# Nevada State Simulation Center (NSSC)

# Policy and Procedure Manual

## About this Manual:

In Fall of 2021, the Nevada State Simulation Center opened its doors to students and faculty in Henderson, Nevada. The Director of Health Science Lab and Simulation and the Simulation Lab Coordinator came together to establish a formalized document of the policies and procedures for the Nevada State Simulation Center.

The Nevada State Simulation Program was granted Provisional Accreditation by the Society of Simulation in Healthcare (SSH) June 30, 2024, through December 31, 2026. During that time, the program will be working toward Full Accreditation status.

This manual outlines all policies, procedures, and operations for the Nevada State Simulation Center for all staff, faculty, and students to follow. Core topics are outlined, and each topic includes a description to assist in the understanding and application of the policies and procedures upheld onsite.

# Author Acknowledgements

## Lead Authors:

Nina Marcellus, MSN-Ed, RN, CHSE, CNEcl – Director of Health Sciences Lab and Simulation (Director of Lab and Simulation)

Brittney Machin-Campos, MPH, BS, CHSOS – Simulation Lab Coordinator

## Contributing Authors

James Allen, MS, BS – IT Support Specialist

Crystal Basa (formerly Marcelo), AGS, CHSOS – Simulation Operations Specialist (SOS)

Karin Bolster (formerly Healy), BS, CHSOS – Simulation Operations Specialist (SOS)

## Review and Approval:

June Eastridge, EdD, RN – Dean, School of Nursing

Ipuna Black, PhD, RN - Associate Dean, School of Nursing

## Contents

# I. General Information

## A. Program Mission Statement

The mission of the Program is to create an environment of learning that fosters the principles of leadership, professionalism, and critical thinking within our student body, staff, and faculty. Our focus is to aim for excellence in healthcare by utilizing the most up-to-date technology and following evidence-based clinical practice while providing students with an environment of psychological safety throughout their simulation experience.

## B. Program Vision and Values Statements

The vision of the Program follows the same vision set forth by the School of Nursing at Nevada State University. The Nevada State University School of Nursing fosters excellence in healthcare by providing innovative and evidence-based education. Our focus on caring and competence leads to improved health, safety, and cultural awareness for all participants within the communities served.

*The Simulation Program values diversity of students, faculty, staff, and leadership while seeking to promote a culture of inclusivity, innovation, humility, and appreciation for all those developing, participating, and observing activities within this space.*

## C. Code of Ethics

- The faculty of NSU value integrity. To support this value, the School of Nursing endorses an honor code based upon trust and integrity in others. With a commitment to professionalism, this code of conduct is an integral part of the School of Nursing and every student enrolled in the program is expected to follow the code of professional conduct located in the BSN Handbook.
- Students who break the professional conduct code are subject to the actions as defined in the Professional Behavior Deficiency policy located in the BSN handbook. Honesty is a professional characteristic that is vital to the practice of safe nursing and is expected of all students. Misconduct of any type will not be tolerated as it lowers the standards of Professional Nursing Practice and jeopardizes the safety and well-being of the public.
- The faculty of the School of Nursing is charged with establishing and maintaining standards of ethical, moral, and personal conduct for students in the program. It is the responsibility of the Dean, School of Nursing, or delegated agent or agents, to enforce all rules governing student affairs.
- The Dean has the authority to administratively withdraw a student from the School of Nursing at any time if professional breeches of a legal, moral, ethical, health, social or academic nature occur. Students found in violation of professional

conduct, may appeal the Dean's decision. Please refer to the student grievance section of this handbook.

- In addition to the School of Nursing Honor code, all students must comply with Nevada State University Student Code of Conduct (Policy ID# SA 5.1), which can be found at https://nevadastate.edu/policy/current/student-code-of-conduct/

## D. Institution Governance

- The Board of Regents has jurisdiction over all units of the Nevada System of Higher Education. The Chancellor, who is appointed by the Board of Regents and responsible directly to it, is the chief administrative officer of NSHE. The Chancellor is to keep the Board fully informed of the standards of scholarship, the fiscal integrity, and the administrative efficiency maintained at each institution.
- In accordance with the policies established by the Board of Regents, the governance of Nevada State University has been designed to include a system of shared governance to ensure maximum input and involvement by the entire NSU community and to represent institutional constituents. They are the Faculty Senate, its committees and recognized Senate affiliates, the Classified Staff Council, the President's Leadership Team, and the Nevada State Students Alliance (NSSA).

## E. Decision Making

- The Division of Culture, Planning & Policy (CPP) oversees the development and maintenance of Nevada State University's institutional policy and procedure. Institutional policy and procedure are intended to provide clarity to stakeholders while mitigating institutional and stakeholder risk, advancing equity, and ensuring compliance with state and federal laws as well as the procedures and guidelines of the Nevada System of Higher Education. Institutional policies align operations, set behavioral expectations across the institution, and communicate roles and responsibilities.
- CPP has the important task of helping the Nevada State community develop policies that are accessible, flexible, efficient, and supportive of the most diverse range of stakeholders possible.
- We strive to involve and empower our institution's subject matter experts and those directly impacted by all institutional policies. NS stakeholders including students, academic faculty, administrative faculty, classified employees, executive staff, recognized student clubs and organizations and other campus groups are encouraged to get meaningfully involved in policy development by providing input on draft policies or by joining a policy development team. Standardized policy and procedure tools, templates, and timelines empower policy developers to consistently organize and communicate information.
- Institutional policy lifecycle phases are Pre-Development, Development, Approval, Distribution, and Maintenance. All institutional policies are reviewed by general

counsel and approved by the relevant Division Vice President and the President of Nevada State University. Learn more at www.nevadastate.edu/policy.

- The Faculty Senate's areas of jurisdiction are the academic programs, academic and administrative faculty, academic regulations, educational materials, and other related matters. Other governance bodies on campus include the Nevada State Student Alliance and the Classified Employees Council.

## F. Required Disclaimers

The Simulation Oversight Committee (SOC) was initially developed with the vision to provide oversight and advisory functions to the simulation Program. The purpose of this committee is to determine gaps in processes, staffing, resources, and a projected vision for the Program. The Program Director also holds a seat as ex-officio (non-voting) on the School of Nursing Curriculum Committee (as of December 2025) and for the next term includes the following individuals:

- Dr. June Eastridge, Dean of the School of Nursing (ex-officio)
- Nina Marcellus, Health Sciences Director of Lab and Simulation (ex-officio)
- Ludy Llasus
- Nora Hernandez-Pupo
- Venessa Peterson
- Neha Patel

## G. Dress Code

The Student Dress Code can be found in the BSN handbook page 66-69 and using the following link: https://nevadastate.edu/wp-content/uploads/2023/08/BSN-Handbook-2023-2024-Final.pdf

## H. Hours of Operation

**Schedule:** Monday–Saturday
**Operating Hours:** 8:00 AM – 10:30 PM

- **Day Shift:** 8:00 AM – 4:00 PM
- **Evening Shift:** 2:00 PM – 10:30 PM

**Note:** Evening shift hours are not every day. These hours may vary depending on the semester rotation and the schedule of the evening shift cohort. If no evening shift skill labs, open lab, or simulations are scheduled, the center closes at 4pm.

## I. Terminology

Simulation Center uses the Healthcare Simulation Dictionary (2020) for all terms regarding simulation and skill labs.

LINK: Healthcare Simulation Dictionary (ssih.org)

### J. Personnel

The Program structure includes one Health Sciences Director of Lab and Simulation who works under the direct supervision of the Dean of the School of Nursing. The Health Sciences Director of Lab and Simulation directly oversee the Simulation Lab Coordinator, Lead Information Technologist. This role works closely with the Director of Clinical Affairs and the Associate Dean of Nursing and jointly oversees all part-time clinical faculty and dedicated skills lab faculty and staff. Collaborative scheduling between these three positions ensures that all full-time, part-time clinical, and lab faculty are scheduled effectively for the program's needs and evaluated on performance. The Health Sciences Director of Lab and Simulation position is also responsible for hiring and training all dedicated simulation facilitators in collaboration with the Simulation Lab Coordinator, as well as hiring Standardized Patient Actors. The Program organizational structure is defined within the Health Science Lab Accountability Chart and falls within the School of Nursing Organizational chart.

## II. Administrative Information

### A. Support staff and contact tree:

- The Simulation Center is comprised of the Director of the Lab, Simulation Lab Coordinator, Simulation Operations Specialist, IT Specialist, Facilitator/Facilitators, and Standardized Patients. Review organizational chart in section 2.d. for chain of command.
- SON contact list is updated each semester and sent out to all faculty and staff via email

### B. Overtime policy

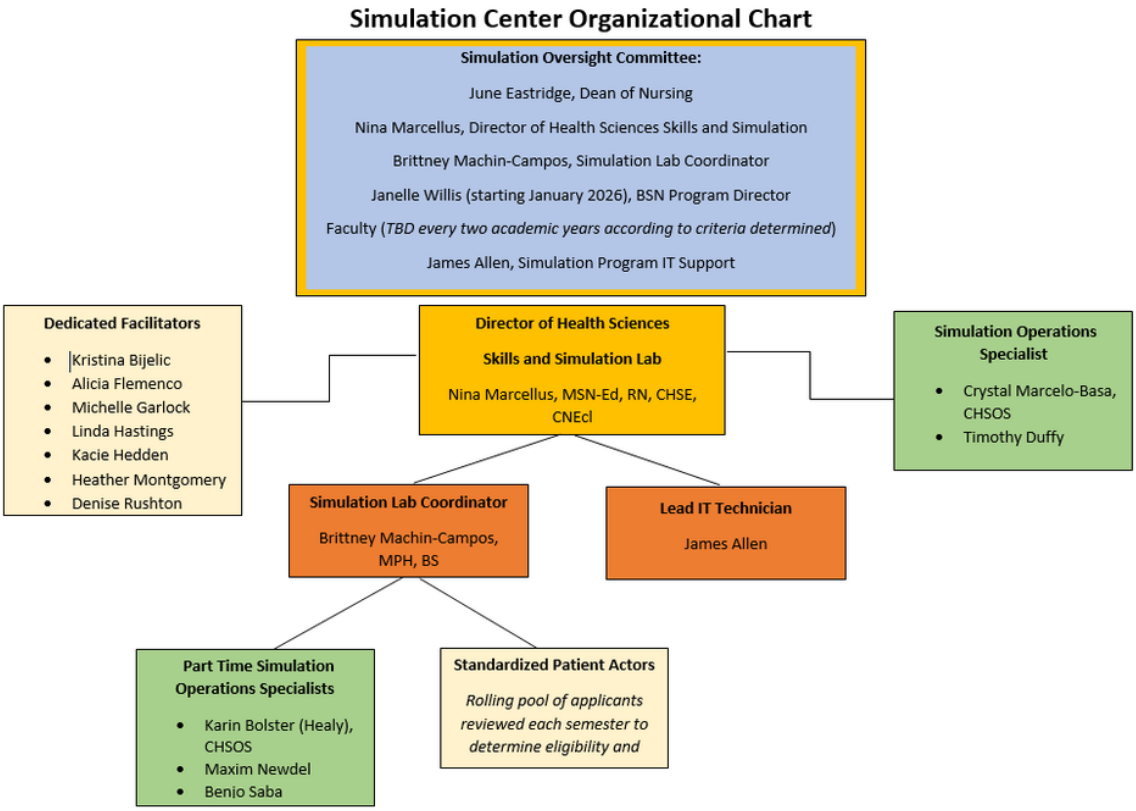
- Currently, the NS Simulation Center currently does not have overtime policy in place since overtime is not offered any of our part-time employees.
- Full-time employees (salaried based) are expected to work 5 days a week, no overtime is available. If a full-time employee works a day that is not part of their pre-determined schedule, they may take a day off without needing to use PTO.
- Per HR institutional policy, LOA or Part-time standardized patients and simulation operation specialist are not allowed to work over 8 hours within a workday.

