

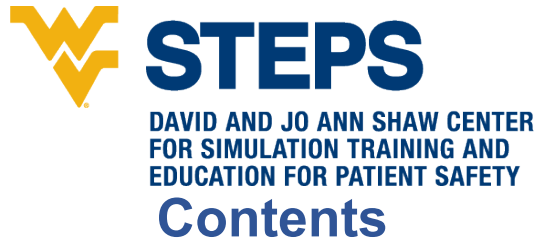
STEPS

Policy & Procedure Manual



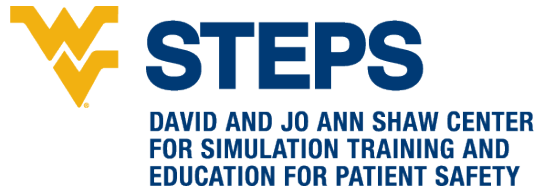
Jason Craig

WEST VIRGINIA UNIVERSITY

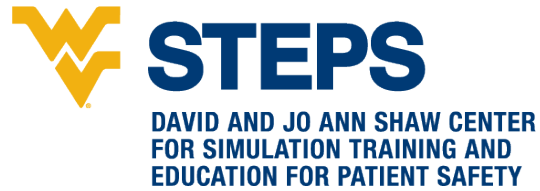


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STEPS and WVU School of Medicine Mission and Vision Statements

STEPS:

Mission – Optimizing patient safety and the quality of healthcare.

Vision – Exceptional Care  Better Health

WVU School of Medicine:

Mission – Improving the health and wellbeing of everyone we serve.

Vision – A hopeful and healthy West Virginia.

AD01: Naming Convention and Signing

Purpose:

To ensure consistent naming and numbering of policies and procedures.

Scope:

STEPS Leadership

Anyone writing policies and procedures for STEPS

Responsibilities:

- STEPS Leadership: Provides oversight that all new policies are named and numbered according to policy. Also ensures that updates are numbered as per policy and maintained in a centralized location.
- STEPS Staff writing policies: Those writing policies will name and number according to policy. They will also sign as the author of the policy.
- Medical Director or designee: Reviews new and updated policies to ensure proper naming and number. If not the author of the policy, will sign in place of the Director.
- Director or designee: Reviews new and updated policies to ensure proper naming and numbering. If not the author of the policy, will sign all policies.

STEPS Staff: When writing new or updating policies, they will ensure that numbering is according to the new policy.

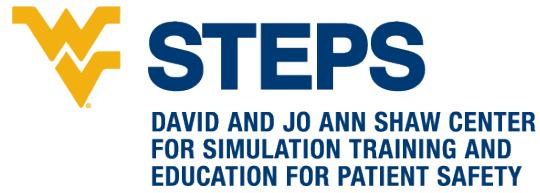
Definitions:

None required for this policy.

Procedures:

Naming and numbering of new policies will be done as follows:

- Policies will be included in one of the designated categories.
- The first two initials and numbering order within the category will be used to designate the policy.
- The name of the policy will be according to the category and/or the intent of the policy.
- Updates will be numbered in sequential order based on the extent of change. (i.e. 1.0, 1.2, or 1.0, 2.0, etc.)
- The Director will sign policies unless they are the author of the policy. In that case, the Medical Director will sign the policy.



Policy: AD01
Adopted: January 25, 2018
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Daniel Summers
Author

July 18, 2018
Date

X Dorian Williams
Approver

July 18, 2018
Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	February 5, 2018
2.0	New Policy Format	July 18, 2018

AD02: Dress Code

Purpose:

To ensure STEPS staff, faculty, and instructors present themselves to our customers in a professional manner. Staff should be aware that appearance is an integral part of our image and contributes to professionalism. Inappropriate dress could be detrimental to our mission and vision.

Scope:

This policy applies to all staff, faculty, and instructors representing STEPS.

Responsibilities:

Enforcement of this policy will be the responsibility of the direct supervisor for staff. Faculty not assigned directly to STEPS and guest instructors will be under the discretion of STEPS Director or Medical Director. It is the responsibility of all to police each other in order to maintain our professional appearance at all times.

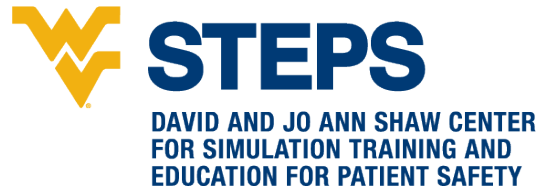
Definitions:

None required for this policy.

Procedures:

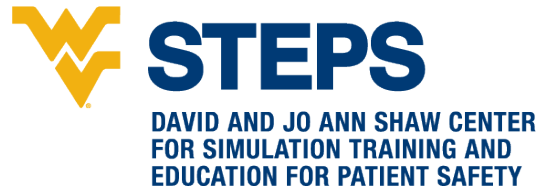
All staff, faculty, and instructors must demonstrate professionalism and a businesslike attitude through their appearance.

- All must be clean and well-groomed. Grooming preferences or dictates by religion, ethnicity, etc. are not restricted but should always be well-presented.
- All clothing should be clean and in good repair. Rips, tears, or holes are not appropriate.



Policy: AD02
Adopted: January 25, 2018
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

- All clothing must be appropriate for this setting. Clothing worn for workouts, outdoor activities, or recreation are not allowed.
- All clothing must project professionalism. Clothes that are too revealing or inappropriate for this venue will not be allowed.
- Clothing with writing or decals that might be perceived as offensive or inappropriate are not allowed.
- Exception to the above (i.e. jeans day, holiday attire, etc.) will be at the discretion of the director.



Policy: AD02
Adopted: January 25, 2018
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Daniel Summers

Author

July 19, 2018

Date

X Dorian Williams

Approver

July 19, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	October 1, 2009
2.0	The SOP template was updated, and the dress code process was further defined.	May 2, 2017
3.0	New Policy Format	July 19, 2018

AD03: STEPS Oversight and Integration Leadership (SOIL)

Purpose:

The purpose of this policy is to describe the structure and function of the STEPS Oversight and Integration Leadership (SOIL). This group serves to help STEPS achieve its vision (Exceptional care -> Better health.) and support its mission. The SOIL functions as an Advisory Committee with bi-directional communication.

Scope:

- Provide insight and advice into emerging trends utilizing technology in healthcare education.
- Review/oversight of STEPS Committees (Executive Committee functions).
- Accreditation oversight both STEPS accreditation and meeting accreditation requirements of those we serve.
- Review, advise, recommend, and initiate, policies, and issues relating to STEPS
- Serve as a channel through which faculty at large may introduce matters for consideration.
- Address concerns or complaints unable to be handled by EQI or STEPS Leadership

Responsibilities:

Members include:

STEPS Medical Director, STEPS Director, IPE Director, One appointed representative from each of the Health Sciences Schools, and WVU Hospital Education Leader. Chair to be chosen from the membership excluding the Medical Director and STEPS Director.

Reports to the Assoc. VP for Academic Affairs through the Medical Director

- **STEPS Medical Director**
 - Serves as Advisor to the Committee
 - Works with the Chair and STEPS Director to develop meeting agendas
 - Reviews meeting minutes
 - Has overall responsibility for ensuring appropriate use of STEPS facilities and staff

- **STEPS Director**
 - Serves as Chair of the Committee in the Chair's absence
 - Works with the Chair and Medical Director to develop meeting agendas
 - Reviews meeting minutes
 - Responsible for the day-to-day operations of STEPS facilities and staff

- **Committee Members**
 - Assists committee Chair and STEPS director with meeting agendas
 - Attends meetings whenever possible
 - Reviews and votes on approval of action items
 - Collects and reports on matters of Simulation as it relates to their constituents
 - Sends a designee to the meeting in their absence if possible

- **Administrator**
 - Responsible for scheduling meetings.
 - Takes meeting minutes, disseminates them to members and files them for later reference.
 - Acts as a point of contact for committee business
 - Actively participates in meetings and committee correspondence.

Definitions:

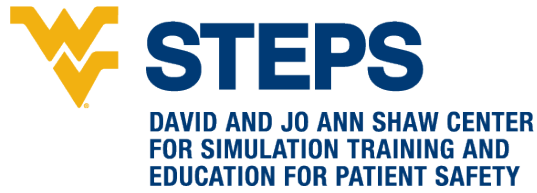
Term or Acronym/Abbreviation	Definition
STEPS	Simulation Training and Education for Patient Safety
SOIL	STEPS Oversight and Integration Leadership

Procedures:

- The STEPS Oversight and Integration Leadership shall typically meet on a quarterly basis and ad hoc meetings as needed.
- Minutes from the prior meeting will be presented for approval then archived.
- Agenda items will be distributed prior to the meeting
- The STEPS Medical Director, STEPS Director or invited STEPS Committee chairs/designees will present a summary of each committee activities since the last SOIL meeting.
- Each Committee Member will provide an update for the School or area they are representing
- Minutes will be generated and distributed for comment.

References:

- None required for this policy.



Policy: AD03
Adopted: January 25, 2018
Reviewed/Revised: January 29, 2024
Author: Dorian Williams
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Dorian Williams
Author

January 29, 2024
Date

X Daniel Summers
Approver

January 29, 2024
Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	January 25, 2018
2.0	Updated to common STEPS format policy	July 23, 2018
2.1	Vision update and removed reference to old advisory committee.	January 29, 2024

AD04: Orientation

Purpose:

To ensure faculty, staff and learners have a role-appropriate introduction to the rooms, equipment, capabilities, and purpose of STEPS.

Scope:

This policy applies to all individuals who utilize STEPS.

Responsibilities:

Enforcement of the policy will be the responsibility of the STEPS Director, or his designee.

Definitions:

None required for this policy.

Procedures:

Staff will receive an appropriate and ongoing orientation to the center by way of their initial training, and utilization of the STEPS Orientation Manual. The individual responsible for the specific area of the staff member's training will sign their initials by the appropriate space on the trainee's orientation checklist and/or onboarding form.

Faculty/Educators will be given an initial tour of the center, and will have a meeting with designated staff members regarding scheduling, usage, and capabilities according to their needs. New faculty inexperienced to the simulation modality will be provided with an orientation course. In addition, specific simulation training sessions will be made available as the need and demand arises, such as lunch & learn sessions, teaching scholar courses, conferences, and other opportunities.

Learners: Faculty/Educators are expected to properly orient their learners to the simulation environment prior to their simulation encounters. This is expressed to them through the various orientation sessions mentioned above.

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Policy: AD04
 Adopted: April 28, 2017
 Reviewed/Revised: October 2023
 Author: Jason Craig
 Approver: Daniel Summers

Appendix A: Generic Onboarding Form:

ONBOARDING STEPS			
Title	Description of Item	Equipment Check-Off	Signature - Date
Equipment Needs			
Desk Top Computer			
2 Monitors			
Wire less Key board/mouse			
Desk Phone			
Laptop			
Software Needs			
Description of Item	Software Check-Off	Signature - Date	
Microsoft Office			
LearningSpace			
SharePoint			
Access Needs			
Description of Item	Access Check-Off	Signature - Date	
Trainings for Position			
Description of Item	Training Check-Off	Signature - Date	
Committee Responsibilities			
Description of Item			
Other			
Links to helpful information			

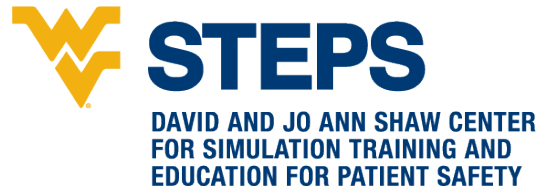
Appendix B: Employee Orientation Checklist:

New Employee Checklist

Employee: _____

Emp. Init.		Date	Trainer
	Provide with access to Sharepoint Orientation Materials		
	Conduct tour of center		
	Introduction to Human Patient Simulator		
	Introduction to SimMan and SimMan 3G		
	Introduction to METIMan		
	Introduction to Advanced Airway Trainers		
	Introduction to CAE PediaSIM		
	Introduction to BabySIM		
	Introduction to SimNewB		
	Introduction to Gaumard NOELLE		
	Introduction to Gaumard Newborn HAL		
	Introduction to Laerdal ALS Baby		
	Introduction to MPL Megacode Man		
	Introduction to Nursing Anne VitalSim		
	Introduction to Patient Kelly Simulator		
	Introduction to VitalSim		
	Introduction to NBC Module		

Introduction to Kyoto Kagaku EYE and EAR Exam Trainers		
Introduction to Endoscopy Accutouch System		
Introduction to Baby Umbi		
Introduction to Vascular Access Virtual Reality Sim		
Introduction to IV Arms, Central Line Trainers, & Arterial Line Trainers		
Introduction to Chester Chest		
Introduction to TraumaMan		
Introduction to Ultrasound Machines and Trainers		
Introduction to FLS 2000		
Introduction to Male & Female Pelvic and OB Trainers		
Introduction to Family Planning Educator		
Introduction to Breast/Testicle Simulators		
Introduction to Circumcision Trainers		
Introduction to SP Program		
Introduction to GTA Program		
Introduction to LearningSpace		



Policy: AD04
Adopted: April 28, 2017
Reviewed/Revised: October 2023
Author: Jason Craig
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

April 23, 2019

Date

X Daniel Summers

Author

April 23, 2019

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	December 14, 2016
2.0	The SOP template was updated.	April 28, 2017
3.0	Template updated to STEPS Common Format	July 23, 2018
4.0	Procedure Updated	April 4, 2019
4.1	Added Appendices for Onboarding and Orientation	April 23, 2019

AD05: ID Badge

Purpose:

ID badges allow for ease in identification and well-defined roles. ID badges provide security to our center and its users, which is only accessible through specifically authorized ID badge swipe-access after business hours.

Scope:

This policy applies to any learner, staff, or educator currently holding an ID badge that clearly defines their role (ie. WVU Hospital ID, Student ID, Employee ID).

Responsibilities:

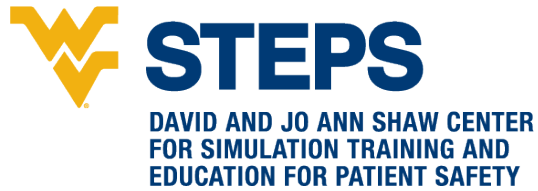
All educators, staff, and learners are responsible for visibly wearing their ID badge on their person. If this badge is lost or stolen, the badge holder is responsible for reporting it right away and begin the process of replacing it, per WVU Health Sciences Policy.

Definitions:

None required for this policy.

Procedures:

- ID Badges must be worn visibly when using the center, in accordance with WVU Policy.
- ID badges can be used around the center for swipe-access after regular business hours. Swipe access can be granted through authorization of the Director.
- If an ID badge is lost or stolen, it must be reported right away.



Policy: AD05
Adopted: April 18, 2017
Reviewed/Revised: October 2023
Author: Kathryn Smalley
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Kathryn Smalley
Author

July 23, 2018
Date

X Daniel Summers
Approver

July 23, 2018
Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	October 1, 2009
2.0	The SOP template was updated, and the policy was further defined.	January 18, 2017
3.0	New Policy Format	July 23, 2018

ED01: Curriculum Committee

Purpose:

The purpose of this policy is to outline the processes for review of simulation activities that have taken place at STEPS and define the roles and responsibilities of the Curriculum Committee.

Scope:

This committee is charged with ensuring that faculty are utilizing the STEPS center to provide quality education by:

- Assisting faculty to design educationally sound objectives
- Creating evaluations to appropriately assess simulation activities
- Reviewing the simulation educational skills of those directing the simulation
- Ensuring the triennial review of course content

Additionally, the committee assists with Longitudinal Faculty Development and/or Credentialing of Faculty.

Responsibilities:

- **STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **Curriculum Committee Chair(s)**
 - **Committee Members**
- **Employee Responsibilities**
- Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **Curriculum Committee Chair(s)**
 - Sets meetings agendas with input from the committee.
 - Leads committee meetings
 - Takes minutes and disseminated them to members
 - Distributes new course requests to committee members.

