



**INTERPROFESSIONAL EDUCATION
(IPE) SIMULATIONS: START
SIMPLE AND BUILD**

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OBJECTIVES:



- Identify steps to implement an IPE Simulation
- Recognize available resources for planning IPE Simulations.
- Describe the best team members to help develop and implement IPE Simulations.
- Identify possible challenges to implementing IPE Simulations..



FIRST LET'S DISCUSS THE DIFFERENCE BETWEEN MULTIDISCIPLINARY AND INTERPROFESSIONAL

Multidisciplinary Education

Definition:

- Combining or involving several academic disciplines or professional specializations in an approach to a topic or problem.

Interprofessional Education

Definition:

- Two or More professions learn with, from and about each other to improve collaboration and the quality of care



INTERPROFESSIONAL TEAMS INCLUDED IN OUR 2017 METRO CARE HOSPITAL-MASS CASUALTY SIMULATION:

- OKC Fire Department – Station 18
- OKC Police Department-Springle Lake Division
- EMSA
- Metro Tech Emergency Response Team
- Homeland Security-OSSI (Oklahoma School Security Institute)
- Practical Nursing
- Surgical Technology
- Radiologic Technology
- Health Career Certification (CNA/AUA)
- Dental Assisting
- Medical Assisting
- Medical Office



WHERE TO START:

Overall Goal: Improve communication between multidisciplinary teams.

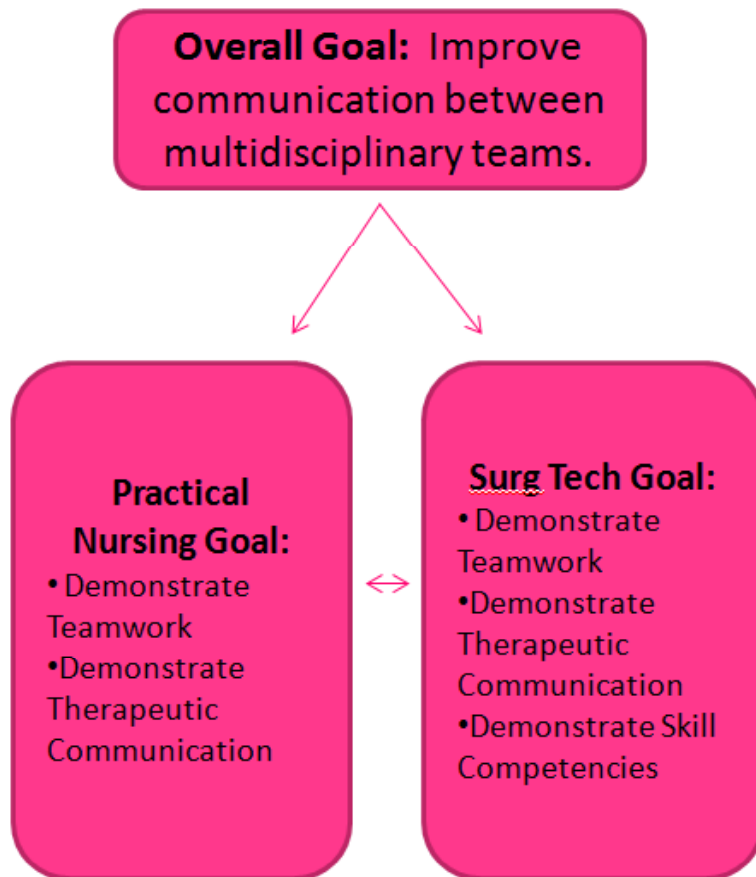


Overall Goal: Improve communication between interprofessional organizations during mass casualty events.

- Identify your goal of the IPE Simulation.
 - This can even be your long range goal that you want to work towards
- Do you have support from your institution?
- Make a list of the of the interprofessional teams you would like to involve in your IPE Simulation
- Keep first IPE Simulation Small (2-3 programs/teams)..



BRAINSTORMING MEETINGS:



- Can be one large or several small to facilitate active discussions.
- Get a key person from each program/entity to attend for their input.
- Review the ultimate goal.
- Identify goals/objectives for each program/entity



NOW IT IS TIME FOR SCENARIOS!