### C. Scope of Work/description personnel classifications

- Standardized Patient/Participant *(SP)*: A person carefully coached and trained to simulate a patient so accurately that a skilled clinician cannot detect the simulation. The Standardized Patient will accurately and consistently portray the history, personality, physical findings, emotional structure and response pattern of an actual patient, family member, healthcare provider, or needed role during nursing student training simulations.

- Simulation Operation Specialist *(SOS)* - The Simulation and Lab Technician will support operations of both skill lab and simulation education for the School of Nursing to ensure that users receive a quality educational experience. This position provides lab support for setup/breakdown of low fidelity manikins in skills labs, operate high fidelity simulations.
- Simulation Lab Coordinator – Coordinates operations of skills lab and simulation activities for the School of Nursing to ensure that users receive a quality educational experience. This position provides lab support for setup/breakdown of low fidelity manikins in skills labs, operate high fidelity simulations, as well as manages and maintains the simulation schedule. The lab coordinator also manages all inventory tracking, ordering, and maintenance of equipment and supplies.
- IT Support Specialist – Serves as the technical lead to architect, design, implement, operate, and support a wide variety of patient simulation equipment and clinical systems which record, evaluate, and integrate simulation technology into clinical teaching scenarios.
- Director of Health Science Simulation and Skills Lab *(Director of Lab and Simulation)* - Oversees the daily operations of the Skills and Simulation Center. This includes overseeing delivery of the lab and simulation portion of the nursing curriculum, lab content planning, room scheduling, supply requests, oversite of support staff, and lab/SIM faculty mentoring. The Director of Lab and Simulation ensures that the lab experience is aligned with the Caring Science Curriculum and collaborates with nursing faculty to best use lab facility resources to support course content delivery.
- Facilitator *(formerly used term Concierge)* - The Simulation Facilitator is responsible for facilitating high fidelity simulation scenarios and standardized patient encounters in the Baccalaureate of Science in Nursing (BSN) program. The position will serve in the role of Facilitator for simulation to facilitate high fidelity and mixed/hybrid scenarios in collaboration with a simulation operationalist and content expert (i.e., clinical instructor). The Facilitator will collaborate with simulation staff, faculty, and students during simulation scenarios and will guide debrief sessions following each scenario progression while upholding standards of best practice per INACSL and SSH. They will be expected to attend ongoing education and training offered by the simulation center to gain proficiency in the center's simulation model.
- Student worker *(PALS or Course Assistant/CA)* – Nursing CAs help students develop a positive self-concept; the skills to identify and address the academic challenges of the students by using the student's own experience, training, and skills. In addition, to supervising in a peer-to-peer open lab setting when students come to open lab to practice nursing skills.

## D. NSSC Organizational Chart




## E. Staff Quality Improvement & Professional Development

All simulation staff are encouraged to attend conferences annually to continue simulation specific education. A minimum of 2 CE certificates per academic semester and are logged annually for the Health Sciences Director of Lab and Simulation, all Simulation Operations Specialists (full time and part time), Technology Support, and Simulation Facilitator. The program received funding for professional development in 2022 to be used by the end of fiscal year 2025. This funding totaled $45,000, distributed over 3 years from 2023-2025. The Program staff were able to attend multiple conferences during 2022 and 2023, to include SimOps, SimGhost, IMSH, and INACSL (two team members per conference, depending on purpose of conference as it relates to role in the Program, team member availability, and last conference attendance). More simulation conferences for the Program staff are planned for 2024 and 2025.

## F. Course Leads, Instructors, and Facilitator Training

Facilitator (facilitators) are trained on site for 4-8 hours (depending on the size of the incoming group of hires). This training includes a PowerPoint presentation, theories behind simulation, expectations of the role, and live scenario demonstrations that require the facilitator to act in the roles of student, content expert, and facilitator (facilitator) so that roles are better understood. The purpose of the roleplay is to give them insight into the student experience in order to allow for a better understanding of how to navigate student debriefing of experiences. The new facilitator is then scheduled to shadow a trained and experienced facilitator for two full days in simulation with students prior to facilitating with a student clinical group alone. Mentoring continues long term with the program, and facilitator often opt to add skills lab course(s) to their role to be more involved with the School of Nursing and the Simulation Program.

## G. Instructor Orientation (PTI/Lab)

- All instructors receive training from the simulation operations staff on how to utilize simulation equipment appropriately and effectively in the skills ward for the respective activities. Step-by-step instructions are made available to the faculty to refer to when needed. Part-time instructors have a PTI orientation at the beginning of the semester (this occurs three times a year) that allows them the opportunity to go over canvas, rubrics, teaching plans, and orientation to the skill lab. Ground rules and proper operation and handling of manikins are reviewed at this time with the simulation staff.
- Mandatory, in-person orientation is scheduled annually for incoming part-time faculty and staff before a new academic year starts. This is a full day orientation, and lunch is provided. Clinical and lab course teams meet with the lead course faculty to review clinical/lab course expectations, schedules, expectations regarding absences, testing, clinical paperwork, learning contracts/behavior contracts for students, a brief seminar on Caring Science, and all logistics delivered at this orientation. Condensed/hybrid orientations are offered each subsequent semester, with the expectation that lab teams will meet to determine expectations for the semester, discuss any change requests from the previous semester, and any potential challenges (i.e., holidays, scheduling conflicts, etc.)
- This orientation is required for new faculty or faculty who have not had clinical/lab courses assigned to them for 2 or more semesters, due to potential for changes made. It is required for all lab teams to meet to determine co-teaching expectations for the semester, discuss any changes from the previous semester, and any potential challenges (holidays, scheduling conflicts, etc.) Beginning January 2024, lab course team leads are assigned and compensated to take on more of a leadership role in the co-taught lab courses. Skills lab courses are co-taught with a team of 4 instructors overseeing 32 students. Each instructor is assigned as the instructor on record for a group of 8 students. It is necessary for the team to pre-brief before the start of each new semester, just as they also

debrief following the end of the semester. Feedback and revision requests are reviewed; launch for revised content set for Fall semester of each academic year.

## H. Staff Orientation

- Orientation for newly hired Simulation Operations Specialists (SOS) is conducted as part of the post-hiring onboarding process. Each new staff member undergoes a structured training program, beginning with shadowing the Simulation Lab Coordinator and an experienced full-time Simulation Operations Specialist to gain familiarity with skills lab setups and operational procedures.
- As the academic semester progresses, orientation extends into the high-fidelity simulation environment. During this phase, new staff are systematically guided through each simulation scenario under the direct supervision of the Simulation Lab Coordinator. Independent facilitation is permitted only after successful completion of this supervised training.
- The orientation program is designed to span approximately six (6) weeks, equating to 48–56 hours of hands-on training. Throughout this period, new hires are provided with a comprehensive orientation binder containing essential onboarding resources and training materials for ongoing reference.
- Upon completion of the six-week training protocol, each new Simulation Operations Specialist is formally evaluated by the Simulation Lab Coordinator using a standardized evaluation form. A minimum score of 42 out of 56 points is required to demonstrate competency.
- If a new hire scores below the minimum threshold, they will be placed on a structured remediation plan and re-evaluated within two to three weeks. Failure to meet the minimum score upon re-evaluation may result in termination of employment.
- Facilitator (facilitators) are trained on site for 4-8 hours (depending on the size of the incoming group of hires). This training includes a PowerPoint presentation, theories behind simulation, expectations of the role, and live scenario demonstrations that require the facilitator to act in the roles of student, content expert, and facilitator (facilitator) so that roles are better understood. The purpose of the roleplay is to give them insight into the student experience in order to allow for a better understanding of how to navigate student debriefing of experiences. The new facilitator is then scheduled to shadow a trained and experienced facilitator for two full days in simulation with students prior to facilitating with a student clinical group alone. Mentoring continues long term with the program, and facilitators often opt to add skills lab course(s) to their role to be more involved with the School of Nursing and the Simulation Program.

# III. Simulation Operation Specialist Staff Policies:

## 1. Daily Operations and Setup

• SOS is responsible for preparing simulation rooms, skill labs, including, but not limited to equipment setup, manikin set up, and facilitating simulations per the Sim Center calendar.
• All skill lab setups must be completed no later than 30 minutes prior to the scheduled session.
• Post-session teardown and equipment reset must be completed within 1 hour of session end.

## 2. Work Hours and Scheduling

Dayshift work hours: 8:00 AM – 4:00 PM; Evening shift work hours: 2:30 PM – 10:30 PM.

**Daily Responsibilities:**

- Simulation Operation Specialists (SOS) must check the simulation calendar each day and confirm that all preparations are complete for the following day's sessions.

**Scheduling & Assignments:**

- All simulation events are assigned by the Simulation Lab Coordinator. SOS team members will receive calendar invites from the simulation center's business profile. Each simulation activity is also assigned to an SOS using a color-coded system for clarity and organization.

**Additional Notes:**

- Overtime is not available for SOS roles.

## 3. Simulation and Skill lab tasks and expectations:

The following checklists have detailed tasks on the expectations and procedures when the simulation staff is scheduled for skill labs:

- Daily opening & closing checklist for skill labs – available in SOS training resource binder. This goes through the process of how-to start-up and shutdown all simulation technology.
- Simulations "Go live" checklist - available in SOS training resource binder.
- Simulations "end of day" checklist - available in SOS training resource binder.
- Follow the NSU Skills Daily Checklist for Skill Lab assignments and tasks, also provided in the SOS resource training binder.

### 4.Maintenance and Safety equipment

• Log all maintenance activities and report malfunctions immediately using NSU Equipment work form. Link: https://forms.office.com/r/d3dB7igdPD

• Wear gloves when handling manikin or task trainers. No ink pens or betadine on or around manikins and task trainers.

### 4. Documentation and Inventory

- Submit a weekly operations report using the High Usage Supply Excel Workbook to the Simulation Lab Coordinator containing low inventory of supplies.
- Document any incidents using NSU incident form for any medical events, accidents or injuries.
- **Inventory:** any packages delivered to NSU Simulation Center should be verified that all contents are present from the packing slip. If a packing slip is not present, ask the Simulation Lab Coordinator to print one to ensure that all supplies and/or equipment is verified to ensure that payment for supplies and equipment are paid for in a timely fashion.

### 5. Collaboration and Communication

- Attend monthly team meetings and contribute to simulation planning and strategizing.
- Collaborate and communicate with fellow SOS team members and supervisors.
- Communicate with faculty and facilitators to ensure simulation needs are met during simulation day events.
- Provide technical support during live simulations and debriefings.

### 6. Training and Professional Development

- Participate in at least 2-4 professional development activities per semester (example: webinars, conferences, in-service training, etc.)
- Stay current with simulation technology and best practices.

### 7. Break and Timekeeping Policy for LOA Employees

- In accordance with NSU HR labor policies, all LOA employees are required to take a 30-minute unpaid meal break if scheduled to work more than six (6) hours in a day. Employees must clock out during this break.
- LOA employees working a six (6) hour shift are to take two (2) paid 15-minute breaks during their shift. These breaks do not require clocking out.
- All LOA employees must record their work hours **in real time** using the Workday app, as required by NSU Human Resources.
- Time entries must reflect actual hours worked.

- Falsifying time records may result in disciplinary action, up to and including suspension or termination.

