

POLICY & PROCEDURES MANUAL



Dr. Frank Bryant, Jr.
Patient Simulation Center
&
Nursing Laboratories

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1. General Information

The Dr. Frank Bryant, Jr. Patient Simulation Center and Nursing Laboratories (Simulation Center) is an Academic Support Program at St. Philip's College (SPC), that provides simulation-based clinical training capabilities to the Division of Health Science programs.

This policy and procedure manual complements and is governed by the policies and procedures of St. Philips College as well as those of the Division of Health Sciences.

All users of the Simulation Center must adhere to its policy and procedure guidelines. Failure to do so may result in disciplinary action. All learners must read and acknowledge this policy and procedures document prior to entry into the Simulation Center.

2. History, Dedication, and Introduction to Simulation

a. History and Dedication of the Simulation Center

The Dr. Frank Bryant Jr. Patient Simulation Center is dedicated to the memory of Frank Bryant Jr. M.D. Dr. Bryant was a graduate and devoted supporter of St. Philip's College, and he dedicated much of his career in service to the residents of San Antonio's East Side. His contributions and accomplishments include:

- Graduate of St. Philip's College
- The first African American president in the history of the Bexar County Medical Society
- The first Medical Director of the Ella Austin Clinic and co-developer of the East San Antonio Medical Center
- The first president of the C.A. Whittier Medical Society
- Served on the Alamo Community College District Foundation Board
- Received the Bexar County Medical Society Foundation Award, given to an individual who promoted excellence in the San Antonio medical community, dedicated time to volunteer efforts, and provided leadership within the community

Out of respect for Dr. Frank Bryant Jr. and his love for St. Philip's College, his widow, Gloria Bryant, City Public Service, and the ACCD Alumni Association made a generous donation for the establishment of the Dr. Frank Bryant Jr. Patient Simulation Center & Nursing Laboratories.

b. Introduction to Simulation

Simulation based education in healthcare provides experiential learning in a safe and controlled environment. It is a bridge between classroom learning and clinical application. Put simply, simulation-based training for health professionals includes all the instructional methods used to prepare health professionals for the real thing. The Simulation Center uses a variety of technologies and equipment to make this possible. Equipment may include skill-specific anatomical models or "task trainers," computerized manikins or "patient simulators," and desktop

or virtual reality training applications. An inventory of patient care supplies and environments compliments our simulation equipment line up to provide a truly hands-on learning experience for participants.

3. Mission, Vision, and Values

a. Mission

The Dr. Frank Bryant, Jr. Patient Simulation Center & Nursing Laboratories extends access to health science career training and develops caring and competent health science professionals through a comprehensive program of experiential learning through simulation-based education.

b. Vision

The Dr. Frank Bryant, Jr. Simulation Center will be the best in the nation in performance excellence and training students for clinical success.

c. Values

The Simulation Center pursues its Mission and Vision by adherence to our **3 Core Values:**

- Student Engagement and Success through access to immersive, state-of-the-art health care education and training.
- Performance Excellence through innovative programming, training, and systems design.
- Community Advocacy and Outreach focusing on careers in healthcare and patient safety/education.

4. Governance:

a. Organization and Structure:

The Simulation Center's position in St. Philip's College falls under the Dean of Academic Success for Health Sciences, and authority and oversight continue directly through the Vice President of Academic Success and the College President. See the [St. Philip's College Organizational Chart](#).

The governance of the Simulation Center consists of college, division, and program level oversight and support. The Simulation Center Academic Program Coordinator manages and leads the Simulation Center, driving the overall strategic and operational goals of the Simulation Center as well as contributing to daily operational, technical, and instructional support for academic programs. Reporting to the Academic Program Coordinator is a full-time Lab Technician, who supports day-to-day operations, technical support, maintenance, and troubleshooting. Student work-study employees report to the Coordinator and Lab Technician, providing additional operational support as assigned.

