



California Health Sciences University

COLLEGE OF OSTEOPATHIC MEDICINE (COM)

SIMULATION PRIORITIZATION OF SIMULATION RESOURCES

PURPOSE

This policy is to ensure the Simulation Center and program availability by prioritizing the utilization of space and resources.

SCOPE

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

POLICY STATEMENT

Decisions for use of the Simulation Center and resources (both internal and external) are based on

- University priorities found in the CHSU Strategic Plan and COM Strategic Plan
- Organizational goals, course objectives, and general healthcare clinical assessed needs as provided by the clinical faculty
- Availability of infrastructure (equipment, simulation staff, and supplies)
- Number of participants influencing timing of events
- Availability of clinical faculty facilitators or healthcare organization attendings

The Simulation Center Director working directly with the Simulation Center staff collaborate with the Office of Academic Affairs which oversees the curricula, department chairs, and course directors prior to the academic year start to plan high priority use of the Center and resources. Based on these meetings, dates are placed on the Simulation Center calendar to ensure availability for CHSU academic needs.

Where possible, and in consultation with CHSU leadership, the Center Director will approve use of the Simulation Center by educational and healthcare organizations from the community is



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permitted, including external community healthcare organizations, community colleges, college pathway programs, residency programs, and high schools for example.

Final decisions for use are made by the Associate Dean, Osteopathic Clinical Education and Simulation and the Simulation Center Director.

Within the University, Simulation Center use is based on the following priority scheduling:

First Priority	Second Priority	Third Priority	Fourth Priority
Primary & Specialty Course Practice Sessions (TDP & TPP) Osteopathic Principles and Practices course directors Entrustable Professional Activities Courses Directors Interprofessional Education Course Directors	New Course Requests Based on Latent Identified Curricular Needs	Didactic Sessions	<ul style="list-style-type: none"> • Non-Simulation Meetings • Tours & Public Relation Activities
OSCEs Summative Check-off of Skills Grading	FOSCEs Formative Check Off of Skills Practice	<ul style="list-style-type: none"> • Faculty and Staff Development • Simulation Planning Meetings 	<ul style="list-style-type: none"> • External Client Contracted Experiences • High School Health Career Programs • College Pathway Programs • Residency Programs
Practical Exam Check-off of Skills Grading	Remediation Requests	Simulation Training Faculty and Staff	Student Interest Group After Hours Skills Practice



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RELATED INFORMATION AND PROCEDURES

- A. Added priority rating is done using the Simulation Center Simulation Scenario and Simulation Request Process (Appendix A) and the Priority Scale (Appendix B).

RESPONSIBILITIES

- A. Simulation Center Director, Simulation Center staff, all CHSU faculty and facilitators, internal and external clients, and students of CHSU are responsible for upholding and following this policy.

HISTORY (R*)

Approval Date:

7/5/2023

Revision Date(s):

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



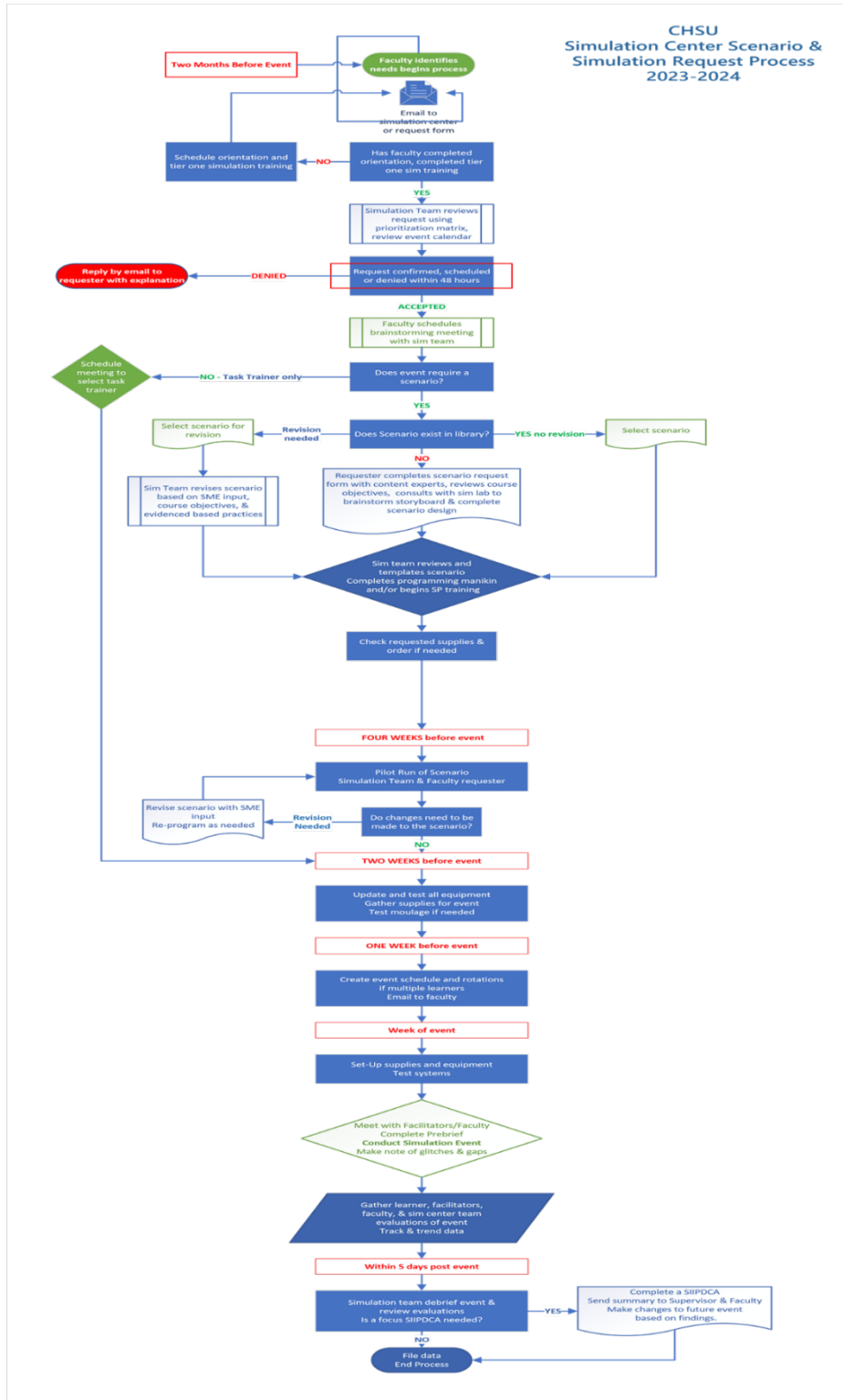
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APPENDIX A