Scenario	Labs/Skills (AUA Tasks)	Radiography	IV/Medications (Nursing Tasks)	Transporter
Chest Pain Leah Johnson (34)	CBC, CMP, Cardiac Markers, PT, PTT EKG UA	Portable CXR	IV ASA Nitro NS	NO/YES
Abdominal pain-kidney stone Keely Falcon (35)	CBC,CMP, PT, PTT UA I&O	Abdomen xray	IV	YES/YES
Compound Fracture-Right Darrian Rose (36)	CBC,CMP, PT, PTT EKG UA-I&O	Xray	IV NS Tetanus	YES
Gun Shot Wound-Left Lower Abdomen Sparrow (1)	CBC,CMP, PT, PTT EKG UA-I&O	CXR/Abdominal Series*	IV NS	YES
Gun Shot Wound-Right Lower Abdomen Park (2)	CBC,CMP, PT, PTT EKG UA-I&O	CXR/Abdominal Series*	IV NS	YES

- Smaller meetings.
- Refer back to goals/objectives for each program/entity.
- Keep scenarios as real as possible.
- Use your content experts.
- Keep simple the first year and build as you go..
 - Build up the amount of task to complete
 - Paper charts- electronic charts
 - Hospital Day- Mass Casualty



IMPLEMENTATION FOR HOSPITAL DAY

AM Surgery Schedule

Surgery Time	Patient Name	Surgery
0745	Deweese, Billie	Hemorrhoidectomy
0800	Lewis, Joey	Cholecystectomy
0815	Lewis, Joseph	ORIF L femur
0830	Williams, Terrie	TAH-BSO
0845	Williams, Teri	L wrist ORIF

PM Surgery Schedule

Surgery Time	Patient Name	Surgery
1130	Lewis, Joey	Cholecystectomy
1145	Deweese, Billie	Hemorrhoidectomy
1200	Lewis, Joseph	ORIF L tibia
1215	Williams, Terrie	TAH-BSO
1230	Williams, Teri	L wrist ORIF

- Create Time Line
- Review Expectations for students and their roles
- Preplanning assignments
- Create Patient Scripts
- Create Charts/Standing Orders/armbands
- Assign Patients/Roles
- Room/Hospital Unit Set Up..



IMPLEMENTATION FOR MASS CASUALTY

Pt Name _____ Sparrow
 DOB: 7/1/XX
 Allergies: Morphine

Shooting/Script:
 You were in the process of loading the bus when shooter started. You were hit by a bullet and slide to the ground. Lay on the ground with your hands over your injury yelling for help until first responders treat you.

Hospital Scenario/Script:
 You should be transported by ambulance to hospital. You were shot in Left Lower Abdomen, wake and alert, c/o pain at 10/10

Moulage: Gunshot wound Left Lower abdomen about 1 inch from side went straight through, bleeding wound



+ victims
— police line
- - - MT Road closure
- - - ambulance route

- Same for Hospital Day Plus:
- Time Line for Mass Casualty & Hospital
- Additional “victims”
 - Volunteer Information Sheets
 - Waivers
- Triage tags
- Scene Set Up
 - Accessibility
 - Route for ambulance
- Notification to dispatch
- Alerting the neighborhood..



HOSPITAL DAY: BEGINNING (2 PROGRAMS) FOCUS ON POST-OPERATIVE CARE AND SURGICAL COMPLICATIONS.



○ Scenarios

- TAH-BSO with bleeding.
- Femur ORIF with hypoglycemia.
- Ruptured Appendix with hypovolemia (bleeding).
- Wrist ORIF with blue finger nails.
- Cholecystectomy with N/V to over sedation..



PRE-OPERATIVE CHECK-IN



OPERATIVE



RECOVERY ROOM REPORT/POST OPERATIVE



HOSPITAL DAY: ALL HEALTH PROGRAMS +

Overall Goal: Improve communication between multidisciplinary teams

Practical Nursing Goal:

Prioritizing care while demonstrating teamwork and good communication skills.

Health Careers (AUA/CNA/Pharm Tech) Goal:

Demonstrate Teamwork and communication skills.

Dental Assistant Goals:

Demonstrate teamwork and communication with multidisciplinary teams.

Medical Assistant Goals:

Demonstrate teamwork and communication with multidisciplinary teams.

Surgical Technology Goal:

Demonstrate competencies in the preoperative, intraoperative, & postoperative procedures.