A cooperative governance model allows the Simulation Center to serve the diverse needs of the

Division's independently accredited academic programs. Program staff oversee operations of the Simulation Center, conduct program needs assessments, and help define simulation methodology. Academic Program faculty oversee curriculum, program learning objectives, instruction, and assessment as defined by their respective governing bodies. The Simulation Center has formally partnered with the Vocational Nursing Department to implement an integrated simulation curriculum within that program, with two designated Simulation Faculty to oversee all simulation activities.

b. Unit Oversight and Review:

Operational oversight and review of the Simulation Center occurs at the Division level. Operational decision making is coordinated by the Simulation Center Academic Program Coordinator through the Dean's Leadership Team, which reports directly to the Dean and includes Academic Program Chairs, Operational Program Coordinators, and the Division of Health Sciences Quality Coordinator. The DHS Leadership Team meets on a weekly basis. The Simulation Center Academic Program Coordinator, as a member of the leadership team, consults with members on a weekly basis, providing information and recommendations that define and support ongoing operational goals related to the policy, funding/purchasing, personnel, and daily activities of the Simulation Center. The Dean's Leadership Team is responsible for consensus building, aligning, and supporting the operational goals of member units. In addition, the Simulation Center Coordinator meets monthly with the Dean of Health Sciences to provide updates on operational goals and issues unique to the Simulation Center. The Simulation Center Coordinator is ultimately responsible for decisions regarding what activities will occur in the Center as well as what resources will be used to support those activities based on these defined operational goals. The Simulation Center Coordinator collaborates with the Simulation Laboratory Technician and additional staff to direct and/or approve ongoing technology, safety, and supply considerations for the operation of the Center.

Academic oversight and review of the Simulation Center is coordinated through a standing Simulation Committee, with core membership that includes the Coordinator, and designated simulation faculty. Core membership in this committee is approved by the Dean of Health Sciences. Ad-hoc membership includes Division chairs, program directors, Simulation Center staff, and the Quality Coordinator. The aim of this committee is to ensure that utilization of the Simulation Center is standardized and implemented in a way that supports the specific instructional needs of Division of Health Sciences academic programs. The committee conducts program needs assessments, approves instructional design elements and operational support, designs faculty training, and disseminates Simulation Based Education methodologies and best practices. With review from the Dean of Health Sciences, the Simulation Committee disseminates best practices and program support.

Strategic oversight and review of the Simulation Center is accomplished through the Good 2 Great Strategic Planning Process, a yearly cycle that drives the Simulation Center's overarching strategy. This continuous cycle ensures the Simulation Center's strategic program/unit objectives are aligned to those of St. Philip's College and the Alamo Colleges District. Strategic plans, known as Operational Unit Assessment Plans (OUAP), are developed and tracked on SPC's Strategic Planning On-line software (SPOL), which provides ongoing two-way communication linking institutional-level and division-level program oversight and review. See the organizations [Good 2 Great Strategic Planning Overview](#) for more information

5. Operations:

a. Hours of Operation

The Simulation Center and its staff direct operational between the hours of 8 a.m. to 7:30 p.m., Monday through Friday. The Simulation Center Coordinator approves after hours and weekend laboratory use in order to schedule the event and determine the supply, equipment, and personnel requirements for the simulation-based activity.

b. Simulation Center Code of Conduct

The Simulation Center code of conduct applies to all faculty, staff, and students that utilize our facilities. The Code of Conduct is presented during faculty and student orientations and copies are displayed throughout the Simulation Center. Violations of the Code of Conduct are handled at the discretion of the Simulation Director.

The Dr. Frank Bryant, Jr. Patient Simulation Center & Nursing Laboratories is committed to providing simulation-based clinical training that is safe, realistic, and effective. To facilitate this, all participants in simulation should:

- *Demonstrate academic and professional integrity*
- *Show respect to self, others, and simulation resources*
- *Maintain confidentiality of simulation activities and student performance*
- *Maintain a realistic simulation environment*
- *Dress appropriate to your profession*
- *Be prepared, be punctual, and be positive*
- *Preserve a no cell phone environment*

c. Safe Learning Environment

The Dr. Frank Bryant, Jr. Patient Simulation Center and Nursing Laboratories staff and trained Simulation Faculty recognize the innate psychological and physiological challenges that can be encountered in simulation-based training and, in particular, immersive Simulated Clinical Encounters. For this reason, we promote the following standards of practice that provide a safe and productive learning environment:

i. Psychological and Physical Safety:

Simulation facilitators will foster a learning environment characterized by confidentiality, mutual support, and constructive feedback. Simulation is a safe learning environment where participants

can make mistakes without fear of reprisal or patient harm.

ii. Structured Pre-briefing:

The aim of a structured pre-briefing is to provide students with a greater sense of control and engagement with the simulation activity by setting clear boundaries, expectations, and goals. During the pre-briefing faculty and/or Simulation Center Staff will establish suspension of disbelief to promote participant immersion. They will cover activity ground-rules and communicate logistical details to participants. All participants will convey respect for the learner and value their perspective. Primary emphasis is placed on the learning aspect of the experience rather than on performance outcomes.

