Integrating the patient and family experience into simulation based education to enhance patient and family centred care

PACE Forum Workshop – November 29, 2016

Susan Cosgrove, Family Leader
Darlene Hubley, Interprofessional Education Lead
Kathryn Parker, Senior Director, Teaching and Learning Institute
Holland Bloorview Kids Rehabilitation Hospital

Holland Bloorview Kids Rehabilitation Hospital is Canada’s largest Children’s rehabilitation hospital, fully affiliated with the University of Toronto. We pioneer treatments, technologies, therapies and real-world programs that give children with disabilities the tools to participate fully in life.

- 600 inpatient admissions
- 58,000 outpatient visits
Simulation Team

Amir Karmali, Family-Centred Care Specialist

Kimberley Siu-Chong, LL.B., ACC.F.M. (OAFM) Client and Family Relations Facilitator

Laura Williams, MSW, RSW, Director, Client and Family Integrated Care

Kathryn Parker, MA., PhD., Director, Teaching and Learning Institute, Simulation Lead

Becky Quinlan, MEd Family Leader

Darlene Hubley, MScCH, OT (Reg.) Ont. IPE Lead Teaching and Learning Institute
Objectives for the next hour

• Identify key steps in the creation of authentic simulations.

• Describe how meaningful discussion can emerge through simulation based education.
What is simulation?

https://www.youtube.com/watch?feature=player_detailpage&v=Z9C0yVgTcbs
Simulation is the imitation or representation of one act or system by another.

Healthcare simulations can be said to have four main purposes – education, assessment, research, and health system integration in facilitating patient safety.

(Society for Simulation in Healthcare)
Why do we do it?

Training and simulation for patient safety

Rajesh Aggarwal, Oliver T Mytton, Milliard Derbrew, David Hananel, Mark Heydenburg, Barry Issenberg, Catherine MacAulay, Mary Elizabeth Mancini, Takeshi Morimoto, Nathaniel Soper, Amitai Ziv, Richard Reznick

Does Simulation-based Medical Education with Deliberate Practice Yield Better Results than Traditional Clinical Education? A Meta-Analytic Comparative Review of the Evidence

Dr. William C. McGaghie, PhD,
Jacob R. Suher, MD, professor of medical education, professor of preventive Medicine, and director of evaluation, NUCATS Institute, Northwestern University Feinberg School of Medicine, Chicago, Illinois
What makes it effective?

WEB PAPER

Comparative effectiveness of instructional design features in simulation-based education: Systematic review and meta-analysis

DAVID A. COOK, STANLEY J. HAMSTRA, RYAN BRYDGES, BENJAMIN ZENDEJAS, JASON H. SZOSTEK, AMY T. WANG, PATRICIA J. ERWIN & ROSE HATALA

Mayo Medical School, USA; Mayo Clinic College of Medicine, USA; University of Ottawa, Canada; University of Toronto, Canada; University of British Columbia, Canada

Medical Teacher, Vol. 27, No. 1, 2005, pp. 10–28

Features and uses of high-fidelity medical simulations that lead to effective learning: a BEME systematic review*

S. BARRY ISSENBERG, WILLIAM C. McGAGHIE, EMIL R. PETRUSA, DAVID LEE GORDON & ROSS J. SCALESE

Center for Research in Medical Education, University of Miami School of Medicine, USA; Northwestern University Feinberg School of Medicine, USA; Duke University Medical Center, USA
How do we define simulation at Holland Bloorview?

How can simulation serve this hospital so that a world of possibility can be realized for our clients and families?
How can simulation serve clients and families?
How can simulation serve clients and families?
How can simulation serve clients and families?

5 Strategies of Appreciative Leadership

- make choices for the good of the whole
- high levels of trust
- expected to give their best
- Integrity
- ask powerful questions
- let people know you value them
- value their contribution
- share thoughts
- ask people
- future
- success
- Inquiry
- bring out the best of
- people
- situation
- Inspiration
- awakens the creative spirit
- provides direction
- gives hope
- unleashes energy
- innovation happens
- high performance
- give sense of belonging
- people feel cared for
- engage people to cocreate / collaborate
- give confidence
- encouragement
- take risks
- Ref: Appreciative Leadership
  by: Diana Whitney
  Amanda Trosten-Bloom
  35, 2013
Engaging system voices early in the design and development process enhances authenticity.
Methodology of our “Build Day”

- **31 participants:** Interdisciplinary group, including families, management and frontline staff.

- **Follow Up Exercise:** Reflections on the Build Day.

- **Assigned to groups based on principles of CFCC.**

- **Goal for each group:** Generate two simulation scenarios (one outpatient and one inpatient).

- **Participants shared their personal and professional experiences.**
Output of the Build Day

8 Scenarios Designed

| 5 Outpatient | 3 Inpatient |

Certified Simulationist Training

| 2 additional staff members | 2 Family Leader |

4 Scenarios Further Developed

| Co-creative design process with Build Day Participants | Launched December 2013 orientation – training for new and existing staff |
Reflections on the Build Day

SIMULATION BUILD AS EDUCATION

- 70% of respondents indicated that the day significantly increased their understanding of the principles of client and family integrated care.

ENABLERS OF SUCCESS

- Story telling from multiple perspectives and the use of the templates were identified as the most helpful components of the day.

CONTINUING COMMUNITY ENGAGEMENT

- Over half of the participants indicated that they wanted to continue with the development and implementation of the scenarios.
Clients and Families as Partners in the implementation process
Supporting Clients and Families as Simulationists
Let us show you what we mean...

**Partnership (Collaboration)**

The scenario is about two staff members who meet with a family member. The family and the early childhood educator (ECE) have an established relationship as they’ve know each other since the beginning of the school year however, the occupational therapist (OT) is a relatively new staff member who is meeting the family for the first time. The purpose of the meeting is to review the goals that were set collaboratively by the team and family earlier in the school year.