies. If the accident or emergency is severe, call 911 first.

- **Damaged or Broken Equipment**

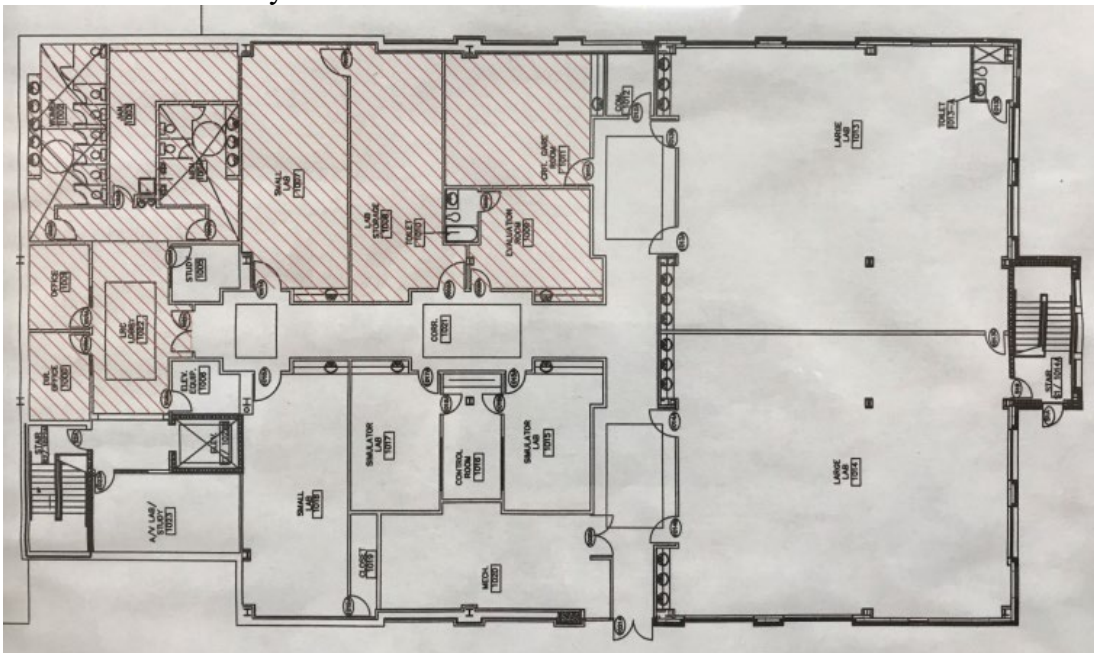
- In the event of any damaged or broken equipment, the equipment should be taken out of use, and faculty or students should notify Mrs. Camp-Spivey.

Facilities and Resources

- **Description of Space**

- The Simulation Center (11,000 square feet) in the MBSON is a state-of-the-art facility, equipped with multiple high fidelity patient simulators that include SimMan Essentials and SimMan 3G; multiple mid-fidelity patient simulators that include SimNewB, SimBaby, SimJunior, SimMom, and Nursing Annes; and several static manikins. The setup of the rooms in the Simulation Center allows for individual, small, or large group learning activities. Through partnerships with local hospitals, medical and pharmacy schools, and businesses, students are afforded the opportunity for interdisciplinary, collaborative practice.

- **Simulation Center Layout**



- Virtual Tour of Simulation Center (HEC 1st floor): <http://events.uscupstate.edu/mbson/>
- Faculty Offices
 - There are two faculty offices located in the Simulation Center. One office is occupied by the Simulation Lab Coordinator, and the other office is occupied by a simulation nursing faculty member.
- Study Shack
 - The Study Shack provides a dedicated study space in the Simulation Center for both prelicensure nursing students and students enrolled in nursing programs. There are anatomical models, medical posters, and textbooks that students can use to facilitate their learning.

