

Scenario Design and Construction Workshop

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SUN Meeting – Sao Paulo, Brazil 2024







About WISER

- Academic Healthcare Simulation
 Center Founded in 1994
- Affiliated with University and a Large Hospital System
- Accredited by the Society for Simulation in Healthcare







Overview of WISER



Schools

- Medicine
- Nursing
- Pharmacy

Students

Research



UPMC CHANGING MEDICINE

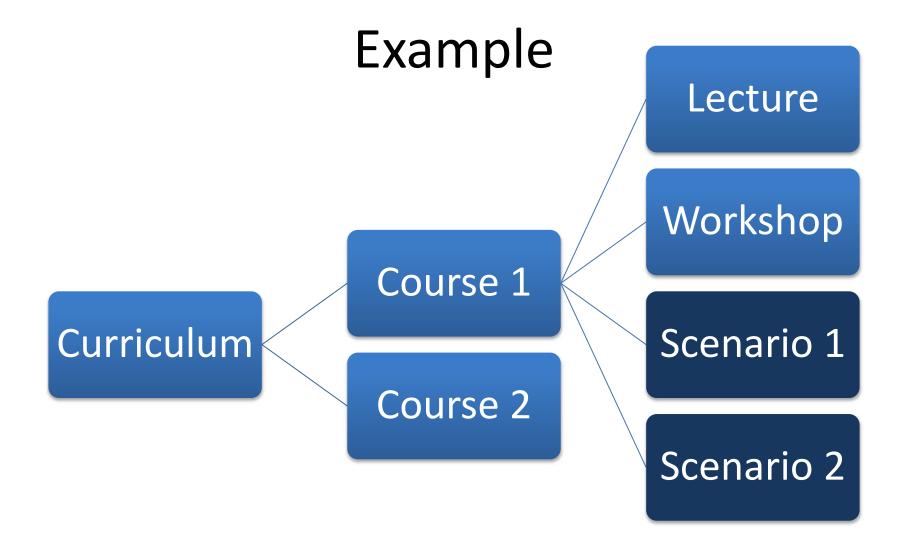
Hospital Support
Patient Safety
Physicians, Providers, and Staff
Resident Education

What is a Scenario?





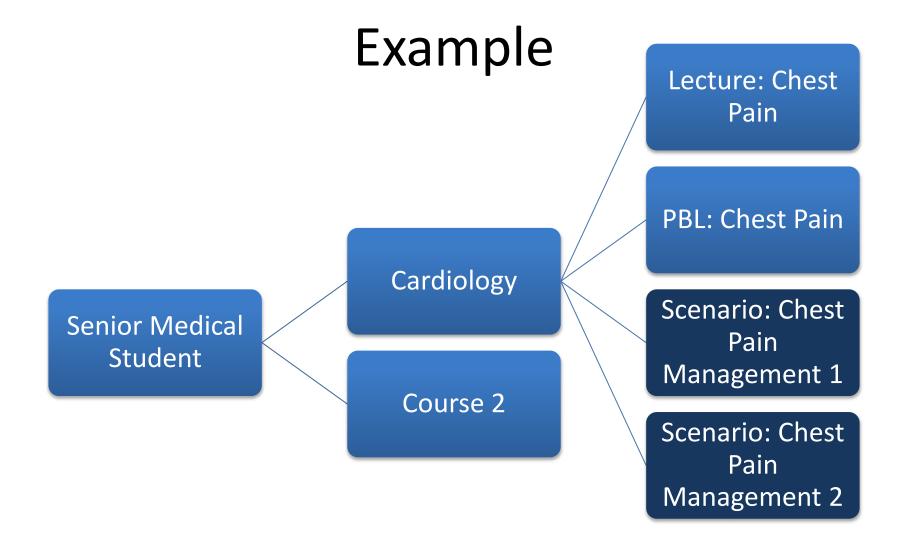


















What is a Scenario?



Process

Who?

Who are Learners? Level of Learner?

WHAT?

- What is being taught
- Objectives

HOW?