iii. Structured Simulated Clinical Encounters:

All participants in Simulated Clinical Encounters maintain activity ground-rules and expectations during simulation activities and there is a plan in place to address questions or concerns that arise during the course of the activity.

iv. Structured De-Briefing:

Simulated Clinical Encounters must be followed by a structured debriefing session that clarifies the experience, develops insight, and promotes deep learning in simulation participants. The focus of de-briefing is the elucidation of knowledge through open discourse, the recognition of best practices, the discussion of alternate methods and approaches, and the discovery of opportunities for improvement. The goal of de-briefing is to synthesize academic and experiential learning into clinical applicability and performance – learners should walk away with clear lessons learned that they can apply to patient care.

The Simulation Center has a number of tools, templates, and procedures in place to standardize delivery of simulation activities to provide for a safe and productive learning environment.

If a participant at any time feels threatened by the simulation experience, the simulation educator will be responsible for determining the appropriate course of action including altering or stopping the Simulated Clinical Encounter. The Simulation Center Coordinator and Faculty Simulation Coordinator will be informed of the incident and follow up with the participant and faculty member.

v. Incident Reporting:

If the physical safety of a participant is compromised, the simulation educator or Simulation Center staff will stop the simulation and assess the participant. If necessary, an emergency or non-emergency response can be initiated through our campus police dispatch.

Campus Police Dispatch
Non-Emergency (210) 485-0099 Emergency – (210) 484-0911

Regardless of the nature of an incident, a SOBI (Strategies of Behavioral Intervention) Incident Report is completed by the overseeing faculty and submitted to the College Vice President of Student Success, in compliance with the college's student safety policy

The Simulation Center has a number of tools, templates, and procedures in place to standardize delivery of simulation activities to provide for a safe and productive learning environment.

d. Operation of Simulation Equipment and Technology

Trained simulation staff operate and maintain simulation technology and equipment. Faculty are not permitted to operate simulation equipment/technology without express permission from and training by Simulation Center staff. All simulation equipment will be tested and calibrated prior to use to ensure best performance. If Simulation technology or equipment is not performing as expected, immediately contact a Simulation Center Staff member for troubleshooting.

e. Dress Code

Participants will adhere to the following dress code policies:

- i. Participants must wear: close toed shoes and visible school/employer ID badge.
- ii. Participants should dress in attire suitable for a clinical setting in their field
(In most cases the Simulation Center defers to the dress codes of the respective Academic Programs it serves)

f. Food and Drink Policy

Consumption of Food/Drink is **NOT** permitted the Simulation Center. Drinks with securely closed lids may be stored on countertops and shelving away from patient care areas. All drinks must have secure lids. Participants should report any unexpected spills to simulation staff immediately.

6. Administrative Information

a. Staff and Faculty Contact Information

Name	Position	Contact
Ricardo Lopez	Simulation Center Academic Program Coordinator	(210) 486-2144 Ropez471@almo.edu
Derrick Jones	Simulation Center Academic Lab Technician	(210) 486-2196 djones318@alamo.edu
Dianna Garza	Simulation Education Coordinator	(210) 486-2006 Dgarza358@alamo.edu

b. Scope of Work

i. Academic Program Coordinator

The Simulation Center's Academic Program Coordinator oversees the day-to-day operations of the program, ensuring performance capacity and sustainability. The Academic Program Coordinator (or the "Coordinator") serves as a healthcare simulation operations and methodology expert and collaborates with program faculty and organizational leadership to advance the mission of St. Philip's College, the Division of Health Science, and the Dr. Frank Bryant, Jr. Patient Simulation Center and Nursing Laboratories. The Coordinator is responsible for all aspects of program operation and management.

ii. Simulation Center Academic Lab Technician

The Academic Lab Technician maintains and operates Simulation Center resources to include supplies, equipment, and software. The Lab Technician collaborates with Simulation Center Program Coordinator and faculty to design, develop, plan, and implement Simulated Clinical Encounters and Skills Laboratories. The Lab Technician also develops faculty training resources in collaboration with the Academic Program Coordinator and assists with the operation of the Simulation Center.

iii. Faculty Simulation Coordinator

The Faculty Simulation Coordinator oversees educational activities in the Simulation Center to include pedagogy, instructional design, implementation, and evaluation of Simulated Clinical Encounters. The Faculty Simulation Coordinator is an expert resource on simulation-based instruction, and provides training and oversight to faculty who facilitate training in the Simulation Center. The Faculty Simulation Coordinator helps define and assess the Simulation Center's activity offerings, including Clinical Skills Laboratories and Simulated Clinical Encounters.