– Simulation Rooms

- 1007 – This room contains empty hospital beds, bedside tables, overbed tables, and medical headwalls for students to gain hands-on experience with equipment they will encounter in nursing practice. There is a SMARTBoard and a large wall-mounted monitor in this room that is connected to a computer. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes.
- 1008 – This is a storage room.
- 1009 – This room contains SimMan Essential for foundations and medical surgical nursing experiences. This room also has a hospital bed, a bedside table, an overbed table, a medical headwall, and traditional tables and chairs for students to have lessons and practice skills. There is a large wall-mounted monitor in this room that is connected to a computer. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes. (Note – Room 1010 is the restroom located within 1009.)
- 1011 – This room contains SimJunior, SimBaby, and Resusi Junior for pediatric nursing experiences. This room also has hospital beds, a hospital crib, bedside tables, overbed tables, a medical headwall, a pediatric crash cart, and traditional tables and chairs for students to have lessons and practice skills. There is a large wall-mounted monitor in this room that is connected to a computer. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes.
- 1012 – This room contains computer servers.
- 1013 – This is a large multipurpose room. There are traditional tables and chairs for students to have lessons and practice skills. This classroom-type space can seat 36 students. This room also contains sixteen Nursing Anne manikins, hospital beds, bedside tables, overbed tables, and medical headwalls for students to gain experience on client care procedures. There is a retractable projection screen and audiovisual equipment within this room to which a computer can be connected. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes.
- 1014 – This is a large multipurpose room. There are traditional tables and chairs for students to have lessons and practice skills. This classroom-type space can seat 36 students. This room also contains three private simulation rooms with SimMan Essentials, hospital beds, bedside tables, overbed tables, medical headwalls, and medication dispensing machines for foundations and medical surgical nursing experiences. A wall in this room has two dry erase boards and a SMARTBoard. There is audiovisual equipment within this room to which a computer can be connected. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes.

- 1015 – This room contains SimMom, SimNewB, and static newborn infant manikins for maternal-newborn nursing experiences. This room also has a hospital birthing bed, a hospital crib, a hospital infant warmer, a bedside table, an overbed table, a medical headwall, and a medication dispensing machine. There is a large wall-mounted monitor in this room that is connected to a computer. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes.
- 1016 – This is the control room between 1015 and 1017 that houses the computers and audiovisual equipment used to manage simulation experiences in these two rooms. Two-way glass in the control room allows faculty to observe students during simulations without being visible to students.
- 1017 – This room contains SimMan 3G for medical surgical nursing experiences. This room also has a hospital bed, a bedside table, an overbed table, a medical headwall, a ventilator, an adult crash cart, a medication dispensing machine, and traditional tables and chairs for students to have lessons and practice skills. There is a SMARTBoard and a large wall-mounted monitor in this room that is connected to a computer. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes.
- 1018 – This room contains four Nursing Anne manikins, hospital beds, bedside tables, overbed tables, and medical headwalls for students to gain experience with client care procedures. There is a SMARTBoard and a large wall-mounted monitor in this room that is connected to a computer. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes.
- Lab 114 at University Center Greenville (not part of Virtual Tour, pictured below) – This room contains a combination of empty hospital beds, Nursing Anne manikins, and static manikins, as well as bedside tables, overbed tables, and medical headwalls so that students can have hands-on experience with clinical nursing skills. There are traditional tables, chairs, and a SMARTBoard available for learning activities. This setup can be used in a variety of ways, from displaying visuals during skills practice to viewing simulation recordings for debriefing purposes.

