Simulation Education Advisory Committee (SEAC) update

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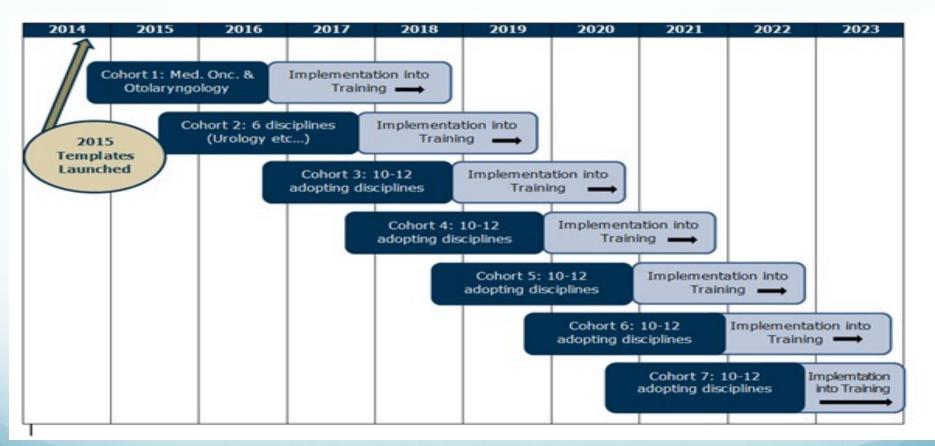
CRISIS RESOURCE MANAGEMENT







CBD Discipline Rollout: Proposed Implementation Plan



Technology-enhanced simulation training improves outcomes

- Cook D & Hamstra S performed meta-analysis, identified 609 studies enrolling 35,000 trainees
- In comparison with no intervention effect sizes were significant for: knowledge outcomes, time skills, time behaviors and direct benefit to patients

Cook DA et al. Technology-Enhanced simulation for Health Professions Education. A systematic Review and Meta-Analysis JAMA 2011; 306(9):978-988.

doi:10.10001/jama.2011.1234

Simulation and assessment

- Simulation undoubtedly has a key role to play across specialties in formative evaluation utilizing principles of deliberate practice & mastery learning
- Simulation and summative evaluation is likely also important especially with high-stakes assessment

Chiu M et al. Can J Anesth 2016'(63):1357-1363

Nguyen L et al Can Urol Assoc J 2015;9(1-2):32-36

Simulation and patient safety

- Simulation programs are already heavily invested in patient safety and quality improvement within organizations
- An opportunity exists, particularly at University of Toronto, to lead the way and leverage existing simulation resources for all health professions

Barriers to integrating simulation into curriculum

- Logistics
- Cost
- Space
- Faculty development
- Assessment







Current Simulation centres

- Largely funded by TAHSNe centers and partners
- Accreditation:
 - Royal College of Physicians and Surgeons
 - American College of Surgeons
 - Society for Simulation in Healthcare
- Non-accredited programs
- Informal/ad hoc

SEAC - Mandate

- Engage the active players in the field of simulation currently involved in Faculty of Medicine, University of Toronto education across the GTA
- Bring together key partners with expertise in the delivery and formulation of simulation activity (TAHSNe, SimONE, CFD)
- Understand current strengths and future capacity (expertise, equipment, resources, scholarly activity)
- Lay the foundation for a future network in order to: improve the delivery of efficient and effective education, foster collaborative academic activity (annual symposium, external review)

Initial Findings

- Wealth of resources and expertise within simulation across all specialties
- Isolation of sim programs
- Only a small amount of innovation, clinical research occurring
- Costs are variable and often prohibit collaborative work for educators and administrators alike

SEAC - Deliverables

- Held 6 meetings with all the major TAHSNe simulation program managers and medical leads, along with our valued simulation partners
- Developed and administered an environmental scan of these major program sites (Structure, Resources, Scholarship, Strengths & Weaknesses)
- Collated and summarized data, currently in preparation for an initial report to the Dean of Medicine

SEAC - Deliverables

- Inaugural University of Toronto Simulation Symposium – January 24th, 2018
- Next steps:
 - External review
 - Second round of survey, in order to bring in other institutions and key players in the delivery of simulation

Simulation Network Faculty of Medicine

- Common administrative platform
- Provide quality learning experience for our continuum of learners (UME, PGME, CME) using evidence-based principles
- Seamless integration of allied health disciplines (existing local staff, partnerships with other organizations)
- Foster a collective environment for clinicians, and engage researchers, innovators, industry

Inaugural Simulation Symposium

Save the Date!

January 24, 2018

8 am -1 pm