- Presents results of review/mentoring to committee for vote.
- Maintains communications to include scheduling meetings and distributing project information and letters.
- **Committee Members**
 - Assists and mentors interested educators when asked
 - Reviews documentation of mentoring and responds Yes – allow activity to move forward or No – and provides constructive feedback.
 - Actively participates in meetings and committee correspondence.

Definitions: None required for this policy.

Procedures:

- Faculty/Instructor submits request for a new activity to STEPS Center and/or requests help developing the activity. The committee chair will send the activity request to the committee member from the corresponding discipline to review.
- If faculty/instructor requests help developing the activity, a committee member from that discipline will act as a “simulation mentor” and contact the instructor to provide templates/ideas/checklists to help successfully develop, implement and evaluation the simulation activity.
- Committee member(s) will review the activity to ensure that objectives/assessment/ simulation equipment are appropriate and complete a review of the activity (the committee member will also likely need to contact the instructor for additional information about the activity, which will help foster mentoring relationships within each discipline). The committee member will submit the completed review on SOLE for other committee members to review (ideally within 7-10 days of being assigned the activity).
- Committee members will be notified that a new review has been submitted and will have 1 week to view the document and either "Approve" or "Recommend Changes." Committee members are also encouraged to leave any recommendations for improvement for the faculty/instructor (and note any opportunities to develop IPE activities). Comments will be compiled by the

committee chair and any recommended changes will be sent to the faculty/instructor of the activity

- Activities scheduled for the upcoming semester (with the exception of “alphabet” courses) are downloaded from Sharepoint, sorted, and posted on SOLE. Using a form letter, discipline representatives will contact their assigned faculty and request they provide the date of the most recent update to that activity (objectives, materials, etc). Responses will be uploaded to the corresponding folder on SOLE and the committee chair will document the date of review. Instructors for activities that do not have a recent update will be targeted again in the following semester.

References:

SSIH Accreditation Core Standards and Criteria:
Teaching/Education Standards and Measurement

Accreditation in the area of Education will be available to Programs that demonstrate regular, recurring simulation educational activities with clearly stated objectives (knowledge, psychomotor skills and behaviors) and provides evidence of ongoing improvement of educational activities. The 4 sections of Education Standards are: (1) Education Design, (2) Qualified Educators, (3) Educational Activities, and (4) Evaluation and Improvement.

1. EDUCATIONAL ACTIVITIES

a. The Simulation Program is committed to providing high-quality simulation educational activities.

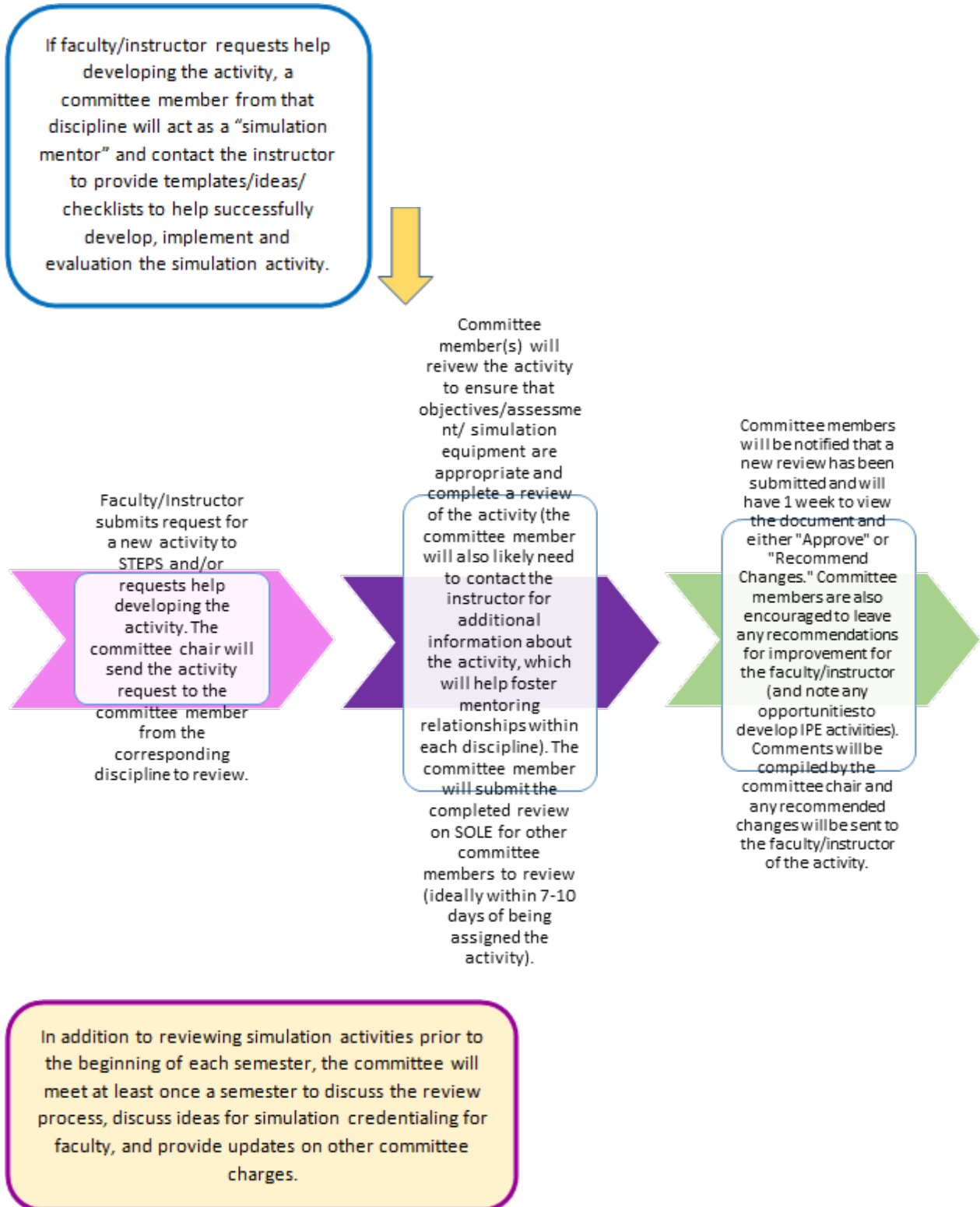
- i. Document or describe how the Program links its educational activities to the Program’s mission and goals.
- ii. Describe and document the qualifications of the individual(s) that oversee simulation educational activities.
- iii. Provide documentation of simulation educational activities (maximum 3).
- iv. Onsite, provide at least 3 videos of simulation educational activity for reviewers to examine.

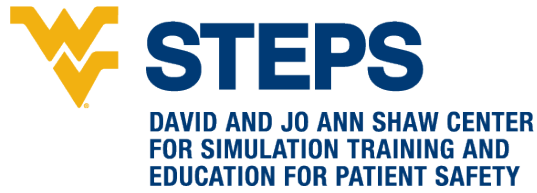
2. EDUCATIONAL ACTIVITY DESIGN

a. The Simulation Program designs simulation educational activities that are evidence based, engaging, and effective.

- i. Describe how the Program assesses need for simulation educational activities.
- ii. Describe how the Program designs simulation educational activities.
- iii. Provide tools used in the design of simulation educational activities.

- iv. Provide a list of educational activities that follow the design process (maximum of 10). Onsite reviewers will choose three (3) activities to review.
- b. The Simulation Program determines how simulation modalities, locales, and/or realism will meet the learning objectives.
 - i. Describe how simulation modalities, locales, and/or level of realism are determined when designing simulation educational activities.
- c. The Simulation Program has personnel with expertise designing simulation educational activities.
 - i. Describe the process to ensure that simulation experts are included in the design of simulation educational activities.
 - ii. Submit accreditation biosketches for simulation experts that are involved in the design of simulation educational activities. (maximum of 5)
- 3. QUALIFIED EDUCATORS
- a. The Simulation Program has access to qualified educators.
 - i. Submit accreditation biosketches for the most active educators (maximum of 5).
- b. The Simulation Program selects educators to match the learner group's level of study.
 - i. Describe the process to match the qualifications of the educator to the characteristics of the educational activity.
- c. The Simulation Program has a process to assure ongoing development and competence of its simulation educators, at least annually.
 - i. Describe the evaluation and feedback processes for simulation educators.
 - ii. Provide a list of simulation educators (maximum of 10). Onsite reviewers will choose three (3) educators to review.
 - iii. Document or describe opportunities for educators to engage in professional development that is specific to simulation.
- d. The Simulation Program has a process to assure orientation and development of those who participate in the delivery of educational activities but are not simulation experts.
 - i. Document or demonstrate the elements included in the orientation process for those that participate in the delivery of educational activities but are not simulation experts.
 - ii. Describe the evaluation and feedback processes for those that participate in the delivery of educational activities but are not simulation experts.





Policy: ED01
Adopted: December 7, 2017
Reviewed/Revised: November 2023
Author: Lee Ann Miller
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Lee Ann Miller

Author

November 16, 2023

Date

X Daniel Summers

Approver

November 16, 2023

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	December 7, 2017
2.0	Updated to common STEPS format policy	7/23/2018
2.1	Added Flowchart	4/23/2019
2.2	Added curriculum review/revision requirements as per CHSE Site Visit recommendation	10/26/2020
2.3	Removed research coordinator	11/16/2023

ED02: Evaluation & Quality Improvement Committee

Purpose:

The purpose of this policy is to outline the processes for periodic review of simulations that have taken place at STEPS and define the roles and responsibilities of the Evaluation & Quality Improvement (EQI) committee.

Scope:

STEPS assembled an Evaluation & Quality Improvement committee comprised of qualified individuals of the health professional schools to ensure quality education is taking place by regular review of evaluation submissions and correction of concerns. The focus of the committee is upon student satisfaction, instructor satisfaction of support, student centered instruction, reduction of error, and reflection for future growth and improvement.

Responsibilities:

- **STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **EQI Committee Chair**
 - **Committee Members**
 - **Simulation Information Specialist**

- **Employee Responsibilities**
- Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **EQI Committee Chair**
 - Sets meetings agendas with input from the committee.
 - Collects, reviews and distributes submitted course review material
 - Leads committee meetings and keeps minutes
 - Composes letters of thanks and/or remediation
 - Maintains records of course reviews and data for each submission

 - **Simulation Information Specialist**
 - Gathers center evaluation data from LS
 - Populates dashboard.

 - **Committee Members**

- Assists and mentors interested educators when asked
- Reviews and approves submitted project proposals
- Actively participates in meetings and committee correspondence

Definitions:

Term or Acronym/Abbreviation	Definition
EQI	Evaluation & Quality Improvement
ADEE	Assistant Director Education & Evaluation
SOLE, eValue, RubyOnline	Online evaluation tools
LS	Learning Space

Procedures:

- Periodic review of evaluations by school designee on corresponding evaluation tool. Report of outliers (scores less than 3.0) submitted to faculty in charge of the educational session and brought to the next committee meeting
- Regular committee meetings to conduct review and provide suggestion to instructors and STEPS staff as needed.
- Review of designated courses, as indicated in SSIH accreditation core standards and criteria, occurs at regular committee meetings. When necessary, committee will report recommendations to the faculty in charge with expectation of follow up prior to the next course offering.
- End of semester collection of instructor feedback via SOLE survey

References:

SSIH Accreditation Core Standards and Criteria:

4. EVALUATION AND IMPROVEMENT: The Program has a method to evaluate its overall program and services areas, as well as the individual educational, assessment, and/or research activities in a manner that provides feedback for continued improvements

4.b.i. The program has a plan for systematic quality improvement (QI)/ performance improvement (PI) that includes but is not limited to assessment of learner outcomes and achievement and course evaluation by course participants, at least annually.

Appendix A: Instructor Evaluation

Instructor Evaluation of STEPS 2023

Please rate your overall assessment of using STEPS for your simulation activity this semester.

For simulations with more than one session, please base your ratings on your STEPS experience from throughout this past semester (e.g. if you have worked on several activities using STEPS this semester, provide an overall rating of your STEPS experience).

Please select the entity you represent:

- SOM
- SON
- SOP
- SOD
- WVUH
- Other

Overall, did STEPS meet your needs?

- 5 Yes, all the time
- 4 Yes, most of the time
- 3 Yes, sometimes
- 2 No, not very often
- 1 No, not at all

Overall, did the scheduling process meet your needs?

- 5 Yes, all the time
- 4 Yes, most of the time
- 3 Yes, sometimes
- 2 No, not very often
- 1 No, not at all
- Not Applicable

4. Overall, did the simulation run smoothly?

- 5 Yes, all the time
- 4 Yes, most of the time

- 3 Yes, sometimes
- 2 No, not very often
- 1 No, not at all
- Not Applicable

5. Overall, did the equipment work properly?

- 5 Yes, all the time
- 4 Yes, most of the time
- 3 Yes, sometimes
- 2 No, not very often
- 1 No, not at all
- Not Applicable

6. Overall, did the Standardized Patient(s) meet your needs?

- 5 Yes, all the time
- 4 Yes, most of the time
- 3 Yes, sometimes
- 2 No, not very often
- 1 No, not at all
- Not Applicable

7. Overall, did you receive enough support from the center staff?

- 5 Yes, all the time
- 4 Yes, most of the time
- 3 Yes, sometimes
- 2 No, not very often
- 1 No, not at all
- Not Applicable

8. If you responded with a rating of 1, 2, or 3 (No or yes, sometimes) to any of the above, please provide feedback as to why you made that selection:

9. Additional comments are appreciated:

Appendix B: Center Evaluation and Instructor Evaluation

STEPS Center Evaluation (CE)

Poor/Fair/Satisfactory/Good/Excellent	Poor [1]	Fair [2]	Satisfactory [3]	Good [4]	Excellent [5]	
1. How would you rate the WV STEPS Center in providing an environment that promotes learning?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
2. If your answer to previous question is Poor or Fair, please comment: (NS)						
3. What could be done differently to improve your experience in the simulation center? (NS)						
Rate Level of Achievement.	Not Provided [0]	Not achieved [1]	Poorly Achieved [2]	Achieved [3]	Well Achieved [4]	Strongly achieved [5]
4. Did this experience achieve the stated learning objectives?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Poor [1]	Fair [2]	Satisfactory [3]	Good [4]	Excellent [5]	Not applicable [0]
5. If your encounter included a standardized patient (live actor), how well did he or she meet your expectations? Comment...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Simulation Instructor Evaluation

On a scale of 1-5 (5 being highest and 1 being lowest) please evaluate the above simulation instructor:

Knowledge of material	1 – 2 – 3 – 4 – 5
Instructional ability	1 – 2 – 3 – 4 – 5
Ability to create a relaxed environment conducive to learning	1 – 2 – 3 – 4 – 5
Degree of professionalism displayed	1 – 2 – 3 – 4 – 5
Time management	1 – 2 – 3 – 4 – 5
Overall teaching effectiveness	1 – 2 – 3 – 4 – 5

Appendix C: Course Review Template

STEPS Simulation Center

Evaluation of Simulation Learning Experiences

Course Name and Number:

Primary Course Coordinator:

Dates of Exercise:

1. Please provide a brief description of the simulation activity or exercise.

2. Did instruction take place prior to the simulation experience to prepare learners for what they would encounter? If yes, please describe.

3. Were learners provided with the learning objectives of the simulation experience prior to the event?

4. Did the simulation experience meet the stated objectives? If yes, please provide supporting evidence or data.

5. Did the exercise include formative or summative assessment/feedback to learners? If so, please describe or attach a copy to this report.

6. Were learner evaluations of the simulation exercise obtained? If so, please attach a copy to this report.

7. Were evaluations of the instructors obtained? If so, please attach a copy to this report.

8. What changes do you plan to implement in this learning activity (if any) based on the experience of these instructors and learners?

Appendix D: Course Review Letter

Evaluation Subcommittee Simulation Review Report

Course Name and Number:
Primary Course Coordinator:
Dates of Exercise:

Dear Instructor:

The Evaluation Subcommittee for STEPS met on **[date]** to review your simulation experience. The purpose of this committee is to systematically maintain quality improvement / program improvement directives which impacts our services to students as well as our accreditation with the Society of Simulation in Healthcare.