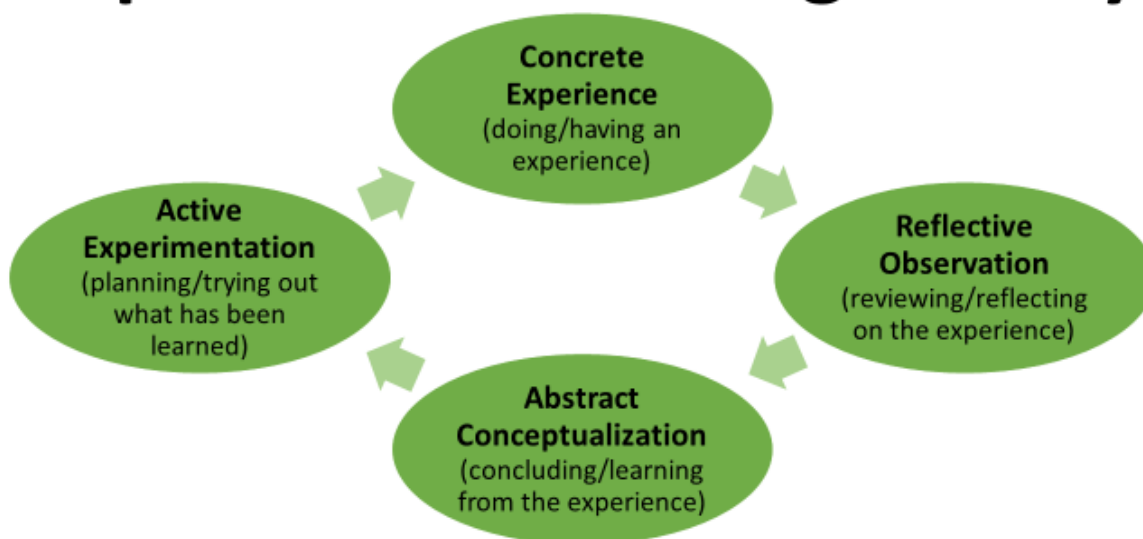


Simulation Information

Simulation is a technique, not technology, to replace or amplify real experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner. Students will participate in simulation experiences throughout the undergraduate and graduate nursing curricula.

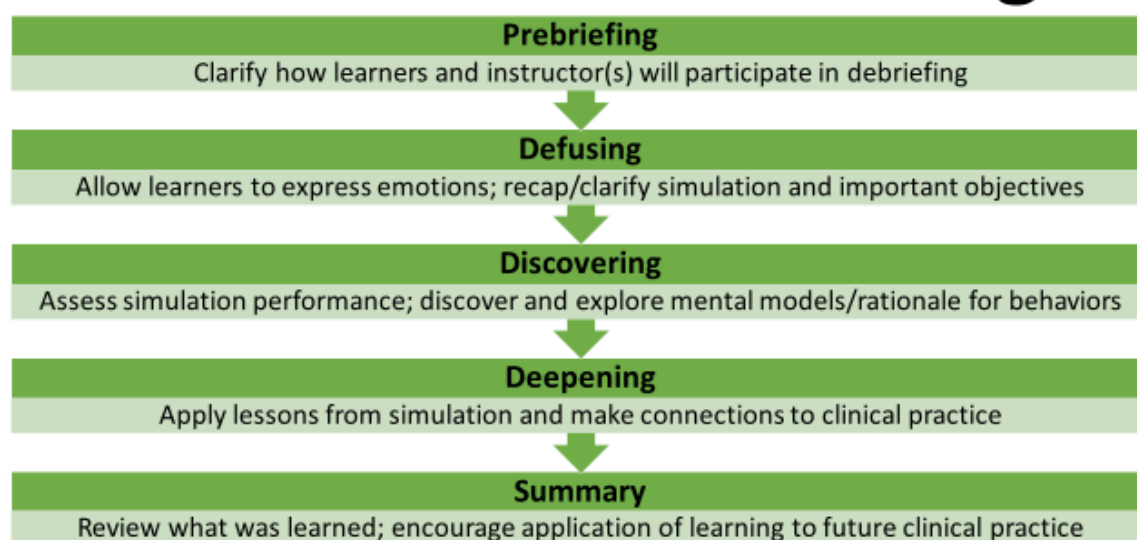
- Simulation Theory (Appendix A)

