

Committee for Accreditation of Healthcare Simulation Programs

CORE

Provisional Standards and Measurement Criteria

Revised May 2016

Provisional Core Standards and Criteria

Core Standards are fundamental structural and operational standards that all accredited Programs must meet. The 7 sections of Core Standards are: (1) Mission & Governance, (2) Program Management, (3) Resource Management, (4) Human Resources, (5) Program Improvement, (6) Ethics, and (7) Expanding the Field.

1. MISSION AND GOVERNANCE

- a. The Simulation Program has a clear and publicly stated mission and/or vision statement(s) that specifically addresses the intent and functions of the Program.
 - i. Provide a copy of the Program's mission and/or vision statement(s).
- b. The Simulation Program has an appropriate organizational structure.
 - i. Describe Program's planned organization and structure including how it is linked to the larger organization, if one exists.
 - ii. Provide the planned organizational chart(s) that demonstrate the Program's organization and structure including lines of authority within the Program.
 - iii. If the Program is or will be a part of the larger organization, provide the organizational chart(s) that demonstrate the Program's position within the organization including lines of authority within the larger organization.
- c. The Simulation Program has a process for strategic review and approval of its activities.
 - i. Describe the planned governance structure including people or committees that provide oversight and/or advisory functions to the Program.
 - ii. Describe the planned process by which the governance structure provides oversight and reviews/approves the activities of the Program.
- d. The Simulation Program has a written plan designed to accomplish the mission and/or vision of the Program.
 - i. Describe the expected process for strategic planning.
 - ii. Provide written strategic plan including the Program's goals for the next three to five years and how they will be achieved.
 - iii. Describe the anticipated trends of simulation use for the forthcoming year (e.g. areas of expansion or change, changes in learners or learner types).

2. PROGRAM MANAGEMENT

- a. The Simulation Program has adequate fiscal resources to support its mission and/or vision.
 - i. Describe the Program's expected budget process for operating and capital expenses and identify the individual(s) responsible for fiscal affairs.
 - ii. Describe the Program's current and/or anticipated financial status.
 - iii. Describe the plan for the Program's financial sustainability over time.
- b. The Simulation Program provides day-to-day oversight of simulation activities in the Program.

- i. Describe the planned process for day-to-day oversight of simulation activities within the Program.
- ii. Document the planned methods used to ensure the staff are kept up to date on simulation activities and Program operations.
- c. The Simulation Program has the ability to prioritize resources as needed.
 - i. Document or demonstrate how simulation resources will be prioritized.
 - ii. Provide up to three (3) anticipated examples that demonstrate how simulation resources will be prioritized.
- d. The Simulation Program has written policies and procedures to assure the Program provides quality services and meets its obligations and commitments.
 - i. Provide simulation-specific policies and procedures that will be or are currently utilized by the Program. These should include at a minimum, the policies/procedures listed below:
 - 1. Confidentiality procedures (including but not limited to, confidentiality and performance between learners and about learners).
 - 2. Mechanisms to protect and address physical and psychological safety of individuals involved in simulation, including orientation to the environment.
 - 3. Mechanisms to appropriately separate simulation and actual patient care materials (e.g. equipment, supplies, and patient information).
 - 4. Storage and maintenance of equipment and supplies.
 - 5. Video recording (including but not limited to permission, use, access, storage, backup and/or recovery, retention, and destruction/deletion of recordings).
 - 6. Record and data retention (including but not limited to acquisition and security of learner and research subject data if applicable).
 - 7. Prioritization of simulation resources.

3. RESOURCE MANAGEMENT

- a. The Simulation Program has the ability to obtain, maintain, and support simulation equipment and relevant technologies to support the mission and/or vision of the Program.
 - i. Describe the various simulation modalities that will be used in the Program.
 - ii. Provide list of anticipated simulation equipment and resources.
 - iii. Describe the expected process to continually assess simulation equipment and technology and how they are utilized in the Program.
- b. The Simulation Program has appropriate physical space for simulation activities to support the mission and/or vision of the Program.
 - i. Provide narrative description of the anticipated facilities to be utilized by the Program for simulation activity.
 - ii. Provide floor plan/blueprints and/or photographs of actual or proposed facilities utilized by the Program.
- c. The Simulation Program provides an adequate number and variety of simulation activities to support the mission and/or vision of the Program.
 - i. Provide a list of simulation activities, the targeted population(s), and the number of participants for each activity for the past 24 months. [NOTE: this is not required for Provisional Accreditation but is required for Full Accreditation. It has been left in these Standards to ensure awareness of future

- requirements when applying for Full Accreditation. This does not need to be submitted for Provisional Accreditation.]
- ii. Provide total numbers of learner contact hours for the past 24 months. [NOTE: this is not required for Provisional Accreditation but is required for Full Accreditation. It has been left in these Standards to ensure awareness of future requirements when applying for Full Accreditation. This does not need to be submitted for Provisional Accreditation.]

4. HUMAN RESOURCES

- a. The Simulation Program is directed by a qualified individual with appropriate authority and time.
 - i. Submit job description and/or other descriptive documents for the director.
 - ii. Submit an accreditation biosketch for the director.
 - iii. Submit a brief narrative that describes how the director is qualified for the position.
 - iv. Describe how the director will have the authority for the operations of the Program.
 - v. Demonstrate how the director will be assigned sufficient time in this role to support the mission/vision of the program.
- b. The Simulation Program has adequate staff to support the mission/vision of the Program.
 - i. Submit job descriptions and/or other descriptive documents for all Program staff.
 - ii. Submit accreditation biosketches for all current Program staff.
 - iii. Submit a brief narrative that describes how each staff will be qualified for their position, including any healthcare simulation specific certifications and/or qualifications.
 - iv. Describe how the Program staff will be sufficient to support the mission/vision of the Program.
- c. The Simulation Program has a process in place to orient, support, and evaluate Simulation Program staff.
 - i. Document or describe how Program staff will be oriented to their roles.
 - ii. Document or describe how Program staff will be made aware of programmatic changes and process improvement opportunities at a frequency that supports the Program's needs.
 - iii. Document or describe how ongoing professional development opportunities will be provided and/or supported for Program staff.
 - iv. Document the ongoing evaluation and feedback process that will be used for Program staff.

5. PROGRAM IMPROVEMENT

- a. The Simulation Program continually improves the operations of the Program through the use of a quality management system.
 - i. Document or describe the anticipated quality management system.
 - ii. Document or describe improvements that might be expected based on the quality management system.
- b. The Simulation Program has processes in place to identify and address concerns and complaints.
 - i. Describe the anticipated process to address concerns and complaints.

ii. Document any concerns and complaints received in the past 24 months and their resolutions. [NOTE: this is not required for Provisional Accreditation but is required for Full Accreditation. It has been left in these Standards to ensure awareness of future requirements when applying for Full Accreditation. This does not need to be submitted for Provisional Accreditation.]

6. INTEGRITY

- a. The Simulation Program is committed to ethical standards.
 - i. Document or describe the ethical standards that will be utilized by the Program.
 - ii. Describe how the Program will meet these ethical standards.

7. EXPANDING THE FIELD

- a. The Simulation Program has activities that extend beyond the Program, contributing to the body of knowledge in the simulation community.
 - i. Provide documentation that at least one (1) individual involved with the Program will be a member of a healthcare simulation society or association.
 - ii. Provide a list of activities (no more than 10) that support or contribute to knowledge within or about simulation. [NOTE: this is not required for Provisional Accreditation but is required for Full Accreditation. It has been left in these Standards to ensure awareness of future requirements when applying for Full Accreditation. This does not need to be submitted for Provisional Accreditation.]