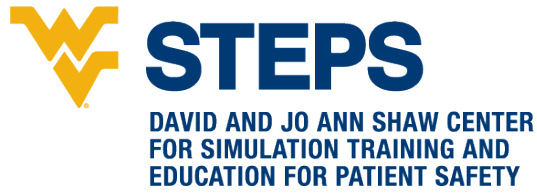
Included in our review materials were the course review template and student evaluations. *We would first like to congratulate you the majority of excellent evaluations from the students.* The purpose of the letter is to provide a summary statement of recommendations to help focus future efforts to improve the course and maximize student learning. Please consider implementing these suggestions the next time your course is offered.

Thank you for your continued support of simulation at WVU Health Sciences. If you have any questions please contact **[The school committee representative]**.

Committee recommendations:

- 1.
- 2.
- 3.

Respectfully,
STEPS Evaluation Subcommittee



Policy: ED02
Adopted: December 7, 2017
Reviewed/Revised: November 2023
Author: Lee Ann Miller
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Lee Ann Miller
Author

November 16, 2023
Date

X Daniel Summers
Approver

November 16, 2023
Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	December 7, 2017
2.0	Updated to common STEPS format policy	July 23, 2018
2.1	Updated Faculty Survey and committee name	October 6, 2023
3.0	Removed research coordinator Updated chair responsibilities Added simulation information specialist role Adjusted score for outliers Added instructor evaluation	November 16, 2023

ED03: Faculty Development Credentialing

Purpose:

In order to maintain accreditation, all individuals who teach at STEPS are required to have a minimum level of knowledge about teaching with simulation. The purpose of this policy is to outline the necessary components of determining the ability of an instructor to teach a course in the simulation center.

Scope:

This procedure is developed for individuals in the schools of Medicine, Nursing, Pharmacy, Dentistry who have instructional affiliation at STEPS.

Responsibilities:

- **STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **Curriculum subcommittee reviews course proposals and mentors faculty prior to implementation of the course.**
 - **Research Assistant tracks participants and dates of participation. RA interacts with Continuing Education to ensure CEUs are awarded to participants.**
 - **Faculty development committee creates and modifies the instruction as needed.**
- **CHSE certified staff present the instruction to audiences upon request or as requested by STEPS to address new instructors or instructors who need support.**
- **Employee Responsibilities**
- Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **Medical Director or designee**
 - **Director or designee**
 - **ADEE meets with faculty who request specific support in creating new instructional activities.**

Definitions:

Term or Acronym/Abbreviation	Definition
ADEE	Assistant Direction of Education and Evaluation
CHSE	Certified Healthcare Simulation Educator
RA	Research Assistant

Procedures:

Minimum objectives for credentialing:

- Describe the STEPS simulation program
- Differentiate 4 simulation modalities
- Utilize 4 components of simulation education

•Options for presentation:

- One hour sessions in STEPS or at Department regularly scheduled meetings
- Self paced online materials TBA
- Or equivalent experience as determined by demonstration of teaching

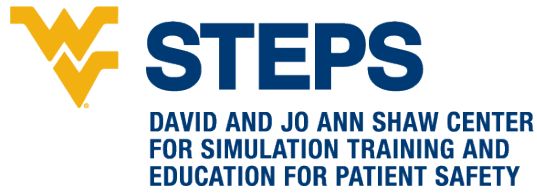
•Demonstration of teaching at STEPS

- Observation/checklist
- Student evaluations
 - Staff mentoring
 - Yearly re-evaluation

References:

Appendix A: Curriculum Committee Workflow.

- **A New Course request is submitted via scheduling software.**
- **Committee co-chairs are alerted**
- **Committee member is assigned to contact instructor**
- **Review of new simulation activities is completed and submitted to committee via SOLE**



Policy: ED03
Adopted: July 23, 2018
Reviewed/Revised: October 2023
Author: Lee Ann Miller
Approver: Daniel Summers

- **Members of committee vote on approval Yes or No with suggestions.**

Appendix B: **Review of New Simulation Activities**

Activity Title:

Implementation Date/Time:

Instructor:

When reviewing the simulation activity, please verify that the following components are stated and/or appropriate:

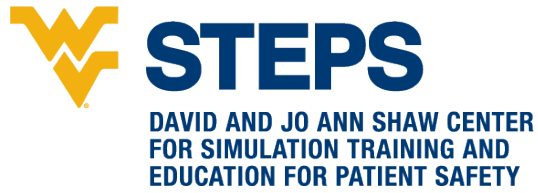
- The activity has clearly defined objectives
- The description of the activity supports the objectives stated
- Simulation equipment requested is appropriate to support the objectives of the activity
- An appropriate assessment tool is being utilized
- Debriefing is included (if appropriate for the activity)

Additional Comments:

This simulation activity was reviewed by:

Committee Reviewer

Date



Policy: ED03
Adopted: July 23, 2018
Reviewed/Revised: October 2023
Author: Lee Ann Miller
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Lee Ann Miller

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Policy: ED03
 Adopted: July 23, 2018
 Reviewed/Revised: October 2023
 Author: Lee Ann Miller
 Approver: Daniel Summers

Chronological Revision History

Version	Modification	Date
1.0	New SOP	December 7, 2017
2.0	Updated to common STEPS format policy	July 23, 2018

EQ01: Equipment Loaning

Purpose:

To make STEPS equipment available to faculty, instructors, and learners for usage outside of STEPS facility. To ensure all equipment remains in good working order prior to loaning and after return. To track equipment for accountability and availability.

Scope:

Equipment may be loaned on a first-come, first-serve basis for educational activities at the discretion of the STEPS Director or designee. STEPS staff must ensure that the borrower is properly trained on the use of equipment. Equipment will be signed out and back in upon return, and inspected for lack of defects prior to leaving STEPS and immediately upon return by staff. Any defects will be noted with the borrower and reported to STEPS director. The borrower may be held responsible for any obvious misuse of equipment as deemed by STEPS Director.

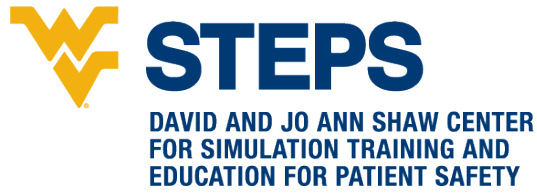
Responsibilities:

This policy applies to all staff, faculty, instructors and learners.

Definitions: None required for this policy.

Procedures:

Equipment may be loaned on a first-come, first-serve basis for educational activities at the discretion of the STEPS Director or designee. **It is important to note that no equipment owned, issued, or loaned by STEPS is intended or authorized for patient care use. All equipment is for education purposes only.** STEPS staff must ensure that the borrower is properly trained on the use of equipment. Equipment will be signed out and back in upon return, and inspected for lack of defects prior to leaving STEPS and immediately upon return by staff. Any defects will be noted with the borrower and reported to STEPS director. The borrower may be held responsible for any obvious misuse of equipment as deemed by STEPS Director.



Policy: EQ01
Adopted: July 23, 2017
Reviewed/Revised: October 2023
Author: Dan Summers
Approver: Dorian Williams

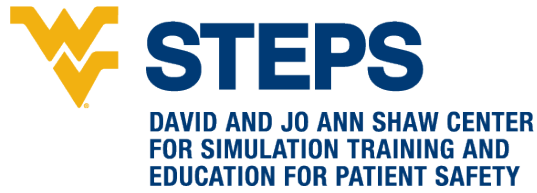
Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Daniel Summers
Author

October 10, 2022
Date

X Dorian Williams
Approver

October 10, 2022
Date



Policy: EQ01
 Adopted: July 23, 2017
 Reviewed/Revised: October 2023
 Author: Dan Summers
 Approver: Dorian Williams

V-SCAN AIR AGREEMENT

The West Virginia University School of Medicine Ultrasound Curriculum involves having portable devices available to the learners to utilize during their clinical rotations. To that end, V-Scan Air devices have been leased from GE Medical for a four (4) year lease. The Clerkships or department listed here agrees to be responsible for device security and will return the devices to STEPS at WVU Health Sciences Morgantown upon request. In the event a device becomes damaged or lost, the department will be responsible to pay for repairs or replace the device(s).

The following devices have been accepted by:

Campus: _____

Department Name: _____

Responsible Person: _____

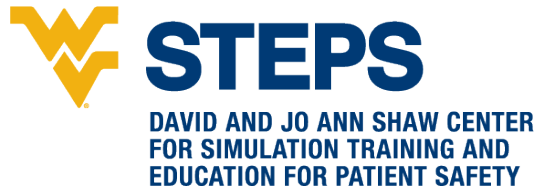
Email Address: _____

Phone: _____

Serial Numbers:

 Signature

 Date



Policy: EQ01
Adopted: July 23, 2017
Reviewed/Revised: October 2023
Author: Dan Summers
Approver: Dorian Williams

V-SCAN AIR AGREEMENT

The West Virginia University School of Medicine Ultrasound Curriculum involves having portable devices available to the learners to utilize during their clinical rotations. To that end, V-Scan Air devices have been leased from GE Medical for a four (4) year lease. The Learner listed here agrees to be responsible for device security and will return the device to the Clerkship Coordinator at the end of this rotation or upon request. In the event a device becomes damaged (Outside of normal use) or lost, this individual will be responsible to pay for repairs or replace the device. (2022 Value currently is \$5,000.)

The following device has been accepted by:

Responsible Person: _____

Email Address: _____

Phone: _____

Date: _____

Serial Number: VA00100_____ Enter Last 4 digits

Signature

Date

Reminder: V-scans for use by students on clerkships are NOT approved for diagnostic use and are only to be used in educational scanning.

Check-out Procedure for Vscan Ultrasound Machines from STEPS:

- A. Vscan machines will be available at STEPS and are the only machines that can be borrowed.
- B. Check-out can only be done during business hours 8am to 4pm and are available on a first come first serve basis.
- C. Report to STEPS reception area with your photo ID and request to check-out a Vscan.
- D. An electronic form requiring contact information will need to be completed when obtaining machine.
- E. Vscan must be returned within 72 hours of check-out.
- F. Vscan will need to be cleaned in accordance with guidelines prior to returning.
- G. Any malfunctions must be reported prior to or upon returning to STEPS.
- H. Lost Vscans are the responsibility of the one who signs out the machine. (Replacement cost is currently \$5000)
- I. Refer to guidelines for proper use and care of Vscan.

2. West Virginia University School of Medicine

Ultrasound Curriculum

Ultrasound Safety and Guidelines for Independent Study and Use

Safety Ultrasound is the safest imaging modality that exists. However, like all imaging, ultrasound exposes the body to energy and excessive exposure could theoretically lead to tissue damage. Cell or tissue injury has never been documented at the energy levels utilized in diagnostic ultrasound.

Ultrasound imaging should still follow the ALARA principle, which means exposing patients to energy levels As Low As Reasonably Achievable. This means that energy exposure for the purposes of teaching should not be prolonged and that higher energy modalities, like Color, Spectral Doppler, and Power Doppler should be avoided for more sensitive tissues, such as a fetus in the first trimester. With these issues in mind, please don't forget that ultrasound, due to its safety, has been the preferred imaging modality in pregnancy for decades and excessive fears of ultrasound energy exposure should not prohibit appropriate practice and education with diagnostic ultrasound.

In general, the US probes are not to be used internally or over open wounds unless barrier precautions and subsequent disinfection is employed. Patients in isolation for any reason should not have ultrasound performed for primarily educational purposes.

Cleaning

On completion of an exam, the probe should be wiped with a clean cloth or towel. Harsh bleaches or highly concentrated alcohol solutions should NOT be used as they can damage the contact surface of the US probe or the probe itself. A good home option is baby cleansing wipes. In the hospital environment, the sani-wipes can be used. Please wear gloves when handling these wipes.

Please check out the US machines, practice as much as possible and try to match “textbook” quality images with your technique. It is only through repeated scanning and practice that you will fully master your US skills.

Reminder: V-scans from STEPS and for use by students on clerkships are NOT approved for diagnostic use and are only to be used in educational scanning.

Chronological Revision History

Version	Modification	Date
1.0	New SOP	January 23, 2017
2.0	The SOP template was updated.	May 2, 2017
3.0	New Policy Format	July 23, 2018
3.1	Added Educational Use Only Statement	October 10, 2022

EQ02: Maintenance

Purpose:

To ensure optimal operation and safety of all equipment in the Simulation Center used in all aspects of clinical education.

Scope:

All STEPS staff and users dealing with equipment, particularly upkeep by simulation specialists.

Responsibilities:

Enforcement of this policy will be the responsibility of the direct supervisor for staff. Faculty not assigned directly to STEPS and guest instructors will be under the discretion of STEPS Director or Medical Director. It is the responsibility of all to police each other in order to maintain operational equipment at all times.

Definitions: None required for this policy.

Procedures:

Records of Equipment Maintenance

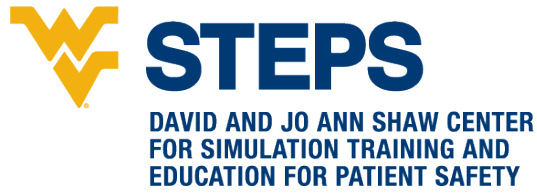
- The maintenance Log in the STEPS database is designed to record the problems identified, corresponding corrective actions the person performing the maintenance and the dates the repair was performed.
- The maintenance log is to be completed by the Simulation Specialist after any repair or check and should include any records of calibration or repairs performed by the manufacturer or service organization.
- Responsibility for performing Maintenance and Performance Testing
 - Service technicians will perform required maintenance when service contracts and Maintenance agreements have been purchased for equipment.
 - Designated STEPS staff will perform and document required maintenance on other designated trainers and equipment

Defective Equipment

- Any suspected problem with the electrical function of equipment or appliances should be reported immediately to STEPS staff and the unit removed from service.
- The Simulation Specialists are responsible for coordinating repair or substitution of defective equipment.

References:

No References



Policy: EQ02
Adopted: February 23, 2017
Reviewed/Revised: October 2023
Author: Russell Doerr
Approver: Dan Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Russell Doerr
Author

July 19, 2018
Date

X Daniel Summers
Approver

July 19, 2018
Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	February 23, 2017
2.0	The SOP template was updated	May 5, 2017
3.0	Updated to common STEPS format policy	July 19, 2018

EQ03: Supply

Purpose:

To ensure that STEPS maintains an appropriate supply stock in order to ensure adequate resources needed to support the educational mission.

Scope:

This policy applies to all STEPS employees, but specifically, the designee(s) assigned to inventory, order, and stock supplies. The designee should be familiar with the educational needs of the center and the faculty using the center, and should be or include a Simulation Specialist/ Technician and the SON Director or Assistant Director of Simulation.

Responsibilities:

- STEPS Employee Designated to Supply (Supply Coordinator):
 - Will monitor schedule for upcoming events to ensure that supplies are ordered in a timely manner prior to an event, not less than two weeks prior.
 - Will maintain an appropriate level of stock held on hand that STEPS uses and keeps, in coordination with the Director and Simulation Specialists
 - Will order or coordinate supply orders between WVU Medicine Materials, Mountaineer Marketplace, Sterile Processing, and outside vendors.
- School of Nursing Inventory Designee:
 - The SON Designee will coordinate with the Supply Coordinator to ensure that SON events have needed equipment.
 - The SON Designee will coordinate with the SON Director of Simulation and the STEPS Director to bill supply orders to the correct department and budget

Definitions: None required for this policy.

Procedures:

In coordination with the Simulation Specialists, Director, SON Director of Simulation and SON Inventory designee, the Supply Coordinator will monitor the schedule and order appropriate numbers of supplies and equipment to ensure either an adequate amount on hand, or supplies specific to an event are received in advance. The Supply Coordinator will also routinely check quantities of stock on hand to ensure adequate levels.

Supplies that sharp, sensitive, costly, or restricted in their use shall be stored in a locked room designated for that purpose. Every effort will be made to restrict access to only the staff and learners who will be using said supplies and only during their scheduled time.

