2.3.2 – Institution facilitates the use of Clinical Skills
Laboratory/ Simulation Based Learning



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POLICY DOCUMENT

LIST OF CLINICAL SKILL MODELS: -

- ✓ Adult manikins-03(male-1, female -1, unisex-1)
- ✓ Newborn dummy
- ✓ Growth and development model
- ✓ Labour dummy.
- ✓ Episiotomy suturing model.
- ✓ IUD insertion model.
- ✓ I V. Infusion model.
- ✓ ET intubation model.
- ✓ Sanitary latrine.
- Sanitary well.
- ✓ Mechanism of labour.
- ✓ Female Pelvis
- ✓ Fatal Skull
- ✓ Newborn Dummy with Cord

ADVANCED MODELS: -

- ✓ Adult CPR with feedback
- ✓ Paediatric CPR with feed back

Aim of skill lab is to provide safe learning experience for the students and make the students clinical experience educational that promotes successful understanding in all aspects of health care with the best interest of student. Simulation and case scenarios are designs to help them develop problem-solving and decision-making skills. In situ simulation to help in learning at work place itself will be conducted.

Faculty will provide students with positive feedback and debriefing of their performance. while students will self-analyse their performance and use critical thinking during the reflection process. Student feedback will be taken to enhance teaching. The simulation lab environment allows student to participate in life-like situations. Simulation will be used as a teaching method to help assess a student's skill acquisition. It will help in developing critical thinking, clinical reasoning and clinical judgement skills there by increasing the probability that those skills will be used in the real-world setting. PANDUR

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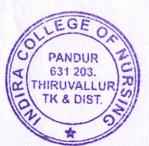
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- All students and faculty will adhere to the simulation centre rules.
- Manikins are to be used with respect and treated as if they were love patients.
- The simulation lab is a learning environment. Students involved in simulated scenarios should have everyone's the respect and attention.
- Situations simulated in the lab are to be used as a learning tool and no discussion of the actions
 of fellow students should take place outside of the lab.
- A debriefing session will be provided for all simulation experience. After the debriefing session, the student should fill out a feedback form to give them the opportunity to reflect on the situation and to provide constructive criticism for further enhancement of the simulation.

The debriefing session will be given importance. It involves the immediate feedback and a reflective critical thinking analysis and communication tool for participants of the simulation exercise. Debriefing assessment is a post training, active evaluation process driven by instructors and peers. The focus of the debriefing will be on positive aspects and should allow the students to answer critical thinking question.

Course conducted:

- ✓ BLS
- ✓ ACLS
- ✓ Mechanical ventilations & O2 therapy
- ✓ IV cannulation
- ✓ Bladder catheterisation
- ✓ Suturing
- ✓ Normal delivery module
- ✓ Basic trauma care & fracture management



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- BLS & ACLS course are conducted in AHA standard certificate and a provider card valid for 2
 days is given to the trainee after successfully completing the course, clearing the written and
 practical examination. Remedy, re-test & retraining are conducted if needed.
- Certificate are issued on successful completion of course.

GENERAL INSTRUCTION:

All users of the centre space must behave in a manner that does not disturb the academic activities occurring in the lab

- 1. No lab user shall infringe upon the privacy, rights, privileges, health, or safety of other labs users.
- 2. All faculty, staff and students must know the orientation prior to using the equipment.
- 3. No eating or drinking is allowed in the lab.
- 4. Use of the computers is restricted to assigned classroom work and not for personal use.
- 5. Do not use the equipment for any purpose other than specified; anyone who fails to comply with this request will be asked to leave the centre.
- 6. Any equipment malfunction or abuse must be reported to the lab coordinator immediately.
- 7. Adherence to the dress code is expected.
- 8. Linens should be properly placed back on the manikin after each use as if caring for a real patient.
- 9. Do not remove the manikin from the bed unless instructed to do so.
- 10. All electronics including cell phones, cameras, camera phones, and video recorders are prohibited during simulations.
- 11. All manikins and other equipment will be kept nearly and in order after use.
- 12. The skill lab technician will verify and keep necessary manikin and equipment ready.
- 13. In situ simulations will be discussed a day prior to the training. The necessary permission to conduct in situ simulation will be obtained by the skill lab technician from the hospital authorities.

14. Maintenance and service of the manikins and equipment, training conducted and plans for upcoming training will all be documented in 203 given format.