## 8. Absences for Simulation Staff: planned or unplanned

- All Simulation Center staff are scheduled in a shared calendar (Outlook) in advance. Changes to the schedule must be approved by the Director and the Lab Coordinator.
- LOA (Part-time/hourly) staff are paid on a positive pay basis (i.e., only paid for time worked). LOA/Hourly employees are employed at-will and may be terminated at any time without cause or notice for lawful reasons (i.e., excessive absences, harassment of another team member, non-compliance with time tracking, tardiness, etc.)
- A full-time staff member is entitled to use accumulated sick leave for personal illness; disability; medical, optometry, or dental service or examinations; childbearing or temporary disability, upon approval of the appointing authority. The appointing authority may require a staff member to provide medical certification from a medical practitioner for absences of more than five consecutive days or if abuse is suspected.
- All members of the Simulation Center staff are expected to adhere to following protocol regarding a planned or unplanned absence:

### Planned:

- Simulation center staff must get approved time off by speaking with their immediate supervisor before submitting it.
- All full-time staff, i.e. simulation lab coordinator, IT specialist, and full-time simulation operation specialist must get approved time off by speaking with the Director of Lab and Simulation.
- Full-time staff must submit a formal request through HR workday for any planned absences.
- All part-time staff, i.e. standardized patients, volunteers, and part-time simulation operation specialists must get approval for time off with the Simulation Lab Coordinator or Director of Lab and Simulation, in the event the coordinator is absent.
- The Director of Lab and Simulation and Simulation Lab Coordinator will then schedule the requested time off in the shared simulation lab calendar.
- All planned time off should be requested at least a minimum of 2 weeks unless there are extenuating circumstances.

### Unplanned:

- All members of the simulation staff must communicate to either the Director of Lab and Simulation and/or Simulation Lab Coordinator regarding any unplanned absences (i.e.

*family emergency, sickness, accident or any other extenuating circumstance*). Communication should be a phone call, text message, or email.

- Full-time staff will also need to submit sick leave or PTO via HR workday.

Additional Resources:

NSHE Board of Regents Handbook for Academic and Administrative Faculty: https://nshe.nevada.edu/wp-content/uploads/file/BoardOfRegents/Handbook/title4//T4-CH03%20Professional%20Staff.pdf

Nevada Classified Employee Policy: https://hr.nv.gov/Resources/Publications/HR123/Attendance/Sick/

## 9. Late Arrival and Notification Policy for LOA Employees:

To maintain a professional and efficient work environment, all LOA and full-time employees are expected to arrive on time for their scheduled shifts. The following policy outlines expectations and procedures regarding late arrivals:

- Notification Requirement
  - Employees who anticipate being late must notify their immediate supervisor **at least 30 minutes prior** to the start of their scheduled shift.
  - Notification must be made via phone call or text message, depending on the communication protocol established by the department.
- Definition of Tardiness
  - An employee is considered **late** if they arrive **more than 5 minutes** after their scheduled start time without prior notice or approval.
- Documentation and Disciplinary Action
  - Repeated tardiness will be addressed through the following progressive steps:
  - **First Incident**: Verbal warning and documentation using the Incident Form.
  - **Second Incident**: Formal written warning submitted to the Director.
  - **Third Incident**: Suspension from scheduled shifts for a designated period.
  - **Fourth Incident**: Termination of employment.
- Exceptions
  - Exceptions may be made regarding emergencies or extenuating circumstances, at the discretion of the supervisor and Director. Documentation may be required.

## 10. Progressive Disciplinary Policy for LOA Team Members

If a LOA team member violates any established policy, the following progressive disciplinary actions will be implemented:

- First Incident – Verbal Warning
  - A verbal warning will be issued, and the conversation will be documented using the official NSU Incident Form.
- Second Incident – Written Warning
  - A formal written warning will be issued and submitted to the Director for review and recordkeeping.
  - NSU Write Up form: NSU Employee Write-Up Form.docx
- Third Incident – Suspension
  - The team member will be suspended from duties for a designated period, as determined by the Director and/or Simulation Lab Coordinator.
- Fourth Incident – Termination
  - Continued failure to comply with policies will result in termination of employment.
  - Each step in this process is intended to provide the team member with an opportunity to correct their behavior while maintaining accountability and upholding the standards of the organization

### 11. Simulation Staff Dress Code:

**Uniforms:** acceptable uniform options listed below

- Black scrubs
- Black scrub jacket
- NSU logo attire shirts
- Business casual (slacks, blouse, button-up shirt, collared shirt, jeans)
- Name tags
- Jeans may not be ripped, sagging, torn or have holes in them
- Closed-toed shoes (sneakers, loafers, dress shoes)

**Uniform Maintenance:** Uniforms must be laundered regularly, wrinkle-free, and in good condition always. Free of lint, pet hair, etc.

**Hair:** Hair must be washed, combed, styled, and cut if applicable. Hair should be groomed, placed in a ponytail/bun if/when needed.

**Facial Hair**: Facial hair must be groomed if applicable.

**Tattoos:** Tattoos are allowed if they are not offensive, contain inappropriate language, or are vulgar.

**Footwear Standards:** Closed-toed shoes are required. Shoes must be clean, in good condition, and appropriate for a professional setting.

**Personal Hygiene:** All individuals are expected to maintain a high standard of personal hygiene. This includes regular bathing, use of deodorant, fresh breath, and maintaining clean and trimmed nails.

**Spirit Week:** Team members may be out of uniform to participate in Spirit Week if attire does not interfere with work or is excessively revealing.

**Additional Attire Guidelines:**

- No stomach showing and under garments must not be visible.
- Shorts, skirts, and dresses must be no shorter than 4inches above the knee.
- No spaghetti-strapped shirts.
- Use of belts to prevent pants from sagging, pants hemmed if they are too long.

**Business Casual Attire approved clothing**:

- Dress shirts (collared), polo shirts, or blouses
- Dress pants/slacks, chinos, khakis, skirts, or dresses (no more than 4 inches above the knee)
- Blazers, cardigans, sweaters (optional)
- Closed-toed shoes (e.g., loafers, dress shoes, ballet flats, heels)

**Piercings:** Piercings are allowed if they are not excessive or distracting. Facial piercings should be minimal, one small stud in nose or eyebrow.

## 12. Workplace Harassment Policy

NSU is committed to maintaining a work environment that is respectful, inclusive, and free from all forms of harassment. Harassment of any kind, whether verbal, physical, visual, or digital is strictly prohibited and will not be tolerated.

**Definition of Harassment**

- Harassment includes, but is not limited to:
- Unwelcome conduct based on race, color, religion, sex (including pregnancy), national origin, age, disability, sexual orientation, gender identity, or any other protected characteristic.
- Offensive jokes, slurs, epithets, or name-calling.
- Physical assaults or threats.
- Intimidation, ridicule, or mockery.

- Display of offensive materials or images.
- Unwanted sexual advances or requests for sexual favors.

Reporting Harassment

- Employees who experience or witness harassment are encouraged to report the incident immediately to their supervisor, the Director, or Human Resources. Reports will be handled promptly, confidentially, and with sensitivity.

Investigation and Resolution

- All reported incidents will be thoroughly investigated. If a violation is confirmed, appropriate disciplinary action will be taken, up to and including termination of employment.

No Retaliation

- NSU strictly prohibits retaliation against any employee who reports harassment or participates in an investigation. Retaliation is a serious violation and will be subject to disciplinary action.

### 13. Vector Training Requirements

- All LOA and Full-time employees are required to complete **mandatory harassment prevention training** as part of their onboarding process. This training must be completed within **30 days of hire** and is designed to:
- Educate employees on identifying and preventing harassment, discrimination, FERPA, data security.
- Clarify reporting procedures and employee rights.
- Reinforce NSU's zero-tolerance policy.
- Refresher training may be required annually or as determined by Human Resources. Failure to complete the required training may result in disciplinary action, including suspension or termination.

## IV. Course Content

Teaching plans are revised annually and shared to faculty and simulation staff via canvas shell. Hard copies are also available in teaching binders on simulation center site.

## V. Simulation Modalities

- **Skill labs -** The skill lab is comprised of 16 low-fidelity Nursing Annes and 6 mid-fidelity Nursing Anne Simulators. All manikins are used for teaching fundamental (N308) and mid-curriculum (N328) nursing skills (i.e. *foley insertion and tracheostomy care*) up to

advanced (N428) nursing skills (i.e. *code blue*). Task trainers such as CVC (*Chester Chest*) and additional IV arms for the skill lab.

- High-fidelity simulators - The simulation area houses 2 Sim Man 3Gs, 1 Sim Man 3G plus, 1 SimMom, 1 SimNewB, 1 Sim Baby, 1 SimJr., and 1 Geriatric Nursing Anne Simulator. Our high-fidelity simulators are used during high-fidelity simulation scenarios, where the schedule is pre-determined by what group, clinical section and scenarios are scheduled for the day.

## VI. Respectful Environment

- The expectation at the School of Nursing is that faculty, staff, and students work together to resolve conflict as soon as possible by using open and respectful dialogue.
- By working together, civility becomes part of our culture. A safe, respectful learning environment is created to meet the mission of graduating competent, caring, and respectful nurses.
- Psychologically safe space - Part of the briefing process that adds to the psychological safety of the student learner experience is that the scheduled facilitator reviews the confidentiality agreement, ground rules, and reminds students that this is a safe space for learning.
- Facilitators are trained to meet students where they are in their knowledge and practice, not where they expect them to be. The debriefing process also begins with the assumption that this is a time for reflection and discussion of the patient scenario just experienced. Students are reminded that no one scenario stems from another, and the debrief room is a safe space to share experiences, ideas, to ask questions, and explore thought processes.
- According to Berman and Snyder (2012), managing conflict involves the following actions:
    1. Demonstrate respect for all parties
    2. Avoid blaming others
    3. Encourage full discussion of issues
    4. Actively listen to other points of view
    5. Use ground rules during discussions to promote fairness
    6. Explore all possible solutions
    7. Being familiar with and exercising chains-of-command

## VII. Feedback and reflection

The Program currently uses a modified version of Debriefing for Meaningful Learning (Dreifuerst, 2009), which moves through phases of reactions, descriptions, analysis, and a summary of the facilitated scenario. The premise of all debrief sessions is that they are student-led discussion based in processing thoughts, reactions, and emotions of the simulation experience. The facilitator is there to guide the discussion and provide a safe space for learning. The content expert is present to clarify any questions related to content, but only after the student-led discussion has dissipated. The tools and resources used for the Program throughout the curriculum can be found in the links below. Included in these

resources is a letter from the Director of Lab and Simulation outlining the expectations of facilitator and faculty for all scheduled simulation experiences.

1. PEARLS Debriefing Tool
2. Debrief Tool (NSU)

# VIII. Simulation technology

## A. Code of Conduct

NS Simulation Center adheres by the School of Nursing Professional Code of Conduct found at https://nevadastate.edu/wp-content/uploads/2023/08/BSN-Handbook-2023-2024-Final.pdf

The NSU Student Code of Conduct and Policies which can be found at https://nevadastate.edu/policy/current/student-code-of-conduct/

When students, staff and faculty are onsite at the simulation center they are all expected to treat each other professionally, civilly, and respectfully. During simulations we advocate that a student's time and experience during simulations is a psychologically safe space for learning. No judgement is passed when mistakes are made. Students and faculty are briefed about the "safe space" during every encounter of simulations.

## B. Evaluation Tools

Qualtrics surveys are used for collection of student, staff, faculty, Standardized Patients, and facilitator responses to the confidentiality agreement and ground rules for the simulation experience, as well as end-of-experience evaluations of the experience and Program. These surveys are used for every student group, every simulation experience. Data and video recording from all simulation scenario and debriefing sessions has been revised (as of Fall 2025) to be housed for 3.5 years which matches the NSU School of Nursing student data collection of exams, reports, and evaluations. Previosly,data from these surveys and simulation scenario and debriefing recordings was housed for 5 years or 1 year following graduation of any respective cohort, whichever is longer. Students are aware that data is only used in research, not shared in any other way for this program's purpose. The Program follows the institution policy on data for future studies and IRB research. Audio/Video recordings are saved for 5 years or 1 year following graduation of any respective cohort, whichever is longer. Students are aware that recordings are used for the purpose of debrief, research, and Standardized Patient/Facilitator learning and evaluation purposes and are not shared in any other manner.