Radiology Goal:

Demonstrate teamwork and communication skills

Biomed Academy Goals:

Identify roles in the Health Care teams.

Public Safety Academy Goals:

Demonstrate teamwork and communication with multidisciplinary teams.

HOSPITAL DAY: ALL HEALTH PROGRAMS SCENARIOS

○ Surgery Unit

- TAH-BSO
- ORIF with hypoglycemia
- Ruptured Appendix
- Wrist ORIF
- Cholecystectomy

○ Medical Unit

- MI
- CHF
- Mental Changes (Labs)
- End Stage Lung Cancer
- DM

○ ER

- Compound Fracture
- Oil Burns
- Pulmonary Embolus
- Ankle Injury
- Hip Fracture
- Asthma
- Appendicitis
- Pneumothorax
- MI
- Head Trauma



EMSA



PRACTICAL NURSING



SURGICAL TECHNOLOGY



RADIOLOGIC TECHNOLOGIST



HEALTH CAREERS CERTIFICATION-CNA

Transporters



CNA- Feeding



BIOMED STUDENTS

Interns



**Pulmonary/Echocardiogram
Lab**



PUBLIC SAFETY ACADEMY

Hospital Security



Prisoner Transport



MEDICAL ASSISTING



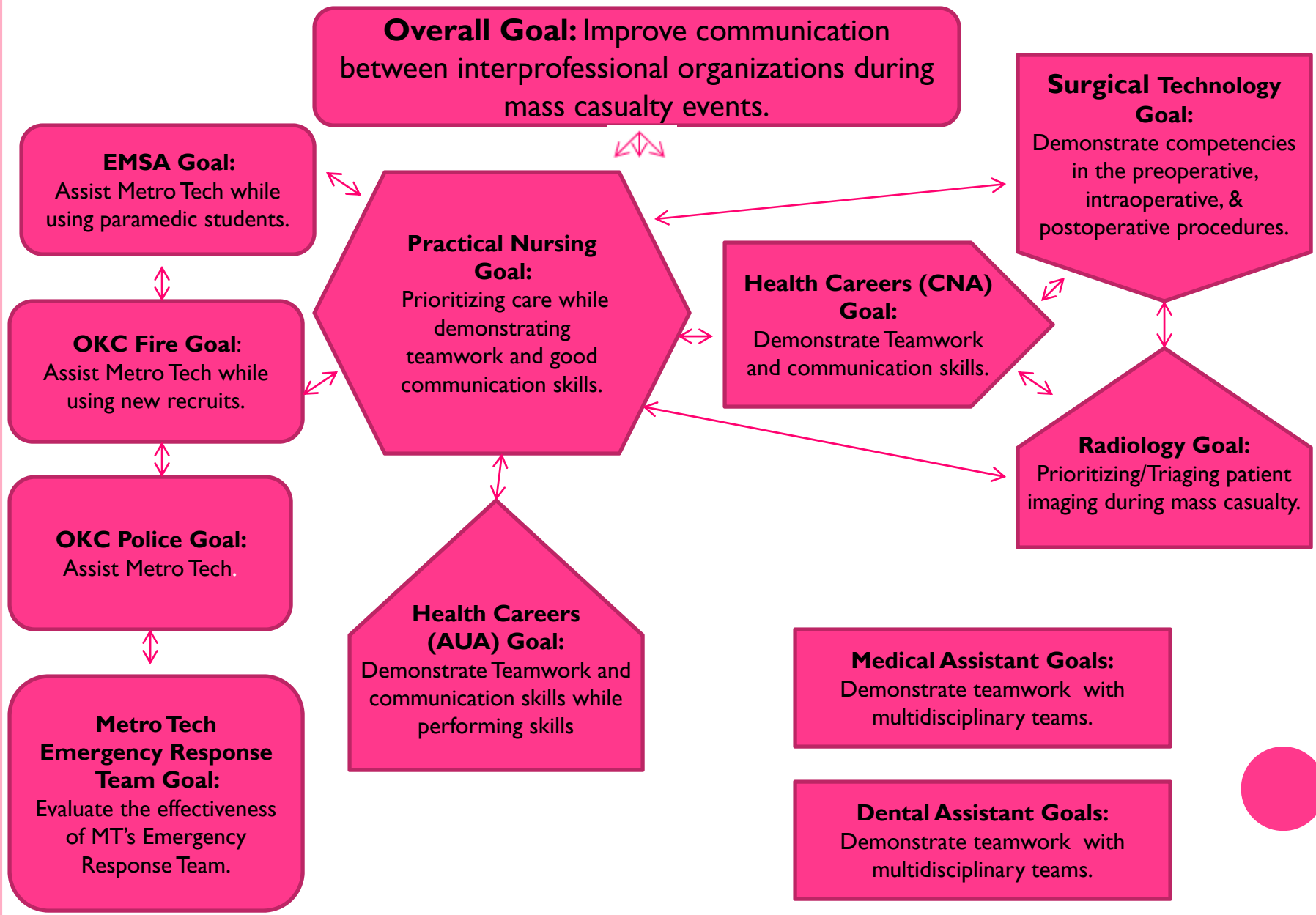
DENTAL ASSISTING



HEALTH CAREERS CERTIFICATION- PHARMACY TECH



2017 HOSPITAL DAY - MASS CASUALTY EXERCISE

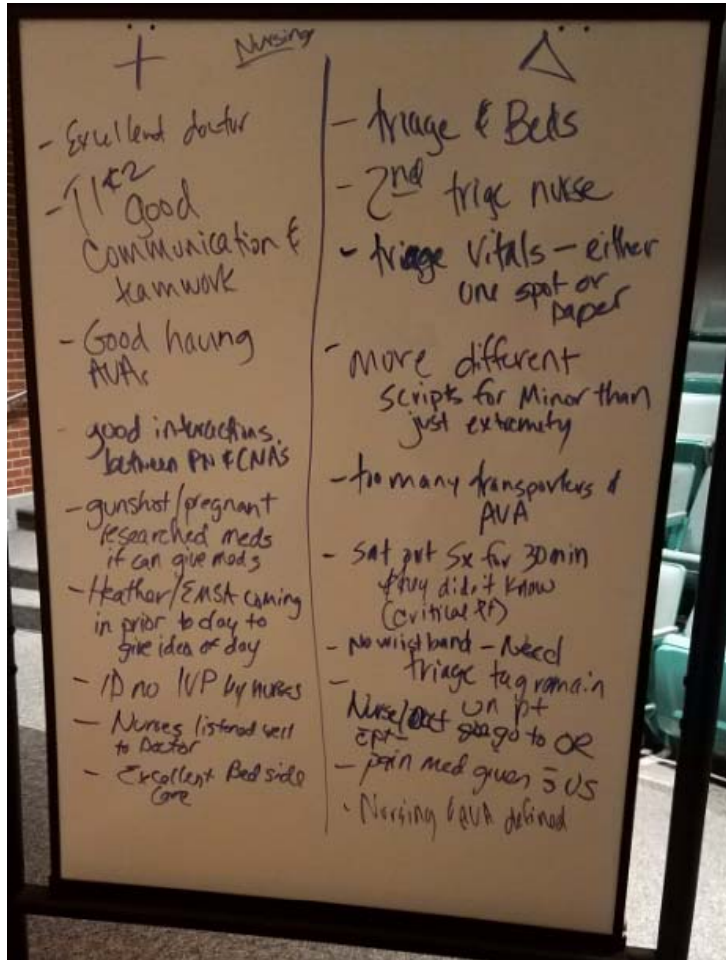


2017 HOSPITAL DAY-MASS CASUALTY SCENARIOS

- Mass Casualty Injuries
 - Abdomen Gunshot
 - Chest Gunshot
 - Shoulder Gunshots
 - Let Gunshots
 - Extremity injuries
 - Lacerations
 - Dislocation
 - Fractures
 - Head Trauma
 - Eye penetration wound
 - Broken teeth
- ER walk in Injuries
 - Compound Fracture
 - Kidney stones
 - Knee pain
 - Asthma
 - MI
- Surgical Patient
 - Tonsillectomy
 - Cholecystectomy
 - Bowel Resection
 - TKA
 - Scoliosis