All medications in the Center are simulated (ie. Demo Dose) but are specifically purchased to look and feel like the real thing. All simulated medications are filled with distilled water and any real medications are discarded. Simulated medication poses a significant risk if mistakenly left in the patient care environment. As such, any educator or staff member that facilitates or performs in-situ simulation will ensure that all medications, supplies, and equipment are returned to the STEPS center (used or unused) and that a complete inventory of the crash cart and any other equipment is performed.

All medical equipment in the Center is intended for non-clinical use only and therefore cannot be used, on or offsite, in the care of actual patients. Equipment such as the defibrillators that may be taken to the clinical environment for in-situ simulation are marked "Simulation Use Only." Many items are donated or sold with the explicit understanding that they are intended for training purposes only and may be associated with legal agreements to that effect. None of the items onsite are maintained by clinical engineering nor are they cleaned and sanitized by environmental services.

The medical and disposable equipment within STEPS should never be used for clinical purposes. However, it should be treated with the same safety precautions employed with actual clinical equipment.

References:

WVU Medicine materials catalog

http://healthwebdev.rcbhsc.wvu.edu/plsql/oracle/procure_il1_catalog

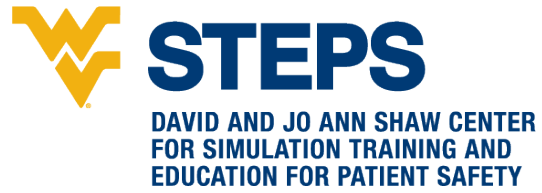
OR 5 Catalog

http://nt-intranet.wvuh.wvuhs.com/plsql/oracle/procure_or5_catalog

OR 2 Catalog

http://nt-intranet.wvuh.wvuhs.com/plsql/oracle/procure_or2_catalog

Common Supply vendors (not a complete list)



Policy: FI01
Adopted: December 16, 2016
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

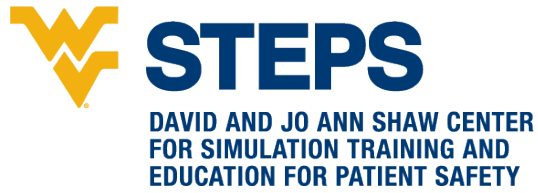
<http://www.pocketnurse.com/> - Demo Dose medications

<https://www.simulab.com/> - Trauma Man tissues

<https://www.bluephantom.com/> - U/S blocks and tissues

<https://worldpoint.com/> - CPR Supplies

<https://www.limbsandthings.com/us/> - FLS supplies



Policy: FI01
Adopted: December 16, 2016
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Daniel Summers
Author

July 18, 2018
Date

X Dorian Williams
Approver

July 18, 2018
Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	March 9, 2018
2.0	New Policy Format	July 18, 2018

FI01: Budget

Purpose:

To ensure a budgetary process is maintained and followed in order to fulfill the mission of STEPS, to be fiscally responsible, and to ensure the viability of STEPS into the future.

Scope:

Staff and leadership of STEPS.

Responsibilities:

STEPS Group or Employee

- An internal budget will be developed for each fiscal year by the STEPS Director with input from faculty and STEPS staff for each area.
- Advisory committee will provide input regarding strategic planning for day to day operations and capital budget items.
- Budget will be reviewed and approved by STEPS Medical Director prior to submission to HSC Leadership.
- Budget will be submitted to HSC Leadership no later than May 30 of each year. Leadership will review and provide feedback to STEPS Director regarding approval of budget.
- Internally, STEPS will keep track of expenditures, maintain various accounts, and see that budgets are met.
- Additional expenditures necessitated by unforeseen expenses will be discussed and approved or denied by Medical Director, Director, and appropriate HSC Leadership.
-

Employee Responsibilities

- Primary budgetary responsibilities will be by STEPS Director with oversight of STEPS Medical Director.

Definitions: None required for this policy.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

Daniel Summers
Author

July 23, 2018
Date

Dorian Williams
Approver

July 23, 2018
Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	December 16, 2016
2.0	The SOP template was updated.	May 5, 2017
3.0	SOP Template updated to STEPS Common Format.	July 23, 2018

FI02: Billing & Receiving Payments Policy

Purpose:

To ensure invoices and payments are processed for services held for STEPS activities.

Scope:

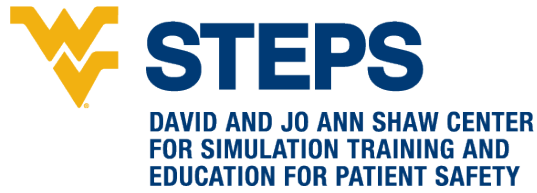
This policy applies to any departments/schools/community outreach utilizing STEPS staff/equipment.

Responsibilities:

Enforcement of the policy will be the responsibility of the STEPS staff to complete the appropriate form and send to the Office Administrator regarding services rendered. The cost is determined by the STEPS Director.

Procedures:

- Faculty/staff/individuals determine the needs of the activity.
- Once the logistics are determined, a quote for potential cost of the activity is provided to the faculty.
 - Designated form for invoicing is filled out by STEPS staff and sent to Office Administrator.
 - Office Administrator prepares invoices as appropriate for activity.
 - Invoices are created per semesters, monthly, or as needed and sent to appropriate individuals for billing.
 - Acceptable forms (s) of payment
 - Mountaineer MarketPlace (Internal Transfer)
 - Credit Card (eStore)
 - Cash
 - Check
- The invoice generator can be found at the following link:
 - <https://sole.hsc.wvu.edu/Form/1416/Public/Respond?id=ShsQALV3IzNo>



Policy: FI02
Adopted: June 23, 2021
Reviewed/Revised: October 2023
Author: Tonya Gillum
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Tonya Gillum

Author

October 10, 2022

Date

X Daniel Summers

Approver

October 10, 2022

Date

Policy: FI02
 Adopted: June 23, 2021
 Reviewed/Revised: October 2023
 Author: Tonya Gillum
 Approver: Daniel Summers

Chronological Revision History

Version	Modification	Date
1.0	New Policy	June 23, 2021
1.1	Added Link to Invoice Generator	October 10, 2022

FI03: Fee Policy

Purpose:

To ensure proper billing for activities organized and coordinated by STEPS.

Scope:

This policy applies to any departments/schools/community outreach utilizing STEPS staff/equipment.

Responsibilities:

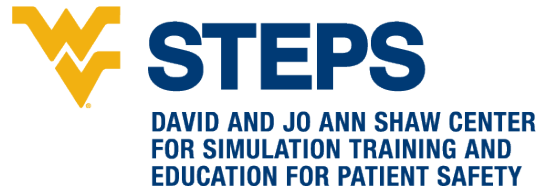
Enforcement of the policy will be the responsibility of the STEPS staff per guidelines set forth in this policy. The cost is determined by the STEPS Director or designee.

Definitions:

New Activity – Any educational activity that has not been vetted by curriculum committee or has not yet been conducted in STEPS.

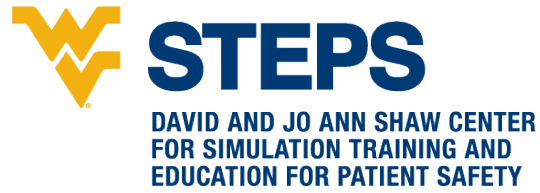
Procedures:

- Faculty/staff/individuals determine the needs of the activity.
- Once the logistics are determined, it will be decided if this falls into a category that requires billing for the activity. See criteria below:
 - Undergrad Schools are billed per agreement, per semester
 - M3 clerkships are charged for new activities after July 2021
 - Residency programs within WVU will be charged for replacement supplies beginning January 2022.
 - Any resident, faculty, or staff outside of WVU/WVU Medicine Ruby, Morgantown campus will be charged for utilization of space, supplies, and STEPS staff.
 - All entities outside of WVU SoM, Morgantown campus, will be charged for Standardized Patients unless otherwise determined.
 - STEPS will provide a budget and be reimbursed for any activities utilizing External funds (Contracts, Grants, etc.).
- A quote for potential cost of the activity is provided to the faculty.



Policy: FI03
Adopted: July 26, 2021
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

- Collections will be made according to billing and payment policy.



Policy: FI03
Adopted: July 26, 2021
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X **Daniel Summers**
Author

Date: July 26, 2021

X **Dorian Williams**
Approver

Date: July 26, 2021

Policy: FI03
 Adopted: July 26, 2021
 Reviewed/Revised: October 2023
 Author: Daniel Summers
 Approver: Dorian Williams

Chronological Revision History

Version	Modification	Date
1.0	New Policy	July 26, 2021

IN01: LearningSpace

Purpose:

The LearningSpace policy ensures the integrity and confidentiality of simulation information and student records of education stored in the Learning Management System.

Scope:

This policy applies to those with access to STEPS LearningSpace its components.

Responsibilities:

- **Admin**

- Manage LearningSpace data and users/privileges in accordance with WVU Academic & Professional Standards.

- **Faculty Users**

- Faculty-in-charge must request privileges for support staff from a STEPS LearningSpace Manager.
- Faculty shall not share or save passwords in a manner that compromises security.
- Faculty must protect confidentiality and integrity, maximizing educational value and personal security.
- Faculty must utilize LearningSpace for the purpose of education, simulation, evaluation, and/or research. Use for any other reason shall be reviewed and authorized in advance by the STEPS Director/Medical Director.

- **Learners**

- Learners shall not share or save passwords in a manner that compromises security.
- Any unauthorized review, use, disclosure, or distribution is prohibited.
- Learners must utilize LearningSpace for purposes of education, simulation, evaluation, and/or research. Use for any

other reason shall be reviewed and authorized in advance by faculty-in-charge.

• **Multiple-Privilege Users**

- Those with multiple-privileges in LearningSpace are responsible for knowing their appropriate role.

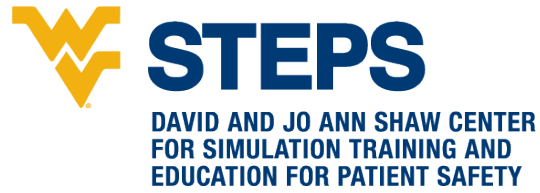
Definitions:

Term or Acronym/Abbreviation	Definition
Faculty Users	A person with Faculty privileges in LearningSpace, including but not limited to a combination of Admin, Video Management, Learning Management, User Management, Report Management, and/or Data Entry
Learner	A person with Learner privileges in LearningSpace
Multiple-Privilege User	A LearningSpace user that has a combination of roles that can include faculty, learner, and/or Standardized Patient roles.

Procedures:

- Any unauthorized review, use, disclosure, or distribution is prohibited
- LearningSpace will only be used for the authorized purposes of education, simulation, evaluation, and research. Use for any other reason shall be reviewed and authorized in advance by the STEPS Director/Medical Director.
- Any information stored in LearningSpace shall only be shared with authorized personnel at the discretion of the faculty in charge. This includes, but is not limited to: videos, reports, users, passwords, cases, activities, emails, and live video streaming.
- Master passwords are to be given only to authorized personnel by the discretion of the Director/Medical Director.

References:



Policy: IN01
Adopted: December 14, 2016
Reviewed/Revised: October 2023
Author: Kathryn Hoffman
Approver: Daniel Summers

- WVU HSC Student Conduct policy:
<http://publichealth.hsc.wvu.edu/student-services/student-policies/student-code-of-conduct-policy/>
- WVU Academic & Professional Standards:
<http://catalog.wvu.edu/graduate/enrollmentandregistration/#academicintegritytext>

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

Kathryn Hoffman

Author

July 19, 2018

Date

Daniel Summers

Approver

July 19, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	12/14/2016
1.1	The SOP template was updated	12/18/2017
1.2	SOP template was updated, Author signature line re-inserted	1/29/2018
2.0	Updated to common STEPS format policy	7/19/2018

IN02: Audio-Video Retention, Archival, and Destruction

Purpose:

All simulations may be recorded using the STEPS video-capture and learning management system. The recordings allow for review of the activity for education, formative and summative evaluation, quality assurance and research. This policy defines the circumstance for retention, archival and destruction of audio and video recordings. Ensure that STEPS complies with West Virginia University record retention policies.

Scope:

This policy applies to:

- All staff, faculty, and instructors representing STEPS
- All learners utilizing STEPS onsite, in situ or remotely
- Particular STEPS staff with privileges to adjust video recording and viewing settings within STEPS video-capture and learning management system.

Responsibilities:

STEPS

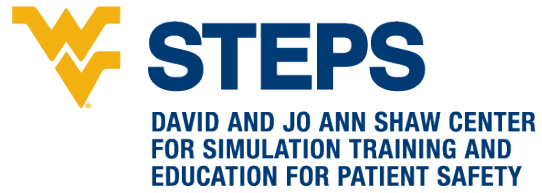
Definitions: None required for this policy.

Procedures:

- Recorded audio-video is stored in our learning management system accessible from password protected servers as per SOP IN03 Audio-Video Recording
- STEPS is responsible for the management of the audio/video system and has exclusive control of the release of recordings produced by this system.
- In general, recorded audio/video will be kept until the end of the following entire academic year and deleted over the following 6 months. For example, recordings between July 1, 2017 and June 30, 2018 will be kept until at least July 1 2019; they will be deleted between July 1 2019 and Dec 30, 2019.

Exceptions:

- Any audio/video documenting a summative grade will be retained to comply with the involved learner's School or Organization policy. Upon completion of a summative video, it will be "locked" in LearningSpace by administrator of course, either if they have sufficient level of access, or notify STEPS Simulation Information Specialists to do so.
- Any audio/video used for research. All such audio/video requires Institutional Review Board (IRB) approval and will be retained per the study protocol.
- If a relevant video is believed to be useful for another purpose, for example, education in another course or as promotional material, a permanent video clip of the experience will be made available to the requester per authorization both by the STEPS Director (or designee) and the activity director.
- Authorizations will be kept on file.
- Specific videos requested for use outside of the activity will generally be converted into a permanent video clip and transferred to the requester once approved.



Policy: IN02
Adopted: January 29, 2018
Reviewed/Revised: October 2023
Author: Russell Doerr
Approver: Daniel Summers

- Audio/Video recordings may be deleted immediately after non-summative events at the request of the activity/course director.

References:

SOP IN03 Audio-Video Recording

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Russell Doerr

Author

January 29, 2018

Date

X Daniel Summers

Approver

January 29, 2018

Date

Policy: IN02
 Adopted: January 29, 2018
 Reviewed/Revised: October 2023
 Author: Russell Doerr
 Approver: Daniel Summers

Chronological Revision History

Version	Modification	Date
1.0	New SOP	1/29/2018
2.0	Updated to common STEPS format policy	7/19/2018

IN03: Video Recording

Purpose:

The purpose of this policy is to outline the storage and use guidelines for recordings created in the STEPS A/V system.

Scope:

This policy applies to all use of the A/V system for capturing and storing video of educational activities.

Responsibilities:

- **Medical Director** makes final decisions on a/v storage, use, and distribution. This power is also delegated to the director.
- **Director** makes decisions on a/v storage, use, and distribution. This power is also delegated to the Learning Management Administrators.
- **Learning Management Administrators** make decisions about a/v storage, use, and distribution, based on the wants and needs of the course instructors.
- **Course Instructor** must know video policy guidelines and communicate if and why videos must be stored longer than the policy suggests.
- **Supporting faculty, staff, and instructors**
- **Learners**

Definitions:

Term or Acronym/Abbreviation	Definition
a/v	audio/visual

Procedures:

- The video system is primarily used to record simulation based educational activities. The recordings allow for review of the activity for both formative and summative evaluation. Video is never used in areas where personnel would have an expectation of privacy, such as restrooms or locker rooms.
- Prior to utilizing the STEPS Center, a Video/Photo release must be signed by all learners, faculty, staff, standardized patients, and any other individual that has the potential of being recorded (reference Video/Photo Release policy for further information) in order to utilize the center. If a learner disagrees, the course faculty must decide how to proceed with their simulation.
- All video cameras are capable of being recorded continuously by a digital video recording system. Recorded video is stored in our Learning Management system accessible from password-protected servers and is used for education and evaluation of our learners as well as investigative research activities. STEPS is responsible for the management of the video system and has exclusive control of the release of video recordings produced by this system. Recorded video is not routinely made directly available to learners, or the general public. The director of each course shall determine if any video relevant to the experience should be available to the learner group or others. Requests to provide access to video recordings will be considered based upon agreement between the course faculty and STEPS. If a relevant video is believed to be useful for another course, as an example, or as promotional material, a permanent video clip of the experience

will be made available to the requester per authorization by the Director or designee.

