Committee for Accreditation of
Healthcare Simulation Programs

Assessment Accreditation Standards Companion Document

2021 Standards Revisions

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This Companion Document has been designed to help you with becoming accredited. Primarily it serves these purposes:

1. Provide insight and information for applicant programs.
2. Explain and describe the types of evidence expected to meet each of the Standards.
3. Ensure clarity for what is provided prior to the site visit as part of the accreditation packet.

IMPORTANT: the descriptions and evidence provided are NOT prescriptive. The SSH Accreditation Standards are designed to allow Simulation Programs in any setting to apply. It is recognized that there are many ways to achieve outcomes as well. As such, any evidence listed is representative of the types of information that has been acceptable. This companion document should not be considered a prescriptive list of items all Programs must complete, but rather a tool to help each Program identify how to best meet each standard. Should you have any questions about any of the Standards or criteria, or feel that they do not fit your Program for any reason (e.g., cultural), please contact the SSH Accreditation Program at accreditation@ssih.org.

DOCUMENT ELEMENTS

The standards for each area of Accreditation are broken into different elements:

<table>
<tr><td colspan="2">▪ Standard Area Description (in the dark blue area)
– High-level description of the overall content in the area of accreditation (Core-ARTSF)</td></tr>
<tr><td colspan="2">1. Section header (boldfaced type with a number in the light blue area)
– The title for the section that groups items together, each area of accreditation has its number of sections.</td></tr>
<tr><td colspan="2">a. Standard statement (italicized with a lower-case letter in the light blue area)
– This is the standard. Evidence should be provided based on the criteria in the subsections below.</td></tr>
<tr><td>i. Criterion (items listed in the white area in the left column of the table)
– These are the items that must be provided to demonstrate meeting the standard.</td><td>▪ The column (in the white area) to the right side of the Criterion in the companion document is where the Program can find information about the intent of specific criteria; and examples, clarifications, and descriptive information that will help the Program respond to each standard and criterion.</td></tr>
</table>

TERMINOLOGY

- **DEMONSTRATE**: This term is consistently used for overall Standards statements. “Demonstrate” means the Program must show how the standard is met (through the criterion). There are often many ways to demonstrate meeting individual criterion.
- **DESCRIBE**: This term is used to indicate that a narrative is sufficient as evidence to meet a particular criterion. If documentation is requested in addition to the description, the criterion will specify with the following phrase: “*Describe and provide supporting documentation*.”
- **DOCUMENT**: This term is used to indicate that some form of documentation must be provided as evidence to meet a particular criterion. Examples of this could include providing a list of items such as equipment, a policy, and procedure, a floorplan, simulation design forms, etc. If a description is required in addition to the documentation requested, the criterion will specify the following phrase: *“Describe and provide supporting documentation.”*
- **PROGRAM:** The term “Program” refers to the simulation center or organization that is applying for accreditation. The Program could refer to a stand-alone facility, a collaborative simulation consortium, or the Program could be part of an overarching organization.
- **PROGRAM DIRECTOR***:* All SSH Standards and Criteria use the term “Program Director” to describe the person with primary authority for the

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Simulation Program. The person in this role, however, does not need to have the official title of "Program Director."

ASSESSMENT STANDARDS AND CRITERIA

Application for accreditation in *Assessment* will be limited to those Programs that demonstrate the ability to develop, implement, and validate summative simulation assessments. The assessment activities should be characterized by trained assessors, valid and reliable tools, and consistent testing conditions. Assessment leadership and assessors must be competent in the art and science of human performance assessment.
Assessment tools may be:

- Obtained from a peer-reviewed journal
- Defined by professional societies, licensing bodies, or certification organizations
- Modified or created *de novo* if justified via expert panel review process.

The Four Assessment sections of the Standards are related to:

(1) Assessment Activities (2) Assessment Activity Design (3) Qualified Assessors(4) Evaluation and Improvement

1. ASSESSMENT ACTIVITIES *a. The Simulation Program is committed to providing high-quality simulation Assessment activities.* – This is the standard. Evidence should be provided based on the criteria in the subsections below.	
i. Describe and provide supporting documentation on how the Program links its *Assessment* activities to the Program's mission, goals, and/or strategic planning.	▪ Describe how the Assessment activities specifically link to the mission and/or vision of the Program. ▪ Example: The Center "xxx" completes an annual review of all programs offered just prior to the close of the fiscal year, and all assessments are reviewed by the Center's team to ensure that the target mission is being met. ▪ Supporting documentation, e.g., copy of last annual review as described in the example.
ii. Describe the qualifications of the individual(s) that oversee these activities.	▪ The intent of this criterion is for the Program to describe that they have a deliberate process in place for selecting (an) individual(s) who oversee(s) the Assessment activities who have/have the knowledge and understanding of Assessment principles and practices.