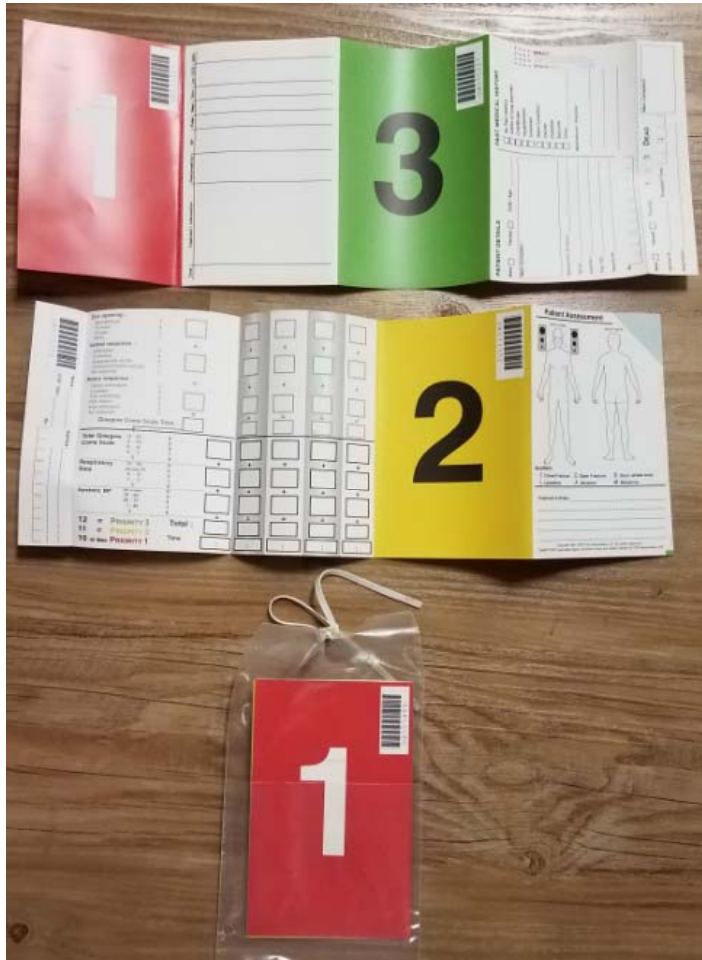
DEBRIEFING STILL THE ULTIMATE TOOL!



- Several Debriefing sessions are required to get better insight.
 - Each Department/Entity
 - Everyone together at one schedule time
 - Meet with key person from each department/entity
- Plus/Delta good for large groups..



DURING DEBRIEFING WHAT STUDENTS STATED THEY LEARNED:



- Utilizing triage tags
- Teamwork important
- Clarity in Communication
- Utilizing Standing Orders
- How to be in Patient Shoes
- Relieving ICP
- Gaining Experience in Mass Casualty situations
- Need to get faster in taking report from paramedics
- Written reports from paramedics not feasible



EVALUATIONS



- Plus/Delta
- Survey Monkey
- Google Forms



	Strongly Disagree	Disagree	Agree	Strongly Agree	N/A	Total	Weighted Average
▼ I was able to use skills that I have been taught in my program of study	0.00% 0	0.00% 0	66.67% 6	33.33% 3	0.00% 0	9	3.33
▼ This was a good way to reinforce theory content I have been taught in the classroom	0.00% 0	0.00% 0	77.78% 7	22.22% 2	0.00% 0	9	3.22
▼ I was able to identify my strengths and weaknesses in what I have previously learned in the program	0.00% 0	0.00% 0	66.67% 6	33.33% 3	0.00% 0	9	3.33
▼ I saw a learning value in participating in this event/exercise	0.00% 0	0.00% 0	77.78% 7	22.22% 2	0.00% 0	9	3.22
▼ I would like to participate in exercises/events like this again	0.00% 0	0.00% 0	77.78% 7	22.22% 2	0.00% 0	9	3.22

EVALUATION RESULTS: STUDENT COMMENT'S ON WHAT THEY HAVE LEARNED:

- “I learned the importance of time management and multitasking.”
- “I thought it was good that while under all the stress and pressure that we all worked well together. I also liked that the instructors were helpful and not judgmental during the process.
- “Teamwork is key, working with great team members get the job done.”
- “There are critical thinking processes in organization that are key to have things run better.”
- “I learned that what I’ve learned in the class setting has stuck and knew what I was doing.”