Recorded video is stored according to policy **IN02** referring to audio visual record retention. Specific videos requested for use outside of the activity will generally be converted into a permanent video clip and transferred to the requester once approved.

Video/Photo/Tour Release

By submitting this response I consent to be observed, audio/video recorded, and/or photographed during simulation activities, and understand that these may be used by West Virginia University on behalf of STEPS for any reasons including but not limited to documentation of training, evaluation of performance, fund raising activities, advertising, promotions, and educating about simulation in health care.

By my consent to participate in the Simulation Activity, I hereby authorize STEPS to use audio/video recording and/or photograph, and transmit my name, image, voice, or contributions in connection with the Simulation Activity for the above stated purposes. I assign to STEPS any property rights, including but not limited to copyright, that I might have in any of my course contributions or in the recordings or photographs, and I agree that I will not receive any compensation for my participation. Additionally, I hereby release STEPS and the Board of Governors of West Virginia University, its members, officers, and employees from liability for any and all claims or causes of action of whatever kind or nature, whether known or unknown, foreseeable or unforeseeable, including but not limited to invasion of privacy or copyright infringement arising out of my participation in the Simulation Activity.

I acknowledge that I am at least eighteen (18) years old OR, in the event the participant is under 18, the parent or guardian acknowledges, that this Authorization, Assignment, and Release of Liability Agreement has been read and understood and is being voluntarily accepted.

References:

Policy IN02 – Audio Video Retention, Archival, and Destruction

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Kathryn Smalley

Author

December 12, 2019

Date

X Daniel Summers

Approver

December 12, 2019

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	1/1/2017
2.0	The SOP template was updated and the Video Recording process was further defined.	12/18/2017
2.1	Updated to reflect current practices and to reflect current numbering convention.	1/29/2018
3.0	Updated to common STEPS format policy	7/19/2018
3.1	Standardized with IN02	8/1/2018
3.2	Updated Consent Form	12/2/2019

IN04: Website

Purpose:

The purpose of this SOP is to define changes and approvals for content to be developed and/or created for use on the STEPS website.

Scope:

Any person(s) requesting to make content changes or develop website items

Responsibilities:

- STEPS Group or Employee
 - Management of STEPS
 - Management in STEPS has final say of what content may or may not be added to the website as well as changes made to the SOP
 - Website Committee
 - Develop or coordinate development and uploading of content upon approval
 - Employee Responsibilities
 - Specific roles and responsibilities for employees if groups of employees are identified above.
 - Medical Director or designee
 - Member of “Management of STEPS” group. Responsibilities designated in its respective section.
 - Director or designee
 - Member of “Management of STEPS” group. Responsibilities designated in its respective section.
 - Website Committee Chair
 - Member of “Website Committee”. Responsibilities include informing Management of STEPS on any content changes and ensure content that approved is created or uploaded as well as responsibilities designated in its respective section.

- Website Committee Members
 - Member of “Website Committee”. Responsibilities designated in its respective section.

Definitions:

Term or Acronym/Abbreviation	Definition
Content	Any material (text, images, etc.) added to website
CMS	Content management system
Website Design	Themes and layouts (how content is configured to appear) on website

Procedures:

- All content must be compliant with WVU Policies and guidelines set by the University relations department as well as following the HSC ITS Website Content Guide located on the Website Support page. WVU and HSC Policy in References.
- Website design is managed by ITS Web Development services and they must be contacted for design changes. See WVU Policy in References.

Content Additions and Updates

- **Website change approval**
 - A request must be sent to the Website Committee for any additions or changes made to the website. After the request, the Website Committee will collect any further information needed. Once information is collected, content changes will be sent to the STEPS management group for approval.

- **Content development**
 - Content will be given or created by the website committee after approval of the change
- **Website content approval**
 - After content is developed, approval by both the website committee as well as the management of STEPS is required.
- **Publish content**
 - Once the content is changed, the website committee chair(s) will publish content in the CMS.

References:

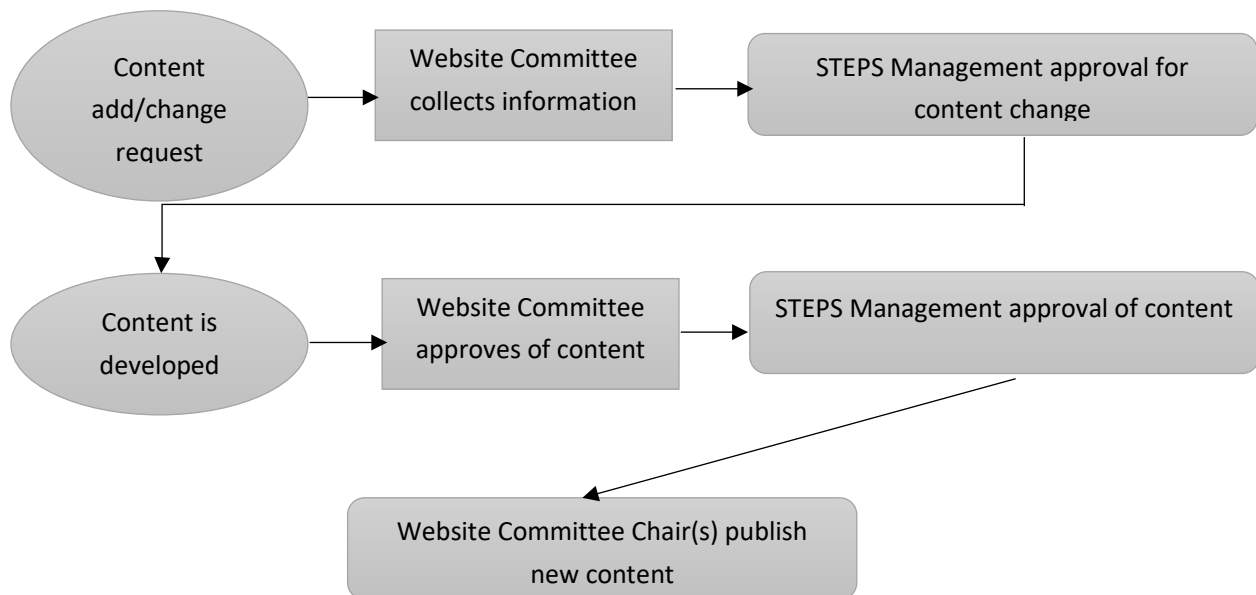
University Relations Policy and Guidelines:

<http://universityrelations.wvu.edu/digital-services/policies-and-guidelines>

HSC ITS Website Support:

<https://its.hsc.wvu.edu/website-support>

Appendix A: Flowchart of approval procedure for content additions or changes



Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Lee Ann Miller

Author

July 20, 2018

Date

X Daniel Summers

Approver

July 20, 2018

Date

Policy: IN04
 Adopted: January 23, 2018
 Reviewed/Revised: October 2023
 Author: Lee Ann Miller
 Approver: Daniel Summers

Chronological Revision History

Version	Modification	Date
1.0	New SOP	1/23/2017
2.0	Updated to common STEPS format policy	7/20/2018

IN05: Password

Purpose:

To ensure the integrity and confidentiality of course information and student educational records.

Scope:

This policy applies to all staff, faculty, and learners with access to any password protected system used in STEPS. This includes, but is not limited to, LearningSpace, SOLE, and WVU myID.

Responsibilities:

It is the responsibility of all staff, faculty, and learners to keep their passwords safe and up-to-date. Master passwords are to be given only to authorized personnel by the discretion of the Director/Medical Director.

Definitions: None required for this policy.

Procedures:

All staff, faculty, and learners shall not share passwords or save passwords in a manner that compromises its security. Users are responsible for the integrity of their password.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Kathryn Smalley

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	December 14, 2016
2.0	New Policy Format	July 23, 2018

IN06: IT Security Policy

Purpose:

The purpose of this policy is to provide protection for all information that is used, stored, and shared at STEPS.

Scope:

As an entity of WVU HSC, all STEPS staff, faculty, and users follow the HSC IT Policy Manual for matters regarding information technology.

Responsibilities:

Please refer to the WVU HSC IT Policy Manual for further responsibilities (see reference section of this document)

Definitions:

- WVU- West Virginia University
- HSC – Health Sciences Center
- IT – Information Technology

Procedures:

Please refer to the WVU HSC IT Policy Manual for further procedures (see reference section of this document)

References:

HSC IT Policy Manual - <https://its.hsc.wvu.edu/policies>

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Kathryn Smalley

Author

April 17, 2019

Date

X Daniel Summers

Approver

April 17, 2019

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	4/17/2019

OP01: Scheduling

Purpose:

The purpose of this policy is to describe the scheduling process, including priority scheduling.

Scope:

This policy applies to all individuals and entities requesting STEPS space and/or STEPS faculty & staff.

Responsibilities:

- **STEPS Faculty & Staff Roles & Responsibilities**
 - **Medical Director** approves schedule upon review and provides final say to conflict. This may be delegated to the director.
 - **Director** oversees schedules and provides input to scheduling conflicts. This may be delegated to administrative associate.
 - **Administrative Associate** oversees schedulers.
 - **Scheduler** sends priority scheduling email, implements schedule policy, guides individuals and entities to ensure they request what they need, inputs approved events onto the STEPS SharePoint calendar
- Entities/Individuals Requesting STEPS Space/Faculty must follow the procedures for scheduling


Definitions: None required for this policy.

Procedures:

Scheduling requests are accepted approximately 6 months prior to the beginning of each semester. Dates are listed in emails sent by STEPS scheduler.

Following designated priorities and due dates, STEPS space and faculty will be

assigned. When the priority due dates have passed, scheduling will be on a first-come, first-serve basis. In order to keep things as organized as possible, we would prefer that requests not be sent in prior to the dates indicated for each semester. Please use the request form provided online (see resource section of this document for a link).

- In order to request events and/or faculty & staff, as well as view the STEPS calendar, please see the STEPS web calendar.
- A link to the web calendar may be found in the resources section of this document. To schedule days and times for your simulation event, choose “Schedule an Event”.
- Put your name as course scheduler. Start by typing in your e-mail, then hit enter or click the check names icon - . (You can use the address book at the end of the line to search for names.) As course scheduler, you will be emailed a notice when STEPS has received the form, and a confirmation once it has been approved. Please also fill in the Course Instructor.
- Simulation Instructor will be filled out by STEPS.
- If you are scheduling multiple times for the same event; (i.e. Days in a row, once every week on Monday, Friday, etc.), please fill out the “explanation of reoccurring event” field as well.
- The items required are denoted by the red asterisk (*) in the required field.
- Forms need to be filled out completely in order for us to assign the proper rooms and equipment.
- Fill out all of the fields pertaining to your request. The following items will help us better meet your educational needs:
 1. The number of participants
 2. Three (3) educational objectives
 3. A detailed description of the simulation
 4. Standardized Patients (yes or no)
 5. LearningSpace needed (yes or no)
 6. Equipment, personnel, etc.
- You will receive a notice that your request was received by STEPS. You will also receive a confirmation once the event has been scheduled.

References:

STEPS Schedule Request:

<https://wvuhsc.sharepoint.com/sites/wvusim/STEPS/stepscalendar/Lists/New%20Event%20Request%20Form/Datasheet%20View.aspx>.

STEPS Scheduling Email:

TO: Simulation Scheduler

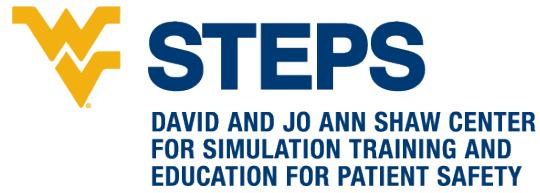
Please read carefully.

Directions for Scheduling:

We are now accepting scheduling requests for **Fall Semester 2020 & Spring & Summer Semester 2021**. Dates are listed on the next page. Following our designated priorities and due dates, we will make assignments. When the priority due dates have passed, scheduling will be on a first-come, first-serve basis. In order to keep things as organized as possible, we would prefer that requests not be sent in prior to the dates indicated for each semester. Please use the request form provided online.

• In order to request events, as well as viewing our calendar, go to our website calendar page below. Click on the link below and follow the login instructions on this page.

- <http://steps.wvu.edu/about/internal-resources/calendar/>
- To schedule days and times for your simulation event, choose “Schedule an Event”.
- • Please put **your email address in the “Email of person scheduling this activity”**. Start by typing in your e-mail, then hit enter or click on next box. As course scheduler, you will be emailed a notice when STEPS has received the form, and a confirmation once it has been approved. Please also fill in the Course Instructor. Simulation Instructor will be filled out by STEPS.
- If you are scheduling multiple times for the same event; (i.e. Days in a row, once every week on Monday, Friday, etc.), please fill out the “explanation of reoccurring event” field as well as the number of participants per time session.
- The items required are denoted by the red asterisk (*) in the required field.
- **IMPORTANT**- Please do your best to fill out all of the fields pertaining to your request in order for us to assign the proper rooms and equipment.
The following items will help us better meet your educational needs.
 1. the number of participants
 2. three educational objectives
 3. detailed description of the simulation
 4. Standardized Patients (yes or no)



Policy: OP01
Adopted: April 10, 2018
Reviewed/Revised: October 2023
Author: Kathryn Smalley
Approver: Daniel Summers

5. LearningSpace needed (yes or no)
6. Equipment, personnel, etc.

You should receive notice that your request was received by STEPS. You should also receive a confirmation once the event has been scheduled. **Please watch for these e-mails and if you do not receive either of them or there is a question about them, please contact us at 293-7837.**

If you need further assistance, contact us by phone 293-7837 or email wvsteps@hsc.wvu.edu.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Kathryn Smalley

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	February 5, 2018
2.0	Updated to common STEPS format policy	July 23, 2018
2.1	Updated Scheduling Letter	April 23, 2019

OP02: Center Usage

Purpose:

To ensure that ground rules are established to govern the conduct and operation of simulation encounters and participants in the center.

Scope:

This policy applies to all individuals who utilize STEPS.

Responsibilities:

- **STEPS Management**
 - Overall enforcement of policy.
- **STEPS Staff**
 - Monitoring of Faculty/Instructors and Learners for policy compliance.
- **Faculty/Instructors**
 - Adherence to policy and monitoring Learners for policy compliance.
- **Learners**
 - Adherence to policy.

Definitions:

Term or Acronym/Abbreviation	Definition
SEU	Surgical Education Unit, Room 3518

Procedures:

- Always treat and care for the simulators/Standardized Patients with respect, as you would a real patient. It is an expectation that all staff, faculty, instructors, and learners demonstrate professionalism when utilizing equipment and space within STEPS.
- Learners should leave all unnecessary items in the lockers assigned by the university/institution, as appropriate.
- Lockers within the STEPS facility are intended for use by learners not affiliated with the university/WVU Medicine, and are provided on a first-come, first-serve basis.
- STEPS/WVU will not be held responsible for damage/theft of personal items.
- No uncovered drinks are allowed in simulated clinical areas. Absolutely no food or drink is permitted in close proximity to simulators or simulation equipment.
- No jacket, coats, school bags, or purses are to be placed on the beds or floor space. All personal items are to be left in the provided lockers or designated space.
- Pencil only- no pens allowed around manikins or task trainers. Never write or draw on the simulators because it will permanently remain on the skin.
- Before leaving STEPS, rooms should be returned to the condition in which you found them.
- All medical sharps (needles, etc.) must be properly disposed of by the person using them.

References:

None required for this policy.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

April 18, 2019

Date

X Daniel Summers

Approver

February 18, 2020

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	December 14, 2016
2.0	Updated to common STEPS format policy	July 23, 2018
3.0	Procedure Update	April 4, 2019
3.1	Added rules regarding locker use and personal items.	February 12, 2020
3.2	Added further clarification for policy	February 18, 2020

OP03: Learner Confidentiality

Purpose:

To provide a consistent, psychologically safe environment and experience to learners, and to preserve the integrity of simulation activities.