Experiential Learning Theory

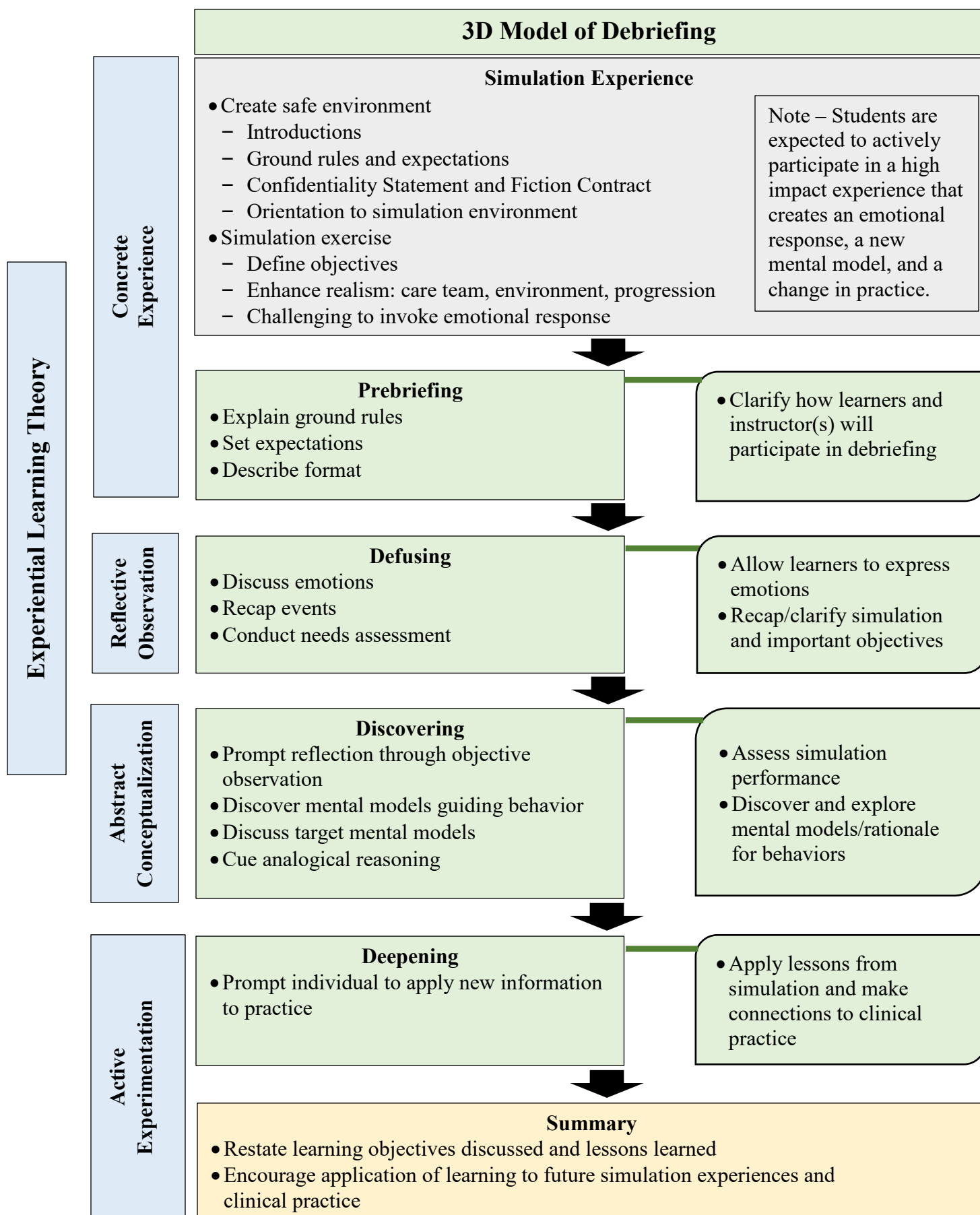


- Debriefing Framework (Appendix B)

3D Model of Debriefing



• Integration of MBSON Simulation Theory and Debriefing Model Framework



- **Simulation Confidentiality Statement and Simulation Fiction Contract**

- Simulation Confidentiality Statement: The simulation environment offers a safe setting to practice the skills and behaviors associated with professional nursing practice. Protecting client confidentiality is a key responsibility. The privacy of simulated clients and care provided while engaging in any simulation should be protected. You should not discuss any events during practice, simulation, or debriefing with anyone other than the students and faculty who have directly participated in your simulation or skills experience.

Simulation Fiction Contract: Faculty have set up simulation experiences that are as realistic as we can make them with current technology. For your part, the simulation is much more enjoyable and instructive if you conduct yourself as if you are in a real clinical situation. You should engage in the simulation as if you are working with real clients, family members, and other health care professionals. During the simulation, faculty ask that you take your role seriously and suspend disbelief. The more engaged you are during the simulation scenario, the better the learning experience.

By acknowledging this information, you are agreeing to the Simulation Confidentiality Statement and the Simulation Fiction Contract. Violations of this agreement may result in an unsatisfactory clinical evaluation and a Clinical Remediation.

(Note – Students acknowledge the Simulation Confidentiality Statement and the Simulation Fiction Contract electronically in CastleBranch and on the Mary Black School of Nursing Simulation Evaluation Survey. Faculty should review this information with students prior to simulation experiences.)