7. Faculty Responsibilities

a. Equipment Utilization

- i.** DO NOT use equipment for any purpose other than specified use
- ii.** DO NOT use ink pens, felt-tipped markers, iodine or betadine near the manikins or task trainers. These items will PERMANENTLY stain the equipment.
- iii.** USE ONLY water-soluble patient lubricant or silicone-based manikin lubricant provided by the center on all patient simulators and task trainers.
- iv.** DO NOT use food coloring or any product with food coloring on manikins or plastic equipment.
- v.** RESET SKILLS STATIONS – After skills labs, all equipment should be powered down after use and patient care areas reset. Power down simulators if you are the last user; turn off oxygen/suction; remake beds and discard or consolidate used supplies; return all items to their original locations. The Golden Rule at the Sim Center is

“Leave it as you found it, or better.”

- vi. Proper hand washing or use of hand sanitizers will be practiced in all aspects of simulation education. This helps to keep manikins and equipment clean and operational
- vii. All simulation equipment should be used only after participant is given training and permission by simulation staff.

8. Student Responsibilities

a. Simulation Preparation

- i. Participants are expected to come to lab/simulation prepared by completing pre-simulation reading and/or assignments given to students by the instructor. Students must have necessary assessment equipment in their possession.
- ii. Participants should inform their instructors if they are unable to attend class or have not completed class requirements. Alternate accommodations will be discussed.
- iii. Participants should be knowledgeable in the care, handling and proper use of equipment prior to using it in the Simulation Center. Equipment and supplies are to be used safely and for their designated purpose. Equipment is only used if instructed to do so and under the supervision of faculty or staff

b. Cell Phone Usage

- i. The use of cell phones is prohibited during simulation activities. All personal use of cell phones should be conducted outside of the Simulation Center
- ii. Cell phones may not be used for the purpose of video recordings or taking pictures during any simulation activities including debriefing.

c. Independent Practice

Independent practice in the Simulation Center is permitted at the discretion of our staff. Onsite practice requests by students or study groups may be granted if the practice does not interfere with courses or instructional resources. It is highly preferable to practice under the supervision of a faculty member but staff may grant limited independent practice time for basic skills training review. Under no circumstances will students be permitted to practice with sharps (i.e., injection, venous access; blood draw, etc.) without direct faculty supervision.

9. Scheduling and Prioritization of Simulation Resources

a. Prioritization Policy

Requests for utilization of space and resources at the Simulation Center are prioritized first through discussions between program staff and the requesting point of contact. Factors taken into consideration include mission alignment, number and type of participants, nature of the simulation activity (skills training vs clinical scenario) and the availability of equipment, space, and personnel needed to support the activity. If the activity can be readily accommodated, a permanent entry is approved for the Center's event calendar. If any of the requested resources are unavailable, the Simulation Center will present alternatives to the program for review. Where

competition for resources occurs between academic programs, all stakeholders are brought into the discussion to achieve consensus on the best manner to move forward, whether that is exercise modification or rescheduling of activities. If resolution cannot be achieved at program-level, the matter is brought to the respective chairs and the Division of Health Science Leadership Team for review and division-level prioritization.

b. Priority of Use

Nursing Education Programs are generally given first priority for simulation space and resources, in accordance with strategic goals and guidance from the Dean of Health Science Leadership Team. Allied Health Skills Lab support and Interprofessional use is given next priority for scheduling and resources.

c. Scheduling

Program reservations can be made via the [Simulation Center Website](#) under the “Reservations” drop-down heading. The reservation form prompts faculty to enter relevant simulation activity details and requirements. Form submission and approval by the Academic Program Coordinator results in a detailed event listing on the Simulation Center Event Calendar on the program’s [Alamo Share Page](#). The Simulation Center event calendar also provides a transparent view of the Center’s activities for the division of health sciences, allowing programs to verify resource availability in real-time. (Note: AlamoShare website and SharePoint resources are only accessible to employees utilizing their organizational sign-in credentials).

