Comparison of Components Among Simulation Centers: An International Analysis

Objectives

- Identify common components of simulation centers located in a variety of practice settings.
- Compare and contrast characteristics of simulation centers located in a variety of practice settings.
- Identify gaps that can impact a simulation center’s ability to meet its strategic objectives and/or Society for Simulation in Healthcare accreditation standards.

Results Summary Overview

- Majority in Community Colleges (41%) or Large Academic centers (35%)
- Majority serve nursing students (91%)
- Majority under 5000
- Majority in Community Colleges (41%) or Large Academic centers (35%)
- Majority in Community Colleges (41%) or Large Academic centers (35%)
- Most had no business model (81%)
- Only 14% were partnerships or consortiums
- 54% utilized Standardized Patients
- 59% of simulations facilitated by academic staff.
- 54% of centers had only 1 full time employee
- 45% of centers had only 1 full time employee

Method

Survey design was utilized to collect data from simulation centers based in a variety of settings including community colleges, large academic institutions, healthcare organizations, and state or regional consortiums. © 2014 Qualtrics, LLC Online Survey & Insight Platform was used for survey distribution and data analysis. A 25 item survey was authored by the researchers using a modified version of a simulation center description tool acquired through the National League for Nursing Simulation Educator Leadership (NLN SimLeader) Program. A pilot study was conducted including 20 participants from the NLN SimLeader program. Following data analysis, survey questions were reviewed and modified for clarity. One question was added in order to identify geographic region of simulation centers. For the large scale study, participants were invited to complete the 26 item survey through the NLN Simulation Information Resource Center (SIRC), Healthy Sim Linked-In page, Society for Simulation in Healthcare (SSH) Nursing Community Section and Facebook page and International Nursing Association for Clinical Simulation and Learning (INACSL) Facebook page. Survey response rate, including the pilot study, was 72%.

Recommendations

This survey presented this team with a considerable amount of data to evaluate. The initial objective will be to establish criteria for defining a large versus a small center. Variables could include square feet, number of contact hours, or number of personnel. The roles and functions of the centers’ personnel may reveal information about the sustainability of the centers. Examples include possible correlations in direct management of the budget, tech support, dedicated personnel to facilitate simulations and the continued successful operation of the center. The survey contained a free response question regarding challenges faced by the simulation center. Thematic analysis of these responses will provide further insight into the direction of future research. Only a small percentage of the surveyed centers were SSH accredited. Future data analysis may reveal variations in staffing patterns, funding, and/or space. SSH accreditation and the INASCL standards are considered best practice in simulation, and this team hopes to be able to identify challenges to meeting those standards, and inform decision making for the design and operation of simulation centers.

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