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- 15. Meetings of all the coordinators will be conducted every month, presided by the Medical Director and Principal to discuss the progress, further training, encouraging Research activity and Revenue generation to help those activities.
- 16. All students and faculty wanting to use the lab must have proper orientation to the equipment. The doors of the lab will be locked at all times. Any student wishing to use the lab must notify the skill lab coordinator and sign in on the attendance book, when working with the manikins, students must be careful and wear gloves, equipment must not be taken out of the lab unless requested by an instructor.
- 17. All centre users and visitors are to wear their identification batch when at the centre. All centre user and visitor or to store their personal belonging in the locker room upon arrival. Users are reminded to bring their own locks.
- 18. The centre cannot be held responsible for any personal item left un attendant in any of the conference or team training facilities.
- 19. Centre uses including learners, instructor and standardized patient, are expected to be punctual for learning sessions.
- 20. The centre is used for examination purpose, it is imperative that users remind in the space designated for their session. Access to the staff lounge is limited to centre staff, instructor and faculty.
- 21. Food and drink are not permitted in the simulation team training room task trainer room, computer room.
- 22. Unauthorised photography is not permitted in the centre.

Equipment maintenance

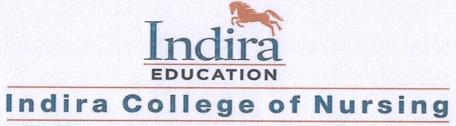
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1. The manikins and the task trainers in the skill lab or to be cleaned with mild soap and water and then rinsed and air dried after use. These Manikins are also to be left in the bed. All injection manichen & catheterization need to be squeezed of any fluid and left to dry. Any spray used for lubrication of the manikins need to be used sparingly. Spares for manikin have to be used according to the manufacturer's instruction.

AMC for Manikins and equipment to be maintained servicing done according to institutions protocol.

3. After the class lab needs to be locked with the lights turned off after the manikins and other equipment are correctly kept in their places a DIST.

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Plan to conduct training

- 1. Faculty will review the scenarios thoroughly prior to class and work with lab coordinator to obtain props and equipment. Faculty must schedule time with the lab co-ordinate a week prior to conducting any training. Practicing scenarios is very important prior to presenting because it allows the instructor's time to become familiar with the equipment being used, the scenario itself, learning objects, and any discussion questions for debriefing. It also helps in scheduling different departmental session effectively without overlapping.
- 2. Training schedules for the years preferably, if not at least for a 3 months period should be sent to skill lab coordinator in advance for smooth functioning
- 3. In situ simulations to be planned at least a week in advance and all participants to be familiar with thoroughly.
- 4. Checklist and agendas to be kept for all programs.
- 5. Participants in simulated scenarios need follow all standard precautions and transmission specific precautions (contact, droplet, airborne). Gloves will be worn with all manikin interactions and should be disposal of in non-biohazard trash cans
- 6. Those with a known sensitivity/allergy to latex need to inform lab coordinator. Every effort will be made to replace equipment with latex-free substitutions.
- Attendance, feedback, program conducted dates all to be documented and maintained in hard copy.
- 8. BLS /ACLS provider cards issued documentation to be maintained correctly, easily, retrievable.
- 9. Complaints or suggestion are received through emails, letter, and session evaluation. Issues submitted in writing, as well as in-person complaints, are discussed at the monthly coordinators meeting. If the complaints pertain to a specific course, the complaints would be shared directly with that course director.
- 10. Ways to improves and streamline the skills lab training will be looked in to continuously. Learners and instructor feedback provides the best mean to identify area of opportunity and potential environment, to better suit student needs. Specially faculty meeting will be conducted to review and discuss current practice and receive feedback to improve.
- 11. Course will be created by the centre-after discussing with the various department heads, curriculum committee and other faculty.
- 12. Research facilities as needed will be provided to students as per the need.

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13. Well designed and implemented research is an essential part of the centre's vision. Faculty & students who wish to do simulation research will be provided with the needed help. All publication involving the use of the clinical simulation centre resource must acknowledge the clinical simulation centre and /or include participating centre staff and director as contributing authors appropriate.

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- 14. Injuries, if any shall be reported to centre faculty/instructor/staff. Any damaged, or potentially dangerous equipment is to be reported to the centre staff.
- 15. Hand washing are use of hand sanitizers shall be part of practice in the centre when at all possible based on the physical layout of the space.