Nursing Education lab and clinical courses hosted in the Simulation Center must be made prior to the start of the semester by course leads as a recurring appointment with the course syllabus and calendar of activities attached. All other reservation requests require a one-week notice.

d. Cancellation Policy

A 24 hour notice is required for all scheduled simulation cancellations. The instructor is responsible for informing both the Simulation Center Director and the participants of the cancellation.

e. Emergency Closures/Inclement Weather

The Simulation Center follows the Alamo Colleges policy and guidance for closures due to emergency or inclement weather. If participants are unable to attend due to severe weather or another emergency and the college has not been officially closed, it is the participants’ responsibility to notify their instructor. Faculty, staff and students may sign up for [Alamo Alert](#), an emergency notification system, to receive up-to-the-minute messages related college emergency or weather-related delay/closure. The St. Philip’s College Weather Line is (210) 485-0189.

10. Tours

a. Requesting Tours

Tour requests should be submitted to the Simulation Center Academic Program Coordinator through email (rlopez471@alamo.edu). Emails should include information regarding visiting audience (number of visitors, where are they from), specific areas of interest for the visit, and the requested date and time for the tour. Requests should be submitted at least one week in advance of the requested tour date. Tour groups are not allowed to observe simulation activities without the participants' consent. Recording or photographing of simulation activities during touring is prohibited.

b. Tour Requirements

Tours can be scheduled Monday-Friday during operating hours, 8:00 am to 5:00 p.m. The Academic Program Coordinator must approve all tours outside of standard operating hours.

c. Tour Cancellations

Tours must be cancelled at least 24 hours prior to the scheduled tour.

11. Equipment

a. Maintenance and Care of Equipment

Proper maintenance of all equipment is essential to the operations of the Simulation Center. The Simulation Center Lab Technician and Simulation Center are responsible for preventative maintenance of patient simulators maintenance and support agreements.

The Academic Program Coordinator also coordinates periodic simulation and medical equipment maintenance, calibration, and safety checks with the Biomedical Engineering Technology Program

Daily Care and use guidelines should be followed with each simulation activity:

i. Cleaning and Disinfecting manikins

1. Do not submerge manikins in water. Do not introduce fluids internally without express permission and guidance from the Academic Program Coordinator
2. Do not use acetone to clean manikins. This will degrade the skin and underlying components over time.
3. Do not use bleach on the manikin skin.
4. Begin cleaning with mild dish soap and water. Dry with soft towel and allow to air dry.
5. Use Patient Wipes to clean the manikin if soap and water are not available. These wipes do not contain bleach or harsh chemicals
6. Use Isopropyl alcohol on a washcloth or 4x4 to clean stubborn stains and residue.

ii. Equipment Guidelines:

Patient Simulator user guides and maintenance checklists are available for reference on the Simulation Center's AlamoShare website

b. Breakage and Repair Policy

Damage to equipment needs to be reported immediately to the Simulation Center Academic Program Coordinator through email (rlopez471@alamo.edu) or by calling (210) 486-2144.

Information should be provided detailing how the current condition and location of the equipment and the circumstances surrounding the malfunction. The Simulation Center Program Coordinator is responsible for contacting appropriate person or entity for the repair.

12. Supplies

a. Organization

The Simulation Center has two primary storage areas

i. Supply Storage – CHP 218A:

1. Patient care kits and disposable supplies and equipment:

- a.** IV access and management
- b.** Injection
- c.** Diagnostic equipment and supplies
- d.** Obstetric care
- e.** Medications
- f.** Respiratory care
- g.** Urinary care
- h.** Wound care
- i.** Gastric care
- j.** Ostomy care
- k.** Personal protective equipment

ii. Equipment Storage - CHP 218:

1. Simulation Equipment

- a.** Patient Simulators
- b.** IV Pumps
- c.** PCA Pumps
- d.** Ventilators
- e.** EKG Machines
- f.** Defibrillators
- g.** Mobile Vital Signs Monitors

2. Patient Simulator Supplies

- a.** Clothing
- b.** Moulage supplies
 - i.** Make up
 - ii.** Jewelry/Eyeglasses
 - iii.** Shoes
 - iv.** Wigs
 - v.** Other Props and small durable equipment
 - vi.**