### C. Course Registration

Course registration institution wide process that is completed through the registrar's office. Students attending any skills lab or simulation will have been previously enrolled in their sections and courses. *This is an institutional process*.

### D. Equipment Utilization

*The following "ground rules" are posted in a skill lab spaces for all students, faculty, and staff to follow. The simulation operation specialists are tasked with overseeing the operations, maintenance and function of all simulators, task trainers, and medical equipment housed on-site.*

- NO PENS or MARKERS in the Skill Lab. Pencils only.
- All student belongings are to be placed in lockers.
- Students should only have their nursing tote bags (store away from manikins and beds)
- All cabinets in the skills ward are stocked with disposable items.
- Supply Carts are stocked with syringes, needles and other miscellaneous items.
- SimCarts must be plugged in at the end of your lab session.
- Press the "POWER" button first on hospital beds before operating.
- All medication, IV bags and blood products are Simulated (i.e., fake). They are not to be used on real humans or animals.
- TWO stools need to be in front of every hospital bed.
- All beds and bedside tables shall be placed in the lowest position by the end of your lab session.
- Gloves are always worn when handling manikins and/or task trainers.
- Treat manikins like live patients; leave manikins and spaces clean and tidy.
- No open liquid containers in lab. Sealed tops only. Place on lab bench.
- Do not unplug any monitors or manikin devices unless instructed to do so.
- No food in the skills ward.
- Manikins should only be moved during ambulation training.
- Students are responsible for cleaning up their skills station at the end of lab practice.
- Do not open pill packets, simulate administering pills to manikins.
- Only inject needles into designated IV arms and injection pads on manikins. Empty all fluids out of injection pads at the end of practice.
- Do not throw away medication pills, medication vials, IV bags and/or Blood bags. Refill with sterile water.

## IX. Course Participants

### A. Course Preparation

Students are expected to:

- Complete all assigned pre-class and post-class key elements
- Arrive for class on time

- Contact the course or clinical instructor if they cannot meet class requirements or not able to attend class or simulation

### B. Code of Conduct

The School of Nursing Code of Conduct can be found in the BSN Handbook and using the following link: https://nevadastate.edu/wp-content/uploads/2023/08/BSN-Handbook-2023-2024-Final.pdf

The Nevada State University Student Code of Conduct and Policies can be found at https://nevadastate.edu/policy/current/student-code-of-conduct/

### C. Cell Phone Usage

- The use of cell phones during classes at the simulation program is strictly prohibited unless otherwise indicated by the instructor for educational purposes only
- All public use of cell phones is expected to be conducted in an area outside of the simulation center
- The use of cell phones for the purpose of recording video, audio, or photographs within the simulation program is strictly prohibited.
- **Exception:** *Live simulation recording by Simulation Center Staff from an approved AV system and stored for training, data collection, and educational use only. Third remediation attempts for high stakes skills testing are recorded per the course syllabi and lab policy for review and documentation purposes.*

## X. Scheduling Courses, Simulation Experiences, and Rooms

### A. Approval Process

All simulation events and skill labs are approved by the Director of Lab and Simulation and the Director of Clinical Partnerships in collaboration with the Associate Dean of Nursing. There are four main components to the approval process:

- The course must be approved by designated leadership.
- Does this course meet the training missions of the simulation program?
- How is this course financially supported?
- Can this course be taught by utilizing simulation or components of simulation?

### B. Scheduling Process

- In accordance with the School of Nursing curriculum, designated sections for curriculum-based simulations are pre-determined and mapped out by the Director of Lab and Simulation and the Director of Clinical Partnerships in collaboration with the Simulation Lab Coordinator.
- High-fidelity and standardized participant simulation experiences are scheduled according to the number of student sections in each clinical course.

- Lab courses are scheduled according to the number of sections of students in each lab course, considering students' weekly schedule of theory courses and assigned clinical days.
- For both simulation experience and skill lab courses, events are not to be changed/cancelled by faculty due to adhering pre-determined clinical hours and program outcomes set by the institution and approved by the Nevada State Board of Nursing (NSBN) unless extenuating circumstances dictate otherwise.
- For faculty and student absences see attendance policy.

Room reservations

- Faculty who requires additional space, time and resources from the Simulation center fill out the room reservation QR code. Simulation Lab Coordinator approves or denies room requests within 48-72 hours, based on “first come, first serve” and space availability. Room reservations can be changed and/or canceled at the discretion of the simulation program staff.

### C. Notifications

All faculty and staff receive an official invite from the sim center outlook calendar for all scheduled simulations.

### D. Cancellation policy

All cancellations for simulations and/or lab courses must go through Director of Lab and Simulation and Simulation Lab Coordinator for approval.

***Extenuating circumstances are acceptable for cancellation:***

1. Instructor calls out sick or due to medical/family emergency less than 24 hours of scheduled simulation event
2. AV system failure due to loss of power at facility
3. Severe weather storms that prevent more than half of student, staff or faculty to be present during scheduled simulation event.

### E. Recording of Scheduled events (e.g., calendar structure and information)

The scheduling process is a collaborative effort between the Associate Dean of Nursing, Director of the Program, Simulation Lab Coordinator, and Director of Clinical Affairs, with input from course lead faculty across the curriculum to ensure simulations are not overbooked, and all required clinical hours are met. All faculty, staff, students, and volunteers have been notified via announcement, staff meeting updates, or email to accept all calendar invites coming from simcenter@nevadastate.edu. Once the calendar invite is accepted any event scheduled on the sim center calendar automatically sends a reminder 1 day in advance of the scheduled event. These reminders can be customized to send multiple times (i.e., 1 week ahead and 1 day ahead via email).

### F. Schedule Disputes

Any conflicts within the schedule will be resolved by the Director of Lab and Simulation and Simulation Lab Coordinator in collaboration with the Director of Clinical Partnerships.

### G. Observation for Non-Participants

Simulations and Skill Labs can only be observed if all student participants have previously given consent. Student consent policy is included in the ground rules for all simulation experiences.

## XI. Tours

### A. Requesting a Tour

- All tours are requested and approved by the Director of Lab and Simulation.
  - Nina.marcellus@nevadastate.edu
- In the event the Director of Lab and Simulation is absent, tours are requested and approved by the Simulation Lab Coordinator.
  - Brittney.machin-campos@nevadastate.edu
- All tours must be scheduled at least 72 hours prior to the desired tour date/time.

### B. Tour Requirements

- Tours will only be scheduled if they do not inhibit student learning and adequate staff is available.

### C. Tour Cancellation

- Tours are to be cancelled no later than 24 hours in advance

## XII. Equipment

### A. Standard Program Equipment

NSU provides laboratory skills and simulation equipment that makes learning relevant to current healthcare standards as well as future trends in the clinical setting. Nursing skills lab spaces are outfitted with equipment such as mobile medication dispensers, computers used for teaching, hospital beds, low-fidelity task trainers, mid-, and high-fidelity manikins, a shared classroom space used for theory courses and math reviews. The center holds 38 hospital beds, 1 infant warmer, and 1 infant crib, 18 low-fidelity manikins, 6 mid-fidelity manikins, and 9 total high-fidelity manikins to be used in the simulation environment. Aside from these full-bodied manikins, the center houses 24 of each type of low-fidelity task trainer, to include trainers for necessary bedside nursing skills such as IV insertion, Foley catheter insertion, CVC dressing change, Tracheostomy care, wound care, and ostomy care.

The high-fidelity simulation area uses KB Port AV equipment to facilitate and store data from high fidelity simulation sessions through the program. Working cameras are found throughout the center in the skills ward, testing rooms, simulation debrief rooms, and all simulation scenario rooms. Patient monitors are found at each bedside, totaling 39 (to include the infant monitor in the labor and delivery simulation area). The 3-bay skills ward houses 6 large monitors for delivery of educational content, including video capability to provide countertop demonstrations of various skills using task trainers.

Within each testing room is a hospital bed and the necessary patient monitoring equipment used for health assessment practice. No manikins are housed in these rooms, to provide space for students to practice as patients and as nurses in the healthcare setting. Each simulation debrief room contains 16 movable chairs with attached desktops that swivel. These chairs make the debrief sessions more open and offer a psychologically safe space for students to process simulation scenarios once they have occurred.

In addition to the equipment listed previously, the program utilizes the following instructional equipment skills lab sessions as well as high fidelity simulations:

- Alaris IV pumps (39)
- Reister patient monitors (39) for human use
- Laerdal patient monitors (39) for simulation use
- Sharps containers (39)
- Oxygen/Medical Air/Suction wall connectors (39)
- Vital Sim Pads (24)
- Sim CartRX (medication carts) (16)
- LLEAP Software Laptops (9) for simulation use
- Large screen TV (8)
- KB port computers (6) for simulation use
- Supply carts (4) in skills ward
- Adult Crash Cart (3)
- Pediatric Crash Cart (1)
- High Fidelity Simulation KB Port & A/V Equipment

## B. Inventory

Inventory management is overseen by the Simulation Lab Coordinator. Documents are shared with the SOS team and the Director via a secure OneDrive folder. Changes to spreadsheets/tracking are performed by the Simulation Lab Coordinator. The SOS team notifies the Lab Coordinator of low stock. An algorithm is followed to pre-determine the needs and uses of all consumable supplies for each semester.

## C. Acquisition policy and process

The following process is followed when acquiring supplies, equipment, or simulators:

- Research on supplies, equipment and/or simulators.
- Establish a priority list for materials and equipment based on needs assessment *(this is done at the end of every semester to address the needs for the upcoming semester)*.
- Submit for formalized quote from vendor or create PO with select vendors (i.e., *Medline, Diamedical*)
- Receive finalized quote and review information for any errors and submit back to the vendor for corrections, if applicable.
- Approve final quote for submission of order.
- Supplies/equipment shipped from vendor(s).
- Obtain shipping/tracking information.
- Supplies/equipment delivered to NSU main campus – email sent to shipping handler to notify of incoming deliveries and coordination of delivery established.
- Shipping handler from main campus delivers to NS Simulation Center
- Supplies are inspected and reviewed to ensure that all components have arrived and/or not damaged.
- Packing slips are signed off by staff who unload and unpack supplies and equipment.
- The administrative assistant is notified to pay invoice(s) or receive items.
    - **Note:** Supplies that are under the consumable category (i.e., *gauze, tape, gloves, etc.*) have on the packing slip any updates on backordered items. It is the role of the Lead SOS to follow up with the vendor (i.e., *Medline*) on the estimated time of arrival of backordered items via Medline sales rep. Other arrangements at that time can be made if supplies are not shipped out in time.

## D. Maintenance and care of equipment

The NSU Simulation Center houses 6 storage spaces. Four storage spaces are located in the large skills lab space and house task trainers (i.e., *IV arms, Central Line Dressing Change trainer, Urinary catheter trainer, etc.*) and ambulation equipment. The primary storage space contains all consumable items (i.e., *gloves, alcohol prep pads, IV bags*). The main storage space has three large racks which are moveable along tracks in the floor. Each rack reflects a posted inventory list stating items stocked in each rack. A digital list of the disposable items is kept on file and inventory is tracked at the beginning, middle and end of each semester. The final storage area is designated to hold the high-fidelity manikin cases, along with all simulation props used for our simulations.

The Simulation center has a designated workspace for maintenance of task trainers, repurposing of lightly used medical supplies (i.e., *IV lines, NG tubes, piston syringes*), simulated medication is refilled, and any other required equipment maintenance is performed. Preventative maintenance logs reflect when preventative maintenance is due for equipment and simulators within the simulation center. Preventative maintenance is scheduled annually for all simulators, task trainers, and medical equipment, with the most recent being in April 2024.