- Teaching Methods
- Assessment
- Equipment

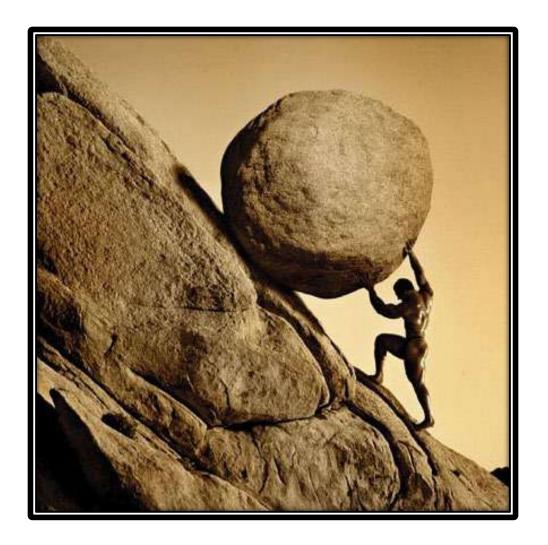
Why Create Scenario Materials?











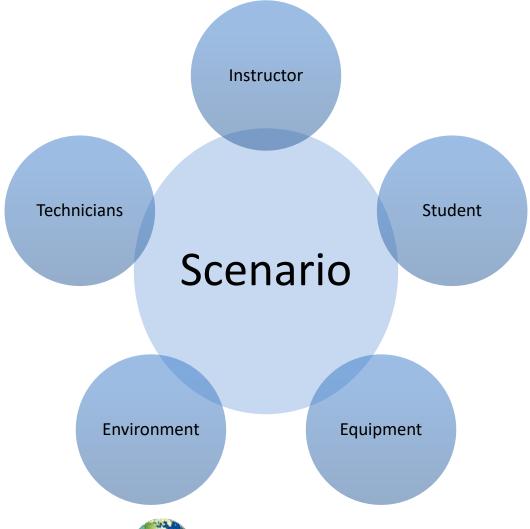
Scenario Construction







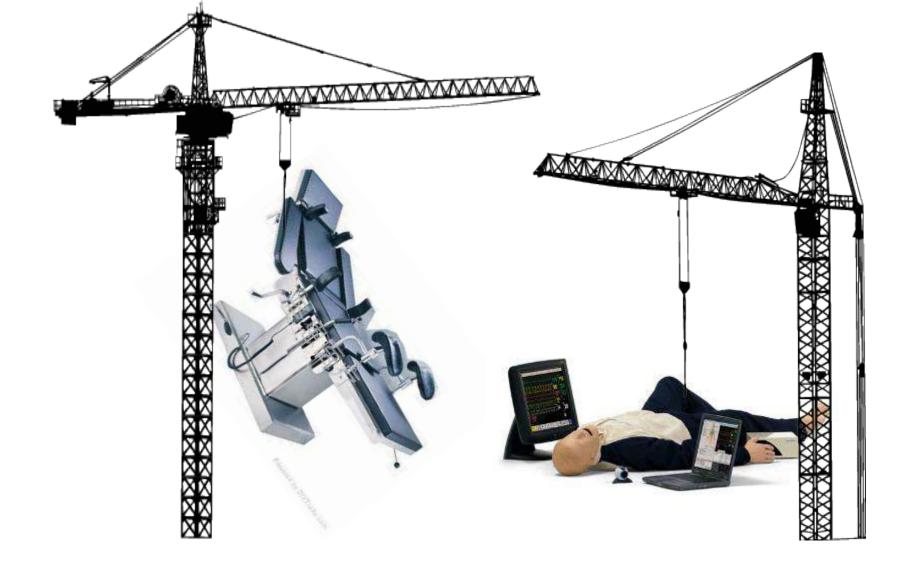
Critical Groups in Scenario Development







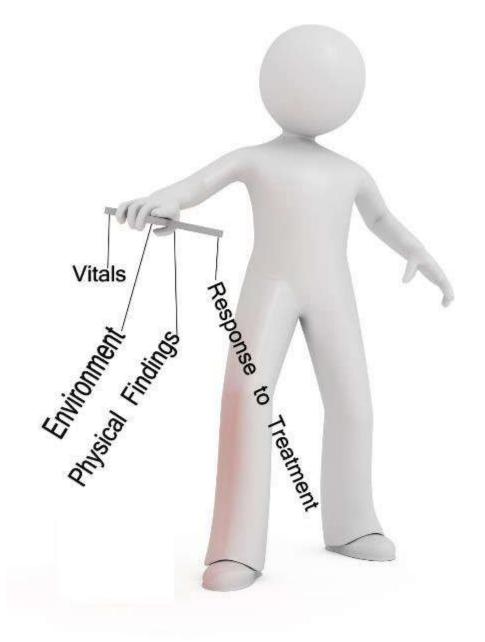










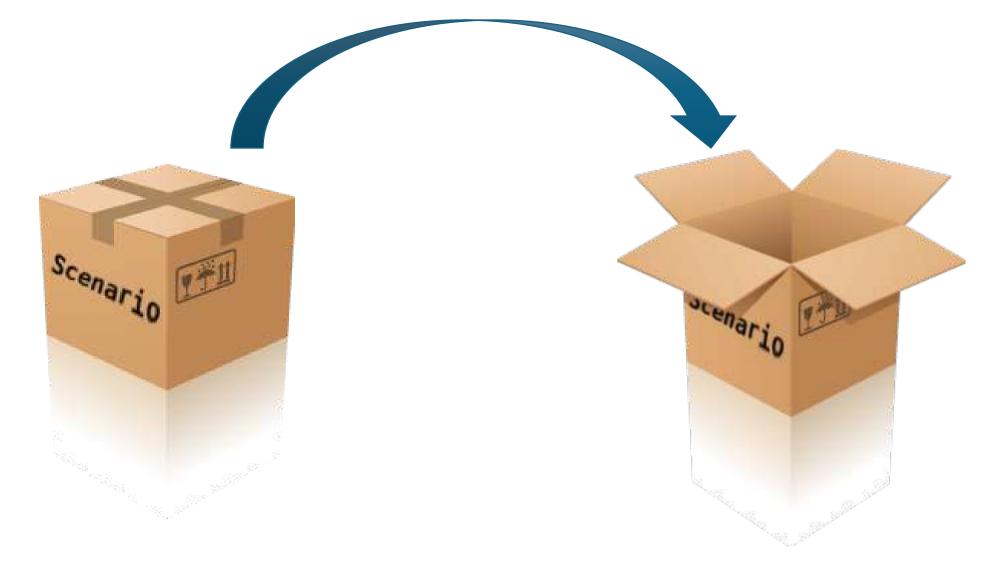








What do you want from the Box?









Who are the Learners?

- All of the Same?
- Mixed Group
- Level
 - Junior
 - Senior







Goals and objectives

- Identify
 - Teaching Goals
 - Assessment Goals
 - Faculty Clarity







Orientation for the Student

- Set Expectations
 - What is simulated vs. what is not
 - Orientation to
 - Environment
 - Equipment







Assessment

- FOCUS Instructor Attention
- Accuracy Capabilities
 - Video vs. non-video review
- Time Realities







Debriefing Intructions

- Linked to Learning Objectives
- Avoid overwhelming the participants
- Don't over-review the obvious
- Suggest a Debriefing Method







Instructor Preparations

- Instructor training is crucial
- Instructor Instructions
 - Understand Objectives
 - Understand Technical Features







Supplemental Debriefing Materials

- Attemp to Standardize Discussions
- Graphs, Pictures, Videos
- Slides of Main Points







Technician Instruction

- Room Set up
- Equipment Lists
- Expectations
- Room Re-set



Pre-Program the Scenario

- Provides Standardization
- Helps with Debriefing
- Helps With Data Collection

Plan to Recycle Scenarios

- Decrease center development time
- Increase quality
- Easier to collect comparison data









Examples







Course Components: Instructor

TASK TO BE COMPLETED

- Establish unresponsiveness
- □ Airway
- Breathing
- Circulation
- ☐ Call for help/Call Rapid Response Team
- Apply defibrillator pads
- Discontinue PCA pump
- □ Administer fluids
- □ Administer Narcan if indicated
- Maintain respiration/ventilation
- Pull bed away from wall
- Pull out headboard
- ☐ Connect bag valve mask to high flow oxygen and ventilate







