7 Tips for Effective In Situ Sim

Research shows that in situ simulation can improve teamwork, communication skills, and patient safety outcomes.[1] Based on our experience and the experience of our customers, we've compiled a few tips to help you be successful.

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Begin with the end in mind

Once you've determined the knowledge, practice, or behavior you want your learners to acquire and transfer to the bedside, you can make informed decisions about simulation technology and curriculum options.

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Use your own equipment

If you use it in the real clinical world, try to use it in simulation. Learners will appreciate the hands-on practice with devices they will use in their real clinical environment.

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Brief everyone in the nearby environment

Because of the nature of in situ simulation, providers, patients, and their families are likely to be nearby. Be mindful and forewarn them that a simulation will be taking place.

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Make labels your best friend

Label simulated medications "for simulation only" or "not for patient use". This will prevent any future harm to real-patients if it is picked up in error.

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Minimize influence on the learner

One of the primary objectives of in situ simulation is identifying system threats. Avoid giving participants an indication of what you are testing. Let them pursue the simulation as they would handle it.

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Encourage mindful self-reflection

Debriefing is one of the most important components within a simulation experience. Analyzing what went right, what went wrong, and how to improve before dealing with a real patient case.

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Give people time to decompress

In situ simulation gives learners a chance to experience real world clinical scenarios in action. With real world experience comes real world stress and emotion. Remember to give learners a moment to regroup after each scenario.

In situ simulation can lead to a higher rate of skill application at the bedside.[2]
We hope you'll use the above checklist as a starting point to make the most of your simulations.

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1.https://pdfs.semanticscholar.org/0d56/bc2906c00f8e41a1267c87ebb153ae478d24.pdf
2. McGaghie, W. C., Issenberg, S. B., Petrusa, E. R., & Scalese, R. J. (2010). A critical review of simulation-based medical education research: 2003–2009. Medical education, 44(1), 50-63