### E. Breakage and repair policy (internal and external)

All damages to manikins, simulators, task trainers, and/or equipment gets reported to the simulation staff.

- Simulators, manikins, and task trainers are serviced and repaired by the SOS team and the Simulation Lab Coordinator.
- Simulators requiring software or mechanical repairs will either receive servicing through our Laerdal vendor customer service representative or a Laerdal technician dependent on the issue at hand.

### F. Equipment Loan policy

Only nursing faculty can borrow equipment from the simulation center. Equipment loan requests are approved at the discretion of the Simulation Lab Coordinator and Director of Lab and Simulation and is dependent on type of equipment, availability, and purpose of request. Equipment Loan Form

### G. Off-site equipment utilization

Equipment loaned out to faculty will require prior authorization from the Director of Lab and Simulation or the Simulation Lab Coordinator.

## XIII. Supplies

### A. Acquisition

See Equipment, subsection C for acquisition policy.

### B. Organization

All disposable supplies are in storage room 261. The shelves are all labeled with a directory of locations of each supply item.

### C. Inventory

A master excel sheet tracks the usage of all supplies, aka as the **2021-2025 NSU Capital and Supplies Equipment** list. This Excel workbook is updated at the end of the semester. The Simulation Lab Coordinator tracks inventory three times in a semester. However, part-time Simulation Operation Specialists and volunteers will do bi-

monthly supply usage checks on the 2021-2025 NSU high-usage consumables (also in a excel workbook) and report the updates to the Simulation Lab Coordinator.

### D. Budget Source

The simulation center has a fixed operating budget of $65,000 funded directly from the School of Nursing. Updates on expenses and budget balance are communicated between the Simulation Lab Coordinator and the Administrative Assistant IV from the School of Nursing. Monthly reports on budget balance shared via email.

### E. Usage and Repurposing of supplies

- Students return all testing items back to the simulation staff.
- Testing supplies include anything that is made from plastic or silicone. For example, Foley bag, urine cup, syringe, etc.
    - Testing supplies are sterilized and repackaged. Disposable supplies such as lubricating jelly and/or alcohol swab sticks are replaced in testing kits.
    - Once kits are repurposed, they are stored in the work room.
    - Repurposed kits are used to stock Student nursing tote bags and simulation rooms.

## XIV. Scenarios

### A. Scenario Development

- Clinical faculty, Program Director and Simulation Lab Coordinator have a meeting regarding scenario development. After reviewing the AACN essentials and student data (ATI , the content of the scenario is decided on. For example, if there is a gap in knowledge for students recognizing signs and symptoms of Hypoglycemia, that is the topic selected for the scenario.
- Simulation Lab Coordinator will use pre-developed scenarios from Laerdal cloud as a foundation for scenario development. One to two options are given to faculty to select.
- The Simulation Lab Coordinator and faculty meet to revise pre-developed scenarios to revise and align objectives and outcomes of the program.
- The Simulation Lab Coordinator does all revisions to scenario progressions and patient charts. Revisions are sent to clinical faculty for review.
- Revisions are reviewed and approved by faculty (content experts).
- New scenarios are then piloted with faculty and simulation staff.
- Revisions are done once more if needed based on the needs assessment completed from the pilot scenario.

- After pilot with faculty and sim staff, the new scenario is piloted for three semesters with nursing students before official implementation in the curriculum.

## B. Scenario Structure

- The Simulation Lab Coordinator and clinical faculty use the NLN scenario template to ensure that all information is available for scenario. This includes history, objectives, props, supplies, equipment, etc.
- Laerdal patient chart template – provided through Laerdal Cloud.

## C. Authorship

- Original authorship is credited to appropriate parties. Revision dates and authors are added to all foot notes of scenarios, charts, and patient scripts.

## D. Audio Visual Storage

- All scenarios are labeled with course number, scenario, and clinical faculty.
- Example: 484_Scenario1_Pupo
- Scenarios are stored in secured archiver and destroyed after 5 years.

## E. Utilization of scenarios

- Simulation scenarios are only used for data collection and educational purposes.
- Videos are not shared via any social media platform.
- Videos are not downloaded.
- Simulation scenarios are only used during designated, scheduled courses.

## F. Clinical Quality Assurance

All faculty share feedback after their scheduled simulation day. This feedback specifically asks for any clinical updates that are relevant for the scenario.

**Example:** *Ranitidine was no longer used in the pediatrics clinical setting beginning of 2022. A pediatric scenario still had Ranitidine in the medical record. The scenario was then revised to place Famotidine instead of Ranitidine.*

## G. Debriefing

All simulation scenarios, whether a pilot or part of a course, must include debriefing. Debriefing is facilitated by a trained facilitator who guides discussion using open ended questions to assist the learners in processing the simulation experience. A

debriefing session is typically twice the amount of time of a scenario. For example, if a scenario is 15 minutes long, a debriefing session should be minimum of 30 minutes.

# XV. Operations

## A. Utilization of Simulation Program Staff.

The Director of Lab and Simulation - oversees the daily operations of the skills and simulation center: Includes but not limited to – oversight of the delivery of lab course and simulations within the nursing curriculum, lab content planning, room scheduling, supply requests, oversite of support staff, and lab/SIM faculty mentoring. The Director of Lab and Simulation collaborates with the nursing faculty to ensure that the lab experiences are aligned with the Caring Science Curriculum and the AACN Essentials and to ensure best use of lab facility resources and faculty to support course content delivery.

Simulation Lab Coordinator – trained to facilitate all operations and logistics in simulations that are part of the nursing curriculum. Trained in operation of all manikins, task trainers, medical equipment, and setting up all skill labs for all courses. Additionally, trains incoming simulation operations team members, standardized participants, and oversees inventory management, scheduling, and peer assistants (student workers) in the lab setting.

Simulation Operations Specialists - trained in facilitation of all simulations within the nursing program curriculum. Trained in operation of all manikins, task trainers, medical equipment, and setting up all skill labs for all courses.

IT Support Specialist - cross trained in facilitating simulations; however, primary duties include all software updates, scheduled maintenance of firmware for all computer devices which includes patient monitors, simulators, link boxes, sim pads, and desktops.

Standardized participants/patients - hired and trained to portray specific health diagnosis for live simulation encounters.

Facilitators (facilitator) - hired and trained to facilitate all simulations within the nursing curriculum. Trained in standards of practice in simulation, required to provide documentation of continued education related to healthcare simulation.

Content experts (clinical faculty) - present for scheduled simulation experiences with their respective student sections. Educated on standards of practice in simulation.

## B. Security of Information

- All cameras in the skills lab, testing rooms, debrief rooms, and simulation rooms are on a secured IP address.
- The IP address, username and password is only shared between simulation staff.

- The IP addresses can only be accessed on-site from our secure computer network.
    - Server room can only be accessed by the Director of Lab and Simulation and IT specialist, requiring a MAR lock identification card for entrance.

## C. Simulator Maintenance

- All simulators are on an annual maintenance schedule.
- High fidelity simulators are currently still covered under warranty by manufacturer until 2026 and have had preventative maintenance by the manufacturing team.
- The Simulation Operations team service all low-fidelity manikins and task trainers annually.
- Unless a task trainer or manikin requires immediate repair then a SOS will rectify the situation in that moment and report the damage in the maintenance log.
    1. Maintenance log for all Laerdal manikins (See SOS training resource binder)
    2. Maintenance repair log (all SOS personnel – see SOS training resource binder)

## D. Course Supplies

- All disposable supplies are always available in the skill lab cabinets. This includes gloves, gauze, band-aids, etc. Skill cabinets are restocked at the end of day.
- Additional supplies, equipment, manikins, and or task trainers for skill labs are specified in all teaching plans for 308, 328 and 428. See teaching plans in Section IV *Courses*.

## E. Course Preparation

- Teaching plans are available to the simulation operation team.
- Lab faculty review teaching plans at the end of every semester. All revisions are updated and uploaded on canvas. Lab faculty are responsible for all content of lab courses.
- Lab faculty submit new equipment/supply requests to simulation operations team at the end of the semester.

## F. Course Turnover

- Skill labs are “turned over” at the end of their session by the simulation operations team. Students are expected to leave their stations clean and organized. For example, all students are to leave their hospital beds in the lowest setting, height of bed at 30 degrees, beds made with hospital corners, all manikins. powered down, and all trash thrown away. Orientation on the

ground rules and expectations of the skill lab environment is provided at the beginning of every semester for all students and faculty. Ground rules for the skill lab environment are sent to the students to review before their first day in lab. Skill Lab Ground Rules are posted in each skill lab space for reference.

- The SOS team is responsible for restocking supplies and setting out additional medical equipment or task trainers for the next lab course.

## G. Open Lab

- **Open lab link (Acuity):** https://nssc.as.me/
- All enrolled nursing students have the opportunity to utilize Open Lab.
- *Open Lab is not mandatory.* **Exception:** Lab course absences, or unsuccessful initial psychomotor exam attempt requiring remediation mandates hours spent in the open lab setting. See course syllabus for absence and psychomotor remediation policies.
- Students are expected to register Acuity accounts (*see canvas resources for further instructions*)
- **Any policies or rules concerning Open Lab not followed can result in a Learning Contract or Professional Behavior Deficiency as written below:**
  - I (student) understand that I will be prepared, on time, professional and civil during my time in open lab
  - I (student) will abide by all BEHSC policies and BSN handbook policies while in the open lab setting.
  - I (student) understand per the Skills Lab Ground Rules that I am allotted 3 open lab appointments per week (*appointments are scheduled in 1-hour blocks and must be cancelled if not attending*).
  - If I (student) am more than 15 minutes late to my open lab appointment, I will be considered a "no show". More than one "no show" will result in loss of open lab privileges for one week. More than two "no shows" will result in a learning/behavioral contract. More than three "no shows" will result in a Professional Behavior Deficiency.
  - I (student) understand that PALS are there to check students in and out; they are not there to manage my open lab schedule.
  - I (student) understand that PALS are not there to answer any skills questions and/or teach me. PALS are there to supervise open lab and ensure everyone is working safely.
- **Appointments must be scheduled at least 2 hours in advance.** The system will automatically close to any new sign ups, 2 hours prior to the open lab start time.
- **Appointments can be cancelled or rescheduled 3 hours before open lab start time.** *In an emergency, email the Simulation Lab Coordinator.*
- Appointments cannot be scheduled more than 7 days out.

- A maximum of 16 students are allowed to schedule per on hour time slot. (Example: *16 students in open lab from 3pm-4pm*)
- The expectation is 2-3 students pers skill station. *Sharing is Caring!*
- Students are responsible for scheduling and cancelling their individual open lab appointments.
- Students attending Open Lab must have an appointment.
- ONLY enrolled nursing students allowed in the open lab environment. Visitors and non-nursing students NOT allowed.
- Faculty NOT allowed in the open lab space. *No additional teaching during open lab times*.
- Students not allowed to stay longer in the lab without an already scheduled appointment, regardless of open station availability.
- All students required to leave practice stations tidy and up to lab standards. A member of the PALs team will check stations before students leave.
- Up to three (3) 1-hour appointments allowed per week per enrolled student.
- Students who schedule/attend more than 3 hours will have hours removed either during that week or in a following week.
- Please check into lab READY TO PRACTICE maximizing your open lab time.
- Students are to be in uniform, per the student handbook, with nursing tote bags.
- Personal items need to be locked up in the locker room. Water is permitted but must be stored on the lab bench – away from the manikins.
- Open Lab Hours of Operation: Monday, Wednesday from 4pm –7pm, Tuesday from 12pm –3pm & 4pm – 7pm, Saturday from 8am – 11am & 12pm – 3pm.
- NOTE: Open lab hours may change from semester to semester; students will be updated on revised hours at the beginning of each semester.

