

Illinois Board of Nursing

Guidelines for the Use of Simulation by Prelicensure Nursing Programs

All Illinois pre-licensure nursing programs are encouraged to follow the *NCSBN Simulation Guidelines for Prelicensure Nursing Programs* delineated in Alexander, Durham, Hooper, Jeffries, Goldman, Kardong-Edgren, Kesten, Spector, Tagliareni, Radtke, and Tillman (2015).

Nursing program faculty members maintain the flexibility of defining simulation hours as they do clinical hours and as such, simulation hours are considered equivalent to clinical hours. Just as clinical hours include a variety of activities in addition to direct patient care as pre-conference and post-conference, simulation hours may include time spent for pre-conferences, preparation for patient care assignments, and de-briefing.

The program is responsible for defining and evaluating achievement of program outcomes as well as for selecting and implementing teaching/learning strategies to support achievement of the outcomes. These responsibilities are within the realm of the MSN prepared faculty.

- A nursing program may opt to utilize a maximum of 25% of its total program's designated clinical hours to meet learning outcomes through the use of simulation. Registered nurse(s) who is (are) master's prepared in nursing will serve to coordinate, conduct, and evaluate simulation-based learning experiences.
- If a nursing program proposes to designate more than 25% of the clinical hours of a *single* course to the use of simulation experiences to meet the learning outcomes of that course, the program will submit the following documentation relative to that course.
 - Syllabus
 - Course number and title
 - Course objectives
 - Course credits and hours designated for didactic, campus lab, clinical lab, and simulation experiences
 - Course assessment measures
 - Simulation template and process
 - Evaluation process and tool relative to course objectives and program learning outcomes
 - Documentation of equipment and supplies to create a realistic environment. Select one high-fidelity scenario being used in course and delineate the supplies and equipment used in conducting that simulation.

In addition, the program is required to submit evidence of meeting the *NCSBN Guidelines for Prelicensure Nursing Programs* from Alexander et. al. (2015) which are provided below.

Approved by BON 11/06/2015

Reviewed by BON 11/01/2024 – No changes.

NCSBN Simulation Guidelines for Prelicensure Nursing Programs

Guidelines	Evidence	Resources
There is commitment on the part of the school for the simulation program.	<ul style="list-style-type: none"> • Letter of support from administrators stating the program has their backing and will be given the resources to sustain the program on a long-term basis. • Budgetary plan for sustainability and ongoing faculty training is in place • Written short-term and long term objectives for integrating simulation into the undergraduate curriculum and evaluating the simulation program. 	
Program has appropriate facilities for conducting simulation	<ul style="list-style-type: none"> • A description of the physical space for conducting simulations including the lab, storage/staging areas and a place for debriefing. 	
Program has the educational and technological resources and equipment to meet the intended objectives	<ul style="list-style-type: none"> • Program has a plan that describes the simulation resources and equipment that will be used to achieve the objectives. 	See Scenario Resources Document
Lead faculty and sim lab personnel are qualified to conduct simulation	<ul style="list-style-type: none"> • Submission of CVs and evidence of qualifications such as: simulation conferences attended, coursework on simulation instruction, certification in simulation instruction, training by a consultant or targeted work with an experienced mentor 	<ul style="list-style-type: none"> • SIRC Courses • Simulation Preparation Programs • Webinars and presentations based on <i>INASCL Standards of Best Practice: Simulation</i> • CHSE Certification • Three-Step Program at Boise State • Textbooks: Jeffries (2007) <i>Simulations in Nursing Education: From Conceptualization to Evaluation</i>; Jeffries (2013) <i>Clinical Simulations: Advanced Concepts, Trends, and Possibilities</i>; and Palaganas, J.C., Maxworthy, J.C., Epps, C. A., Mancini, M.E. (2015). <i>Defining Excellence in Simulation Programs</i>

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Reviewed by BON 11/01/2024 – No changes.

