

The global leader in the art and science of healthcare simulation through excellence in nursing education, practice, and research





Desire Diaz, PhD, Desiree A. Díaz Ph.D, APRN, FNP-BC, CNE, CHSE-A, ANEF, FSSH, FAAN
President, INACSL
Laura Gonzalez, PhD, APRN, CNE, CHSE-A, ANEF, FAAN
Immediate Past President, INACSL

Healthcare Simulation Standards of Best Practice™ & Endorsement

DISCLOSURES

- Dr.Gonzalez is employed by SentinelU® and has 2 patents.
 She is the immediate past President of INACSL
- ➤ Dr.Diaz is the President of INACSL, and has numerous grant funding and 3 patents.

IINTRODUCTION

- Use Healthcare Simulation Standards to stay current
- Ensure that you are up to speed on the latest developments & best practices within simulation
- Highest quality of educational practice through a comprehensive, consistent standard of practice
- Developed in collaboration with the global & interprofessional simulation community

HISTORY OF STANDARDS

- 2011: 1 st ed. of the INACSL Standards of Best Practice: Simulation SM published.
- 2013: 2 nd ed. Published.
- 2014: NCSBN National Simulation Study Results Hayden et al., 2014
- 2015: NCSBN Simulation Guidelines for Prelicensure Nursing Programs - Alexander et al., 2015.
- 2016: 3 rd ed. Published.
- 2021: 4th ed. Healthcare Simulation Standards of Best Practice TM with the support and input of the global simulation community.

HEALTHCARE SIMULATION STANDARDS

- 1. *ProfessionalDevelopment (NEW)
- 2. *Prebriefing: Preparation and Briefing (NEW)
- 3. *Simulation Design
- 4. *Outcomes and Objectives
- 5. *Facilitation
- 6. The Debriefing Process

- 7. Evaluation of Learning and Performance
- 8. Professional Integrity
- 9. Sim-Enhanced IPE
- 10.Operations
- + Simulation Glossary

Healthcare Simulation Standards PROFESSIONAL DEVELOPMENT (NEW)

- Initial & ongoing professional development supports simulationist across career.
- Allows simulationist to:
 - Stay current with new knowledge;
 - Provide high -quality simulation experiences; &
 - Meet educational needs of learners.



PROFESSIONAL DEVELOPMENT

Criteria Necessary to Meet this Standard:



Perform an educational needs
assessment that includes a gap analysis
to provide the foundational evidence
for a well-designed professional
development plan.

Participate in professional development activities that address desired learning outcomes and align with an individual's role and the priorities of the institution.





Reevaluate the professional development plan on a regular basis using formative and summative methods by both the individual and the organization.



Healthcare Simulation Standards SIMULATION DESIGN

Design SBE to meet objectives & optimize outcome achievement.



SIMULATION DESIGN

Criteria Necessary to Meet this Standard:



Designed in consultation with content experts and simulationists



Perform a needs assessment to establish foundational evidence



Construct measurable objectives



Align the modality with the objectives



Design a scenario, case, or activity that provides context



Use various types of fidelity



Plan a learner-centered facilitative approach



Create a prebriefing plan that includes preparation materials and briefing



Create a debriefing or feedback session, and/or a guided reflection exercise



Develop a plan for evaluation



Pilot test simulationbased experiences

Healthcare Simulation Standards PREBRIEFING: PREPARATION AND BRIEFING (NEW)

- Process which involves preparation & briefing.
- Ensures simulation learners are:
 - Prepared for educational content &
 - Aware of ground rules.

PREBRIEFING: PREPARATION AND BRIEFING

Criteria Necessary to Meet this Standard:

Universal Criteria

(L) (L)