## H. After-hours Access

The NSSC building prevents faculty and student access after 9pm daily. At that time, only NSSC simulation staff and necessary CSN facilities have access into the building.

## I. Consent Form

- All students, faculty, staff, SP, and facilitators are required to sign a consent form at the beginning of every simulation.

## J. Video Recording Policy

- All students, faculty, staff, SP, and facilitators are required to sign a video consent form at the beginning of every simulation.
- All volunteers must sign a confidentiality agreement and are prohibited from viewing any video recordings from simulations.

- All videos are stored on the archiver and destroyed after 5 years and are only used for data collection and educational purposes.

### K. Video Distribution Policy

- Videos are not shared off the simulation center policy.
- If videos are required to be reviewed by faculty (for remediation purposes), faculty must come to the simulation center for viewing.

### L. Video Destruction Policy

- All videos are destroyed after 5 years.

## XVI. Course/Simulation Observation

### A. Observation of simulation policy for course participants.

All participants (students and faculty) are to sign the NSSC ground rules for observation of simulation experiences.

### B. Observation policy for non-participants

Volunteers who are applying for the nursing program are not allowed to watch any simulations. Non-participants are to sign our Confidentiality Agreement.

### C. Required disclaimers and pre-event statements.

All learners and faculty are required to watch Simulation Room and Manikin Orientation before their first day of simulation. **The following disclaimers are discussed in the video:** *simulated medications, manikin functions, no pens in the simulation room, proper handling of manikin, how to use all medical equipment in simulation room and skill labs, etc.*

### D. Required event of course acknowledgements.

All students are required to read and sign NSSC Student Policy and Procedures and sign the attestation form at the beginning of every semester. This covers all ground rules in the skill labs. NSSC Student Handbook and Attestation

### E. Course Approval Process

Course approval is done through institutional process and Faculty Senate. Courses approved for nursing must also go through the State Board of Nursing for final approval. Courses and course content must align with the curriculum mapping, including the AACN Essentials.

### F. Mandatory Elements of a course

Curriculum, AACN Essentials Transition - Mandatory elements of a course must align with the predetermined and preapproved curriculum outline, and the program mapping includes AACN Essentials program outcomes, course outcomes, and competencies.

# XVII. Remediation

## A. General remediation policy

The following remediation policy is for all Skill Lab course testing (psychomotor examinations). Simulations are psychologically safe learning opportunities, not used for remediation or high stakes testing.

**Skill Performance Peer-to-Peer Evaluations (75% of grade)—N308**

Skill Performance evaluation for fundamental level lab courses (N308) are considered high-stakes and performed 1:1 with the instructor on record for the initial attempt. If the initial attempt requires remediation per the criteria described in this section, the 2nd (and/or 3rd) attempts will be with faculty as noted in the policy below:

There is a maximum of 50 points possible. To pass the skill, the student must achieve 75% on each individual psychomotor skill. If 75% is not obtained, remediation and a 2nd attempt will be necessary. See pages 25-26 for details on initial, 2nd, and 3rd attempts.

*Faculty will create a schedule for testing for their individual group.*

**Skills Check Offs are scored in SIX distinct domains, as denoted below:**

- Entry & Introduction
- Identification
- Caring Behaviors & Preparation/Education
- Skill
- Time
- Conclusion & Exit

CRITICAL CRITERIA

Critical criteria are items, identified by the clinical faculty, that when performed or not performed would result in patient death and/or injury, criminal or civil risk, negligent care, nursing malpractice, significant patient dissatisfaction, and/or the like. Our greatest wish is your success, and we present these not to instill fear but to ensure you, as a potential future BSN RN, understand the significant risk and responsibility associated with invasive skills.

CHARACTERISTICS OF SUCCESS

**Skills performed by a student and evaluated as "satisfactory" will possess the following characteristics:**

- Situational perception includes full incorporation of care plan and diagnosis in relation to goals and outcomes.
- Exhibits deliberate planning and formulation of routine.

- Utilizes equipment safely and efficiently
- Fully exhibits caring behaviors in addition to psychomotor and cognitive skill
- Performs fully without cues from faculty
- Achieves/addresses all critical criteria

CHARACTERISTICS LEADING TO FAILURE

Skills performed by a student and evaluated as "unsatisfactory" may reflect the following characteristics:

- Limited situational perception (as example, does not modify care plan to mitigate risks associated with skill or does not perform follow-up assessment)
- All aspects of skill are treated separately with equal importance.
- No situational perception (as example, does not know current K+ level or BP when administering furosemide)
- Displays unfamiliarity or inefficiency with equipment.
- Performs with cues from faculty.
- Does not achieve/address all critical criteria.

*A second instructor may be utilized anytime for evaluation at the discretion of laboratory director or instructor. This is on a case-by-case basis.*

UNSUCCESFUL ON 1st ATTEMPT

If a student's performance on the 1st attempt is deemed unsatisfactory (*critical criteria fail or less than 75%*), the instructor will:

- Perform a review of the assessment and provide remediation and opportunities for improvement on the psychomotor remediation form. This will be done at the end of the testing day.
- Email the signed PDF to the student, Student Success Coordinator and Director of Lab and Simulation.
- Arrange for a re-test in one week after continued practice and Skill Practice Lab attendance. The time of the rescheduling of the retest is at the instructor's discretion. If the student passes on the second attempt (without critical failures), they will be awarded points per the rubric
- Note that the lab schedule will continue, regardless of remediations. Remediations will be scheduled around the pre-determined lab practice time.
- *The primary lab instructor is responsible for the re-test before or after lab hours, or the delegation of re-test to an alternate instructor if needed (this is on a case-by-case basis)*

UNSUCCESFUL ON 2nd ATTEMPT

The 2nd attempt will be evaluated by the same section instructor or designated by the Laboratory Director. If a student's performance is deemed unsatisfactory on the 2nd attempt (critical criteria fail or less than 75%), the instructors will:

- Communicate results of the Potential Risk of Course Failure to the Student Success Coordinator and Director of Lab and Simulation. This will be done at the end of the testing day.
- The Laboratory faculty will perform a review of the assessment and provide remediation and opportunities for improvement on the psychomotor remediation form.
- Email the signed forms (in PDF) to the student, Director of Lab and Simulation, Student Success Coordinator and upload as a comment within the drop box in Canvas for that particular skill set.
- Arrange for a re-test in one week after continued practice and Skill Practice Lab attendance. The time of the rescheduling of the retest is at the discretion of the instructors. If the student passes on the 2nd attempt (*without critical failures*), they will be awarded points per the rubric.
- Note that the lab schedule will continue regardless of remediations. Remediations will be scheduled around the pre-determined lab practice time.

3rd ATTEMPT
NOTE: **The 3rd attempt will be audio and video recorded**

The 3rd attempt will be evaluated by TWO (2) clinical faculty designated by the Laboratory Director. *The selected faculty will not have taken part in the evaluation of the skill thus far.*
If a student's performance is deemed unsatisfactory on the 3rd attempt, the instructors will:

- Communicate results to the primary lab instructor, Student Success Coordinator, and Director of Lab and Simulation.
- Perform a review of the assessment and provide remediation and opportunities for future improvement on the psychomotor remediation form.
- Email the signed forms (in PDF format) to the student, Director of Lab and Simulation, Student Success Coordinator, and the Director of Clinical Partnerships
- Upload as a comment within the drop box in Canvas for that particular skill set.
- The Director of Lab and Simulation will notify senior program leadership of the course failure
- If the student passes on the 3rd attempt (*without critical failures*), they will be awarded points per the rubric

*If the student is unable to successfully pass the third attempt satisfactorily, it will constitute a failure of the course.*

*If a student fails twice in the final week of the semester, the instructor will schedule a final attempt before grades are due (i.e., during the designated make-up days for the semester).*

## Skill Performance Peer-to-Peer Evaluations (75% of grade)—N328 and N428

Skill Performance evaluation for upper-level lab courses (N328 and N428) are peer-to-peer for the initial attempt. If the initial attempt requires remediation per the criteria described in this section, the 2nd (and/or 3rd) attempts will be with faculty as noted in the policy below: This is a peer-to-peer evaluation of skills processes. To show competency for the skill, the student must achieve 75% on each individual psychomotor skill as evaluated by a peer during the assigned time. This is an opportunity for student peers to assist each other providing documentation of competencies reached at this level in the BSN program. If 75% is not obtained during peer-to-peer evaluation, remediation, and a 2nd attempt with the instructor on record will be necessary. See below for details on the criteria for competency completion and processes for remediation.

*Faculty will create a schedule for testing for their individual group.*

### Skills Check Offs are scored in SIX distinct domains, as denoted below:

- Entry & Introduction
- Identification
- Caring Behaviors & Preparation/Education
- Skill
- Time
- Conclusion & Exit

### CRITICAL CRITERIA

Critical criteria are items, identified by the clinical faculty, that when performed or not performed would result in patient death and/or injury, criminal or civil risk, negligent care, nursing malpractice, significant patient dissatisfaction, and/or the like. Our greatest wish is your success, and we present these not to instill fear but to ensure you, as a potential future BSN RN, understand the significant risk and responsibility associated with invasive skills. *It is important for all students to be held to a high standard of practice. Holding each other accountable to this high standard is of equal importance in nursing practice.*

### CHARACTERISTICS OF SUCCESS

**Skills performed by a student and evaluated as "satisfactory" will possess the following characteristics:**

- Situational perception includes full incorporation of care plan and diagnosis in relation to goals and outcomes.
- Exhibits deliberate planning and formulation of routine.
- Utilizes equipment safely and efficiently
- Fully exhibits caring behaviors in addition to psychomotor and cognitive skill
- Performs fully without cues from peer evaluator
- Achieves/addresses all critical criteria

## CHARACTERISTICS LEADING TO FAILURE

**Skills performed by a student and evaluated as "unsatisfactory" may reflect the following characteristics:**

- Limited situational perception (as example, does not modify care plan to mitigate risks associated with skill or does not perform follow-up assessment)
- All aspects of skill treated separately with equal importance
- No situational perception (as example, does not know current K+ level or BP when administering furosemide)
- Displays unfamiliarity or inefficiency with equipment
- Performs with cues from peer evaluator
- Does not achieve/address all critical criteria.

## UNSUCCESFUL ON 1st ATTEMPT

If a student's performance (peer-to-peer evaluation) on the 1st attempt is deemed unsatisfactory (*critical criteria fail or less than 75%*), the instructor will:

- Perform a review of the assessment and provide remediation and opportunities for improvement on the psychomotor remediation form. This will be done at the end of the testing day.
- Email the signed PDF to the student, Student Success Coordinator and Director of Lab and Simulation
- Arrange for a re-test in one week after continued practice and Skill Practice Lab attendance. The time of the rescheduling of the retest is at the discretion of the instructor. If the student passes on the second attempt (without critical failures), they will be awarded points per the rubric
- Note that the lab schedule will continue, regardless of remediations. Remediations will be scheduled around the pre-determined lab practice time.
- *The primary lab instructor is responsible for the re-test before or after lab hours, or the delegation of re-test to an alternate instructor if needed (this is on a case-by-case basis)*

## UNSUCCESFUL ON 2nd ATTEMPT

The 2nd attempt will be evaluated by the section instructor on record or designated by the Laboratory Director, if there are extenuating circumstances (*i.e., instructor is absent*). If a student's performance is deemed unsatisfactory on the 2nd attempt (critical criteria fail or less than 75%), the instructors will:

- Communicate results of the Potential Risk of Course Failure to the Student Success Coordinator and Lab Director. This will be done at the end of the testing day.