Faculty are prepared to lead simulations		<ul style="list-style-type: none"> • See NCSBN Simulation Faculty Preparation Checklist
Program has an understanding of policies and processes that are a part of the simulation experience.	<ul style="list-style-type: none"> • Policies describing the following, include, but are not limited to: method of debriefing; plan for orienting faculty; qualifications of faculty and sim lab personnel; plan for training new faculty; evaluation methods. 	<ul style="list-style-type: none"> • Socratic Method of Debriefing • See NCSBN Program Preparation Checklist • INASCL Standards

BONs and nursing programs should also consider the following criteria when determining the amount of simulation that can substitute for traditional clinical hours: overall number of clinical hours required, student pass rates, availability of clinical sites, turnover of faculty and program directors, student complaints, and retention rates.

In addition, in preparation for using simulation, faculty and programs should use the following checklists:

Faculty Preparation Checklist

- The simulation program is based on educational theories associated with simulation, such as experiential learning theory.
- The faculty members are prepared by following the INACSL *Standards of Best Practice: Simulation*.
- A tool for evaluating simulation-based learning experiences has been designed based on the INASCL *Standards of Best Practice: Simulation* evaluation methods.
- The program curriculum sets clear objectives and expected outcomes for each simulation-based experience, which are communicated to students prior to each simulation activity.
- The faculty members are prepared to create a learning environment that encourages active learning, repetitive practice, and reflection and to provide appropriate support throughout each activity.
- The faculty members are prepared to use facilitation methods congruent with simulation objectives/expected outcomes.
- The program utilizes a standardized method of debriefing observed simulation using a Socratic methodology.
- A rubric has been developed to evaluate the students' acquisition of KSAs (knowledge, skills, and attitudes) throughout the program.
- The program has established a method of sharing student performance with clinical faculty.
- The program collects and retains evaluation data regarding the effectiveness of the facilitator.
- The program collects and retains evaluation data regarding the effectiveness of the simulation experience.
- The program provides a means for faculty members to participate in simulation-related professional development, such as webinars, conferences, journals, clubs, readings, and

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certifications such as certified health care simulation educator (CHSE), and participation in NLN Sim Leaders/Sigma Theta Tau International (STTI) Nurse Faculty Leadership Academy (NFLA) with a focus on simulation.

Program Preparation Checklist

- The school has created a framework that provides adequate resources (fiscal, human, and material) to support the simulation.
- Policies and procedures are in place to ensure quality-consistent simulation experiences for the students.
- The simulation program has an adequate number of dedicated trained simulation faculty members to support the learners in simulation-based experiences.
- The program has job descriptions for simulation faculty members/facilitators.
- The program has a plan for orienting simulation faculty members to their roles.
- The program uses a needs assessment to determine what scenarios to use.
- The simulation program provides subject-matter expertise for each scenario debriefing.
- The program and faculty members incorporate the INACSL *Standards of Best Practice: Simulation*.
- The program has appropriate designated physical space for education, storage, and debriefing.
- The faculty members have a process for identifying what equipment or relevant technologies are needed for meeting program objectives.
- The program has adequate equipment and supplies to create a realistic patient care environment.
- The faculty use evaluative feedback for quality improvement of the simulation program.
- The administration has a long-range plan for anticipated use of simulation in the forthcoming years.

Alexander, M., Durham, C., Hooper, J., Jeffries, P., Goldman, N., Kardong-Edgren, S., Kesten, K., Spector, N., Tagliareni, E., Radtke, B., and Tillman, C. (2015). NCSBN Simulation Guidelines for prelicensure nursing programs. *Journal of Nursing Regulation*, 6(3), 39-42.

Hayden, J., Smiley, R., Alexander, M., Kardong-Edgren, S., and Jeffries, P. (2014). The NCSBN National Simulation Study: A longitudinal, randomized, controlled study replacing clinical hours with simulation in prelicensure nursing education [Supplement]. *Journal of Nursing Regulation*, 5(2).