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iii. Describe and provide supporting documentation of up to three (3) simulation Assessment activities developed and/or adapted by the Program.	▪ If you have developed Assessment activities AND adapted others, please provide an example of each type. ▪ If you use a combination of simulation modalities for Assessment, please provide an example of each type E.g., SP methodology, procedural-based Assessment, non-human simulation, mixed modality, hybrid simulation).

iv. Describe how the Program's physical space, chosen Assessment simulation modalities, choice of Assessors, and technology are appropriate for Assessment.	▪ Describe how your program determines the appropriate location (e.g., simulation lab, in-situ, etc.) for conducting Assessment activities. Describe how the physical space chosen supports Assessment activities. ▪ Describe how your program decides what simulation modalities you use in your Assessment activities. (There is no requirement to use more than one simulation modality). ▪ Describe how Assessors are chosen for Assessment activities could include (but is not limited to) standardized patients, faculty observers, peer-reviewers, etc.). ▪ Describe technology support for Assessment activities (audio-visual capture, checklists, grading, etc.).

2. ASSESSMENT ACTIVITY DESIGN *a. The Simulation Program designs simulation-based Assessment activities that are evidence-based, engaging, and effective.* – This is the standard. Evidence should be provided based on the criteria in the subsections below.	
i. Describe how the Program determines the need for Assessment activities.	▪ Describe the process used by the program to determine the need for Assessment activities. ▪ Examples of the needs assessments that would drive the implementation of Assessment activities could include (but are not limited to): – Curricular driven needs (i.e., OSCEs) – Credentialing for privileging and/or licensing – Root cause analysis of a sentinel event has demonstrated the need for an assessment of competencies

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ii. Describe how the Program designs and/or adapts simulation-based Assessment activities.	▪ If your program creates AND adapts existing Assessment activities, please describe the process used for each. ▪ It is not required to develop activities de-novo. Previously developed activities from elsewhere in the Program, institution, or healthcare simulation community can be used. However, these activities must be appropriate for the Program's Assessment goals.
iii. Describe and provide supporting documentation on the process used to develop and/or adapt Assessment instruments/tools.	▪ Describe how the instruments/tools created AND/OR chosen, measure learners' attainment of the activity's learning objectives. ▪ Provide supporting documentation of the process described above- e.g., minutes of meetings, email exchange, etc. If you create AND adapt, provide an example of each. ▪ If there is a multi-station SP exam (OSCE), provide goals and objectives, a blueprint of cases, scripts, and checklists. ▪ An Assessment blueprint refers to the display of all of the cases for a multi-station SP Assessment or procedural Assessment. Please show a well-balanced multi-station Assessment that will meet the objectives of the Assessment.
iv. Describe and provide supporting documentation on the process to ensure that Assessment instruments/tools are reliable and valid for the level of the learner being assessed.	▪ Describe the process used to ensure that Assessment instruments/tools developed and/or adapted are reliable and valid for the level of the learner being assessed. Assessment instruments are only valid for the level of learners on which they were tested (year 1 medicine residents, Undergraduate nursing students, M4 students, EMTs, etc.) ▪ Provide supporting documentation for the reliability and validity determination of an Assessment tool/instrument developed or adapted. If you have original and adapted instruments/tools provide documentation for one of each.

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<td>v. Document: Provide a list of Assessment activities (maximum 10).</td>
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This criterion intends to determine that the Program conducts Assessment activities. Please utilize a similar list format consistent with the components listed below:

Course/sessions name
Simulation methodology
Learner- type and level
Instruments/tools
Raters/Assessors

The site reviewers will request three Assessments from the provided list. Please be prepared to offer Assessment materials upon request.
The example below is an acceptable list format :

<table>
<tr><th>Course/Session
Simulation Methodology</th><th>Learner
Type and level</th><th>Instruments/
Tools</th><th>Raters/ Assessors</th></tr>
<tr><td>Internal Medicine Clerkship
OSCEs (3 stations)</td><td>Medical Student-
3rd year</td><td>OSCE
Checkli
sts</td><td>SPs</td></tr>
<tr><td>Surgery Residents
Procedural skills (4 stations)</td><td>PG1-5</td><td>OSATS</td><td>Faculty</td></tr>
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<table>
<tr>
<td>vi. Document: If the Program uses a variety of methodologies and/or assesses across different learner groups, please provide a sample from each area. Maximum of three (3).</td>
<td>

This criterion intends to determine if there are multiple methods for providing Assessment activities within the Program.
Examples of activities may include (but not limited to):

<table>
<tr><th>For OSCEs</th><th>Multi-Station
Procedural Assessment</th></tr>
<tr>
<td>

If single or multiple-station(s), domains assessed
For multiple stations, OSCE blueprint
Recruitment materials for SPs
SP case materials (door instructions, script, checklists)
SP training materials and documentation of training
Schedules
Orientation materials for participants
How cut scores were developed
Redacted results
Statistics (item analysis, interrater agreement, etc.)
Notification of results to faculty and or learners
Remediation process

</td>
<td>

Blueprint
Schedules
Instructions for each station
Checklists or other instruments used
Training materials for raters
Orientation/briefing material for participants
How cut scores were developed
Redacted results
Notification of results to faculty and learners
Remediation process if any

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<td>vii. Describe and provide supporting documentation on how participants are oriented to Assessment activities.</td>
<td>

Describe how participants are oriented to the Assessment process, objectives, environment, and instruments/tools.
Describe how participants are informed of the grading process and the consequences of not meeting passing standards, and the need to remediate.
Provide supporting documentation of one orientation process (what is provided to participants before the session and/or at the beginning of the session- could be copies of emails or postings on learner site).

