

INTRODUCTION

New technologies are intended to enhance patient care and lower patient mortality. However, the IOM, *Crossing the Quality Chasm (2001)* reported that the rapid changes in the nation's healthcare delivery system, due to the tremendous expansion of knowledge and technologies, can pose threats to patient safety and have implications in the work environment. One of the challenges proposed to redesign the system is to create strategies to support clinicians in their ongoing acquisition of knowledge and skills.

Simulation training integrates scenario-based programs using a full-scale patient simulator to assess and develop clinical competency, promote teamwork and improve care processes.

OBJECTIVE

Describe the use of team-based simulation as a strategy to engage professionals across the organization to coordinate patient management in the OR/PACU, Anesthesia and Emergency Department. The engagement of these disciplines helps to build a collaborative approach which is critical to ensure safe and effective patient care.

BACKGROUND

- ❖ 2014: OR/PACU Educators met with Dr. Roya Yumul to discuss interdisciplinary use of the simulation lab aimed at including an anesthesiologist, anesthesia residents, OR nurses, scrub techs and PACU nurses.
- ❖ Trauma Coordinator collaborated to create case scenarios that replicated real cases.
- ❖ Disease/procedure-specific case scenarios (MH, Code Blue, Trauma) were designed to emphasize specific clinical or behavioral content.
- ❖ Our overarching goal is to foster a team-based approach while teaching clinical assessment skills, procedures, management of emergencies and use of technology.

QUALITY QUESTION

Can team-based simulation be an effective teaching/learning method to assess and develop clinical competency, promote teamwork and improve care processes?

WOMEN'S GUILD SIMULATION CENTER for ADVANCED CLINICAL SKILLS



Operating Room/PACU Simulations



Trauma Simulation

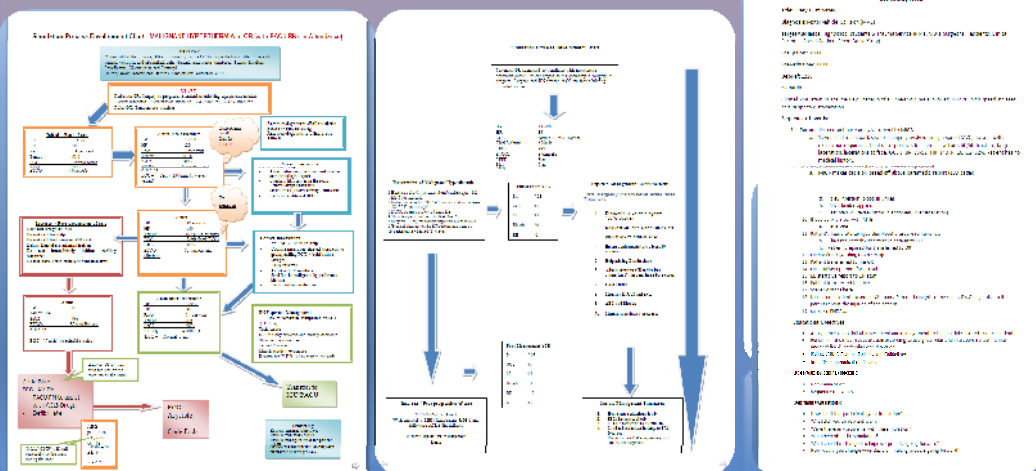
The individuals pictured below participated in a multi-disciplinary Mock Trauma where the patient was stabilized in the ED and then transferred to the OR. Over 30 people participated including physicians, surgical residents, OR RNs, PACU RNs, ED RNs, Clinical Partners, Surgical Techs, Social Worker, Pharmacy, Radiology and Anesthesiology. It was an exceptional learning experience for all...



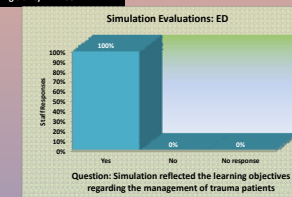
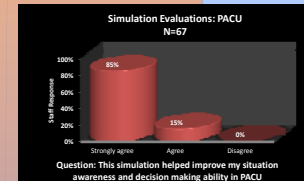
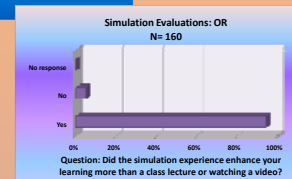
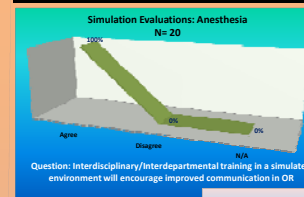
Debriefing

CASE SCENARIOS DEVELOPMENT

Case Scenarios: PACU /OR /ANESTHESIA/ ED



Evaluations



CONCLUSIONS

- ❖ The simulations of case scenarios that replicated real cases allowed the healthcare team to relate and learn from these scenarios rather than abstract conceptualization.
- ❖ The simulation helped the learners acquire knowledge, integrate skills into new situations, evaluate processes that improve teamwork and recognize the consequence of their decisions.
- ❖ The post-scenario debriefings provided a milieu to dialogue, self-reflect and give feedback to members of the team.
- ❖ Future plans: Educators/coordinators need additional training courses/workshops in medical simulation.

ACKNOWLEDGEMENTS

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