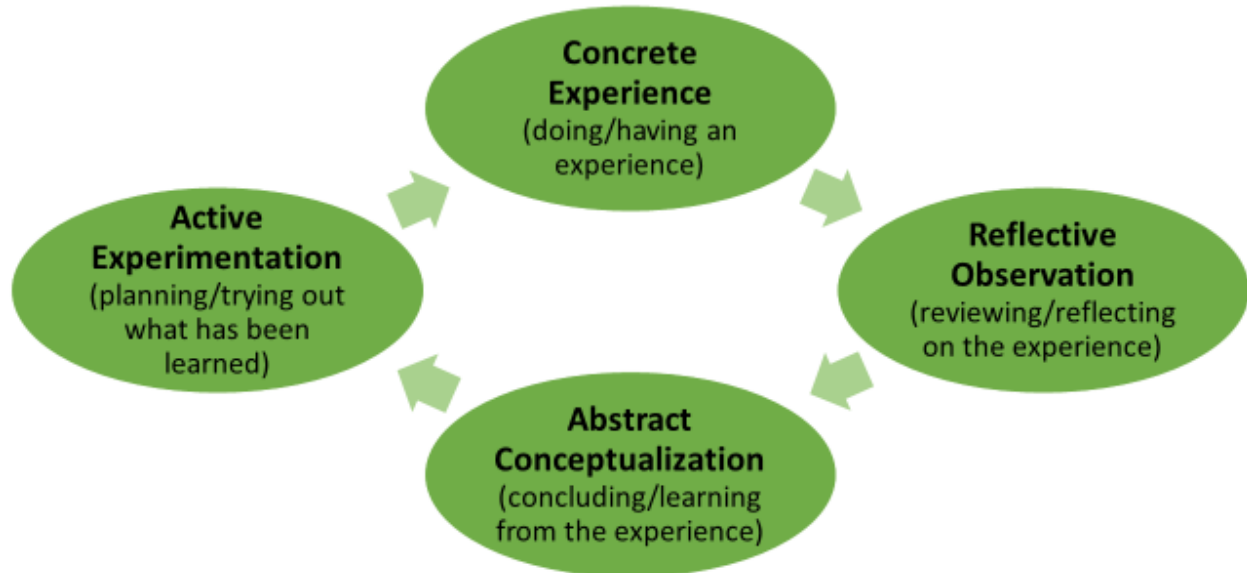
- **Standardized Simulation Process**
 - Pre-Simulation Assignment
 - Students will complete pre-simulation assignments to prepare for simulation experiences.
 - Overview of Simulation Experience
 - During the overview, students will receive information and review materials relevant to simulation experiences, such as learning objectives, expected outcomes, and the Simulation Confidentiality Statement and the Simulation Fiction Contract.
 - Simulation Experience
 - Students will participate in simulated scenarios by providing nursing care to clients. Faculty will evaluate students' performances.
 - Debriefing
 - During debriefing, students will reflect on simulation experiences to enhance learning and heighten self-awareness and self-efficacy. Faculty will use the 3D Model of Debriefing to guide debriefing sessions (Appendix B).
 - Simulation Evaluation Survey
 - Following simulation experiences, students will answer questions on an electronic survey to evaluate their experiences (Appendix C). These questions are adapted from the National League for Nursing's Simulation Design Scale.
 - Post-Simulation Assignment (optional)
 - Students may complete post-simulation assignments based on their simulation experiences.
- **Simulation Training Resources for Faculty**
 - Simulation training resources for faculty are located in the Mary Black School of Nursing Students' Blackboard page under the Simulation Center tab.

References

- International Nursing Association for Clinical Simulation and Learning. (2020). *INACSL standards of best practice: Simulation*.
<https://www.inacsl.org/inacsl-standards-of-best-practice-simulation/>
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<http://www.nln.org/sirc>
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<https://www.ssih.org/ToolkitandResources>
- University of Leicester Doctoral College. (2019, May 3). *David Kolb: Kolb's experiential learning cycle*. University of Leicester.
<https://www2.le.ac.uk/departments/doctoralcollege/training/eresources/teaching/theories/kolb>
- Zigmont, J. J., Kappus, L. J., & Sudikoff, S. N. (2011). The 3D model of debriefing: Defusing, discovering, and deepening. *Seminars in Perinatology*, 35(2), 52–58.