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viii. Describe and provide supporting documentation on the process used to ensure inter-rater reliability amongst Assessors.	▪ Describe the process for ensuring inter-rater reliability amongst Assessors -should show a deliberate and structured process. ▪ This may include the training process for the Assessors to use the Assessment instruments. ▪ Provide supporting documentation of the process for one of your Assessment activities.

3. QUALIFIED ASSESSORS *a. The Simulation Program has access to qualified Assessors* – This is the standard. Evidence should be provided based on the criteria in the subsections below.	
i. Describe and provide supporting documentation of how the most active Assessors within the Program are qualified for their roles. Provide SSH accreditation bio-sketches for these Assessors (Max of 5).	▪ This criterion intends to determine that the Assessors within the Program are qualified to conduct Assessment activities. ▪ The narrative will assist in demonstrating the type of Assessors that the Program utilizes and how they are qualified to conduct Assessment activities. ▪ Providing an SSH accreditation bio-sketches for the most active Assessors will further demonstrate these qualifications. (With a max of 5). ▪ The biosketches for the Assessors should demonstrate, as applicable, formal Assessment training and experience.
b. The Simulation Program selects Assessors to match the level of learner or activity. – This is the standard. Evidence should be provided based on the criteria in the subsections below.	
i. Describe the process used to match the qualifications of the assigned Assessors to the level of the learner.	▪ The Reviewers will be looking for the documented process the program uses to review their assessors and determine their expertise in conducting assessments for each activity, is there specific training, a degree, etc., and the expertise in qualitative versus quantitative assessments. ▪ It is recognized that cultural expectations (e.g., due to seniority) may take precedence. The Program should document what they do and can refer to cultural norms.

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c. *The Simulation Program has a process to assure ongoing development and competence of its assessors at least annually.* – This is the standard. Evidence should be provided based on the criteria in the subsections below.	
i. Describe and provide supporting documentation of the Assessment and feedback processes for Simulation Assessors.	▪ Describe how the program assesses the accuracy of the Assessors, and how the program provides feedback to the Assessors on their Assessment skills ▪ Provide, if possible, a redacted Assessment and feedback to an Assessor.
ii. Describe and provide supporting documentation on opportunities for Assessors to engage in professional development that is specific to simulation.	▪ Describe the process for professional development for your Assessors specific to simulation. ▪ Document professional development opportunities for up to 5 of your most active Assessors over the last 24-month period. ▪ Examples of professional development activities for Assessors: – SP in-house training programs, webinars, or other online programs ▪ Faculty in-house training programs, webinars, or other online programs, conferences, and other CE activities.

d. *The Simulation Program has a process to ensure the orientation and development of those who participate in the delivery of Assessment activities* ***but are not competent Simulationists.*** – This is the standard. Evidence should be provided based on the criteria in the subsections below.	
i. Describe and provide supporting documentation on the elements included in the orientation process for those that participate in the delivery of Assessment activities *but are not competent Simulationists.*	▪ Describe the process for onboarding individuals who participate in Assessment activities but are not simulation experts. ▪ Provide, if possible, redacted documentation for one such orientation process.
ii. Describe and provide supporting documentation on how individuals are chosen to Assess and provide feedback to the Assessors.	▪ Describe the process for selecting individuals who provide Assessment and feedback to the Assessors. ▪ Provide SSH Accreditation bio sketch for 1-2 of these individuals.

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4. EVALUATION AND IMPROVEMENT *a. The Simulation Program has mechanisms in place to evaluate, review and update* Assessment *activities at least annually.* – This is the standard. Evidence should be provided based on the criteria in the subsections below.	
i. Describe how Assessment activities are evaluated routinely using a standardized, systematic method.	▪ Processes may vary by Program. Programs should submit what they have access to and can contact SSH for further clarification as needed. ▪ There are many types of support (e.g., human factors, psychometric, and/or statistical support as examples) ▪ Describe the process to evaluate the Assessment activities. The process should be part of an ongoing quality improvement process- activities should be assessed systematically and routinely. ▪ Should answer the following questions: – Does the Assessment activity meet the stated objectives? – Is the Assessment activity reliable and valid for the level of the learner? – Were any issues identified (Assessors, materials, timing)? If yes, what was the response? ▪ How information is shared with administration/faculty etc.
ii. Document: Provide supporting documentation of evaluations of Assessment activities (at least 3, maximum 5) over the past 24 months. Documentation should demonstrate quality improvements in Assessment activities that were made based on the review process.	▪ Provide supporting documentation of 3-5 Assessment activity evaluations over the last 24 months. Highlight any quality improvements that were made based on the last review of Assessment activities.

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