



# California Health Sciences University

## COLLEGE OF OSTEOPATHIC MEDICINE (COM)

### SIMULATION ASSESSMENT AND EVALUATION POLICY

#### **PURPOSE**

The purpose of the policy is to ensure a plan is in place with a defined timetable for ongoing assessment and evaluation of simulation activities including participant and faculty satisfaction with operations, programming, and fidelity of the environment.

#### **SCOPE**

This policy affects Simulation Center administration and staff, CHSU faculty and staff, and participants (external and internal) who work in and with the CHSU Simulation Center.

#### **POLICY STATEMENT**

The CHSU Simulation Center and Program is subject to ongoing programmatic-level evaluation using multiple methods. Simulation Center personnel are responsible to develop a performance improvement plan to ensure ongoing quality improvement of the simulation program and integration into curriculum.

The evaluation process will follow simulation standards to ensure quality, validity, and improvement for all simulation-based education. The CHSU Simulation Center and Program adheres to the Society for Simulation in Healthcare (SSiH) Teaching/Education Standards and the International Nursing Association for Clinical Simulation and Learning (INASCL)

- SSiH Educational Activities and Design
- SSiH Qualified Educators
- SSiH Evaluation and Improvement
- INASCL [Healthcare Simulation Standards of Best Practice™ Outcomes and Objectives](#)
- INASCL [Healthcare Simulation Standards of Best Practice™ Simulation Design](#)



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- INASCL [Healthcare Simulation Standards of Best Practice™ Evaluation of Learning and Performance](#)

Defined methods for evaluation have been determined for:

- Participants (formative and summative) for internal and external learners
- Facilitators
- Simulation-based experiences
- Faculty satisfaction

Simulation activities are evaluated and tracked throughout the academic year with a final summary analysis at the end of the fiscal year. The summary in the End of Year Review is reviewed by the CHSU Provost, College Deans, the Office of Institutional Assessment, Effectiveness and Research, Simulation Advisory Council for collaborative expert guidance in the simulation process, and COM Associate Dean, Osteopathic Clinical Education and Simulation who has the supervisory role to the simulation program and the Simulation Director.

Simulation standardized assessment and evaluation tools map to the American Osteopathic Association Seven Core Competencies and the [Osteopathic Considerations for Core Entrustable Professional Activities for Entering Residency](#). The 13 objectives of the Core Entrustable Professional Activities for Entering Residency are mapped on all simulation scenario templates, and learner assessment tools used with the simulation-based experience and post-encounter debriefing. They crosswalk with the College of Osteopathic Pathic Medicine program learning outcomes (American Osteopathic Association Seven Core Competencies) and the individual course learning outcomes.

The simulation program and team use the SII-PDCA model (Strengths, Insights, Weaknesses, Plan Do Check Act) for simulation performance improvement based on gaps



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## DEFINITIONS

**A. Simulation Activity** – The entire set of actions and events from initiation to termination of an individual simulation event; in the learning setting, this is often considered to begin with the prebriefing and end with the debriefing. All the elements in a simulation session, including the design and setup required.

## REFERENCES

Lopreiato JO (Ed.). (2016). Healthcare simulation dictionary (36). Rockville, MD: Agency for Healthcare Research and Quality.

## RELATED INFORMATION AND PROCEDURES

### A. Simulation Program Assessment and Evaluation Activities

WHAT	WHEN	WHO	HOW and/or Additional Comments
Ad Hoc Committee	At least once during an accreditation cycle plus review at the end of each academic semester and end of year.	Simulation team members, clinical faculty, supervisory dean to the simulation center	Review participant evaluations of simulation activities.
Strategic Planning	Every 5 years – based on university cycle	Simulation center director and staff, associate dean, osteopathic clinical education and simulation	Prior to accreditation, complete strategic plan revision for 2023-2028

Simulation Effectiveness Tool Modified (SET-M) (anonymous)	Ongoing At least twice a semester for each course in the Simulation Center including any done in the classroom	Participants and learners in simulation events/activities Modified for external clients	QR code provided at the end of the simulation experience to be scanned by participants using a published, valid and reliable instrument. Results are summarized and kept in a database.
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Faculty Simulation Evaluation (anonymous)	Ongoing	Clinical faculty and external clients working in and with the simulation events and activities	QR code provided by email at least once a semester. Results are summarized and kept in a database.
Tour Satisfaction Survey	Periodic	Contact for tour set-up	Email to contact in charge of tour and ask them to distribute the on-line survey link to the people who attended the tour. Results are summarized and kept in a database.
Revision of Simulation Program Policy and Procedure Manual	Periodic with changing landscape July of the odd numbered year	Simulation Program: director & staff Clinical Faculty Supervisory dean	Policies are written or revised with input from simulation program faculty and staff. Final approval is by the University Policy Development Committee
Budget	Annually	Simulation Center director & staff, supervisory dean, & university CFO and input from clinical faculty	The Simulation Program annual budget is reviewed with a summary of expenses reported to the Dean, CFO, and VP of Operations.
Annual Statistical Report – Simulation Metrics	End of each academic year	Simulation Center director & staff, supervisory dean,	All use of simulation will be tracked, and a summary of simulation-based education provided to faculty and staff in the End of Year Report. The Simulation Advisory Council will review the summary at the annual meeting
Simulation Faculty Educators evaluation for competency	Once during the academic year	Simulation Center Director or designee	Clinical faculty who has been through educator training (Tier 3) and serve as facilitators during simulations are to maintain competency either through simulation training, workshops, course,



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			conferences, or in-services. These are to be reported each year to the Simulation Center Director. The Simulation Center Director will directly observe and evaluate faculty during simulation events for improvement feedback.
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### RESPONSIBILITIES

A. The Simulation Center Director and staff, clinical faculty and facilitators, external clients, and students of CHSU are responsible to uphold and follow this policy

### HISTORY (R\*)

Approval Date:

7/5/2023

12/11/2019

Revision Date(s):

4/3/23

Reviewed Date(s):

7/5/2023

**R:** COM Dean

**A:** Simulation Center Director, Associate Dean for Osteopathic Clinical Education and Simulation

**C:** COM Faculty and Staff, CHSU Legal Counsel, CHSU Policy Development Committee, Simulation Personnel

**I:** CHSU Community



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