# Instructor simulation guidance

Simulation teaching station outline

Each candidate group will rotate around simulation stations. In each room, the faculty and an actor will run through a single simulation in a 30 minute period with approximately 15 minutes for the simulation and 15 minutes for debrief and feedback.

Simulations will run in real time with realistic team roles and time for a human factors debrief. A clear focus and learning outcomes are provided for each simulation as well as faculty guidance to assist in achieving the specified objectives.

Actors

Each of the simulations contains an actor briefing. The actors should be given the full simulation notes to provide background for their preparation, but should be guided to focus on the actor briefing. Faculty should meet with the actors prior to the station to ensure that they clarify the key features for a particular simulation and answer any questions that the actor may have.

Running simulations with teams and ‘own’ job roles

In order to make simulations relevant to candidates’ day to day work, ensure that they play the role as they would their own – to achieve this you may need to adjust the role of the clinician; the ‘place’ of the assessment and the scope of any intervention. **Candidates may wish to extend themselves and practise beyond their current role and there is flexibility for the faculty to respond to this as felt appropriate.** Although it is critical that the identified candidate leads the activity and their initial team member assists them, other members of the group should be involved as part of the team and should perform their role as competent team members. Their performance at this point is continuously assessed.

In each group, aim to ensure that everyone plays initial team member, arriving team member and observer.

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| **Candidate ‘observers’:** "Give guidance of key areas of leader and member performance including preparation, APEx **ABCD**, **AEIO** and the **U**nified assessment, the focused well-phrased history and physical assessment and the focused conversational psychosocial assessment. Also cover what is expected in terms of human factor issues, and communication including SBAR handovers. |

During the course, each candidate is allocated two simulations where they will take the initial lead role. In this role, they will:

1. Commence and complete the APEx Primary and Secondary Assessments:
   1. ***If they would not normally complete a physical assessment as part of their job role and they do not wish to extend themselves:*** they can invite a colleague who is competent at physical assessment to assist them as a member of their team **– instructors should ensure that this person provides assistance in this area, but does not take over the lead role in the simulation.**
   2. ***If they would normally complete physical assessments or they wish to extend themselves:*** they will complete the full APEx Primary and Secondary Assessments.

They will achieve the grade of ‘meets’ if:

* In their job role, they would not be expected to complete a physical assessment and are successful in leading the APEx primary and secondary mental health assessments and requesting and responding to the physical assessments by their nominated colleague. They should also demonstrate the qualities described for a team leader in the assessment matrix

OR

* In their job role, they are expected to complete physical assessments and they successfully complete all of the steps in the APEx primary and secondary assessments. They should also demonstrate the qualities described for a team leader in the assessment matrix

Other team members may be asked to participate in the simulation if required. All candidates in the group who are members of the team will be allocated a grade at the end of each simulation. Those who have not led during a simulation will be allocated a grade based on their effectiveness as team members as described in the assessment matrix.

Teaching with continuous assessment:

The simulations have a **teaching with continuous assessment** focus and, therefore, **it is acceptable to prompt and remind** during the simulation. A need to do this frequently would suggest a weaker candidate who needs further support. However, the candidate still needs to demonstrate that they can achieve the key treatment points autonomously.

To reinforce the fact that they are teaching simulations, candidates can take a ‘time-out’ by saying ‘PAUSE’ if they want to work through an issue with the faculty or their team (of fellow candidates). During this ‘PAUSE’ phase faculty are able to assess if the candidate is approaching the assessment logically according to the structured approach.

Debrief structure

Using the learning conversation, the debrief should cover both the technical and non-technical elements of the simulation.

The debrief will be for the team as a whole. Ensure that both technical skills and non-technical skills are fully debriefed. Encourage all team members to identify and discuss learning points. This should help candidates to explore issues of concern in this or previous simulations and contribute to their ongoing development. Some or all of the following themes may feature:

* Technical skills in an **ABCD**, **AEIO** **U**nified Assessment format and guided by the KTPs; in particular safety of the staff, the patient and others.
* Non-technical skills, including qualities of team membership and leadership:

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| --- | --- |
| Team members | * Clear communication * Respect * Flexibility * Assertiveness * Ability to listen |
| Team leaders | All of the above, plus   * Full overview of all aspects associated with patient and team * Prioritises according to KTPs * Summarises and re-evaluates |

* Feedback on environment, where necessary

At the end of the debrief, give the opportunity for candidates to ask questions, answer these and then summarise the key points.

