

## Orientation to the Patient Safety Training Center at Dartmouth-Hitchcock: Creating a Safe Learning Environment

We believe that everyone participating in this simulation experience is intelligent, cares about doing his/her best, and wants to improve clinical practice and patient outcomes. Learners may feel pushed to the edge of their comfort zone; learning and interacting with new information may be uncomfortable.

### Learners are oriented to the layout of the Simulation Center/PSTC:

- Orient learners to the expectations of the PSTC:
  - The PSTC is a clinical environment and is considered a simulated patient care area.
  - Food or Drink is not permitted outside the debrief rooms.**
- Orient learners to the location of supply rooms, medication room, restrooms, kitchen, and debrief rooms.
- The PSTC is NOT a latex free environment. Non-latex gloves are provided for your protection.
- Be respectful; do not interfere with the learning experiences of others in the Simulation Center.

### Learners are oriented to the equipment they will be using in the Simulation:

- Orient learners to the capabilities of the manikin (speaking, auscultation, palpation, etc.).
- Pens, pencils, highlighters, markers, and skin preparation solutions/wipes (excluding alcohol) are not permitted near the manikins (human patient simulators).
- Orient learners to the location of supplies and equipment to be used in the simulation.
- Orient learners to the location of personal protective equipment as needed.
- Orient learners to the use of medications for the simulation as needed.

### Orientation to the Simulation Experience:

- Clearly outline and define expectations of learners and facilitators.
- Discuss concepts of mutual respect, professional integrity, and confidentiality surrounding simulation.
- Request learners complete a verbal "Fiction Contract"; to treat simulation as if it is real, to suspend disbelief, and to be deliberate in practice (actual assessment of the patient, hand hygiene, use of PPE, scanning of medications, time outs, and sterile technique etc.).
- If there is going to be recording, explain how the recording is to be used (eg: debriefing, evaluation of learning, research, etc.) and that recordings are not saved unless requested by faculty prior to the event.

### Orientation to the Simulation Scenario

- Clearly outline and review the Scenario learning objectives.
- Clearly define expectations and roles of learners and facilitators.
- Review and address knowledge gaps prior to the simulation, including the use of equipment in the scenario (eg: Sigma pumps, Monitor, Zoll defibrillator, etc.).
- Review time frame for completion of scenario and/or specific skills within the scenario.
- Describe how the learners will be assessed and evaluated.
- Provide patient situation/background (eg: SBAR).

#### References:

- Eppich, W., & Cheng, A. (2015). Promoting excellence and reflective learning in simulation (PEARLS): Development and rationale for a blended approach to health care simulation debriefing. *Simulation in Healthcare, 10*(2), 106-115. Doi: 10.1097/SIH.0000000000000072
- Page-Cuttrara, K. (2014). Use of prebriefing in nursing simulation: A literature review. *Journal of Nursing Education, 53*(3), 136-141. Doi: 10.3928/01484834-20140211-07
- Stephenson, E., & Poore, J. (2016). Tips for conducting the pre-brief for a simulation. *Journal of Continuing Education in Nursing, 47*(8), 353-355. <https://doi.org/10.3928/00220124-20160715-05>