Training for instructors

- 1. Simulation instructors are required to attend at least one continuing education event per year focused on some aspect of simulation-based education, by participating in centre sponsored courses as well as in external events at other centres.
- 2. Work-shop for clinical educators and faculty who use, or plan to use, simulation based educational efforts such as in-situ simulations, procedural and team training is also being planned to be conducted once a year, using lectures, demonstrations and interactive exercises, we will introduce participants to the basic techniques, types of simulation, available equipment, audio visual aids, logistics, challenges of simulation, and debriefing.
- 3. Learners' evaluation of the instructor, staff, equipment, and facilities will also be taken and analysed so that improvements can be made based on the feedback.
- 4. The concept is to create a safe learning and constructive debriefing environment for the participant. So strict confidentiality of what transpires on both a clinical and interpersonal level throughout the exercise will be maintained.
- 5. Always pre briefing will be done prior to a course, so that participants understand the process.

Supply and maintenance of equipment

- Proper labelling and maintenance of supplies and equipment is required for safe use and handling.
- 2. Appropriate maintenance of equipment, timely repair, and services will be ensured for the longevity of the centre's equipment, the centres have to purchase the longest and highest level of warranty on all its simulation purchases to ensure that the maximum number of repairs and service is included. In addition to noting the date of purchase, serial number and simulator vendor at the time of purchase, the centre also to record the date of warranty expiration for all equipment, whether annual service checks are included, and the service check due date.
- 3. The centre incorporates the cost of warranty renewal in its annual operational budget.
- 4. When there is an issue with a piece of equipment, the simulation technician will alert the director, attempt to service and when possible, resolve the situation in himself. If this is not possible, he will contact the vendor and determine the next step. That may include guidance by phone as additional troubleshooting in attempted return of the equipment by mail to the vendor for repair or an onsite visit by the vendor.

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- 5. For those pieces of simulation equipment covered under warranty agreements that i nclude annual services checks, the simulation technician will contact the vendor several months prior to that date to schedule an onsite site visit.
- 6. The simulation technician is also responsible for day- to-day service and care of all simulation equipment. He will clean, refill fluids, make basic repairs and replace disposable parts as needed. He will be aware of the current maintenance status of all equipment in the centre and will maintain a log of all requests, repairs and preventative maintenance work conducted.

MAINTENANCE OF MANIKINS AND EQUIPMENT AFTER EACH USE:

- Wipe down all manikins and skills trainers to remove all adhesives, moulage and markings.
- Drain all fluids and the flush tubing system. Top of all fluids as needed.
- Clean disinfectant all American Heart Association course materials (mask, valve) in conjunction with AHA guidelines.
- Assess all task trainers, manikins and medical equipment for obvious damage, leaks, necessary part replacements, and cleanliness. If not in use or scheduled to be used, once wiped, drained and dried, store inappropriate area.
- Check supplies of sheets, replace as needed. Change dirty or wet linen.
- Set aside course disposables to be inventoried by senior tech. Once inventoried, unused disposables should be returned to storage.
- Power off simulators, PCs.

WEEKLY:

- Clean and inspect all equipment.
- Calibrate sensors and monitors if any
- Turn on and test all electronic devices, check/ replace batteries as needed.
- Drain all fluids and the flush tubing system. Top off all fluids as needed. Add antifungal agent as needed. Change dirty/wet linen and clothing.

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MONTHLY:

- Inspect (and if needed replace) all disposable parts.
- Assess for wear and tear that might need major work or factory service.

Professional behaviour is expected at all times in the simulation centre and users are expected to abide by Medical Code of Conduct.

Bi Annual meeting of the Hospital Director, Principal, Skill lab Director, and co-ordinators will be conducted to discuss financial planning, procurement of new equipment needed, faculty training, student training schedules and Revenue generation, it will then be presented for budget allocation.

SKILL LAB TRAINING MANIKINS (BASIC & ADVANCED)

1	Whole body CPR manikin	2
2	Tracheal intubation models	2
3	Adult BLS manikins with Q CPR	5
4	Defibrillator / scenario trainers	2
5	Bladder catheterization models	11
6	Normal delivery manikin	3
7	IV Cannulation trainer	36
8	IM injection trainer	20
9	Breast examination model	2
10	Suturing leg trainer	10
11	Paediatric BLS manikins	5
12	Neonatal resuscitation manikin	1
13	AED trainers	2
14	ECG rhythm generator	1
15	Genitourinary model (unisex)	2
16	Neonate FB obstruction	1

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