Scope:

Applies to all users of STEPS.

Responsibilities:

All individuals who utilize STEPS have the responsibility to maintain a confidential and professional atmosphere. Individual responsibilities are outlined in the procedure below.

Definitions:

None

Procedures:

- STEPS Staff:
 - Responsible for ensuring that this policy is followed.
 - Maintain integrity of information and activities
 - Preserve learner confidentiality with regard to personal information, grades, and performance
 - Any suspected violations of confidentiality as described in this policy should be forwarded in writing to the STEPS Director or appropriate faculty, and shall include information to support the investigation of the violation.

- Faculty/Educators:
 - Responsible for ensuring that this policy is followed.
 - Maintain integrity of information and activities
 - Preserve learner confidentiality with regard to personal information, grades, and performance
 - Any suspected violations of confidentiality as described in this policy should be forwarded in writing to the STEPS Director or appropriate faculty, and shall include information to support the investigation of the violation.
 - Communicate levels of expected confidentiality to STEPS Staff when developing/designing simulation activities.
 - Explain the policy and expected level of confidentiality to learners upon STEPS Orientation and/or activity prebriefing.

- Learners:
 - Responsible for adhering to the established policy.
 - Maintain integrity of information and activities
 - Preserve confidentiality with regard to personal information, grades, and performance
 - Any suspected violations of confidentiality as described in this policy should be reported to the STEPS Director or appropriate faculty/staff, and shall include information to support the investigation of the violation.

- Formative and/or Summative Assessment will remain completely confidential by all, and only shared as appropriate.

References:

Policy SA04 related to Psychological Safety

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Christy Barnhart

Author

April 16, 2019

Date

X Daniel Summers

Approver

April 16, 2019

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	May 24, 2017
2.0	The SOP template was updated.	July 23, 2018
3.0	Moved Psychological Safety comments to Psychological Safety Policy (SA04)	April 9, 2019
4.0	Rewrite and Clarification of Policy	April 16, 2019

OP04: Participant and Observer Safety

Purpose:

To ensure that the risk of unintentional injury to learners or observers is minimized, and to create a safe learning and evaluating environment.

Scope:

All STEPS employees, educators, learners, and observers.

Responsibilities:

All persons within the STEPS facility, more especially educators, STEPS staff and the STEPS Director.

Definitions: None required for this policy.

Procedures:

Educators and STEPS staff are to ensure that learners are engaged in proper behavior and operation of equipment during their learning encounter. If multiple learners are taking turns using the same equipment, educators and STEPS staff are responsible for ensuring that either the last learner leaves the station in a safe condition, or the educator or staff member performs that duty. Educators and STEPS staff are also responsible for ensuring observers maintain a safe distance from the activity taking place. Faculty/Instructor permission must be obtained prior to outside observation. Any person within the STEPS facility has the authority to immediately stop an activity if he/she believes that a safety hazard is present.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

April 22, 2019

Date

X Daniel Summers

Approver

April 22, 2019

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	March 21, 2017
2.0	New Policy Format	July 23, 2018
2.1	Addressed Observer Permission	April 22, 2019

OP05: Learner Complaint resolution

Purpose:

To provide a plan/procedure to ensure learners have a means to register a complaint and follow it to resolution.

Scope:

This policy applies to all staff, faculty, and instructors representing STEPS.

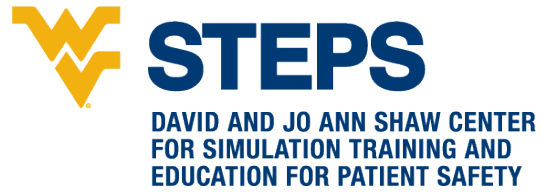
Responsibilities:

Enforcement of the policy will be the responsibility of faculty involved in the session followed by STEPS staff, and ultimately STEPS Director and/or Medical Director.

Definitions: None required for this policy.

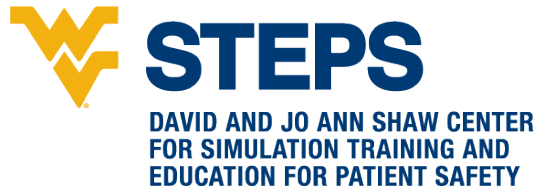
Procedures:

- Most sessions conducted within STEPS are followed up with an evaluation that is reviewed by the EQI Committee. This process is well described in the EQI Committee policies.
- If a learner has a complaint that needs to be addressed during or immediately after the session they are encouraged to go to the faculty in charge of the session or to STEPS staff involved.
- Should the learner not feel comfortable with this course of action they may ask to speak with the STEPS Director.
- It is the responsibility of the one to whom the complaint was reported to see that it is properly taken through the channels, and an appropriate resolution is made and reported back to the learner.



Policy: OP05
Adopted: November 1, 2018
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

- Further, each school has a policy for conflict resolution and the learner can pursue the complaint through those means.



Policy: OP05
Adopted: November 1, 2018
Reviewed/Revised: October 2023
Author: Daniel Summers
Approver: Dorian Williams

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Daniel Summers

Author

November 1, 2018

Date

X Dorian Williams

Approver

November 1, 2018

Date

Policy: OP05
 Adopted: November 1, 2018
 Reviewed/Revised: October 2023
 Author: Daniel Summers
 Approver: Dorian Williams

Chronological Revision History

Version	Modification	Date
1.0	New Policy	November 1, 2018

OP06: Professionalism

Purpose:

To ensure STEPS staff, faculty, and learners conduct themselves in a professional manner, upholding the highest standards of WVU, HSC, and individual programs.

Scope:

This applies to all who utilize STEPS.

Responsibilities:

Enforcement of the policy will be the responsibility of faculty, staff, and learners that utilize STEPS.

- Learner – Treat other students, faculty and staff, with dignity and respect. Maintain learner confidentiality.
- Faculty - Treat students, faculty and staff, with dignity and respect. Maintain learner confidentiality.
- Staff - Treat students, faculty and staff, with dignity and respect. Maintain learner confidentiality.

Definitions: None

Procedures:

STEPS expects all to follow professionalism guidelines by WVU, HSC, and each individual school or program.

Links provided for each program's policies:

WVU

<https://studentconduct.wvu.edu/>

SON

<https://nursing.hsc.wvu.edu/media/74526/2018-19-ug-handbook-81418.pdf>

<https://faculty.wvu.edu/files/d/da823b3c-8a3d-45aa-b22a-ae699bb7db20/faculty-handbook-8-17-17.pdf>

Pharmacy

<https://pharmacy.hsc.wvu.edu/media/1937/wvu-sop-student-code-of-academic-and-professional-integrity-document.pdf>

SOM

<https://medicine.hsc.wvu.edu/media/361658/academic-and-professionalism-standards-governing-the-md-degree09program-final63017.pdf>

<https://medicine.hsc.wvu.edu/media/2989/student-code-of-academic-and-professional-integrity-for-the-m.pdf>

Dentistry

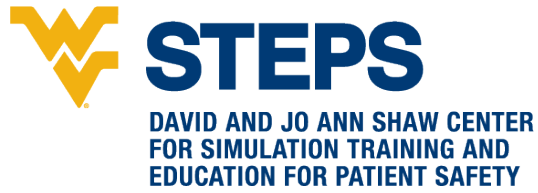
<https://dentistry.hsc.wvu.edu/media/1069/policy-on-academic-and-professional-standards.pdf>

Public Health

<https://publichealth.hsc.wvu.edu/students/student-resources/policies-forms/student-code-of-conduct-policy/>

WVU Medicine

<https://wvumedicine.org/wp-content/uploads/2018/12/Code-of-Ethical-Conduct-12182018.pdf>



Policy: OP06
Adopted: April 19, 2019
Reviewed/Revised: October 2023
Author: Jason Craig
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

April 22, 2019

Date

X Daniel Summers

Approver

April 22, 2019

Date

Chronological Revision History

Version	Modification	Date
1.0	New Policy	April 19, 2019

OP07: Psychological Stress

Purpose:

While STEPS makes every attempt to ensure that learners experience a psychologically safe environment, unknown events from the learner's past may cause undue stress in what may otherwise be considered a safe scenario. In an effort to mitigate the impact of this stress to the learner, this policy has been created to provide a plan/procedure to ensure learners that have an undesirable/stressful psychological reaction to an educational activity in STEPS have a means for immediate care and follow-up.

Scope:

This policy applies to all staff, faculty, and instructors representing STEPS.

Responsibilities:

- Enforcement of the policy will be the responsibility of faculty involved in the session followed by STEPS staff, and ultimately STEPS Director and/or Medical Director.

Definitions:

Carruth Center
Health and Education Building
390 Birch Street
P.O. Box 6422 Morgantown, WV 26506
304-293-4431wvucccps@mail.wvu.edu

Procedures:

- Faculty and staff are to monitor learners during sessions conducted in STEPS to ensure psychological safety at all times.
- If a learner acknowledges and/or is determined to be having an adverse psychological stress event during or after a session, the following steps will occur:
 - Faculty or staff will discuss situation with learner and determine if they can continue in the session or if further assistance is needed
 - If needed, learner will be removed from session and have an appropriate individual stay with them.
 - Either faculty from that discipline or the STEPS Director (or designee) will be notified.
 - Based on the learner's needs, they will be allowed to return to the session or monitored.
 - If the learner or the one watching them deem further assistance is needed they will be provided with information to contact the Carruth Center.
 - Should the learner be deemed to be in significant psychological stress, they will be accompanied either to the Emergency Department or to the Carruth center.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Christy Barnhart

Author

April 9, 2019

Date

X Daniel Summers

Approver

April 9, 2019

Date

Chronological Revision History

Version	Modification	Date
1.0	New Policy	November 1, 2018
2.0	Revised Policy to expand purpose and clarify procedure.	April 9, 2019
2.1	Renamed Policy to Psychological Stress	May 11, 2020

OP08: Psychological Safety

Purpose:

To ensure a psychologically safe environment in which students feel free to express ideas and make mistakes without fear of being discounted or ridiculed.

Scope:

This policy applies to all staff, faculty, learners and instructors representing STEPS.

Responsibilities:

Enforcement of the policy will be the responsibility of faculty involved in the session followed by STEPS staff, and ultimately STEPS Director and/or Medical Director.

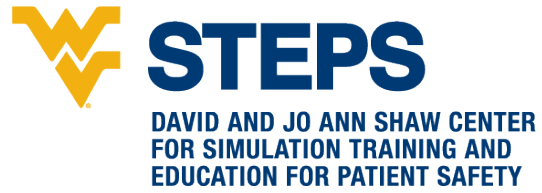
Definitions:

Psychological Safety:

- A feeling (explicit or implicit) within a simulation-based activity that participants are comfortable participating, speaking up, sharing thoughts, and asking for help as needed without concern for retribution or embarrassment.
- The perception of members of the team that the team is safe for risk taking, and mistakes will be considered learning opportunities rather than there being embarrassment or punitive consequences (Edmondson, 1999; Higgins et al, 2012)

Procedures:

- Learners are to be informed during orientation and/or prebriefing that a psychological safety policy is in place and remind them that the simulation center is a safe learning environment in which they are free to explore and express ideas and make mistakes without fear of being discounted, ridiculed or embarrassed.
- This rule shall not apply during summative assessment insofar as the definition of safe learning environment changes and consequences exist for mistakes, such as effects on grades, etc. Other aspects of this policy, such as the learner feeling safe from ridicule, etc. will still apply in these circumstances.



Policy: OP08
Adopted: May 11, 2020
Reviewed/Revised: October 2023
Author: Jason Craig
Approver: Daniel Summers

- Faculty and staff are to monitor learners during sessions conducted in STEPS to ensure psychological safety at all times.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

May 11, 2020

Date

X Daniel Summers

Approver

May 11, 2020

Date

Chronological Revision History

Version	Modification	Date
1.0	New Policy	May 11, 2020

OP09: Infectious Disease (ID) Guidelines for Center Usage

Purpose:

Establish ground rules to govern the conduct and operation of faculty, staff, and learners during simulation encounters, and to reduce risks and ensure the safety, to the best of our ability, for those utilizing the STEPS center at times when Infectious Diseases are prevalent. (i.e. COVID-19, Influenza, etc.).

Scope:

This policy applies to all individuals who utilize STEPS.

Responsibilities:

- **STEPS Management**
 - Overall enforcement of policy.
- **STEPS Staff**
 - Monitoring of Faculty/Instructors and Learners for policy compliance.
- **Faculty/Instructors**
 - Adherence to policy and monitoring Learners for policy compliance.
- **Learners**
 - Adherence to policy.

Definitions:

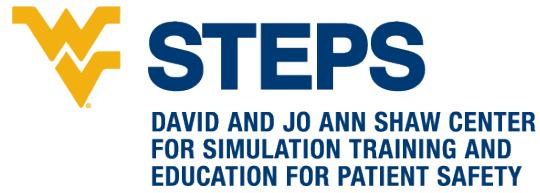
Term or Acronym/Abbreviation	Definition
Covid-19	a mild to severe respiratory illness that is caused by coronavirus.
CDC	Center for Disease Control

Procedures:

- Other operational policies enforced unless superseded by this policy for purpose of ID mitigation.
- Follow all CDC recommended guidelines related to healthcare workers.
- Follow WVU Medicine guidelines as related to practicing in a clinical environment.
- WVU and HSC Guidelines may supersede CDC or WVU Medicine in some cases.
 - ie. Learners must wear masks at all times when in the STEPS center.
- Provide virtual instruction, if possible, to meet learning objectives.
- On site staff will be limited to those required to meet faculty and learner needs.
- Limit class/group size in order to meet distancing standards.
 - Numbers of learners per group depends on room and type of training.
 - It is the expectation that faculty will plan accordingly to ensure distancing
- Rooms and supplies used for an activity will be cleaned appropriately.
 - STEPS Staff will ensure cleaning supplies are available per guidelines of manufacturer.
 - Any specific cleaning instructions will be made available.
 - STEPS Staff will be responsible for ensuring proper cleaning takes place between activities or as deemed appropriate.
 - Equipment used during an activity will be cleaned between learners as appropriate.
- Self-learning or unsupervised practice will be restricted to appointment only so that proper cleaning may occur.
 - Faculty and Graduate level learners will be permitted once they have been in serviced on usage of equipment, to include proper cleaning.
 - Proper handwashing before and after usage of equipment is expected.
- Ensure infrastructure is in place for IT, facility maintenance, and housekeeping.
- Office space visitation should be kept to a minimum.
 - Outside of office occupants, visitors should limit time in the office to the minimum necessary to accomplish their purpose.
 - When possible, meetings should always be conducted using virtual videoconference software.
 - The number of visitors at any given time should be limited in order to maximize social distancing.

- Lockers within the STEPS facility will be closed when ID scenarios are being enforced.

References:



Policy: OP09
Adopted: July 6, 2020
Reviewed/Revised: October 2023
Author: Jason Craig
Approver: Daniel Summers

<https://www.cdc.gov/>

<https://coronavirus.wvu.edu/>

<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/infection-control.html>

<https://wvumedicine.org/covid/>

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

July 6, 2020

Date

X Daniel Summers

Approver

July 6, 2020

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	July 6, 2020

OP10: Animal and Human Cadaver and Tissue Handling Protocol

Purpose:

The purpose of this protocol is to provide guidance for all faculty, staff, and students when working with animal or human cadaveric tissue, which could be a biohazard or potentially infectious. Using animal or human tissues or parts in the Clinical Simulation Center is permissible, however all tissue use for education must follow the guidance set forth by the Institutional Biosafety Committee (IBC).

Scope:

This policy governs the acquisition of cadaveric tissue to be used as part of any research or educational presentation and covers all faculty, staff and students working with biohazards, potentially infectious materials, or animal or cadaveric tissue.

Responsibilities:

Enforcement of the policy will be the responsibility of the Principal Investigator or Laboratory Manager. For non-research educational use of tissue, the STEPS Leadership Team will be responsible to ensure tissue use follows WVU Biosafety Guidelines. The Biosafety Manual can be found at <https://www.ehs.wvu.edu/biosafety/biosafety-manual>.

