

IN SITU SIMULATION SAFETY

BRIEFING CHECKLIST

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SIMULATION TEAM BRIEFING

01

Medications/Equipment

- Identify any exceptions to using real, non-expired drugs
- Designate team member to reconcile fake medications
- Designate team member to replace equipment/re-stock

Patients

- Identify and mitigate risks to SIMULATED patients (i.e. CPR if to become unresponsive)
- Identify and mitigate risks to REAL patients (i.e. staffing levels if sick patients)

Communication

- Clarify plans for communication with other services in the hospital (eg switchboard, Code Blue calls - simulated vs real)
- Designate team member to Inform staff/patients/families nearby

Environment

- Identify environmental risks to participants - electrical, physical hazards

Safety Lead

- Designate overall responsibility for situational awareness of safety risks during the activity and the method to abort simulation if necessary

SIMULATION PARTICIPANT PRE-BRIEFING

02

Awareness

- Reference the general issue of safety risks to patients (sim and real) and participants. Encourage to speak up if concerned

Medications/Equipment

- Detail the relevant real/simulated medications
- Request not to remove from the simulation space

Safety Lead

- Inform that the simulation may be altered in real-time for safety reasons (i.e. not actually going to CT because patient on the table).
- Outline how these decisions will be communicated

03

NON-PARTICIPANT STAFF IN CLINICAL AREA

Awareness

- Inform that simulation is occurring and there are safety risks
- Identify designated simulation event safety lead

Empowerment

- Explicit encouragement for clinical staff and patients/families to speak to safety lead if concerns

ADDITIONAL RESOURCES

1. Raemer D, Hannenberg A, Mullen A. Simulation Safety First- An Imperative. Simul in Healthc 2018; 13(6):373–375. doi: 10.1097/SIH.0000000000000341
2. Bajaj K, Minors A, Walker K, Meguerdichian M, Patterson M. “No-go considerations” for in situ simulation safety. Simul Healthc 2018;13(3):221–224. PMID 29621037.