13. Simulation Supplies and Equipment

a. Simulated Medications, Patient Records, and Treatment Devices

The Dr. Frank Bryant, Jr. Patient Simulation Center is housed in the Center for Health Professions Building on the St. Philip's College main campus. The Simulation Center and the Center for Health Professions provide academic and simulation-based training to health science students. Patient care is limited to outside clinical site locations that partner with Division of Health Science programs. The Center utilizes only simulated medications and patient records for student safety and confidentiality, and the use of non-simulated medications or patient information during instructional activities is strictly prohibited. Simulation Center staff will dispose of any patient records or live medications discovered in accordance with the campus waste management policy;. AED's and defibrillators in the Simulation Center are similarly strictly task trainers.

b. Inventory

The Simulation Center maintains a supply and equipment inventory list and consistently monitors stock levels. Equipment valued greater than \$1000 or deemed high risk is identified by bar code and audited annually by Simulation Center Staff and by Alamo College District Inventory Control Department. The Simulation Director should be notified if inventory supplies are low or if a tagged item is missing.

c. Usage and Re-Usage

To limit waste and control costs, efforts will be made to re-use supplies where possible without sacrificing instruction and student learning. Patient care kits should be re-used for training where possible but a fresh kit will be provided for each student during skills check-offs. Other examples of commonly re-used supplies include oxygen delivery devices, nasogastric tubes, and intravenous tubing. The Simulation Center Staff monitor re-used supplies for wear and tear and coordinate periodic replacement.

Needles or sharps SHOULD NOT be reused under any circumstances, and should be disposed of properly in the Sharps Containers located throughout the Simulation Center.

14. Simulation Learning Activities

The Simulation Center supports a variety of learning activities that address specific program learning objectives across the Division of Health Science. These simulation-based activities provide a holistic learning experience, that allow students to gain clinical knowledge, skills and abilities while building competence and confidence as a healthcare provider.

a. Simulation-Based Skills Training:

Foundational training that is procedure and technique-focused is supported through the Simulation Center's Skills Lab Catalogue. Every skills lab offers a standardized set of equipment, supplies, and patient simulators to support learner acquisition of each technique and/or procedure. The list of supplies for each individual skills lab is developed with input from content experts, current textbooks, and feedback from membership of the Simulation Committee. The full listing of

Skills Laboratories is available on the Simulation Center [AlamoShare](#) Site. Skills lab checklists must be developed and documented by the academic program utilizing the Simulation Center, or the program may opt to utilize the skills checklists kept on file with the Center.

b. Simulation Based Clinical Training/Simulated Clinical Encounters:

Simulation-based activities that focus on the integration and application of a student's knowledge, skills, and abilities towards a real-world scenario are termed Simulated Clinical Encounters (SCE's). These immersive, scenario-based simulations attempt to recreate a patient care encounter to foster critical thinking, communication, decision-making, and prioritization. SCE's encourage the application of foundational knowledge and promote deep learning. The Simulation Center supports a curriculum of Simulated Clinical Encounters, based primarily on Elsevier's Simulation Learning System product, in a partnership with the Vocational Nursing Program. The Simulation Learning System SCE's span the scope of the vocational nursing scope of practice, and follow the International Nursing Association for Clinical Simulation and Learning (INACSL) 2016 Standards of Best Practice for Simulation Design. More about the INACSL Standards for Best Practice: Simulation can be found at <https://www.inacsl.org/inacsl-standards-of-best-practice-simulation/>.

c. Photography and Video Recording Use Policy

Rooms utilized for Simulated Clinical Encounters are equipped with video/audio monitoring and recording devices along with signs indicating such monitoring is in use. Photography and video recordings outside of staff-monitored recordings is PROHIBITED during any simulation experience without proper consent of the Simulation Center Coordinator or designee. Video recordings are used solely for educational purposes or demonstration of skills competency.

Video recordings are stored on private servers behind firewall and administrative access protections to ensure the privacy of participants. Faculty overseeing simulation activities may access recordings for debriefing with account access and password issued by the Simulation Center. Recordings are archived monthly to offline storage and are stored for approximately 2 years. After 2 years, archived recordings may be purged from storage.

Simulation Participants consent to filming upon orientation to the Simulation Center. (See "Confidentiality/Policy Agreement and Consent to Film" form at the conclusion of this document).

d. Quality Assurance

i. Simulation-Based Activities Quality

The Simulation Committee continually evaluates its catalogue of Skills Laboratories and Simulated Clinical Encounters for course relevancy, and evidence-based best practice. As practice standards change, labs and scenarios are modified to reflect current practices.

ii. Service Quality

The Simulation Center conducts annual cohort surveys to assess student satisfaction with Simulation Center services and learning experiences. This survey provides a broad measure of performance and captures the voice of the customer. Student feedback is factored into strategic planning and continuous program improvement efforts.

e. Evaluation Policy

At present the Vocational Nursing Program is the majority stakeholder in use of simulation within their education program. As such, the evaluation of simulation -based activities occurs within the overall clinical evaluation of students. This is accomplished using end of course surveys and post-simulation qualitative analysis. It is our intent as a Center to develop a formal evaluation process for individual simulation-based activities with our Academic Programs.

