In Situ Simulation: A Model for Department-Wide Training and Improvement of **Patient Care**

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Introduction

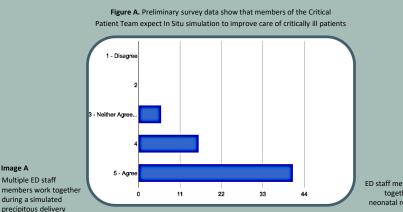
- In Situ simulation models are designed for safely practicing rare, high-risk clinical scenarios in the actual environment where healthcare providers perform.
- In Situ simulation obstacles include: technical issues, logistics, cultural barriers, and medico-legal issues.1-2
- Benefits include: identifying resource deficiencies, equipment malfunctions, and clinical knowledge gaps.³
- Our institution identified a need for improved critical patient care due to the closure of a local Level 2 Trauma Center.
- We have developed an In Situ Simulation model that is easily integrated into the Emergency Department (ED) and has increased staff commitment to simulation and improved patient care.

Objective

The object of this preliminary study was to assess the commitment of ED team members to In Situ training meant to improve communication, role delineation, patient care, and respect among all members.

Methods

- Prospective, interventional, survey-based study
- Community-based hospital setting
- IRB exemption obtained
- Preliminary surveys were conducted prior to In Situ simulation
- Surveys will be conducted after all In Situ simulations completed
- Participants include:
 - Emergency Medicine attendings
 - Residents
 - Paramedics
 - Nurses



In Situ Simulation



Image B ED staff members work together during a neonatal resuscitation

Results

- Preliminary surveys indicate that staff anticipates improvement in:
 - Communication
 - Confidence in charting
 - Patient care
 - Respect for team members' roles
- At the conclusion of this study we will be able to assess whether pre-simulation commitment translated into actual improvements in ED management including:
 - Patient outcomes
 - Patient throughput

Discussion

- We hypothesize this In Situ model will improve:
 - Communication
 - Role delineation
 - Respect among ED staff
- With the trend to consolidate healthcare facilities, other emergency departments will soon find a need for improving the care of critically ill patients.

References

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Acknowledgements

We would like to thank the entire emergency department staff as well as the Doctors Hospital Simulation team for their full commitment and help implementing this innovative educational