Definitions:

Animal Tissue: Any animal tissues being used for research and/or teaching either removed from euthanized animals or purchased from area butcher, slaughterhouse or food store.

Biohazards: Any biological agent that has the potential to cause harm to people, animals, plants, or the environment. Also referred to as *Infectious Materials*.

Biosafety: The discipline addressing the safe handling and containment of infectious microorganisms and hazardous biological materials through the application of containment principles and risk assessment.

Blood Borne Pathogen: Microorganisms carried in the blood that can cause disease in humans.

Cadaver: A dead human body used for medical or scientific purposes such as medical education or research.

Cadaveric Tissue: Tissue, including parts from a cadaver, or the dead body of an animal or human. Cadaveric tissues can be fixed or unfixed.

Infectious Materials: Synonym for Biohazards. See Biohazard for definition.

Institutional Biosafety Committee (IBC): An institutional committee, required by the *NIH Guidelines for Research Involving Recombinant and Synthetic Nucleic Acids*, which reviews research being conducted on all campuses involving recombinant and synthetic nucleic acids, pathogens, toxins, wild animals, exotic pests, and human-derived materials.

Other Potentially Infectious Materials (OPIM): Any human body fluids which can be contaminated by blood including: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, or saliva. Unfixed human tissues or organs, other than intact skin, are also considered OPIMs. Lastly, cells/tissue cultures, organ cultures, and culture medium or other solutions containing human immunodeficiency virus (HIV) or hepatitis B virus (HBV) blood, organs, and other tissues from experimental animals infected with HIV or HBV.

Procedures:

Requirements for the Safe Use and Disposal of Tissue

Personal Protective Equipment (PPE): Any person handling any form of tissue is required to wear appropriate gloves at all times. Nitrile gloves are the preferred choice given their wide range of protection. If a significant splash hazard exists, safety goggles or glasses are required. If the tissue contains a formalin-based preservative, additional

PPE or controls may be recommended or required. The use of unfixed human tissue may require additional PPE as recommended by the IBC.

No food or drink: Nothing allowed in lab area where animal or human tissue is located.

Work Surfaces: Disposable underpads or “Chux” must be used on all work surfaces. All work surfaces will be cleaned with detergent and disinfected with appropriate disinfectant such as Sani-Wipe® or Sani Cloth® (germicidal disinfectant wipes) or a 10% bleach mixture. Remove gross contaminants. Clean surface to remove gross contamination. Spray or otherwise saturate with disinfectant. Allow to stand for 3 minutes prior to final wipe down with paper towel.

Instruments: Non-disposable instruments that are used will be washed in the sink to remove gross contamination. Any large tissue pieces should be placed with the remaining tissue for disposal. Once cleaned, instruments shall be sanitized using a 10% bleach mixture. Allow instruments to soak for 10 minutes prior to rinsing and drying. The dishwasher with automatic dish detergent may be used for sanitizing cleaned instruments.

Injury or incident:

In the event of injury such as needlestick or splash to mucous membranes or possible contamination incident First Aid should be administered in accordance with Infectious Agent Fact Sheet on Page 6-9 of this document. Environmental Health and Safety shall be notified by following the EHS guidelines:

Employee: Supervisors are to report injury and incidents within 24 hours for needed review and advisement from Environmental Health and Safety and Medical Management. Please clearly complete, sign and send to wvuinjuryincidentreport@mail.wvu.edu:

Form: https://www.ehs.wvu.edu/files/d/4542ab33-c652-426a-9172-eceeb8bd3e19/employee-injury-incident-report-4_9_18.pdf

Student or Visitor: Form must be completed by the student or visitor to report an injury within 24 hours. Form must be printed, signed, and emailed to wvuinjuryincidentreport@mail.wvu.edu:

Form: <https://www.ehs.wvu.edu/files/d/ef6b3218-d9c2-4b04-9d83-223aed0d61c2/student-or-visitor-accident-form-2018.pdf>

Animal tissue:

Animal tissues are permitted for use in simulation-based education and research provided the animal tissues or parts meet the requirements of The WVU IBC.

Center users are expected to demonstrate common sense and good judgment in the storage, transportation, use, and disposal of animals' parts used for simulation education or research.

Grocery Store, Butcher, or Slaughterhouse:

Includes food grade items such as pigs' feet or hot dogs as well as items such as porcine or bovine tracheas, stomachs and intestines, and varied organs.

Items for Consideration:

- Freshness of the parts – avoid the use of parts with offensive odors that may impact learners or linger in the Center after the simulation is concluded.
- Fluids from the parts – avoid parts with excessive fluid drainage that may leak during transport into or through the Center or potentially damage Center equipment.

Disposal of parts – Once the simulation is completed, the sponsoring department is responsible for removing the parts from the Center. Parts should be double bagged in heavy-duty opaque garbage bags to limit risk of leakage. Use of a red Biohazard Bag is not permitted. All biological specimens should be disposed of in the main hallway or designated trash container and housekeeping notified. When notifying housekeeping, describe the tissue as food grade meat.

Some larger identifiable parts that may pose a higher risk of poor public perception if exposed, may be best disposed of by sending through stericycle.

Human Tissue:

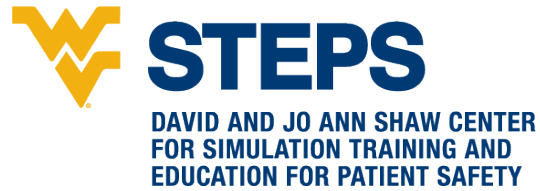
STEPS is committed to the dignified and respectful treatment of cadavers and recognizable human body parts. Human tissues are permitted for use in simulation-based education and research provided the tissues or parts meet the requirements of The WVU IBC.

The procurement, inventory, use, storage, transfer, transportation, and disposition of cadavers/parts used for education and research purposes must be conducted safely, respectfully, and in compliance with all legal, public health, and ethical standards.

All procurement of cadavers and/or cadaveric tissue must be from an Approved Supplier. Orthopedics at WVU has limited frozen storage space that can be utilized by STEPS if necessary.

Outside Vendor:

In the event an outside vendor arranges for cadavers or cadaveric tissue for an educational session, the vendor is responsible for the acquisition and disposal of



Policy: OP10
Adopted: December 1, 2021
Reviewed/Revised: November 2023
Author: Russell Doerr
Approver: Daniel Summers

such tissue. It must come from an approved supplier of human tissue and instructions/arrangements for disposal or return must accompany the tissue. For whole cadavers, it is preferable for responsible attendants to accompany the cadaver and arrange storage and disposition.

WVU Pathology:

All cadaveric tissue or cadavers obtained from WVU Human Gift Registry will be treated in accordance with WVU HGR policies and protocols. Arrangements for acquisition, use transport and disposition shall be made prior to the activity.

West Virginia University Infectious Agent Fact Sheet

Human Samples

This document must be completed prior to start of project involving infectious materials.

PI/Supervisor Name: Daniel Summers PI phone number and email: (304) 293-8425
Name of potentially infectious material: Human tissue samples
Biosafety Level: BSL2
Description of infection risk: Tissue is being obtained from the WVU human gift registry. The human gift registry does not accept cadavers with a known infectious disease, but this tissue is not tested for pathogens.
Transmission Mode: Needle stick or other percutaneous injury, splash to the mucous membranes
Disinfection: 10% bleach, peroxide based disinfectants
Other Comments:

To be completed by WVU Occupational Medicine:

Emergency Response for Exposure:

First Aid: <ul style="list-style-type: none"> • <i>Skin Exposure:</i> immediately go to the sink and thoroughly wash the skin with soap and water. • <i>Skin Wound:</i> immediately go to the sink and run wound under water while squeezing to express blood. Then thoroughly wash the wound with soap and water. • <i>Splash to Eye(s), Nose or Mouth:</i> immediately flush the area with running water for at least 15 minutes. <p>The following procedures are for biological exposures. If you have an injury that does not involve an exposure (muscle sprain, cut from a sterile scalpel), you can call Occupational medicine at 304-293-3693 during business hours (Monday – Friday 8am – 4:30pm). If it is after hours or on a holiday or weekend, please go to the WVUH Emergency Department.</p>

After First Aid is applied:

- The person involved must immediately report the incident to their supervisor or Principal Investigator (PI).
- Exposed personnel should take this sheet and the exposure questionnaire and go directly to WVUH Emergency Department.
- If the person could be potentially contagious, please call the WVUH Emergency Department for instructions on how to enter. The charge nurse phone number is 304-598-6122 and main ED phone number is 304-598-4172. Please try to call the charge nurse first.
- The Supervisor/PI should fill out an incident report found on the EHS website within 24 hours of the incident: <https://www.ehs.wvu.edu/general-safety/injury-illness>
- Once the incident report has been sent in, the individual can contact medical management 304-293-hurt (4878) for return to work questions or workers compensation questions.
- The exposed individual should call Occupational Medicine the next business day to inform them of the incident schedule a follow-up appointment.
- The supervisor/PI is responsible for reporting the incident to the biosafety officer (BSO) 304-293-7157, aaelliott@mail.wvu.edu .

Medical Care:

- Initial evaluating provider will document the route of exposure and circumstances under which exposure occurred (29 CFR 1910.1030(f)(3)).
- Confidential individual medical evaluation.
- Baseline lab studies will be obtained with the exposed employee's consent, as detailed below.
- Post-exposure prophylaxis, when medically indicated, will be provided as detailed below.
- Counseling regarding medical conditions resulting from exposure to blood or other potentially infectious materials (OPIM).
- Written opinion to employer stating only that:
 - a) The employee has been informed of the results of the evaluation;
 - b) The employee has been told about any medical conditions resulting from exposure to blood or OPIM which require further medical evaluation or treatment.
 - c) Hepatitis B vaccination is/is not indicated for the employee, and whether the employee has received such vaccination

Laboratory Tests to Order:

1. HIV 1 /2 antibody
2. Hepatitis C antibody screen with reflex to HCV PCR
3. Hepatitis B surface antigen
4. Hepatitis B surface antibody

<p>5. Total Hepatitis B core antibody If PEP is ordered: CBC, hepatic function panel, renal function panel.</p>
<p>Treatment: A. In decision-making algorithms, source is of unknown BBP status. Use CDC guidelines to determine whether PEP is appropriate. PEPLine: 888-448-2911 available 24/7 If prescribed, preferred PEP 3-drug regimen for occupational exposures: 1. Truvada (tenofovir DF 300 mg/emtricitabine 200 mg once daily) AND 2. Raltegravir 400 mg bid OR dolutegravir 50 mg daily. Consult CDC guidelines update for alternate regimens. Start as soon as possible after exposure (prefer less than 2 hours; up to 72 hours). Consult Infectious Disease if exposed employee is pregnant, is breastfeeding, takes other medications, or has comorbidities.</p> <p>B. Determine whether the exposed employee needs HBIG and offer if appropriate.</p> <p>C. Determine whether the exposed employee needs Hep B vaccine and offer if appropriate.</p>
<p>Request to Emergency Department Personnel: Please arrange follow-up with Occupational Medicine in 72 hours for baseline lab results and counseling.</p>
<p>Instructions for Occupational Medicine Clinic: If employee is first seen in follow-up from the ER, schedule future labs/immunizations as needed, and provide counseling and work/activity instructions.</p>

References:

- CDC, *Information for Healthcare Personnel Potentially Exposed to Hepatitis C Virus (HCV)*, April 2018; retrieved from: <https://www.cdc.gov/hepatitis/pdfs/testing-followup-exposed-hc-personnel.pdf>.
- CDC, *Guidance for Evaluating Health-Care Personnel for Hepatitis B Virus Protection and for Administering Postexposure Management*, December 2013; retrieved from: <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6210a1.htm>.
- Kuhar D.T. *et al*, *Updated US Public Health Service Guidelines for the Management of Occupational Exposures to Human Immunodeficiency Virus and Recommendations for Postexposure Prophylaxis*; retrieved from: <https://www.jstor.org/stable/10.1086/672271>.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Russell Doerr

Author

December 1, 2021

Date

X Daniel Summers

Approver

December 1, 2021

Date

Policy: OP10
 Adopted: December 1, 2021
 Reviewed/Revised: November 2023
 Author: Russell Doerr
 Approver: Daniel Summers

Chronological Revision History

Version	Modification	Date
1.0	New Policy	

OP11: Unsupervised User Policy

Purpose:

To ensure proper usage of STEPS during and after normal work hours (0800 to 1600).
To govern proper conduct, usage of equipment and supplies, and proper learning techniques.

Scope:

This policy applies to any individual learners/departments/schools utilizing STEPS for simulation and/or skills practice without direct supervision.

Responsibilities:

Enforcement of the policy will be the responsibility of the STEPS staff per guidelines set forth in this policy.

Definitions:

Unsupervised Users – Any educational activity that does not have a Professor/Faculty/Upper Level Resident/STEPS Staff/Appropriate instructor available to oversee and ensure proper educational practices are followed.

Procedures:

- Faculty/staff/individuals determine the need for the activity, and if appropriate for learner to be unsupervised as per the following:
 - Learner has been properly instructed and is felt competent to practice activity.
 - Equipment to be used does not require direct supervision or expertise of STEPS staff or another faculty to operate. (i.e. High fidelity manikins or DaVinci Robot)
 - Items to be used are not cost prohibitive or department is able to pay for replaceable items.
- Learners who wish to participate in an unsupervised activity must have permission from an appropriate educator to schedule activity.
- Proper orientation of learners must be determined by STEPS staff relating to room and equipment prior to session.
- Professional practice must be followed according to STEPS professionalism policy.
- Please report any problems with equipment or facilities to STEPS at 304-293-7837.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X **Daniel Summers**
Author

June 10, 2022
Date

X **Dorian Williams**
Approver

June 10, 2022
Date

Policy: OP11
 Adopted: June 12, 2022
 Reviewed/Revised: December 2023
 Author: Daniel Summers
 Approver: Dorian Williams

Chronological Revision History

Version	Modification	Date
1.0	New Policy	

RE01: Research Committee

Purpose:

The purpose of this policy is to define the roles and responsibilities of the research committee, identify core members of the committee and define the expectations as described in the general Institutional Review Board (IRB) protocol for projects involving simulation-based research.

Scope:

STEPS assembled a research committee to oversee the general IRB protocol for projects involving simulation-based research. This group monitors educational research conducted using simulation modalities to assure compliance with IRB policies and promote high-quality research. The committee also provides assistance with establishing a timeline for project completion.

Responsibilities:

Members include the STEPS Medical Director who is the Principal Investigator (PI) on the general protocol, the STEPS Researcher, the Administrative Research Coordinator, the Director of Simulation, the Assistant Director of Education and Evaluation, the lead Simulation Specialist, and members at large from the schools of the Health Sciences Center. This interprofessional group reviews all educational research studies utilizing the IRB-approved umbrella research protocol to assure that they meet the standards set forth in the protocol. Members can help educators identify research questions, develop methods to collect data, and report the findings for conferences, journals and other forms of scholarly dissemination. The committee can help link educators with similar interests to promote quality projects that advance knowledge about simulation and its impact on learners. The committee will elect a chairperson from the membership.

- Medical Director
 - Serves as the Principal Investigator on the general IRB
 - Works with the committee chair to develop meeting agendas

- Has overall responsibility for ensuring appropriate use of STEPS facilities and staff for research purposes.

- Research Committee Chair
 - Sets meetings agendas with input from the STEPS Medical Director.
 - Leads committee meetings
 - Assigns mentors, with input from the STEPS Researcher, as needed for novice researchers

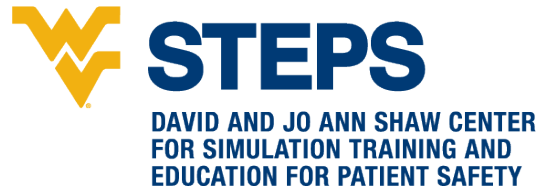
- Administrative Researcher
 - Assists committee chair and medical director with meeting agendas
 - Acts as a point of contact for committee business.
 - Maintains communications for the committee to include scheduling meetings and distributing project information and letters.
 - Maintains records of approved research projects and data for the specified period for each project, or the IRB whichever is greater.
 - Maintains records of all submitted projects and decision documents for a period of one (1) year from submission date.
 - Composes letters of acceptance or denial of projects
 - Ensures that credit for research conducted under the umbrella of the STEPS IRB Protocol is appropriately assigned to the faculty conducting the research within the digital record keeping system used by various university Promotion, Tenure, and Recruitment Committees.