EVALUATION RESULTS: STUDENT'S COMMENTS ON CHALLENGES:

- “Not having control of the situation, need to prepare myself better.”
- “Lack of communication and knowing who to get help from if I had any questions.”
- “Taking care of all patients in a timely manner.”
- Working under staffed.”
- “Trying to fill out paperwork while taking care of more than 1 patient at the same time.”



WHAT WE HAVE LEARNED OVER THE YEARS:

- Faculty need to know their assignments and room layout to assist students better
- Maps of building with departments (ex. xray, surgery, etc)
- Better student preparation- need walk throughs
- Identify which role student is playing (ex. CNA, AUA, Transporter, Nurse)
- Have skills list available for each role.
- Better communication lines between units/rooms.
- Available communication between Ambulance & ER to make more realistic
- Time Consuming- create charts that are reusable yearly



CHALLENGES

- Programs in different spots in curriculum
- Involving Health Programs in other buildings (MA & DA)
- Faculty Support & Buy In
- Administration Support
- Financial Support
- Mass Casualty Protocols with local agencies
- Getting students to fill our evaluations for more detailed responses
- Contingency Plans
 - Weather
 - Real Life Situations

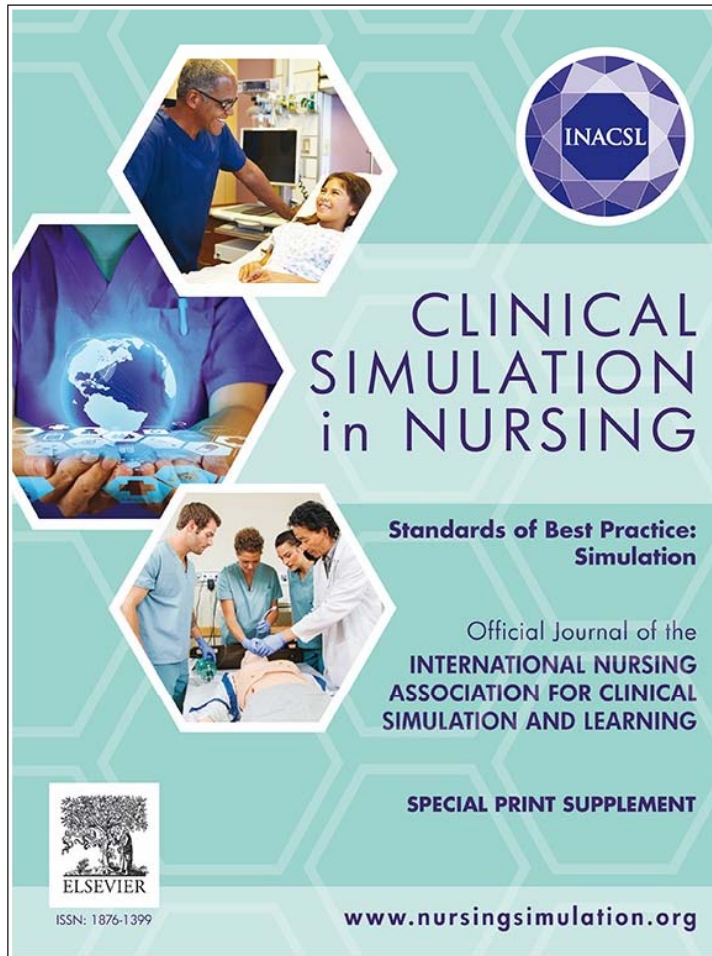


RESOURCES

- Collaboration is our biggest resource!
- Center for Health Sciences Interprofessional Education Research and Practice (University of Washington)
- Hospital Association of Southern California Active Shooter Drill Materials
- Oklahoma Simulation Alliance
- INACSL Standards of Best Practice: Simulationsm
- ctYOU.org
 - Health to Simulation Resources (create guest user)
 - Simulation Resources including simulator instructions, simulations, articles, etc.



ARE YOU ON THE RIGHT TRACK?



- INACSL Standards of Best Practice: Simulationsm Simulation-Enhanced Interprofessional Education Criteria
 - Based on theoretical or a conceptual framework
 - Utilize best practices in the design and development
 - Recognize and address potential barriers
 - Evaluation plan



2017 METROCare HOSPITAL-MASS CASUALTY VIDEO



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