

# Goal: Implement practicing for patient simulation drills on your obstetric unit to improve communication and patient outcomes

1. Who do you need to include for your presentation on the program to obtain support?

| A. Leadership          |      |       |
|------------------------|------|-------|
| Position               | Name | Email |
| Administration         |      |       |
| Department Chair/Chief |      |       |
| Nursing Leadership     |      |       |
| Other                  |      |       |

| B. Key Staff / Faculty |      |       |
|------------------------|------|-------|
| Position               | Name | Email |
| Nursing Lead           |      |       |
| Physician Lead         |      |       |
| Anesthesia             |      |       |
| Blood Bank             |      |       |
| Laboratory             |      |       |
| Other                  |      |       |

2. Define when Simulation training will occur (scheduled vs. unnannounced, after morning rounds, before shift changes, etc.):

### 4. Simulation Scheduling and Setup:

| Task  | Name | Email |
|---|------|-------|
| Nursing scheduling  |      |       |
| Physician/CNM scheduling                                    |      |       |
| Scheduling drill/blocking room                              |      |       |
| Simulator setup   |      |       |
| Coordination with other services<br>(anesthesia/blood bank) |      |       |
| Other   |      |       |

## 5. What staff/personnel need to be present at the simulation?

- Recommend ensuring multidisciplinary and at least physicians / nurses
- Include other departments (anesthesia / laboratory / blood bank) if possible

### 6. Where will you run your simulations?

- Labor and delivery
- Postpartum unit
- Obstetric clinic
- Emergency room
- Other

### 7. Training of staff responsible for running drills:

- Identify who will be trained
- Who/how many needed to run simulation

### 8. What simulation equipment will be used for training?

- What is currently available at your institution?
- Do you need another simulator and if so, what is your budget?
- Do you have personnel who know how to use it?

#### 9. What will the protocol be to follow up on issues identifed:

- How to distribute learning points and changes?
- How to monitor changes are made?

#### 10. Metrics:

- What process metrics will you use to measure success?
- What outcomes will be evaluated?

11. What is a realistic date to run your initial simulation:

## Practicing for Patients—Implementation Checklist

| To Do Item  | Deadline |
|---|----------|
| Presentation of plans to leadership                                 |          |
| Presentation of plans to staff/providers                            |          |
| Training of simulation facilitators                                 |          |
| Protocol for follow-up on issues identified during drills completed |          |
| Plan to monitor if simulation drills are being done                 |          |
| Date to begin simulation drills                                     |          |
| Evaluation of outcomes plan (3–6 months)                            |          |

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