## Simulation Scenario Template

This standardised template is intended for use by VSA members when developing and submitting scenarios for validation and publication by the Victorian Simulation Alliance (VSA). The template was developed by the California Institute for Nursing and Health Care (CINHC), based in San Francisco, and is a modification of the standard template for The California Simulation Alliance (CSA).

VSA has obtained permission from the CINHC to use the template for the purpose of developing, validating and publishing scenarios. The VSA would like to thank CINHC and the CSA for their support in the establishment and ongoing development of the Alliance.

The VSA aims to support the ongoing development and implementation of simulation within health professional education by:

- Creating a cohesive voice & a common language
- Facilitating ongoing professional development and education
- Information dissemination
- Best practice identification
- Scenario development & sharing
- Fostering collaboration & partnerships
- Facilitating inter-organisational research
- Standard and policy setting
- Identifying opportunities & lobbying for funding
- Linking internationally

Prior to publication, all scenarios are validated by subject matter experts, pilot tested and approved by the VSA. While scenario developers are acknowledged, all scenarios published by the VSA become the property of the Alliance.

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Victorian Simulation Alliance

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**Please note:** Adobe Reader X (10.1.4) is required to save and submit this template once it has been completed. To update your version visit Adobe's website at www.adobe.com, this software is free and requires no purchase to download.

#### **1.0 SCENARIO COVER PAGE**

Scenario title:

Original scenario developer(s): (name and credentials)

Date-original scenario developed: Pre-testing of		date:		
Validation date: Revision da		Revision dat	ites:	
Discipline: (please tick): Medical Nursing Paramedical Midwifery Interprofessional Allied Health (state which area):	Learner speciality: (please Undergraduate Post Graduate Vocational (Diploma/Ce Continuing professional Other (please list):	tick) ertificate) I development	Scenario cast: (no of participants)   Category: (please tick)   Simulator: (please state type)   Programmed scenario: Yes   Mannequin: (please state type)   Programmed scenario: Yes   Programmed scenario: Yes   No   Simulated patient   Hyrbird	
			Estimated time:	

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Section 1

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	1.1 SCENARIO	OVERVIEW	
<b>Type of simulation:</b> (Simulated Patient, Manikin Based, Hybrid, etc)	<b>Target group:</b> (Undergraduate Nursing, Medical Officers, etc)		Total number of active participants:
P	Pre-Scenario Lea	nner Activities:	
Scenario setting: (Emergency Dept, Surgical Ward, etc)		Estimated scenario time: (Insert minute	es)
		Guided debriefing time: (Insert minutes)	
Cognitive skills:		Psychomotor skills:	

**Brief summary:** (Short narrative of the case)

Learning objectives:

**Critical learner actions:** 

Evidence base/references: (APA format)

$\setminus$	'SA Simulation S	cenario Templa <sup>-</sup>	te 4	Sec	tion 1
		1.2 SCENARIO PARTICIPANT ROL	E (CAST)		_
Acti	ve Learners:	Active Confederates:	Total a	ctive participants:	
	Outlin	e roles and responsibilities of the fol	owing participants:	-	_
X	Role: Senier RN on Duty in Eme	ergany Department		Learner	X Confederate
Brie Gup	f descriptor: opearts students and intervenes if it	appears that students are having	-difficulty devising	an appropriate m	nanagement plan
1	Role:			C Learner	Confederate
Brie	f descriptor:				
2	Role:			C Learner	Confederate
Brie	f descriptor:				
3	Role:			C Learner	Confederate
Brie	f descriptor:				
4	Role:			C Learner	Confederate
Brie	f descriptor:				
5	Role:			C Learner	Confederate
Brie	f descriptor:				
6	Role:			C Learner	Confederate
Brie	f descriptor:				
7	Role:			C Learner	Confederate
Brie	f descriptor:				
	"A confederate is an individual other than the (e.g. paramedic, receptionist, family member,	patient who is scripted in a simulation to provide realise lab technician)". Referenced from : http://www.ahcsim	m, additional challenges, or add center.umn.edu/ProjectDevelop	ditional information for the oment/SimulationTerms/inc	learner dex.htm

#### **1.2 SCENARIO PARTICIPANT ROLE (CAST) CONTINUED**

	(	Dutline roles and responsibilities of the following participants:	
8	Role:	Learner	Confederate
Brief	descriptor:		
9	Role:	C Learner	Confederate
Brief	descriptor:		
10	Role:	C Learner	Confederate
Brief	descriptor:		
11	Role:	C Learner	Confederate
Brief	descriptor:		
12	Role:	C Learner	Confederate
Brief	descriptor:		
13	Role:	C Learner	Confederate
Brief	descriptor:		
14	Role:	C Learner	Confederate
Brief	descriptor:		
15	Role:	C Learner	Confederate
Brief	descriptor:		
16	Role:	C Learner	Confederate
Brief	descriptor:		

#### **1.3 SCENARIO PREPARATION**

#### **Participant pre-brief:**

Environment: (key points to mention regarding environment)

Equipment: (key points to mention regarding equipment being used)

Safety: (key points to mention regarding safety)

Simulator/Manikin/Simulated Patient: (key points to mention regarding simulator/manikin/patient)

Limitations and ways to gather required information:

Other:

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1.4 SCENARIO PATIENT DESCRIPTION		
History of present illness:		

**1.5 PATIENT INFORMATION** 

Past medical history: (system review)

Current medications:

Allergies/Reaction to allergies:

Other:

#### 1.6 SCENARIO NARRATIVE/SEQUENCE OF EVENTS

Stage 1: Initiation of scenario

Time:

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Stage 2: Body

Time:

Stage 3: Scenario end point

Time:

#### **2.0 DEBRIEFING GUIDE**

#### General debriefing plan: (please tick)

- ) Individual
- Group
- ) With video
- ) Without video

#### Debriefing materials: (please tick)

- Debriefing guide
- ) Objectives
- Debriefing points

#### Some aspects to consider for debriefing scenarios: (please tick)

- ) Patients centered care
- Teamwork/collaboration
- Evidence-based practice
- Safety
- Quality improvement
- Informatics

- Sample questions for debriefing:
- (Delete those not required/add additional questions if needed)
- 1. How did the experience of caring for this patient feel for you and the team?
- 2. Did you have the knowledge and skills to meet the learning objectives of the scenario?
- 3. What GAPS did you identify in your own knowledge base and/or preparation for the simulation experience?
- 4. What RELEVANT information was missing from the scenario that impacted your performance? How did you attempt to fill in the GAP?
- 5. How would you handle the scenario differently if you could?
- 6. In what ways did you feel the need to check ACCURACY of the data you were given?
- 7. In what ways did you perform well?
- 8. What communication strategies did you use to validate ACCURACY of your information or decisions with your team members?
- 9. What three factors were most SIGNIFICANT that you will transfer to the clinical setting?
- 10. At what points in the scenario were your actions specifically directed toward PREVENTION of a negative outcome?
- 11. Discuss actual experiences with diverse patient populations.
- 12. Discuss roles and responsibilities during a crisis.
- 13. Discuss how current practice continues to evolve in light of new evidence.
- 14. Consider potential safety risks and how to avoid them.
- 15. Discuss the health professional's (select relevant profession) role in design, implementation, and evaluation of information technologies to support patient care.

**References (if required):** 

#### 3.0 SCENARIO SET UP

#### **Room requirements:**

Example: The room/area being utilised should be furnished and set up to appear as close to the area in which you are trying to replicate.

Simulated patient / manikin preparation:

Dress: Example: The SimMan manikin should be dressed in a ward gown

Positioning: Example: In bed sitting semi-fowlers

Props: Example: IV insitu (R) cubital fossa, cervical collar insitu

#### 3.0 SCENARIO SET UP CONTINUED

#### Simulated patient/manikin preparation:

#### Additional module(s):

Example: The following should be applied to the SimMan manikin: (delete or add additional modules/pictures if applicable)

Trauma modules (insert additional pictures if appropriate)

- Closed fracture (R) leg tibia and fibula
- $\boldsymbol{\cdot}$  Open fracture pad inserted in (L) thigh



#### Moulage:

Example:

Apply moulage to replicate bruising in the following areas:

- (R) Upper arm
- $\cdot$  (L) Temporal region

(delete or add additional detail/pictures if applicable)



Example of moulage demonstrating bruising.

Apply small lacerations and grazes to exposed areas of skin. Only basic first aid is to be applied to the open fracture (R) leg; ensure simulated blood is shown coming through the dressing to demonstrate uncontrolled bleeding.

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#### **3.1 EQUIPMENT REQUIREMENTS**

#### **Participants:**

(remove or add equipment as required)

- ) Dress required (uniform)
- PPE (gloves/gowns/eye protection)
- ) Stethoscope
- ) Penlight
- ) Reference material

#### Simulated patient/manikin:

(remove or add equipment as required)

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) Clothing

Manikin patient monitor

#### Trauma modules:

- ) Open fracture femur pad
- Closed fracture (R) tibia and fibula

#### Moulage kit:

- ) Simulated blood
- Paint to simulate bruising

#### **Room equipment List:**

(remove or add equipment as required)

) Monitor/defibrillator ) Suction equipment

Oxygen equipment

- Emergency trolley
- Drug trolley
- IV stand IV infusion pump

) 12 Lead ECG

) Vital signs equipment (BP cuff, etc)

#### Scenario equipment/consumables:

(remove or add equipment as required)

- MedicationsBedpan/urinal
- Dressing packsNeedles

Syringes

Nasogastric tubes

#### **Supporting Documentation:**

(add additional documentation as annexes to this template)

- ) Annex A: Simulated patient role instructions
- ) Annex B: Observation chart
- Annex C: Drug chart
- Annex D: Pathology results
- ) Annex E: ID/Allergy bands
- Annex F: Miscellaneous (Post Op/Pre Op)

#### 4.0 SCENARIO PROGRAM OVERVIEW (ONLY APPLICABLE IF COMPUTER-BASED SCENARIO IS USED)

**Patient monitor used:** 

Layout used/name:

◯ Yes ◯ No

#### **4.1 NON SCENARIO SPECIFIC EVENTS**

Lists events that may be conducted by the participants and registered by the operator, but these will not affect the scenario flow.

ABC:	Miscellaneous:	Medication:
ABC:	Miscellaneous:	Medication:
ABC:	Miscellaneous:	Medication:
ABC:	Miscellaneous:	Medication:

#### 4.2 SCENARIO SPECIFIC EVENTS (Utilised in 4.4 Scenario Flow)

Lists events that must be logged when conducted by the participants to ensure scenario continue to flow.

ABC:	Affect if selected:
Miscellaneous:	Affect if selected:
Miscellaneous:	Affect if selected:
Medication:	Affect if selected:

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#### 4.3 SCENARIO PROGRAM OVERVIEW (ONLY APPLICABLE IF COMPUTER-BASED SCENARIO IS USED)

Manikin sensed events:

Yes No

If yes, list and provide detail:

Handlers Lists events that handlers have been applied to and what actions have been programmed:

Event:	Action:
Event:	Action:
Event:	Action:
Event:	Action:

**Trends** List the trends used in the scenario with a brief description:

#### Name and frame name:

Description: trend length

Name and frame name:

**Description:** trend length

Name and frame name:

Description: trend length

Name and frame name:

Description: trend length

4.4 SCENARIO FLOW - INITIAL STATE (ONLY APPLICABLE IF COMPUTER-BASED SCENARIO IS USED)		
Heart rate:	INITIAL STATE	
	Specific scenario events:	
ECG:		
BP:		
Respiration:		
SP02:		
Temp:		
Other parameters: eg: sweat, blood etc:		
Active handler(s):		
Active trend(s):		
Time in frame:		

4.4 SCENARIO FLOW - SECOND STATE (ONLY APPLICABLE IF COMPUTER-BASED SCENARIO IS USED)		
Heart rate:	SECOND STATE	
	Specific scenario events:	
ECG:		
BP:		
Respiration:		
SP02:		
Temp:		
Other parameters: eg: sweat, blood etc:		
Active handler(s):		
Active trend(s):		
Time in frame:		

5.0 ANNEXES (PLEASE ADD RELEVANT DOCUMENTATION)
Annex A: (title)
Annex B: (title)
Annex C: (title)
Annex D: (title)
Annex B: (title)
Annex E: (title)
Annex F: (title)
Annex G: (title)