Appendix A: Simulation Theory

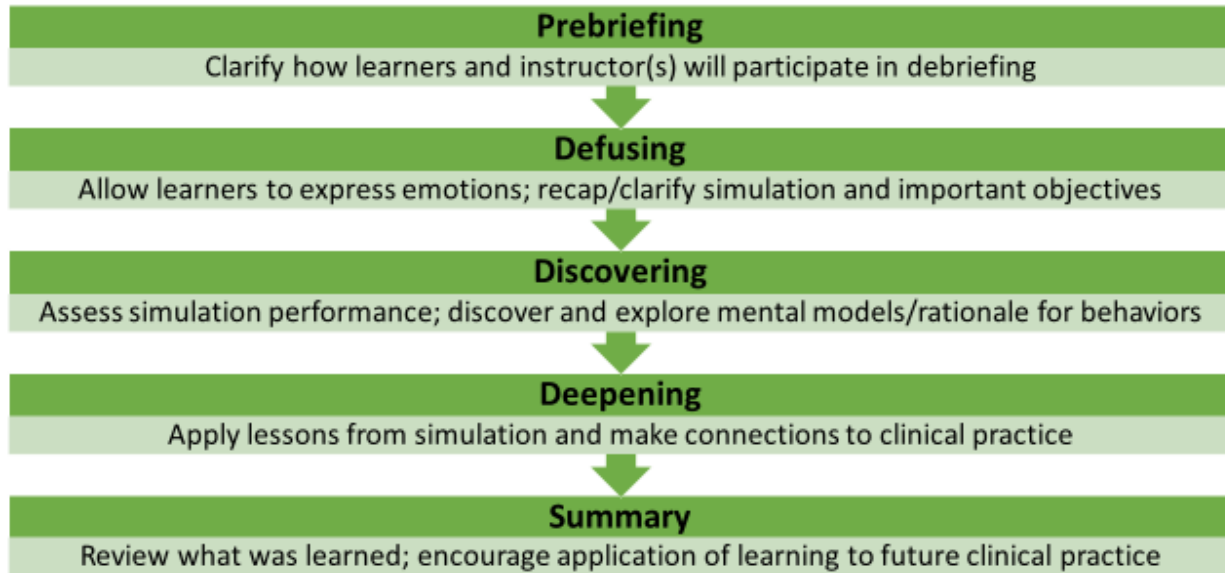
Experiential Learning Theory



- **Concrete Experience** – The first stage involves doing something in which the individual, team, or organization are assigned a task. Active involvement is key to learning. An individual, team, or organization cannot learn by simply watching or reading about something. In order to learn effectively, the individual, team, or organization must actually do something.
- **Reflective Observation** – The second stage involves taking time-out from “doing” and stepping back from the task to review what has been done and experienced. At this stage, many questions are asked and communication channels are opened to other members of the team. Vocabulary is very important and is needed to verbalize and discuss with others.
- **Abstract Conceptualization** – The third stage involves making sense of what has happened to interpret the events and understand the relationships among them. At this stage, learners make comparisons between what they have done and what they already know. They may draw upon theory from textbooks for framing and explaining events, models they are familiar with, ideas from others, previous observations, or any other knowledge that they have developed.
- **Active Experimentation** – The final stage involves learners considering how they are going to put what they have learned into practice. Planning takes the new understanding and translates it into predictions as to what will happen next or what actions should be taken to refine or revise the way a task is to be handled. For learning to be useful, most people need to place it in a context that is relevant to them. If one cannot see how the learning is useful to one's life, then it is likely to be forgotten very quickly.