15. Safety, Security and Data Management

a. Emergencies

i. Medical Emergency:

In case of medical emergency, dial 911 immediately followed by calling Alamo Colleges Emergency Dispatch at (210) 485-0911. If possible, someone should meet EMS outside of the Center for Health Professions Building to direct first responders. Following the event, Alamo Colleges Police will file an incident report.

ii. Non-Medical Emergencies:

For non-medical emergencies Alamo Colleges Emergency Dispatch should be contacted at (210) 485-0911 to report the nature of the incident and request assistance. All non-medical emergencies must be reported by the overseeing faculty or staff via the College [Incident Report Form](#)

iii. AED Locations:

An Automated External Defibrillator (AED) is located on the second floor of the Center for Health Professions Building.

b. Security

- i.** For security concerns related to person, property, or campus, Alamo Colleges Non-Emergency Dispatch should be contacted at (210) 486-0099 to report the nature of the incident or request assistance.

c. Data Management

- i. **Purpose and Scope:** This policy governs the management of simulation-based learning records, specifically audio/video recordings, created internally by the Simulation Center. Procedures herein ensure efficient, economical, and effective controls, consistent with the College District's Records Management Program, the Texas Local Government Records Act, and SSH Accreditation Standard Core.2.d.i.6 (Record and Data Retention). This policy pertains specifically to recordings and associated data managed directly by the Simulation Center. Other learning records (e.g., grading documentation, formal assessments derived from simulations) fall under the purview of the respective academic programs and their associated retention policies.
- ii. **Data Acquisition, Storage, and Backup:**
 - a. *Acquisition:* Simulation data, primarily audio/video recordings, are acquired digitally via the Center's simulation capture system(s) during scheduled learning activities.
 - b. *Storage:* All recordings and associated metadata are stored securely within the simulation capture system's designated environment (*Specify system/location, e.g., "on the designated private cloud server"*). Storage environments are not publicly accessible.
 - c. *Backup and Recovery:* Backup and disaster recovery procedures for simulation data are managed (*Specify method, e.g., "via the simulation capture platform's native functionalities," "per College District IT protocols," etc.*).
- iii. **Access Control, Security, and Confidentiality:**
 - a. *Access Control:* Access to simulation recordings and data is strictly controlled through user roles and permissions configured within the simulation capture system. Access is granted by Simulation Center staff on a need-to-know basis for approved educational, debriefing, assessment, quality improvement, or research purposes.
 - b. *Security Measures:* The Simulation Center employs multiple security layers, including individual user accounts with password protection, role-based security levels defining permissions, secure College District network infrastructure, and data storage in a secure, private environment shielded from public access.
 - c. *Learner Confidentiality:* Simulation recordings containing identifiable learner information are confidential educational records. Access controls protect learner privacy. Recordings shall not be shared outside authorized user groups or used for unauthorized purposes without appropriate consent or as permitted by FERPA and institutional policy.
- iv. **Records Retention and Disposition:**
 - a. *Retention Schedule:* Simulation recordings (formative, summative, high-stakes) shall be retained for a standard period of **two (2) years** from the date of creation, allowing sufficient time for review, assessment, and quality improvement activities.
 - b. *Differentiation:* Data collected for IRB-approved research may be subject to different retention schedules per the research protocol.
 - c. *Disposition:* Following the two-year retention period, recordings will be securely deleted. This process will be managed (*Specify method, e.g., "manually by authorized Simulation Center staff," "via automated system settings"*) according to destruction timelines approved under the College District's Records Management Program and the Texas Local Government Records Act.

- d. *Holds*: Records subject to legal holds, audits, or investigations must be retained beyond the standard schedule until the hold is officially lifted.
- v. **Documentation**: Compliance artifacts, such as system configuration reports or activity logs, may be maintained as needed for operational review or auditing.

