

# **Healthcare Simulation Standards Endorsement**

The application guidelines for achieving the designation of Healthcare Simulation Standards Endorsement are outlined in this document. Each step required to meet the expectations for the Core Four Healthcare Simulation Standards, which include Prebriefing: Preparation & Briefing, Facilitation, Debriefing, and Professional Integrity is stated. Prior to applying, applicants should review these expectations and suitable evidence for meeting the expectations. The exemplars of suitable evidence provided below are not exclusive. The Endorsement program strives to recognize innovative and unique operationalization of the Healthcare Simulation Standards; therefore, your application is reviewed holistically.

The levels of endorsement are Endorsed, Conditionally Endorsed, and Not Endorsed.

- <u>Endorsed</u>: Program recognized as achieving the expectations of the Core Four HSSOBP<sup>™</sup>.
- <u>Conditionally Endorsed</u>: Program recognized as making great strides towards endorsement, but needs additional time to demonstrate having met the expectations of the Core Four HSSOBP<sup>™</sup>.
- <u>Not Endorsed</u>: Program does not meet the expectations for the Core Four HSSOBP<sup>™</sup> endorsement and needs to review feedback to develop a plan for meeting the expectations of the Core Four HSSOBP<sup>™</sup>.

#### GUIDELINES

- Reviewers are looking to see how programs ensure quality simulation by incorporating the Healthcare Simulation Standards. They are not evaluating organizations or operations; instead, they are reviewing the processes in place that reflect a systematic approach to applying the Core Fore Healthcare Simulation Standards.
- Writing should be clear and concise.
- What To Include:
  - o An organizational/programmatic overview that maps simulations to programs (i.e. curricular mapping)
  - Policies related to the Core Four Standards
  - o Demonstration of evidence (i.e. videos, audio, scripts, scenario examples)
    - If providing videos or audio, include timestamps that point to key focus areas that the reviewers may want to see.
  - Simulation faculty/staff CVs (3 page maximum per faculty/staff person)
- What Not to Include:
  - $\circ$   $\;$  Replica of submission for accreditation from other organizations
  - o Inventory and manikin information

#### • CVs of non-simulation faculty/staff

#### **CRITERIA AND EXEMPLARS**

The suggested evidence below are exemplars and do not constitute an exhaustive list. Approval is not based on the volume submitted, but on the quality of the program under review. Exemplars and the gestalt of the application will be taken under consideration when deciding on Endorsement status. One exemplar may be adequately used to demonstrate having met multiple criteria. Therefore, be selective with the exemplars you provide (i.e. less can be more). Be sure to label exemplars with associated criteria. The purpose for the exemplars is to provide evidence and application of demonstration of adherence and/or adoption of the Core Four Healthcare Simulation Standards.

Please note: Diversity, Equity & Inclusion (DEI/EDI) is threaded throughout the simulation process and needs to be reflected in the exemplars provided in a meaningful way.

Criteria from the Healthcare Simulation Standards	Combined Suitable Exemplars for Application
Prebriefing and BriefingCriterion 1The simulationist should be knowledgeable about the scenario and competent in concepts related to prebriefing. Criterion 2Prebriefing should be developed according to the purpose and learning objectives for the simulation-based experience. Criterion 3The experience and knowledge level of the simulation learner should be considered when planning the prebriefing. Criterion 4Based on needs assessment and purpose of the experience, preparation materials are developed to assure that learners are prepared for the experience and can meet the scenario objectives. Criterion 5Preparation materials should be developed according to the purpose and learning objectives of the simulation-based experience. Criterion 6Plan the delivery of preparation materials both prior to and on the day of the simulation-based experience. Criterion 7	<ol> <li>Simulationist exemplars</li> <li>Simulation packet for each simulationist demonstrating professional development activities, simulation education and training, and facilitator evaluation data.</li> <li>Two (2) years of data for facilitators from the two (2) SBE experiences submitted to demonstrate trends.</li> <li>Onboarding process for simulationists to demonstrate training of the Healthcare Simulationist Code of Ethics (https://www.ssih.org/SSH-Resources/Code-of-Ethics) and Healthcare Simulation Standards of Best Practice.</li> <li>Policy &amp; Procedure(s) for description of facilitator roles, expectations, and role development.</li> <li>Scenario exemplars</li> <li>Needs assessment identifying current status, gap analysis, and need for new or revised SBE.</li> <li>Two video submissions of a prebriefing, SBE, and debriefing.</li> </ol>