Course Components: Instructor

CRITICAL DEBRIEFING POINTS

- 1. Review the positive actions displayed by participants regarding the Top 20 List in addition to the following:
 - Recognize PCA overdose
 - Discontinue narcotic
 - Maintain airway, breathing, circulation
 - Administer fluid as initial treatment
- 2. Note opportunities for improvement for the remainder of scenarios.
- 3. Note time markers within the scenario (Example: It was three minutes before the team defibrillated the patient).
- 4. Allocate five minutes within the first debriefing to discuss similar experiences that the instructor may have encountered.
- 5. Acknowledge participant experiences as well. This will serve as reinforcement of the materials and give participants an opportunity to raise questions or discuss concerns.
- 6. Assess proper assembly of flowmeter.







Equipment	Quantity	Checked
Facemask	1	
Nasal cannula	1	
Oral airways	1	
Bag valve mask	1	
Crash cart with supplies	1	
Defibrillator	1	
Defibrillator pads	1	
AED (if not on crash cart)	1	
Backboard for CPR	1	
Blood pressure cuff	1	
V fluid bag/tubing/catheters	1	
CPR code flow sheet	1	
Stretcher or bed	1	
Phone	1	
Pulse oximeter	1	
Oxygen flowmeter	1	
Suction canister	1	
Narcan	1	
PCA pump Sodium Chloride	1	

ROOM SETUP

- The ideal physical environment for this scenario should be similar to the patient care area that the participants are most familiar. Examples include:
 - Patient room for acute care provider
 - MRI suite for radiology personnel
 - Exam room for outpatient provider
- If unable to use clinical area, a classroom setting is an option.
- If a classroom is used, attempts should be made to simulate patient care environments with the images provided in each box (Example: oxygen and suction).

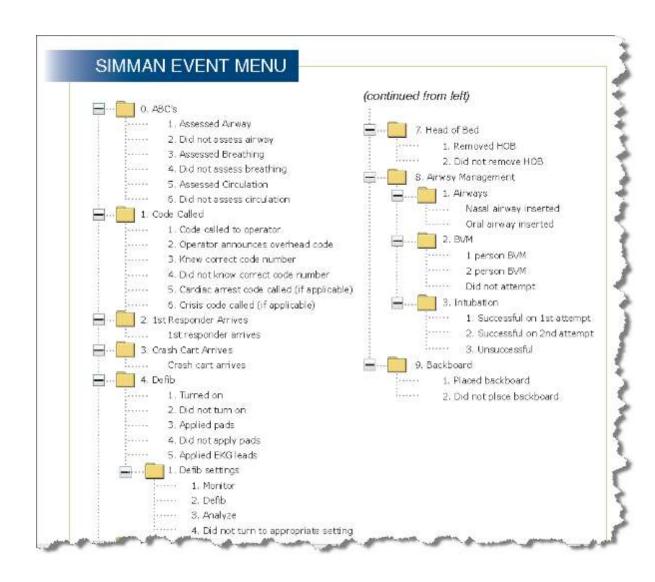
For this scenario:

s scenario.
☐ Prepare manikin to resemble patient corresponding with Scenario 6.
Oxygen flowmeter is in the room or use the photo substitute.
□ IV access
☐ Monitored
☐ Hospital gown
☐ Blood pressure cuff
☐ Pulse oximeter
□ Pillow
□ Other:
☐ Place crash cart outside the room.
☐ Elevate head of bed.
☐ PCA pump should be placed on the IV pole, adjacent to the patient's bed.









ROOM TRANSITION

After the debrief, return the room to its original state.

- Return the equipment to its pre-scenario configuration including bed placement, backboard, BVM, etc.
- Restock any disposables used in scenario.
- ☐ If IV is used, make sure that it is turned off, otherwise the bag will drain.
- Check IV fluids to ensure adequate level for next scenario.
- □ Turn the defibrillator off.
 - If defibrillator pads were used on the manikin, clean the surface area where the pads were attached to remove adhesive residue.
 - If pads are intact, return the pads to the adhesive backing for reuse in the next scenario.
- Return crash cart to outside of room.