Appendix B: Debriefing Framework

3D Model of Debriefing



3D Model of Debriefing

Stage	Purpose	Examples
Prebriefing	<p>To explicitly state how learners should participate in the debriefing and how instructor(s) will participate.</p> <p>Points to include:</p> <ul style="list-style-type: none"> - clarify your role as instructor - detail your expectations for learner participation - explain format debriefing will follow - tell learners how long session will last 	<p>“My role as an instructor is to help facilitate discussion and prompt self-reflection. I expect you to do most of the talking, raise questions about what was going on, identify issues, and volunteer your perspectives. We are going to debrief in three parts. First, we will have an opportunity to talk about our emotions and the impact of the simulation. Next, we will clarify the clinical details of the scenario. During the second part, you will analyze your own performance and evaluate how well the management of those situations worked. Our goal during this phase is to discover your mental model that guided your behavior and then talk about that mental model utilizing all the experience in the room. We will then connect new learning to future clinical situations. Finally, we will summarize key learning points.”</p>
Defusing	<p>To allow learners to vent emotions. To recap and clarify what happened during scenario. To conduct needs analysis of objectives important to learners.</p> <p>Points to include:</p> <ul style="list-style-type: none"> - elicit reactions and emotions - describe what happened 	<p>“How did it feel to be part of that scenario?”</p> <p>“Let’s recap what happened during that scenario so that we can then discuss why during the second part of the debriefing.”</p> <p>“Thank you for bringing that up. Let’s hold that thought and come back to it during the second part of the debriefing.”</p>
Discovering	<p>To analyze and evaluate performance through reflection. To discover mental models or rationale for specific behaviors through inquiry. To identify gaps/matches between existing and targeted mental models.</p> <p>Points to include:</p> <ul style="list-style-type: none"> - identify observed behavior or outcome - ask questions to discover mental model guiding actions - cue individual to make/identify analogy/connection to targeted mental model 	<p>“Person A, I noticed that you did X in Y situation. I was curious about that action because...(instructor offers own mental model about how to deal with Y). Can you tell me why you did X?”</p> <p>“Thank you for sharing the rationale. Has anyone else ever experienced this? What did you do to deal with that situation and why?”</p> <p>“Person A, how might this situation have been different if you had used that strategy?”</p> <p>“Another way to handle X is Z (target mental model). If you had done Z, how would that change Y?”</p>

<p>Deepening</p>	<p>To apply lessons from simulation and make connections to clinical practice.</p> <p>Points to include:</p> <ul style="list-style-type: none"> - prompt learners to connect new learning to larger clinical environment 	<p>“If you were to encounter a similar situation in the future, how would you handle it?”</p> <p>“How can you use the information we just discussed in your clinical practice?”</p> <p>“Can you think of other situations where this information could be applied?”</p>
<p>Summary</p>	<p>To review what was learned throughout the session.</p> <p>Points to include:</p> <ul style="list-style-type: none"> - highlight the key objectives and lessons learned - encourage application of learning to future simulation experiences and clinical practice 	<p>“Today we learned the following:...”</p> <p>“Let’s end with this: What is one thing that you can take away from this session to use in your practice?”</p>

Appendix C: Mary Black School of Nursing Simulation Evaluation Survey

1. **Date of Simulation:** _____
2. **Site of Simulation**
 - Simulation Center at USC Upstate
 - Other: _____
3. **Course Number**
 - NURS 306
 - NURS 310
 - NURS 320/320P
 - NURS 330/330P
 - NURS 340/340P
 - NURS 360/360P
 - NURS 375
 - NURS 410/410P
 - NURS 425
 - NURS 430
 - NURS 441/441P
 - NURS 450/450P
 - NURS 461/461P
 - NURS 497
 - NURS 499P
 - Other: _____
4. **Course Faculty Running Simulation:** _____
5. **Simulation Name/Title:** _____
6. **The purpose, objectives, and expectations of the simulation were clear.**
 - Strongly agree
 - Agree
 - Undecided
 - Disagree
 - Strongly disagree
7. **There was enough information given at the beginning of the simulation to provide direction and encouragement.**
 - Strongly agree
 - Agree
 - Undecided
 - Disagree
 - Strongly disagree

- 8. I developed a better understanding of how to prioritize nursing assessments and interventions.**
- Strongly agree
 - Agree
 - Undecided
 - Disagree
 - Strongly disagree
- 9. I had an opportunity to apply my knowledge and skills from didactic and clinical learning.**
- Strongly agree
 - Agree
 - Undecided
 - Disagree
 - Strongly disagree
- 10. I gained experience in communicating with simulated clients, family members, and/or health care team members.**
- Strongly agree
 - Agree
 - Undecided
 - Disagree
 - Strongly disagree
- 11. Debriefing provided an opportunity to reflect on my performance during the simulation.**
- Strongly agree
 - Agree
 - Undecided
 - Disagree
 - Strongly disagree
- 12. I feel better prepared to recognize and respond to changes in the conditions of clients in health care and community settings.**
- Strongly agree
 - Agree
 - Undecided
 - Disagree
 - Strongly disagree

13. Comments: _____