Continuous assessment and outcomes

Continuous assessment is, at its heart, a formative process designed to feed into future performance. It is best thought of as a process of repeatedly comparing learners’ performance against specific criteria for the achievement of, for example, a skill or a simulation. Instead of a terminal examination (i.e. on the last day of the course), learners are given the opportunity to demonstrate competence throughout the course, for example, during a workshop station or during simulations.

Performance is then repeatedly observed during the remainder of the course, for example during further simulations and any deterioration in competency should be highlighted and remediated.

During the station you will be assessing each candidate who was a team leader or member on ***technical skills*** according to the KTPs and ***non-technical skills*** according to their role with the following possible outcomes:

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| Grade | Provider: in simulations  Key Treatment Points will be used to guide the expected level |
| Exceeds course expectations | Candidate’s performance exceeds the expected level for a provider (see above) |
| Meets course expectations | Candidate’s performance is at the expected level for a provider (see above) |
| Below course expectations | Candidate has not yet demonstrated the expected level for a provider (see above) and they require further support to reach the expected standard.  Further observation or practice should occur to ensure that the faculty is satisfied that the expected standard has been reached. If a candidate does not meet expectations in a simulation station, but they then meet expectations in subsequent simulations, then this can be considered remediated. |
| Serious concern | Red flag score where there are real concerns about a candidate’s performance.  This should be referred to the course director immediately after the station. The course director should then observe that candidate’s performance on the following stations and assess if this is an ongoing concern or whether they have observed an improvement in performance such that the candidate is safe. |
| DNA | Did not attend |

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| **Grade** | **Provider: simulation stations with continuous assessment: non-technical skills** See guidance above for scoring technical skills |
| Exceeds course expectations | Candidate’s performance exceeds the expected level for a team leader or team member (according to their designated role on the station) |
| Meets course expectations | Candidate’s performance is at the expected level for a team leader or team member (according to their designated role on the station) and shows the following qualities:  **Team leader** (in addition to those qualities listed under member):   * Full overview of all aspects associated with patient and team * Prioritises according to KTPs * Summarises and re-evaluates   **Team member**:   * Clear communication * Respect * Flexibility * Assertiveness * Ability to listen |
| Below course expectations | Candidate’s performance is not at the expected level outlined above and they require further support to reach the expected standard. Further practice may be required to ensure that the faculty are satisfied that the expected standard has been reached. |
| Serious concern | Red flag score where there are real concerns about a candidate’s performance.  This should be referred to the course director immediately after the station. The course director should then observe that candidate’s performance on the following stations and assess if this is an ongoing concern or whether they have observed an improvement in performance such that the candidate is safe. |
| DNA | Did not attend |

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| **Scoring:** At the end of each station, score all candidates who have participated in the simulation either as team leader(s) or team members. Give them a score for technical skills and non-technical skills as per the guidance above. The candidate’s performance as an ’observer’ may inform your judgement as to their instructor potential. **The technical skill score for the initial team leader is essential as each provider has to show that they can safely and effectively perform an APEx primary and secondary assessment to meet course expectations (with the caveats in the section 1.1 above).** |

Instructor potential

For any candidates who show instructor potential, score these on the IP assessment sheet/system.

Simulation cases overview

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| **Simulation** | **Simulation focus** |
| *OD\_SH – Overdose and self-harm*  *BS – Behaving strangely*  *CA – Confusion and aggression*  *AD – Apparently drunk* | |
| OD\_SH1 | Overdose |
| OD\_SH2 | Diagnosed with schizophrenia, acute episodes of psychosis |
| OD\_SH3 | Staggered overdose over 36 hours |
| OD\_SH4 | Self-inflicted wounds |
| OD\_SH5 | Overdose |
| OD\_SH6 | Self-inflicted stabbing in hand with small sharp screwdriver |
| OD\_SH7 | Attempted to hang themselves |
| OD\_SH8 | Overdose of ethylene glycol |
| BS\_1 | Panic attack and increasing anxiety |
| BS\_2 | 7 hours loss of memory |
| BS\_3 | 6 weeks post-partum |
| CA\_1 | Confusion, agitation and aggression |
| CA\_2 | Acting ‘crazy’ and scaring everyone |
| CA\_3 | Confused and aggressive |
| AD\_1 | Epilepsy and depression |
| AD\_2 | Asthma and type 1 diabetes |