

GUIDE TO EXECUTING A SUCCESSFUL JUST IN TIME SIMULATION

PART I: Simulation

1. Identify a patient in which to derive case scenario

- a. May be a “watcher”, a patient with higher likelihood of clinical decline.
- b. Can be a “stable” patient in which deliberate practice of contingency planning can be performed.

**In our video example, the team identified a 14 year old male who was just transferred to the inpatient floor from the PICU with a working diagnosis of atypical pneumonia. He has been afebrile on his current antibiotic regimen. He is s/p bilateral chest tube removal and extubation 2 days prior.*

2. Set a time and location conducive to your learners

** At our institution we start 30 minutes prior to inpatient rounds, as to not interrupt workflow; this time also allows bedside nurse to participate. We set up a treatment room closest to the actual patient’s bed location as this typically is the first patient the team rounds on if they are a “watcher.”*

3. Decide roles for educators

- a. Potential roles include: simulator computer operator, facilitator, confederate (i.e. family member or bedside nurse if one not available)

5. Case development

- a. Determine what element of deterioration or deliberate practice you wish to simulate.
 - i. If you have a simulation mannequin available, what do you want your parameters to be?
** In our example, this involved new onset respiratory distress and fever.*
- b. Design learning objectives keeping all participants in mind.
 - Recognize a patient in respiratory distress and intervene (i.e. place on O2, obtain CXR)
 - Identify a patient in shock and start early fluid resuscitation being mindful to re-evaluate.
 - Make a plan for escalation of care, i.e. call a rapid response.

PART II: Debrief

1. Introduce that the debrief is now taking place and remind the participants that this is a safe place

2. Three key components of the debrief:

- a. Identify initial reactions or feelings (“How did that feel?”)
- b. Emphasize teaching points in non-judgmental fashion (“I noticed that you were hesitant to call a rapid response; I’ve seen in practice that the call is often delayed, can you tell me what your thought process was?”)
- c. Take-away (“What is one lesson that you will take away from this experience?”)

3. Remember to balance the teaching objectives that you establish with what you observe during the simulation.

- a. Take notes that you can refer to.
- b. Sometimes you may encounter a teaching point that needs to be addressed over those that you have designed.

4. Establish what contingency plans, the team will derive from this experience

- a. Try to have learners solidify contingency plans as “if this, then...”