- The Laboratory faculty will perform a review of the assessment and provide remediation and opportunities for improvement on the psychomotor remediation form.
- Email the signed forms (in PDF) to the student, Lab Director, Student Success Coordinator and upload as a comment within the drop box in Canvas for that particular skill set.
- Arrange for a re-test in one week after continued practice and Skill Practice Lab attendance. The time of the rescheduling of the retest is at the discretion of the instructors. If the student passes on the 2nd attempt (*without critical failures*), they will be awarded points per the rubric.
- Note that the lab schedule will continue regardless of remediations. Remediations will be scheduled around the pre-determined lab practice time.

3rd ATTEMPT
NOTE: **The 3rd attempt will be audio and video recorded**

The 3rd attempt will be evaluated by TWO (2) clinical faculty designated by the Director of Lab and Simulation. *The selected faculty will not have taken part in the evaluation of the skill thus far*.

If a student's performance is deemed unsatisfactory on the 3rd attempt, the instructors will:

- Communicate results to the primary lab instructor, Student Success Coordinator, and Director of Lab and Simulation.
- Perform a review of the assessment and provide remediation and opportunities for future improvement on the psychomotor remediation form.
- Email the signed forms (in PDF format) to the student, Director of Lab and Simulation, Student Success Coordinator, and the Director of Clinical Partnerships
- Upload as a comment within the drop box in Canvas for that skill set.
- The Director of Lab and Simulation will notify senior program leadership of the course failure
- If the student passes on the 3rd attempt (*without critical failures*), they will be awarded points per the rubric

*If the student is unable to successfully pass the third attempt satisfactorily, it will constitute a failure of the course. If a student fails twice in the final week of the semester, the instructor will schedule a final attempt before grades are due (i.e., during the designated make-up days for the semester).*

## B. Documentation

All evaluation documentation is recorded using the rubrics provided in each course and is uploaded to Canvas learning management system.

### C. Ethical Guidelines

Ethical Guidelines follow the institution code of conduct and FERPA guidelines regarding sharing student information and documentation.

### D. Learner Remediation

Learners requiring remediation must meet with the instructor on record to review the skill/content in question 1:1 to ensure understanding of expectations. Students are then required to attend at least 1 hour of open lab to practice the skill in question before retesting.

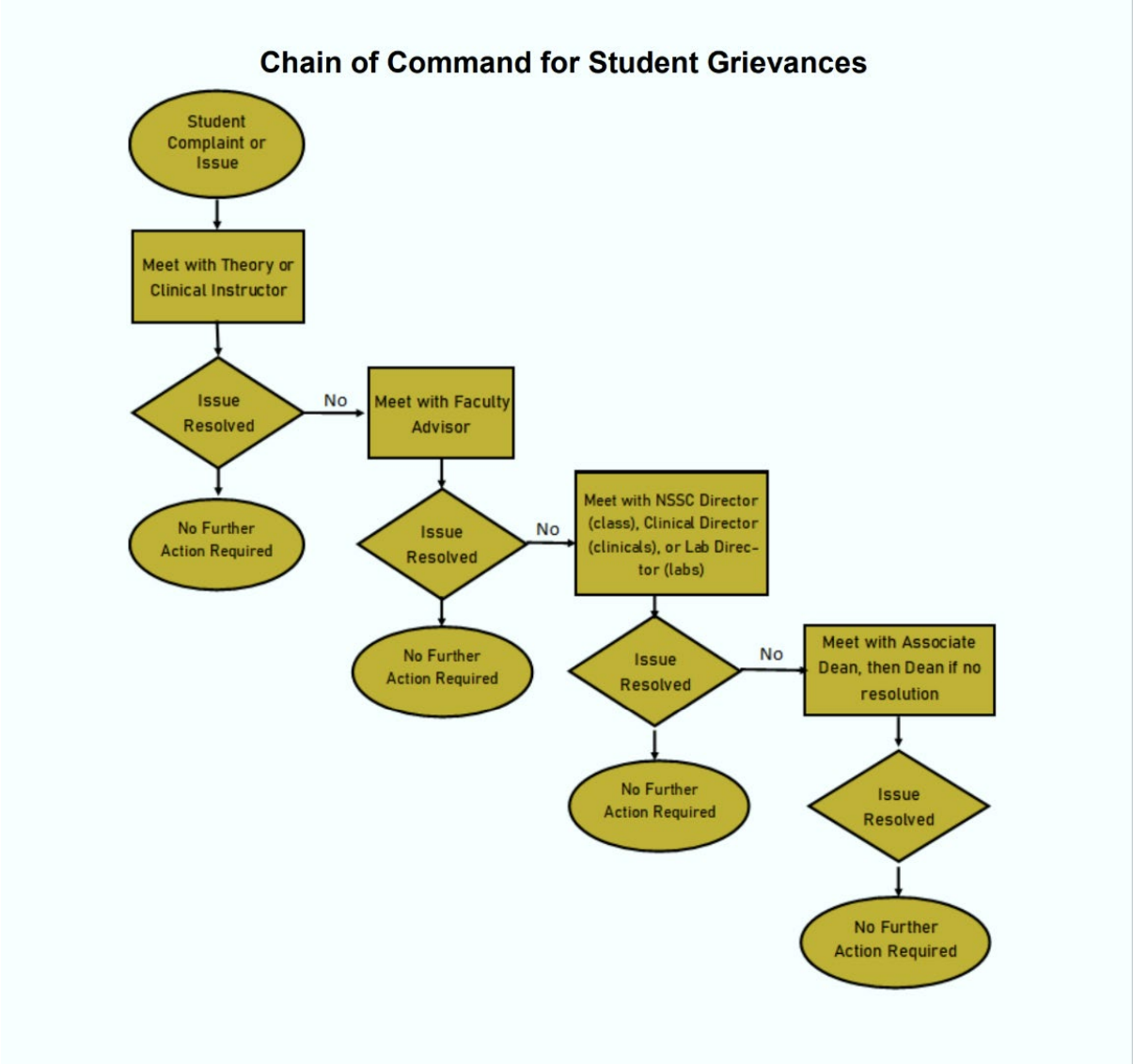
### E. Signage / Scheduling of Remediation

Learners are required to sign an attestation of psychomotor remediation and state their plan for open lab practice. If a skill needs remediation after the 2nd attempt, a learning contract is also completed by the student and instructor. Scheduling for remediation is between the student and instructor and should happen immediately following the initial attempt. Retesting is scheduled at least 1 week after the initial attempt to give the student time to attend open lab practice before testing again. Scheduling for retesting is dependent on the instructor schedule and space availability and is done through the Simulation Operations Team before the instructor confirms testing time with student. The instructor will receive a calendar invite via **simcenter@nevadastate.edu** Outlook calendar to their work email address once scheduling is finalized.

## XVIII. Customer Relations

### A. Dispute Resolution

All disputes from either staff, faculty or students must follow the designated chain of command, as detailed in the student handbook and faculty handbook. The chain of command for student grievances is also found below:




## Academic Student Grievance Policy in the School of Nursing

Academic disputes are expected to be conducted professionally and collegially. Students with an academic dispute must try to resolve it with the involved faculty member. If the dispute is not resolved at this meeting, the student may seek advice from his/her faculty advisor as needed. Additionally, the student may make an appointment with the Director of Nursing Student Success (for concerns related to a theory course), the Director of Clinical Affairs (for concerns related to clinical/community sites), and the Director of the Health Science Lab and Simulation (for concerns related to labs). If the dispute is still not resolved, the student may make an appointment with the Associate Dean. If a resolution is still not reached, the student should schedule a meeting with the Dean of Nursing. If no resolution is reached, the student may submit a formal written complaint to the NSU Office of the

Dean of Students. For all academic grade grievances, including theory and clinical courses, students will use the following NSU Grade Appeal Policy and Procedure:

### B. Marketing of Program

All marketing goes through the Marketing department at Nevada State University.

SON has a sanctioned (preapproved through the University) Facebook page. Simulation center has no affiliation with this Facebook page or oversight.

### C. Policy of Use - Program Name and Institution Branding

**Official name:** Nevada State Simulation Center (*NS Simulation Center, NSSC*)

**Affiliation:** Nevada State University – School of Nursing

**Approved school logo:**

### D. Web Usage

The NS Simulation Center has an outward facing website, on which all information pertaining specifically to the simulation program is found. Website: Nevada State Simulation Center

All information pertaining to the nursing program is through the Nevada State nursing website. Website: School of Nursing - Nevada State University

### E. Information Dissemination

All official SON information is communicated from the leadership level within the nursing department.

All simulation center information is communicated from the Director of Lab and Simulation to faculty and SON leadership.

### F. Official Media Policy

NS Simulation Center adheres to the Nevada State University Media Policy. All approval must go through the marketing department.

## XIX. Travel and Meeting Attendance

### A. Meetings

- Travel funds are available through the schools, departments, and Office of the Provost Seed Grant program. These funds provide for travel by faculty members for the following purposes:

- To attend professional functions and meetings as a means of professional growth and development.
- To conduct research related to scholarly activities.
- To represent Nevada State University outside of the Las Vegas Valley as requested by the institution.

### B. Reimbursement policy

See the campus Travel Manual for details on travel approvals and processing. The faculty should refer to the travel funds procedures for their unit for specific details and availability of funds.

### C. Covered Expenses

For conferences the following are covered for simulation staff: conference registration fee, flight and/or car rental, Lyft/Uber, per diem (flat daily rate) food, and hotel.

### D. Priority scheduling in case of conflict

If an individual is to attend a meeting and a conflict has arisen in the simulation program, the Director of Lab and Simulation will determine if it is a higher priority than the meeting's attendance.

## XX. Research

### A. IRB Policy

- Use of Nevada State University Student Educational Records
  - Nevada State Student Educational Records may be used for Research purposes only when one of the following applies:
  - The records do not include personally identifiable information
  - Nevada State determines that the records will be used by school officials with legitimate educational interest
  - The student (*or the student's parent or guardian, when appropriate*) provides written permission. Written permission must include all of the following:
    - Description of the records to be disclosed
    - Purpose of the disclosure
    - Party or class of parties to whom the disclosure may be made

- Human Subjects Review
  - The study team must describe the use of Student Educational Records in the IRB application and provide the following, if applicable:
  - Documentation that Nevada State has determined that the records will be used by school officials with legitimate educational interest, except for use of Nevada State Student Educational Records under section III below.
  - If the researcher is obtaining written permission from students (or the student's parent or guardian, when appropriate) to access Student Educational Records, the document or mechanism used to secure such permission.
  - The IRB reviewer ensures that all requirements consistent with this policy are met.

- Use of Personally Identifiable Educational Records without Written Permission
    - Nevada State researchers may be considered school officials with legitimate educational interests and may use Student Educational Records of Nevada State students for Research purposes without written permission when the Research is necessary in order for the school official to fulfill a professional responsibility. This includes Research designed to study the effectiveness of an instructional technique, curricula, or classroom management method in a Nevada State course.

# XXI. Safety and Security

## A. Emergencies

- All emergency EXITS are clearly marked throughout the simulation center.
- Evacuation plans and escape routes are posted within the simulation center for all students, staff, and faculty to view.
- The Program follows the institutional policy put forth by the Office of Threat Assessment and Emergency Management and the University Police Services regarding emergency response. An application is available to the University (StateSAFE) for all students, staff, and faculty to receive notification of emergencies on the campus. Students, staff, and faculty are informed that the process to sign up for ENS messaging to receive these notifications is to download the application on their phone/device and/or to send a text message to 79516 to receive all StateSAFE alerts. Once enrolled, text notifications include emergencies and threats as well as other events on campus such as various training events, drills, road closures, and so forth.