Prior to the simulation-based experience, the simulationist conveys important	Two exemplars of simulation scenarios, cases, virtual
information to learners regarding expectations, the agenda, and the logistics for	simulation-based experiences, etc. with paperwork and/or
the experience.	template with:
Criterion 8	<ul> <li>Level of the learner(s)</li> </ul>
Conduct a structured orientation to the simulation-based learning environment	<ul> <li>Simulation-based experience objectives &amp; outcomes</li> </ul>
including the modality.	<ul> <li>Preparatory activities for the learners</li> </ul>
Criterion 9	<ul> <li>Identified type of evaluation for the learners</li> </ul>
Establish a psychologically safe learning environment during the prebriefing.	<ul> <li>Debriefing methodology and timeframe for</li> </ul>
	debriefing
Facilitation	
Criterion 1	• Evaluation of the debriefing
Effective facilitation requires a facilitator who has specific skills and knowledge	<ul> <li>Roles and responsibilities of the facilitator and the</li> </ul>
in simulation pedagogy.	debriefer
Criterion 2	<ul> <li>Facilitating method or type</li> </ul>
The facilitative approach is appropriate to the level of learning, experience, and	<ul> <li>Technology, supplies, and props required to support</li> </ul>
competency of the participants.	the SBE
Criterion 3	<ul> <li>Prebriefing script</li> </ul>
Facilitation methods before the simulation-based experience include	<ul> <li>Purpose</li> </ul>
preparatory activities and a prebriefing to prepare participants for the	<ul> <li>Confidentiality</li> </ul>
simulation-based experience. (Follow the HSSOBP Prebriefing: Preparation and	<ul> <li>Mutual respect</li> </ul>
Briefing).	<ul> <li>Expectations</li> </ul>
Criterion 4	<ul> <li>Fiction contract</li> </ul>
Facilitation methods during a simulation-based experience involve the delivery	<ul> <li>Roles/standardized patient/confederate described/explained</li> </ul>
of cues	if applicable, etc.
(predetermined and/or unplanned) aimed to assist participants in achieving	
expected outcomes.	• Environment
Criterion 5	• Evaluation method
Facilitation after and beyond the simulation-based experience aims to support	<ul> <li>Case description</li> </ul>
participants in achieving expected outcomes.	<ul> <li>KSAs for the SBE</li> </ul>
	<ul> <li>Timeframe of the SBE</li> </ul>
Debriefing	Evidence supporting the inclusion of educational
Criterion 1	principles/theories/frameworks to prepare the prebriefing materials:
Debriefing is planned and incorporated into the simulation-based experience in	<ul> <li>Curriculum/simulation committee minutes</li> </ul>
an appropriate manner in order to guide the learner(s) in achieving the desired	<ul> <li>Faculty/staff work-day minutes</li> </ul>
learning outcomes.	<ul> <li>Simulation mapping across curriculum/program</li> </ul>
Criterion 2	

Constructed, designed, and/or facilitated by a person(s) or system capable and/or competent in providing appropriate feedback, debriefing, and/or guided reflection.

### Criterion 3

Conducted in a manner that promotes self, team, and/or systems analysis. This process should encourage reflection, exploration of knowledge, and

identification of performance/system deficits while maintaining psychological safety and confidentiality.

### Criterion 4

Planned and structured in a purposeful way based on theoretical frameworks and/or evidence-based concepts.

### **Professional Integrity**

Criterion 1

Honor and uphold the Healthcare Simulationist Code of Ethics.

Criterion 2

Follow standards of practice, guidelines, principles, and ethics of one's profession.

Criterion 3

Create and maintain a safe learning environment. (Follow the HSSOBP<sup>™</sup> Facilitation).

Criterion 4

Practice inclusion by respective equity, diversity, and inclusivity among all involved and in all aspects of SBE.

## Criterion 5

Require confidentiality of the performances and scenario content based on institution policy and procedures.

- Evidence of organizational or regulatory requirements to develop preparation materials. There should be citations within prebriefing materials, template, outline, etc.
- Evidence of materials and pre-work materials related to the need (i.e. data that supports the need)
- Communication with learners

# III. Debriefing exemplars

- Two (2) debriefing sessions that are representative of the debriefing in the program. This can be the same two debriefing sessions from the Scenario Exemplars.
- Policy & Procedure or Guidelines for an adopted debriefing process addressing:
  - Psychological safety
  - Debriefing concept introduced in the prebriefing
  - $\circ \quad \text{Ways to debrief and facilitate} \\$
  - Time of debriefing is appropriate for the time and type of simulation
  - Roles and responsibilities of the debriefers and learners
  - Process for evaluations of the debriefing from the facilitators and the learners