Simulationist should be knowledgeable about the scenario



Prebriefing is developed according to the purpose and learning objectives



Consider the experience and knowledge level of the simulation learner

Preparation Criteria



Develop preparation materials to help learner meet objectives



Help learners succeed with variety of activities



Deliver prior to and on the day of SBE to augment knowledge

Briefing Criteria



Set the tone with expectations, logistics, and roles



Conduct a structured orientation to SBE environment and modality



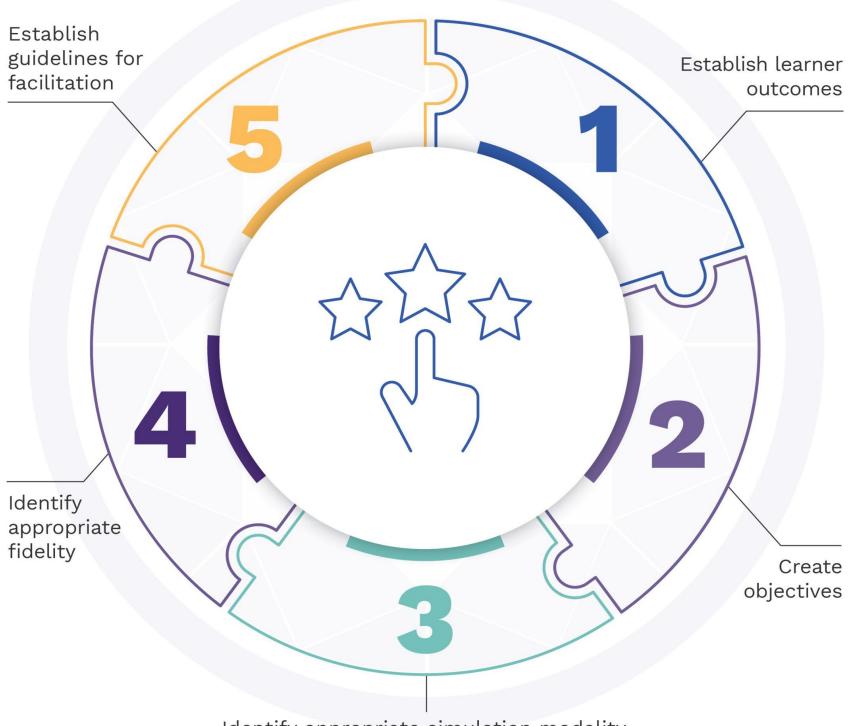
Create a psychologically safe learning environment during the prebriefing

Healthcare Simulation Standards OUTCOMES AND OBJECTIVES

Develop measurable objectives to achieve outcomes.

OUTCOMES AND OBJECTIVES

Criteria Necessary to Meet this Standard:

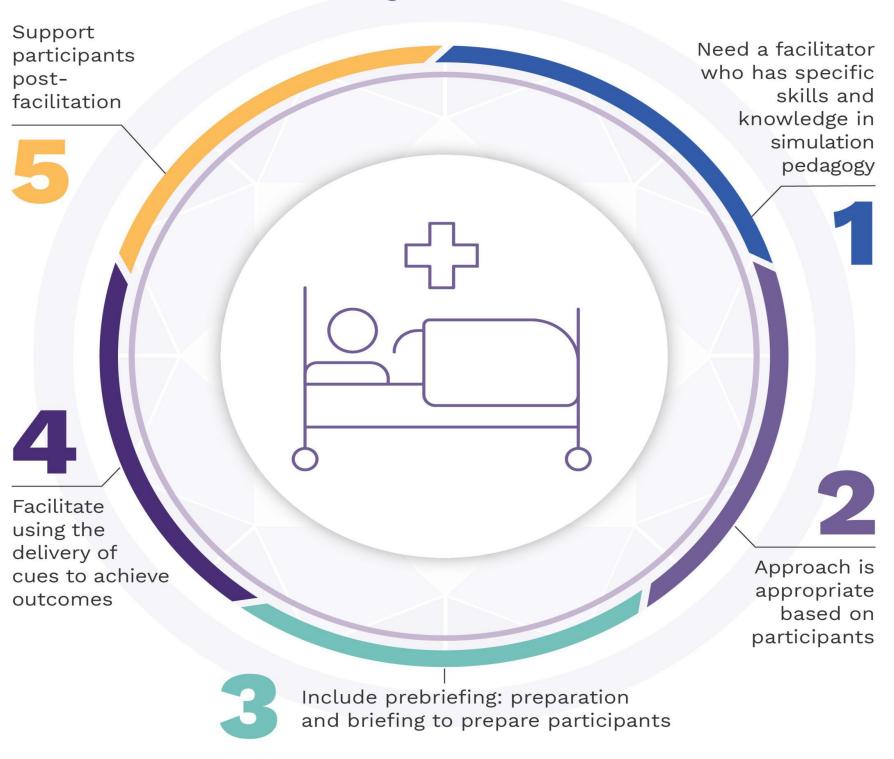


Healthcare Simulation Standards FACILITATION

Structure & process to manage simulation experience for learners.

FACILITATION

Criteria Necessary to Meet this Standard:



Healthcare Simulation Standards THE DEBRIEFING PROCESS

- Simulation includes planned debriefing process
 to:
 - Develop insights;
 - Improve future performance; &
 - Integrate learning into practice.