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CHSU Simulation Center Scenario & Simulation Request Process 2023-2024



Appendix B



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PRIORITY SCALE

Name of Request:

Date:

CRITERIA		
EXTREMELY HIGH IMPACT		4
CHSU Strategic Initiative – Goal 3 Improve healthcare of residents within the region		
National Patient Safety Goals - ID patients correctly; Improve staff communication; Use medications safely (labeling, blood thinners, reconciliation); Equipment alarm safety; Prevent Infections; Prevent mistakes in Surgery (correct surgery, correct site, time out)		
Quality & Patient Safety Serious Harm Events and Serious Safety Events – High Risk/Low Frequency		
Is this scenario sustainable for repeat occurrence? – personnel, staff, equipment, venue (Yes – 4)		
Is there a financial base to cover the costs of this scenario? – division and/or department has resources to meet the costs of the simulation (Yes – 4) MOU with Adventist Family Medicine Residency Program and Fee Structure If further funding is needed (outside funding or future budgeting to repeat the scenario is necessary, then the scenario needs to be reconsidered (Score – 0)		
	Must meet at least 3	Possible 20 TOTAL
HIGH IMPACT		3
Onboarding staff - orientation		
Onboarding faculty – simulation orientation and training		
Mandatory courses/classes required by any department and/or discipline		
	Should meet at least 2	Possible 9 TOTAL
MEDIUM IMPACT		2
Elective Medical Training		
Elective Interprofessional Team Training		
Elective Staff Development Training/Education		
	Should meet at least 2	Possible 6 TOTAL
LOW IMPACT		1
Process simulation – may have some effect on patient care – meant to resolve a gap in workflow and/or process		
Pilot/Test simulation – new equipment vs old; new architectural design; new simulation equipment – may have some effect on patient care		
		Possible 2 TOTAL
HAS IMPACT BUT DIFFICULT TO QUANTIFY		0.5
Is it anticipated that this scenario would improve patient care outcomes?		
Can it be foreseen that there will be in impact on learner behavior that will change how care is given?		
Has this scenario been designed to impact the learner’s behavior with the anticipation of increasing patient safety and improve patient care outcomes?		
Is this scenario compatible with the mission, <u>vision</u> and goals of the California Health Sciences University Simulation Center? Inspire – Develop – Empower		
Contribute to fulfilling the mission of the Simulation Center		
	Should meet all 4	Possible 2 TOTAL
TOTAL SCORE		

Legend: To move forward 39 Maximum 21 Minimum



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LOGISTICS

Potential BARRIERS

Location	Scheduling	Equipment/Moulage	Content
Inside the University Not Available <input type="checkbox"/> Sim Lab <input type="checkbox"/> In situ <input type="checkbox"/> No area for Debrief <input type="checkbox"/> Conference rooms Outside the University <input type="checkbox"/> Weather not permitting for time of request <input type="checkbox"/> First responders needed	<input type="checkbox"/> Too frequent <input type="checkbox"/> Not offered enough times to meet needs Calendar Conflicts <input type="checkbox"/> Calendar Date <input type="checkbox"/> Calendar Time Personnel Not Available <input type="checkbox"/> Assistant Manager Operations <input type="checkbox"/> Sim Technicians <input type="checkbox"/> Standardized Patient Educator <input type="checkbox"/> Standardized Patient <input type="checkbox"/> Sim Director <input type="checkbox"/> Faculty	Not Available <input type="checkbox"/> Mannequin Type _____ _____ _____ <input type="checkbox"/> Moulage too complicated <input type="checkbox"/> Moulage too time consuming <input type="checkbox"/> Special Equipment <input type="checkbox"/> Extended time for equipment set-up <input type="checkbox"/> Large equipment, vehicles, etc. hard to get at time for time of request <input type="checkbox"/> Large volume of supplies needed <input type="checkbox"/> Cost prohibitive	<input type="checkbox"/> Scenario content complexity prohibitive <input type="checkbox"/> Objectives/goals cannot be measured <input type="checkbox"/> Too many objectives for timeframe <input type="checkbox"/> Missing interprofessional set-up <input type="checkbox"/> Timeline unclear <input type="checkbox"/> Pre/Post debrief unclear <input type="checkbox"/> Research component unclear

Opportunities to overcome barriers: