

**THE SIMULATION PROGRAM
AT THE EMORY NURSING LEARNING CENTER
NELL HODGSON WOODRUFF SCHOOL OF NURSING**

SIMULATION SCENARIO DESIGN TEMPLATE

COURSE NAME:

DATE(S) AND TIMES(S):

LOCATION:

COURSE COORDINATOR:

INSTRUCTORS:

SCENARIO TITLE:

TOTAL SESSION/EVENT RUN TIME:

PREBRIEFING RUN TIME:

SCENARIO RUN TIME:

DEBRIEFING RUN TIME:

NUMBER OF PARTICIPANTS:

LEARNER TYPE: ☐ Novice ☐ Advance Beginner ☐ Competent
 ☐ Proficient ☐ Expert

LEARNER LEVEL: ☐ Nursing Undergraduate ☐ Nursing Graduate
 ☐ Other _____

ELECTRONIC HEALTH RECORD IN EHR TUTOR: ☐ Yes ☐ No
(Medication barcodes will be available if patients have charts set up in EHR Tutor.)

EHR COURSE KEY:

EVALUATION OF EXPERIENCE: ☐ Paper ☐ Online
(Please attach copy of evaluation or link to online; please remember to provide lab with results of evaluation for our records and continuous improvement process.)

MATERIALS USED DURING SESSION:

☐Yes

☐No

(Please attach copy of any materials, such as patient handoff reports or observation checklists that will be used during the simulation.)

POST-SESSION/EVENT REQUIREMENT/ASSIGNMENT: *(e.g. reflection, SBAR, etc.; if possible, please provide assignment guidelines)*

OVERALL GOAL OF SESSION/EVENT:

SPECIFIC LEARNING OBJECTIVES:

At the end of the simulation, participants will be able to:

- Describe relevant SDOH influences (identify related SDOH pillars) on physical or mental health from scenarios.
- Discuss options for students to address SDOH/DEI concerns in real-time during and following experience.
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BRIEF SUMMARY OF SCENARIO: *(Overview of the case including relevant medical history, how the scenario flows, and things that should be emphasized.)*

SDOH pillars relevant to the case include - Social, Cultural, Policy, Environmental

KNOWLEDGE AND SKILLS NEEDED: *(What do participants need to know prior to participating in the simulation?)*

PREPARATION WORK REQUIRED BEFORE SIMULATION: *(Activities required for participants to do prior to simulation, such as readings, watching videos, etc.)*

Students must complete SDOH Canvas Training Site

SCENARIO SETTING: *(e.g. ER, ICU, PACU, home, Urgent Care, etc.)*

PREBRIEFING: *(Information covered before simulation scenario begins.)*

- Clarify objectives, role of each participant, and participant expectations, including to what extent they are responsible for leading and providing care.
- Confidentiality
 - Do not discuss the content of the scenarios following the simulation session in order to preserve the realism of the scenarios used and to provide an equitable learning experience for each student.
 - Maintain confidentiality in respect to actions, performance of participants, facilitators, and observers.
- Let participants know that this is a safe learning environment in which mistakes can be made without causing harm. Debrief discussions will allow for learning from mistakes.
- Establish a “fiction contract” with participants. The simulation has been made to be as “real” as possible within resource and technology constraints. Participants should try to suspend disbelief and participate fully with an open mind and positive attitude.
- If clarification is needed regarding logistics, such as with the process, resources, or technology, participants can ask for a brief “time out” to get clarification and guidance.
- **ADD SPECIFIC INFORMATION RELATED TO SIMULATION SCENARIOS**
- Orient student to room environment, such as supplies, manikin, and available resources. Any limitations of care provision should be spelled out; for example, manikins should not receive oral medications.
- Provide patient information to participants, or tell them how they will receive it.

LEARNER INFORMATION: *(Information given to student at the start of the scenario)*

PATIENT INFORMATION: *(Please duplicate this section as needed if multiple patients are included in the session. If this information is given to students in a written format or provided in the electronic chart, please state as such and attach any relevant documents.)*

Name:	Age:	Gender:
Height:	Weight:	DOB:
Provider:	Room #:	Code Status:

Chief Complaints:

Allergies:

Past Medical History:
 Past Surgical History:
 Social History:
 Medications:
 Labs/Diagnostics/Radiology Results:

RELEVANT PHYSICAL ASSESSMENT INFORMATION:

Neuro:
 Respiratory:
 Cardiovascular:
 Gastrointestinal:
 Urinary:
 Skin:
 IV and Drains:
 Latest Vital Signs:

SCENARIO PROGRESSION:

State (i.e. initial, time, etc.)	Patient Parameters (i.e. vital signs, pain level, etc.)	Student Expectations	Cues/Prompts/ to Help Progress Scenario
Initial/0-5 min	BP: HR: RR: O2Sat: Temp:		Operator: Faculty:
	BP: HR: RR: O2Sat: Temp:		Operator: Faculty:
	BP: HR: RR: O2Sat: Temp:		Operator: Faculty:

LABS/DIAGNOSTICS/RAIOLOGY/EKG RESULTS AVAILABLE DURING SIMULATION: *(May attach document or imaging or direct to electronic chart.)*

EQUIPMENT/SUPPLIES/SETUP/MOULAGE: *(List in details what equipment, supplies, setting needed to make the scenario look real.)*

ROLES: *(Other people/roles needed for the scenario e.g. family member, MD, RT, tech, etc.)*

Scripts for each role and who will play the role *(can attach documents):*

- Family Member
- MD
- RT
- Tech

DEBRIEFING: *(Conversation period for reflection and feedback to improve performance and enhance learning...remember that you are facilitating the discussion and not providing a lecture)*

- Reinforce that information is confidential and for the purpose of learning.
- How did it feel?
 - Encourage students to express their reactions.
 - After students express their feelings, guide them to reflective learning.
 - Encourage students to describe SDOH pillars that were uncomfortable for them.
- What went well?
 - If needed and/or time allows, start from the beginning and talk the group through the experience.
 - Encourage students to reflect on their performance as an individual and, if relevant, as a team/leader/follower.
 - Reinforce positive behaviors.
 - Use concrete examples and outcomes as the basis for inquiry and discussion.
 - Remain curious of “why” actions was taken to understand student’s mental frame and discover performance gaps.
 - Answer any questions or clarifications and address any performance gaps but **DO NOT LECTURE OR CRITICIZE.**
 - Encourage students to ask questions or clarifications of application of SDOH pillars into their assessment and proposed interventions.
- Review objectives and ask students how they met the objectives.
- What could be done differently?
 - If they were to do the simulation again, what would they do differently?

- “Take-aways”
 - Lessons learned from the simulation experience
 - “A-HA” moments
- Close debriefing
 - Acknowledge everyone’s participation
 - Thank participants

OTHER DEBRIEFING GUIDED QUESTIONS:

- How did you feel throughout the simulation experience?
- Describe the objectives you were able to achieve.
- Which objectives were you unable to achieve (if any)?
- Did you have the knowledge and skills to meet objectives?
- Were you satisfied with your ability to work through the simulation?
- To Observer: Could the nurses have handled any aspects of the simulation differently?
- What did the team feel was the primary nursing diagnosis?
- How were physical and mental health aspects interrelated in this case?
- **How were SDOH pillars interrelated?**
- What were the key assessments and interventions?
- Is there anything else you would like to discuss?

REFERENCES: *(please include any references used to build the scenario)*

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AACN Essentials

Domains/Competencies/Sub-Competencies

Concepts