THE DEBRIEFING PROCESS

Criteria Necessary to Meet this Standard:



Ensure debriefing is incorporated in an appropriate manner



Constructed, designed or facilitated by a competent debriefer



Promote self, team, and/or systems analysis while encouraging reflection



Planned and structured in a purposeful way based on theoretical frameworks and/or evidenced-based concepts

厚

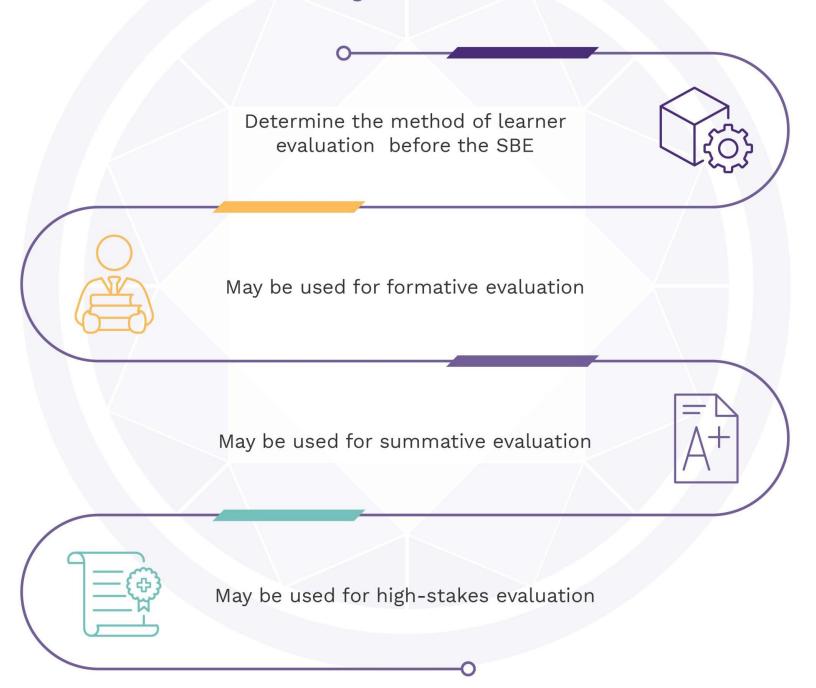
Healthcare Simulation Standards EVALUATION OF LEARNING AND PERFORMANCE

• Simulation requires some form of learner evaluation .



EVALUATION OF LEARNING AND PERFORMANCE

Criteria Necessary to Meet this Standard:



Healthcare Simulation Standards

PROFESSIONAL INTEGRITY

 Demonstrated & upheld by all facilitators, operators, and learners.



PROFESSIONAL INTEGRITY

Criteria Necessary to Meet this Standard:



Honor and uphold the Healthcare Simulationist Code of Ethics

Follow standards of practice, guidelines, principles, and ethics of one's profession





Create and maintain a safe learning environment

Practice inclusion by respecting equity, diversity, and inclusivity





Require confidentiality

Healthcare Simulation Standards SIMULATION-ENHANCED INTERPROFESSIONAL EDUCATION

 Learners from different professions engage in SBE to achieve shared objectives & outcomes.



SIMULATION-ENHANCED INTERPROFESSIONAL EDUCATION

Criteria Necessary to Meet this Standard:



Conduct Sim-IPE based on a theoretical or a conceptual framework



Utilize best practices in the design and development



Recognize and address potential barriers

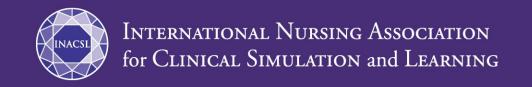


Include an appropriate evaluation plan

厚

Healthcare Simulation Standards OPERATIONS

 Required systems and infrastructures to support & maintain operations.



OPERATIONS

Criteria Necessary to Meet this Standard:



Implement a strategic plan



Provide personnel with appropriate expertise



Develop plans to manage space, equipment, and personnel resources



Secure and manage the financial resources



Use a formal process for effective systems integration



Create policies and procedures to support and sustain the SBE program

Healthcare Simulation Standards SIMULATION GLOSSARY

 Knowledge & ideas clearly communicated with consistent terminology to advance the science of simulation.

Healthcare Simulation Standards

OUR CHALLENGE:

- Continue simulation research, ingenuity, & creativity.
- Keep publishing & presenting work.
- Seek best practice & excellence in simulation experiences.
- Apply & integrate Standards.

Healthcare Simulation Standards REFERENCES

Clinical Simulation in Nursing September 2021



Healthcare Simulation Standards Endorsement





What is Endorsement?

Endorsement IS

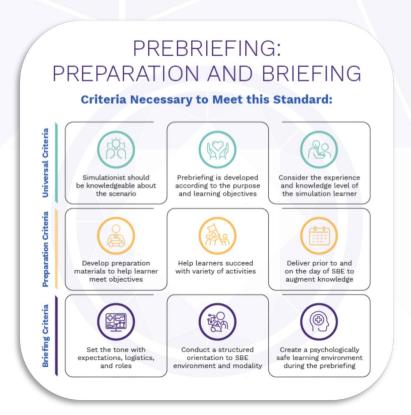
Demonstration of high-quality simulation

Endorsement is NOT

Demonstration of program or operational support of simulation

The Core Four

- Prebriefing: Preparation and Briefing
- Facilitation
- Professional Integrity
- Debriefing













Endorsement Designations

- Endorsed: Program recognized as achieving the expectations of the Core Four
- Conditionally Endorsed: Program recognized as making great strides towards endorsement and needs an additional year to demonstrate achievement of the expectations of the Core Four
- Not Endorsed: Program does not meet the expectations for the Core
 Four endorsement and needs to review feedback to develop a plan for
 meeting the expectations of the Core Four. Consider reapplying in the
 future



Benefits & Desired Outcomes

- Facilitate sustained application of best practices to simulation experiences and programs
- Recognize all varieties of simulation-based experiences, including skills training, low fidelity, high fidelity, AR/VR, distance, manikin-based, and various levels of technology
- Facilitate positive changes that improve simulation education based on the application of evidence-based practices and research
- Encourage ongoing performance evaluation and improvements within simulation programs
- Improve healthcare education and patient safety as a whole through the promotion and practice of high-quality simulation



Core Team

- Laura Gonzalez
- Teresa Gore
- Fara Bowler
- Margaret Verkuyl
- Jill Sanko
- Tonya Breymier

Sub-team Members & Reviewers

- Marie Gilbert
- Angela Pal
- Suzanne Campbell
- Juan Antonio Muro Sans
- Elizabeth Horsley
- Marci Dial
- Lorraine Betts

- Tonya Breymier
- Eliana Escudero Zuniga
- Michelle Brown
- Kelly Thobe
- Tagwa Omer
- Jean-Cristophe Servottee



INACSI INACSI

- 12 programs completed the letter of intent
- 11 submitted applications
 - 2 international programs
 - 2 hospital-based programs
 - 9 academic institutions
 - Public and private
 - ADN, BSN, MSN, allied health
- 9 Endorsements
- 2 Conditional Endorsements





Pilot Feedback: Survey N = 10

How many hours did it take you to complete the application?

- 15-20 (4)
- 20+ (6)

Worthwhile investment?

• 100% said Yes (10/10)

Did you learn anything new about your program?

• 5 yes, 5 no



Pilot Feedback – Focus Group Meeting

- Maybe include evaluation information from stake holders beyond students
- Overall positive experience
- Honored to be part of the process
- Gap identification
- More specific instructions and formatting guidelines
- We really enjoyed the process

- Instructions were not clear need clearer instructions
- Helpful as a self-review
- We had more to show
- Maybe have a map of total program overview as a requirement
- Wonderful activity of self-evaluation



Pilot Feedback Survey: Qualitative

- What is the perceived value of the endorsement?
 - High value for proof of adherence to the Core 4.
 - I think being endorsed by INACSL will validate the quality of our simulation program.
 - Recognition of program excellence to simulation community as well as university administration. Recruiting tool for more simulation faculty.
 - shows outside stakeholders that we are following the standards and expect excellence



Pilot Feedback: Survey - Qualitative

- What was the intangible value of going through this process?
 - A chance for self-review and involving faculty engaged in simulation in looking at the "big picture" of SOBP.
 - The recognition by other simulation experts.
 - The process helped us in our review of internal processes and to clearly state our goals for the future of our simulation program.
 - The intangible value is the teamwork members of our program felt throughout this process. Working together to understand INACSL and the importance of alignment with HSSOBP is invaluable. Bringing together members of our team to collaborate on aspects of the application brought new levels of professional and personal respect that will be reflected in our day-to-day operations.



Eligibility and Application

- Healthcare agencies, hospitals, simulation centers, and academic institutions
- Two annual call for submissions.
- Endorsement is granted for 3 years; reapply for 5 years
- Digital application designed to encourage innovation and creativity.
- Applicants are provided examples of suitable evidence to submit that demonstrate their application of the Core Four, rather than prescriptive requirements
- Please note: you do not have to be a INACSL member to submit





Fees

- Equity Pricing
 - Category A Countries
 - \$150 USD filing fee paid with submission of letter of intent
 - \$2,500 USD application fee paid with submission of full packet
 - Category B, C, D Countries
 - \$100 USD filing fee paid with submission of letter of intent
 - \$1,500 USD application fee paid with submission of full packet

Visit website for full country category listing.

Designation Period and Renewal

- Endorsement: three (3) years,
- Reapply: five (5) years.





Evaluation

- Demonstration of the Core Four Standards (meets, doesn't meet, partially meets)
- Gestalt of the Application
- Inter-rater Reliability
- Minimum of 2 Reviewers for each application
- Committee Discussion
- Final Vote
 - Endorsed
 - Conditionally Endorsed
 - Not Endorsed

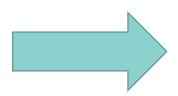


shutterstock.com · 1339409468





Criteria from the Healthcare Simulation Standards



Combined Suitable Examples for application

Examples of evidence:

- Videos
- Scenario templates
- Policies
- Narrative text
- Scripts for debrief and prebrief



Disclaimer

The suggested evidence is not mandatory, nor exhaustive. Every example for each of the Core Four Healthcare Simulation Standards is not required; approval is not based on the volume submitted. The purpose for the examples is to provide tangible descriptions and application of demonstration of adherence and adoption of the Core Four Healthcare Simulation Standards.

Recognition of Endorsement

- Wall plaque
- Recognition on the INACSL Website
- Logo tagline for institution website and email signature
- Ribbon at conferences
- Media opportunity on accomplishment



Fall 2023 Timeline

Date	Activity
Aug 23, 2023 8PM EST Aug 24, 2023 1200 EST	1 hour Webinar: Endorsement
Monday Aug 28, 2023	Call for letters of intent opens
Sept 22. 2023	Reviewer training meeting
Sept 29. 2023	Deadline for submission of letters of intent
Oct 9, 2023	Applications open
Oct 23-27, 2023	Reviewer meeting for inter-rater reliability
Oct 30, 2023	Application deadline
Nov 3-30, 2023	Reviewers complete individual evaluations
Dec 8, 2023	Reviewer meeting
Dec 18-22, 2023	All decisions and notifications of results





www.inacsl.org/endorsement





Questions?



Common Areas for Improvement: Prebrief

- Orientation to technology and simulation experience not described well
- Often stated 'safe space' without providing options if students feel upset or threatened. Important to state identify ways to make it a safe learning space.
- Standardized wording or concepts related to psychological safety, fiction contracts and sensitive information not provided.
- No demonstration of progression of learner in the prebrief.
- Lack of evidence of a needs assessment to describe why a simulation was selected for specific curriculum.
- Limited evidence of level of learner related when determining simulation objectives.
- Lack of curricular mapping to simulations to demonstrate integration.

Common Areas for Improvement: Facilitation

- Lack of demonstration that facilitators focus on the simulations learning objectives in the debrief.
- Limited evidence facilitators were competent in simulation; evidence of training or professional development.
- No regular evaluation of faculty as facilitators
- Limited evidence facilitation was completed at the level of the learner
- Limited documentation of scaling simulation up with subsequent simulations.
- Often no evidence of facilitation beyond the simulation
- Lacking evaluation if the simulation learning objectives were met.
- There needs to be evidence of effective facilitation of all the students i.e. observers and participants in the simulation room.

Common Areas for Improvement: Debriefing

- No identified debriefing framework.
- Lack of focus on the learning objectives in the debrief.
- Debriefing framework provided but in the application scenario a different debriefing framework was used.
- Limited documentation of the evaluation of the facilitator from students and peers.
- Facilitator sets the tone by being professional and a role model.

Common Areas for Improvement: Professional Integrity

- No policy related to signing of confidentiality form, and how often it needs to be signed.
- Lack of demonstration of embedding the SSH code of ethics
- DEI/EDI was described as the policy for the institution and not for the simulation department.
- Limited evidence of integration of DEI/EDI in all aspects of the SBE
- Lack of integration of professional standards related to the participants program.



Questions?