Course Components

Scenario and Debriefing Guide









Course Components: Participant

Quiz

WISER Peter M. Winter Institute for Simulation, Education & Research	UPMC University of Prinstrugh	
	Help Contact Us	Search Logout
Mx Portfolio > RT LUNG 12/31/2008 > POST-QUIZ YOLUMETRIC CO2 (YCO2)		ACCOUNT: SMITAL4
 What are the two main factors that can cause a sudden drop in CO₂ elimination? (Select one of the choices below 	(decreased YCO ₂)	
a. Decrease in ventilation		
D. Increase in ventilation		
O a. Decrease in circulation (perfusion)		
O d. A and B		
○ e. A and C		
2. Of the three phases in the Volumetric Capnogram, which phase indicates airway of Select one of the chances below	deadspace?	
O a Phase 3		
O b Phase 1		
O c. Phase 2		
O d Phase 1 and 3		
3. To calculate Alveolar or Physiologic Deadspace, which of the following should be Selectione of the choices below a. Hount	entered into the NICO ₂ Monitor.	
O b. Weight		
O a. Aag draw time		
O d. PaCO2		
○ a. C and D		
4. Which of the following statements are true regarding Vd/Vt? Select one of the choices below		
() a Normal is 0.20 to 0.40		
b. It defines the relationship between ineffective and effective ges exchange.		
s. Elevated values above 0.50 may be associated with wearing failure		
O d. All of the above		
O a. A and B		

Course Components: Participant

Survey

Peter M. Winter inscitute for Simulation, Education & Research	UPN	1C 15a	reality of Piculourgh Ical Center	Y	
Simulation, Education & Research	_	Help I	Contact Us S	earch	Logout
My Portfolio > My Portfolio History > Manage Class CTT 3/11/2005 > VIEW SURVEY/EVALUATION				ссвимп	SMITAL
Questions bighlighted in red are not active and will not be visible during testing.					
CTT - PRE-CLASS PARTICIPANT SURVEY				Printal	ole Versio
Part I: Background, experience and perception					
Al-Postgraduata Experience in Healthcare (Postgraduats is defined as having a degree in your field of prac-	tice)			Select	Answer 🗸
5. Please indicate your level of training			Stringt Answ	ner ner	
			And the second		Others
If your level of training indicated in Part ±8 was 2 (Resident), 3 (Fellow), 4 (Medical Student), 8 (Nursing Student) or 11 Respitory Therapist Student indicate your training year / SMT					
C. Please list your primary clinical site:			Select Answe	ic)	8
					Other
O. Not including ACLS, have you previously attended a course on crisis team organization?	Select.	Answer			13
E. If you have attended a course on this topic previously, how long ago was that?	-			Select	Answer *
Part 2: Self evaluation of competence and confidence					
A. Self-evaluation of competence during a pries team response	Select	Answer			- 4
8. Salf evaluation of confidence during a crisis team response	100000000000000000000000000000000000000	9900000	Select Answer		
C. Self evaluation of competence in your own field of training / specialty (e.g. Are you a competent nurse?) Select Answer		100000000000000000000000000000000000000	9	
D. Self-evaluation of confidence in your own field of training / specialty (e.g. Are you confident in your nur	sing skills?)		Select Answer		Y
Part 3: Background and Attitudes toward macro simulation (full scale human simulation)			Xiodiosionaudovecono		
A. Compared to clinical expenence with real patients, training with simulation is				Select	Answer 🥦
B. In the future, simulation will be a necessary part of recredentialing				Select	Answer Y
C. I am encomfortable with simulation based competency training	STRONGLYE	TEAGREE	AGREE	STRON	IGLY AGREE
	0	0	0	0	0
O. Lem uncomfortable with simulation based computeror because I am emberressed to perform in front of others.	0	0	0	0	0
E. I am uncomfortable with simulation based compatency because I do not believe it is valid [Improving Hand theare			70.70.1		







Tying It All Together

- Developing Scenarios is a BIG Job
- Will Save Time
- Help With Consistency















Thank You!









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