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16. Medical Waste and Hazardous Materials

a. Sharps

All needles and/or sharps should be disposed of properly in the sharps containers provided throughout the Simulation Center. Simulation staff will package sharps containers that are full in accordance with OSHA compliance standards and replace with new containers. Simulation staff will arrange for disposal of packaged sharps with our contracted medical waste disposal service. Easy to use procedural signage on proper sharps disposal is posted at every sharps disposal station.

b. Biohazardous Waste

The Simulation Center, dedicated to simulation-based training, generally produces little to no biohazardous waste during patient care exercises. The exception to this is for glucose test skills training, in which students will perform a fingerstick on each other under the supervision of a faculty member. The fingerstick procedure, conducted with single use disposable safety lancets, may produce a small amount of blood that must be wiped clean and disposed of in accordance with OSHA compliance standards for biohazardous waste. The Simulation Center has a number of Biohazardous Waste stations for this purpose with easy to use procedural signage. Simulation Center staff package and coordinate disposal of biohazardous waste through a contracted medical waste service.

c. “Clean” Needle Stick Policy

Because the Simulation Center uses no “live” medication and performs no invasive procedures, an accidental needle stick is considered a “clean” needle stick injury. In the event of a “clean” needlestick simulation staff and/or supervising faculty should be notified immediately. First aid should be provided as needed. A [Student Injury Report](#) should be completed by the supervising faculty and the student should be referred to the school nurse if necessary. The student should be informed of the possible outcomes of a “clean” needle stick including bleeding, tenderness, and infection. Supervising Faculty should follow up with the student and provide notification should any serious complications develop.

d. First Aid Kit

A First Aide Kit is mounted in the Simulation Center Skills Lab (CHP 216) near the lab storage

area.

e. Hazardous Materials

The Simulation Center keeps digital files of Material Safety Data Sheets for all potentially hazardous chemicals stored in the Center as well as printed copies in CHP 218 Storage.

17. Policy and Consent to Film Acknowledgement:

**ST. PHILIPS COLLEGE
Simulation Center
CONFIDENTIALITY/POLICY AGREEMENT AND CONSENT TO FILM**

As a Health Sciences student enrolled at St. Philip's College, I may be participating in simulated clinical encounters (SCE's). I understand that simulations may be photographed and/or filmed for educational purposes. I also understand that the content of these simulations must be kept confidential in order to maintain the integrity of the learning experience. I will also be observing fellow students within the Simulation Center and will not discuss their performance with anyone outside of Faculty-led discussions.

I fully understand and acknowledge that the unauthorized release/ mishandling of confidential information or inappropriate exchange of information is prohibited, and disciplinary action may occur if I violate this agreement. I have also read and understand all policy guidelines of the Simulation Center and will abide by them while in the Center.

I will demonstrate the same professionalism in the simulation lab as I would on the job. I will treat all simulated encounters as true clinical encounters by treating the situation, the patient simulators, and/or the standardized patients as I would in a real clinical setting.

I will abide by the Simulation Center Code of Conduct stated below.

The Dr. Frank Bryant, Jr. Patient Simulation Center & Nursing Laboratories is committed to providing simulation-based clinical training that is safe, realistic, and effective. To facilitate this, all participants in simulation should:

- *Demonstrate academic and professional integrity*
- *Show respect to self, others, and simulation resources*
- *Maintain confidentiality of simulation activities and student performance*
- *Maintain a realistic simulation environment*
- *Dress appropriate to your profession*
- *Be prepared, be punctual, and be positive*
- *Preserve a no cell phone environment*

[Click Here to Submit Your Acknowledgement](#)

References

International Nursing Association for Clinical Simulation and Learning (INACSL) Standards Committee. 2016. INACSL Standards of Best Practice: SimulationSM Debriefing. *Clinical Simulations in Nursing*, 12, S21-25. <http://dx.doi.org/10.1016/j.ecns.2016.09.008>

International Nursing Association for Clinical Simulation and Learning (INACSL) Standards Committee. 2016. INACSL Standards of Best Practice: SimulationSM Simulation Glossary. *Clinical Simulations in Nursing*, 12, S39-S47. <http://dx.doi.org/10.1016/j.ecns.2016.09.012>

International Nursing Association for Clinical Simulation and Learning (INACSL) Standards Committee. 2016. INACSL Standards of Best Practice: SimulationSM Simulation Design. *Clinical Simulations in Nursing*, 12, S39-S47. <http://dx.doi.org/10.1016/j.ecns.2016.09.005>