## B. Identification Badges and Entry

- All students, faculty, and staff are required to always have official NS scorpion badges on their person.
- NS Scorpion cards give personalized access to all current students, faculty, and staff.
- Each NS Scorpion card has a digital identification number that registers on Marlock badge readers, which allows the center to track personnel entrances.
- In the event an individual does not have a working badge (i.e., vendor, deliveries, observations, meetings, student volunteers, etc.), a video doorbell is available for staff to view the secure entry point and either grant or not grant entry to the individual.

# XXII. Biohazardous Material

## A. Authorization for Use

The simulation center does not have biohazard material on site.

Only sharps are used on the manikins and task trainers on site. All sharps are disposed in sharps containers.

### B. Location

All sharps' containers are in locked wall units next to every hospital bed station in the simulation rooms, skill labs and testing rooms.

### C. Removal

Only simulation staff has keys to unlock sharps container wall units. Wall units are unlocked, sharps containers are removed and locked, and placed in designated biohazard bins for collection. Republic service comes every three months to remove biohazard material off site and disposes all materials.

## XXIII. Standardized Patients

### A. Safe Work Environment

All standards of best practice with Standardized patients are followed and set forth by the *Association of Standardized Patient Educators (ASPE)*.

| | |
|---|---|
| 1.1 Safe work practices | 1.1.1 Ensure safe working conditions in the design of the activity (e.g., number of rotations, number of breaks, physical, cognitive, and psychological challenges in the role portrayal).<br>1.1.2 Anticipate and recognize potential occupational hazards, including threats to SP safety in the environment (e.g., allergenic substances, exposure to sharps, air quality, live defibrillators).<br>1.1.3 Screen SPs to ensure that they are appropriate for the role (e.g., no conflict of interest, no compromising of their psychological or physical safety).<br>1.1.4 Allow SPs to opt out of any given activity if they feel it is not appropriate for them to participate.<br>1.1.5 Brief SPs so they are clear about the guidelines and parameters of a simulation activity.<br>1.1.6 Provide SPs with strategies to mitigate potential adverse effects of role portrayal and prevent physical injury or fatigue.<br>1.1.7 Inform SPs and clients about the criteria and processes for terminating a simulation if they deem it harmful.<br>1.1.8 Structure time and create a process for de-roling and/or debriefing.<br>1.1.9 Monitor for and respond to SPs who have experienced adverse effects from participation in an activity.<br>1.1.10 Provide a process for SPs and clients to report adverse effects from participation in an SP activity (e.g., documentation and action steps to resolve the situation). |

| | |
|---|---|
| | 1.1.11 Support SPs who act in accordance with delineated program expectations if a complaint is made about them.<br>1.1.12 Manage client expectations of an SP's possibilities and limitations.<br>1.1.13 Work with clients to clearly define the expected scope of SP involvement in work assignments. |
| 1.2 Confidentiality | 1.2.1 Understand the specific principles of confidentiality that apply to all aspects of each simulation event.<br>1.2.2 Ensure that SPs understand and maintain the principles of confidentiality related to specific simulation events.<br>1.2.3 Protect the privacy of the personal information of all stakeholders, including that which may be revealed within a simulation activity. |
| 1.3 Respect | 1.3.1 Respect SPs' self-identified boundaries (e.g., modesty, limits to physical touch, impact on person).<br>1.3.2 Provide SPs with adequate information so that they can make informed decisions about participation in work assignments.<br>1.3.3 Ensure that SPs understand if and how they are being compensated before accepting work (e.g., may include payment for training and work time, travel expenses, food vouchers, gift cards). |

LINK: The Association of Standardized Patient Educators (ASPE) Standards of Best Practice (SOBP) | Advances in Simulation | Full Text (biomedcentral.com)

## B. Case Development

All standards of best practices set forth by the ASPE are followed for case development:

| Principle | Practice |
|---|---|
| 2.1 Preparation | 2.1.1 Ensure that cases align with measurable learning objectives. (See INACSL Standard: Outcomes and Objectives.)<br>2.1.2 Identify and engage relevant subject matter experts to assist in the creation of materials.<br>2.1.3 Ensure that cases are based on authentic problems and respect the individuals represented in a case to avoid bias or stereotyping marginalized populations.<br>2.1.4 Ensure that case development process allows sufficient time to draft, review, and edit case materials prior to implementation.<br>2.1.5 Ensure that changes arising from dry-runs or other piloting processes are addressed prior to implementation of the case. |

| Principle | Practice |
|---|---|
| 2.2 Case components | Ensure case components include the following when appropriate:<br>2.2.1 Clear goals and objectives that can be assessed.<br>2.2.2 Goals and objectives that specify the intended level of learners.<br>2.2.3 Simulation design that meets the purpose.<br>2.2.4 Simulation design that is repeatable.<br>2.2.5 Information for SPs (e.g., situation and backstory, history, affect and demeanor, signs and symptoms to simulate, cues).<br>2.2.6 Training resources (e.g., props, moulage, videos, task trainer).<br>2.2.7 Case-specific feedback or debriefing guidelines.<br>2.2.8 Briefing instructions, time frames, instructions to learners.<br>2.2.9 Evaluation instruments and performance measures (e.g., checklists and rating scales, participant and facilitator evaluations).<br>2.2.10 Training protocols for raters (SP or other).<br>2.2.11 Data for managing the documents and recruiting SPs (e.g., author information, date of development, patient demographics, body type criteria). |

## C. Standardized Patient Training

Standardized Patient (SP) training adheres to standards set forth by ASPE. SP training prepares SPs to portray roles, give feedback, and complete assessment instruments. These three areas are discrete skills but are not mutually exclusive. It is the responsibility of the SP educator to integrate the development of these skills into SP training according to the learning objectives of the activity and the experience of the SP. Training can be done in many formats (e.g., face-to-face, online, blended).

The context in which SPs work determines the degree of standardization (consistency and accuracy) of their behavior, both within an individual SP's performance and between SPs portraying the same role. SP educators apply the same training principles when preparing all simulated participants, including SPs, confederates, and others for all simulation modalities (e.g., hybrid, mixed modality).

## D. Program Management

The program follows standards set forth by the Association of SP Educators (ASPE):

| Principle | Practice |
|---|---|
| 4.1 Purpose | 4.1.1 Articulate a mission statement for the program. |

| Principle | Practice |
|---|---|
| | 4.1.2 Develop program goals.<br>4.1.3 Identify measurable objectives for each goal (where appropriate). |
| 4.2 Expertise | 4.2.1 Possess depth of knowledge in SP methodology.<br>4.2.2 Advocate for the integration of SP methodology into the curriculum where appropriate.<br>4.2.3 Identify when SPs should be incorporated into a simulation activity.<br>4.2.4 Collaborate with subject matter experts to design SP cases, training, and assessment materials.<br>4.2.5 Train SPs according to scenario or project parameters. |
| 4.3 Policies and procedures | 4.3.1 Develop and document policies to guide program activities.<br>4.3.2 Develop and document policies that take into consideration disability access and inclusion.<br>4.3.3 Develop and document business processes and procedures, including but not limited to creating financial management, business, and strategic plans.<br>4.3.4 Ensure policies and procedures are kept current and accessible.<br>4.3.5 Distribute policies and procedures to relevant stakeholders. |
| 4.4 Records management | 4.4.1 Collaborate with subject matter experts to develop a system for reporting learner performance to stakeholders (e.g., learners, curriculum developers, faculty, administration).<br>4.4.2 Ensure that policies are in place for case sharing and archiving.<br>4.4.3 Develop and document methods for securely storing, archiving, and destroying confidential data (e.g., SP records, learner data, video data, consent forms, release forms). |
| 4.5 Team management | 4.5.1 Consult with legal, financial, and human resources experts to ensure that status of SPs (e.g.. employee, independent contractor, volunteer) and compensation structure (if applicable) comply with institutional requirements.<br>4.5.2 Develop processes to identify, screen, interview, select, debrief, and maintain SPs and staff.<br>4.5.3 Recruit and maintain a cohort of SPs that reflects the diversity of the people they represent in simulation activities.<br>4.5.4 Establish policies and procedures for the psychological, physical, and environmental safety of SPs, learners, staff, and faculty. (See the "Domain 1: safe work practices" section.)<br>4.5.5 Advocate for ongoing professional development opportunities for all staff, including SPs. |

| Principle | Practice |
|---|---|
| 4.6 Quality management | 4.6.1 Gather data regularly to assess the alignment of program activities with legislated, institutional, and program policies and procedures.<br>4.6.2 Gather feedback regularly from SPs, learners, faculty, and other users regarding the quality of services provided by the program.<br>4.6.3 Analyze data and other feedback in a timely manner.<br>4.6.4 Implement changes for continuous improvement.<br>4.6.5 Inform stakeholders of changes made based on their feedback. |

## E. Professional Development

Professional Development for SPs is set forth and followed by ASPE standards:

| Principle | Practice |
|---|---|
| 5.1 Career development | 5.1.1 Develop and promote expertise in knowledge, skills, and attitudes related to SP-based simulation.<br>5.1.2 Develop and promote expertise in theories, principles, and processes of education and assessment relevant to the context of one's practice (e.g., medical education, nursing education, legal, and law enforcement training).<br>5.1.3 Maintain membership in professional simulation societies (e.g., ASPE, ASPiH, INACSL, SESAM, SSH).<br>5.1.4 Engage in educational opportunities (e.g., professional conferences, courses, degree programs, certifications).<br>5.1.5 Develop personal management skills (e.g., time management, wellness strategies, career planning).<br>5.1.6 Seek out opportunities for career mentoring. |
| 5.2 Scholarship | 5.2.1 Develop an understanding of the range of opportunities for scholarship in SP methodology.<br>5.2.2 Identify and/or develop new contexts for SP methodology.<br>5.2.3 Contribute to the evolution of best practices through innovation, research, and dissemination of emerging methods in various venues e.g., publications, presentations). |
| 5.3 Leadership | 5.3.1 Promote understanding and development of SP methodology locally, nationally, and internationally.<br>5.3.2 Mentor and support SPs and other SP educators within one's institution and within the community of practice.<br>5.3.3 Seek out and advocate for growth of leadership skills (e.g., collaboration, team building, change management, interpersonal effectiveness, conflict resolution). |

### F. Evaluation

All SPs are evaluated annually by the Simulation Lab Coordinator through the SP annual evaluation form. The annual evaluation form is shared with the SPs prior to their evaluation so they may review the evaluation criteria. The Simulation Lab Coordinator will review the evaluations and provide them to the Director of Lab and Simulation for tracking.

## XXIV. Simulated Medical Equipment and Supplies

### A. Loan Policy

Supplies and equipment used outside of the simulation center will be signed out using the NS Simulation Center Loan form for educational uses only. Supplies and equipment will not be used in any clinical or in-situ environments.

### B. Labeling policy (Separation of equipment for human and non-human use)

All simulation equipment and supplies are labeled appropriately with “not for human use” or “for simulation educational use only” stickers.

## XXV. References:

American Nurses Association. (2015). Code of ethics for nurses with interpretive statements. Silver Spring, MD: Nursesbooks.org Retrieved from https://www.nursingworld.org/practicepolicy/nursing-excellence/ethics/code-of-ethics-for-nurses/coe-view-only/

Berman, A., & Snyder, S. (2012). Fundamentals of nursing. Upper Saddle River, NJ: Pearson Education, Inc.

Clark, C. M., & Springer, P. J. (2010). Academic nurse leaders’ role in fostering a culture of civility in nursing education. Journal of Nursing Education, 49(6), 319-325.

Lewis, K.L., Bohnert, C.A., Gammon, W.L. *et al.* The Association of Standardized Patient Educators (ASPE) Standards of Best Practice (SOBP). *Adv Simul* **2**, 10 (2017). https://doi.org/10.1186/s41077-017-0043-4