- Administrative Research Coordinator
 - Assists committee chair, medical director, and STEPS Researcher with meeting agendas
 - Takes meeting minutes, disseminates them to members and files them for later reference.
 - Acts as an additional point of contact for committee business.

- Assists the STEPS Researcher in Maintaining records of approved research projects and data for the specified period for each project, or the IRB whichever is greater.
 - Assists the STEPS Researcher in Maintaining records of all submitted projects and decision documents for a period of one (1) year from submission date.
 - Assists the STEPS Researcher in Ensuring that credit for research conducted under the umbrella of the STEPS IRB Protocol is appropriately assigned to the faculty conducting the research within the digital record keeping system used by various university Promotion, Tenure, and Recruitment Committees.
- Committee Member
 - Assists and mentors interested educators when asked
 - Reviews and approves submitted project proposals
 - Actively participates in meetings and committee correspondence.

Definitions:

Term or Acronym/Abbreviation	Definition
IRB	Institutional Review Board
Project	Specific Educational research being performed under the STEPS IRB-approved umbrella protocol
Protocol	The STEPS general IRB-approved protocol that describes the essential steps necessary for educational research projects approved by the committee.



Policy: RE01
Adopted: July 1, 2017
Reviewed/Revised: January 2024
Author: Jason Craig
Approver: Daniel Summers

Procedures:

The research committee communicates regularly via electronic communication methods and physically meets at scheduled times to approve projects that are submitted, provide assistance to prospective educators and assign mentors to novice researchers.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

March 21, 2022

Date

X Daniel Summers

Approver

March 21, 2022

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	1/23/2017
2.0	Updated to common STEPS format policy	7/23/2018
3.0	Split to cover just committee responsibilities	12/12/2018
4.0	Addition of STEPS Researcher Position including responsibilities, adjustment of Administrative Research Coordinator responsibilities	3/21/2022

RE02: Research Process

Purpose:

The purpose of this policy is to outline the process for conducting research projects through the David and Joann Shaw Center for Simulation Training and Education for Patient Safety (STEPS) including proposal development, mentorship, and project management. The policy details each step of the research process, while providing guidance as to how to access the resources available along the way.

Scope:

With the increase in research productivity, largely due to the success of the interdisciplinary STEPS research committee, investigators are requesting additional assistance with their research projects, beyond committee review and timeline assistance. This policy will provide information to investigators who wish to utilize STEPS research resources for their projects.

Responsibilities:

Conducting research can be a daunting process for some investigators. Therefore, this policy will provide step-by-step research guidance from the initial conception of an idea to the end product of a publication in a peer-reviewed journal of the investigator’s choice. Should an investigator desire to conduct research through STEPS, this policy will be provided to them upon notification of their interest, with certain steps in the policy being mandatory to STEPS.

Definitions:

Term or Acronym/Abbreviation	Definition
IRB	Institutional Review Board
Project	Specific Educational research being performed under the STEPS IRB-approved umbrella protocol
Protocol	The STEPS general IRB-approved protocol that describes the essential steps necessary for

Term or Acronym/Abbreviation	Definition
	educational research projects approved by the committee.

Procedures:

Upon notification by the investigator of interest in conducting simulation-focused research via STEPS, the following procedures are in place to guide the investigator through the research process. See Appendix A for complete contact list for all positions listed in this document.

**Indicates mandatory steps for investigators to participate in STEPS research projects*

Pre-IRB Approval –

1. Research Design Development

- a. Should an investigator desire assistance with solidifying the appropriate design that best fits the outcomes for their project, STEPS has a dedicated researcher as well as a research coordinator that can provide guidance.
- b. Contact: Researcher and/or Administrative Research Coordinator

2. Research Question / Hypothesis Development

- a. Ensuring the success of a research project at STEPS begins with the solid foundation of a research question and hypothesis. STEPS has a research coordinator that can assist investigators with proper question and hypothesis development.
- b. Contact: Administrative Research Coordinator

3. Proposal Development

- a. Available for investigators who seek to develop a proposal for review by the STEPS Research Committee. The submission of a formal application to the STEPS Research Committee is **mandatory** in order to conduct research in STEPS.
- b. Must be sent to Researcher and/or Administrative Research Coordinator at least 10 days prior to next committee meeting in order to be on agenda, or else it will be slotted for the following meeting.

- c. Please see the Research Committee SOP for further information regarding the formal application.
- d. Contact: Administrative Research Coordinator

4. STEPS Research Mentor Placement*

- a. Mentors will provide support and accountability to principal investigators. They can assist with appropriately articulating research questions, design, hypothesis and objectives, as well as providing recommendations for methodology and implementation.
- b. Contact: STEPS Researcher

5. Mandatory Pre-Review Meeting*

- a. The administrative research coordinator, simulation specialist, mentor and PI of project will meet to review the proposal.
- b. A review of the project's research design, surveys and assessment tools will be provided to finalize the proposal before submission to the research committee
- c. Contact: STEPS Researcher

6. STEPS Research Committee Review*

- a. This interprofessional group monitors the educational research conducted in STEPS in order to assure compliance with IRB policies and promote high-quality research. The committee also provides assistance with establishing a timeline for project completion.
- b. At least one member from the research team proposal (preferably the principal investigator) **must** be in attendance at the Research Committee Review in order to present the team's proposal and answer any committee questions.
- c. For more information, please see the Research Committee SOP for further information regarding the committee.
- d. Contact: STEPS Researcher

7. IRB Approval Notification

- a. Upon Research Committee review of the proposal, the principal investigator will receive an update regarding the status of their proposal. Should there be any revisions requested from the committee, the research team will have until the next scheduled committee meeting to conduct changes and submit for final review.

- b. Once a proposal has been reviewed and approved, investigators will be sent an official approval letter from the committee, providing the investigators with brief next steps, as well as a STEPS research number to be used when referencing their project in the future.
- c. Please see Appendix B for a template approval letter.
- d. Contact: STEPS Researcher and/or Administrative Research Coordinator

Post-IRB Approval –

8. Pre-Implementation Team Meeting*

- a. The purpose of this meeting is to finalize the implementation plan for the project and organize the equipment and/or rooms needed for the project, as detailed in steps 9-10 above.
- b. It is recommended that investigators schedule a time that includes their STEPS research mentor and the principal investigator, as well as necessary STEPS research team members, such as a simulation specialist, assistant director of education and evaluation and the learning space specialist.
- c. Contact: STEPS Researcher and/or Administrative Research Coordinator

9. Materials and/or Other Simulation-Related Requests*

- a. The materials needed for your simulation or any special items for your event will be addressed on the request form located on the STEPS Website (www.hsc.wvu.edu/STEPS) noted above in step 8.
- b. Contact: STEPS Scheduler

10. Simulation Scheduling Requests*

- a. To schedule a simulation, you must fill out the request form located on the STEPS website (www.hsc.wvu.edu/STEPS).
- b. Select “Schedule” at the bottom of the page – This will take you to the instruction page, which will provide directions as to which log-in you should use to complete the form.

- c. Once complete, select “Schedule Event” – This will advance you to the formal event request form. Complete the form and submit request for approval of event and date.
- d. Contact: STEPS Scheduler

11. Project Implementation*

- a. Upon steps 8-10 being completed, investigators may implement and conduct their research project at STEPS.
- b. Contact: STEPS Researcher

12. Post-Implementation Follow-Up*

- a. Investigators are expected to provide semi-annual updates, 6 months from initial approval date, regarding project progression.
- b. Follow-up can be conducted in the form of a team meeting, with the STEPS Researcher, or by having the principal investigator attend the monthly Research Committee meeting that same month. This must be scheduled with the Research Coordinator at least 10 days prior to the next Committee meeting.
- c. Contact: STEPS Researcher

13. Annual Re-Approval*

- a. Principal investigators are expected to provide an annual update, every 12 months from initial approval date to the STEPS Research Committee. The principal investigator is expected to attend the monthly Research Committee meeting during that month in order to provide a brief summary of the project’s progression in the past 12 months.
- b. If requested by the principal investigator, and upon satisfaction from the Research Committee, the investigator will be granted a 12-month renewal for the research project.
- c. Contact: STEPS Researcher

14. Data Analysis

- a. The researcher can contact a statistician through the iLab system in the WV Clinical Translational Sciences Institute (CTSI).
- b. Other respective schools within the Health Sciences Center may have a statistician or other resources within their department to assist with this need.
- c. Contact: STEPS Researcher and/or Administrative Research Coordinator

15. Abstract & Presentation Development

- a. STEPS center has personnel that are able to assist in the development and editing of abstracts for submission to regional, national, and/or international conferences.
- b. Upon acceptance to the conference, STEPS can also assist in presentation development, including electronic and/or printed posters, or oral presentations.
- c. It is recommended that the principal investigator, or the presenting member of the research team, practice their presentation in a monthly Research Committee meeting. The purpose of this practice presentation is to provide presenters with appropriate feedback.
- d. Contact: STEPS Researcher

16. Manuscript Development

- a. STEPS center has personnel that are able to assist in the development and editing of manuscripts for submission to peer-reviewed journals.
- b. STEPS can assist in the submission process to the journal of the investigators choosing, as well as the revisions and re-submission process.
- c. It is an expectation of the principal investigator to submit any manuscripts published in peer-reviewed journals to the Research Committee for their records.
- d. Contact: STEPS Researcher

17. Closing Procedure for Projects

- a. Upon completion of the research project, the principal investigator is expected to notify STEPS of any publications and presentations that were a product of the research conducted in STEPS, as noted in steps 15-16.
- b. To provide formal notification, email the Administrative Research Coordinator with the specific details of the conference where the project was presented, and the peer-reviewed journal where the research was published. Attach electronic copies of presentations and/or publications with the formal citations.

Appendix A: Research Process Contact

STEPS Researcher:

Jason Craig [Contact Information: jfcraig@hsc.wvu.edu (304) 293-1958

Administrative Research Coordinator:

Kathryn Smalley [Contact Information: ksmalley@hsc.wvu.edu (304) 293-7596]

Assistant Director of Education and Evaluation:

Lee Ann Miller [Contact Information: lamiller@hsc.wvu.edu (304) 293-5533]

Medical Director:

Dorian Williams, MD [Contact Information: dorian.williams@hsc.wvu.edu (304) 293-5234]

STEPS Scheduler:

Leigh Ann Bean [Contact Information: leighann.bean@hsc.wvu.edu (304) 293 -2665]

Lead Simulation Specialist:

Rusty Doerr [Contact Information: rdoerr@hsc.wvu.edu (304) 293 –1703]

Appendix B: Template STEPS Research Committee Approval Letter.

<Date>

<Faculty>
West Virginia University

Dear <faculty>

This letter is to confirm that the project you submitted titled < title > was discussed at our <date> Research Meeting. The proposal was determined to meet criteria for approval by the committee under our IRB Protocol #1304035754. Your project number is < > please use this when referencing your project going forward. This project meets the guidelines set forth and has been approved.

Congratulations, we look forward to hearing the results of the study.

Kind Regards,

Jason Craig
Researcher
STEPS – David and Jo Ann Shaw Simulation Training and Education for Patient Safety
(304) 293-1958

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason F. Craig

Author

October 14, 2022

Date

X Daniel Summers

Approver

October 14, 2022

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	April 19, 2019
2.0	Added STEPS Researcher, changed staff member names	October 14, 2022

RE03: Research Committee Chair Election

Purpose:

To provide a process for election of a committee chairperson and define the term length of the office.

Scope:

This policy applies to the overall governance of the Research Committee

Responsibilities:

Enforcement of the policy will be the responsibility of the current chairperson of the Research Committee.

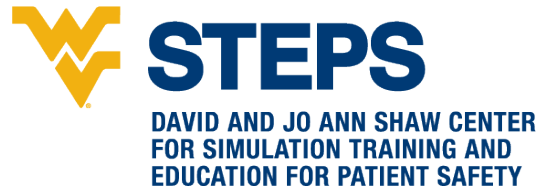
Definitions:

None

Procedures:

The chairperson or interim chair will call for nominations for a Committee Chair during the April meeting of the Research Committee during years in which an election is called for by this policy. Any committee member is free to make a nomination, but the nominee must have been a member of the committee for at least a full academic semester prior to the election. Any person nominated shall submit their curriculum vitae to the committee for review prior to the May Meeting, at which time the chairperson election shall occur.

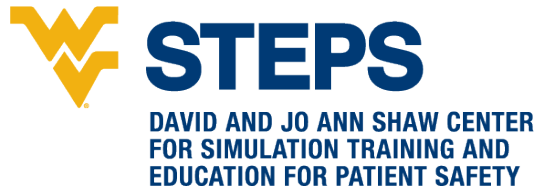
The chairperson term length shall be set at three years, at which time the incumbent may be renominated and reelected at the pleasure of the committee.



Policy: RE03
Adopted: October 14, 2022
Reviewed/Revised: March 2024
Author: Jason Craig
Approver: Daniel Summers

Should the chairperson position become vacant during the term, the committee shall hold a nomination and election for an interim chair to serve the remainder of the term. Until such a meeting takes place, the Simulation Research Specialist or Principal Investigator of the IRB Protocol shall serve as chairperson pro tem.

Should more than one individual be nominated for the position, an election shall be held. Such election shall be conducted by voice vote unless an objection arises.



Policy: RE03
Adopted: October 14, 2022
Reviewed/Revised: March 2024
Author: Jason Craig
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X **Jason F. Craig**
Author

October 14, 2022
Date

X **Daniel E. Summers**
Approver

October 14, 2022
Date

Policy: RE03
 Adopted: October 14, 2022
 Reviewed/Revised: March 2024
 Author: Jason Craig
 Approver: Daniel Summers

Chronological Revision History

Version	Modification	Date
1.0	New Policy	

SA01: Automated External Defibrillator

Purpose:

To ensure proper storage, display, maintenance, availability, and usage of STEPS owned Automated External Defibrillators.

Scope:

For storage, display, maintenance, and availability, all persons employed by STEPS, and especially the designated employee. For usage, all persons in or near the STEPS facility that would have a need for an AED in the event of an emergency.

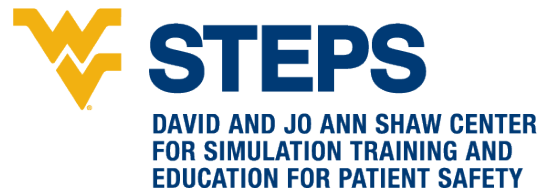
Responsibilities:

For storage, display, maintenance, and availability, all persons employed by STEPS, and especially the designated employee. Ultimately, the STEPS Director. For usage, the individual using the AED is responsible for its operation.

Definitions: None required for this policy.

Procedures:

- All AED's will be properly registered with University Security as well as the County Emergency Response System/911.
- All AED's will be stored in a designated cabinet, made for the purpose, and located in clearly visible, high traffic areas. Cabinets will be clearly marked, with 3-dimensional signage placed above the cabinet. AED's will be inspected monthly for mechanical issues and to ensure disposable equipment has not reached its expiration date. AED cabinets will be unlocked, but will be equipped with an audible alarm when opened. Usage of the AED will be in accordance with manufacturer's guidelines as well as current guidelines as published by the American Heart Association, including activating the Emergency Response



Policy: SA01
Adopted: July 23, 2018
Reviewed/Revised: March 2024
Author: Jason Craig
Approver: Daniel Summers

System. While not required, it is encouraged that all persons undergo training in cardiopulmonary resuscitation.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	March 20, 2017
2.0	New Policy Format	July 23, 2018

SA02: Emergencies

Purpose:

To promote an orderly and safe response to emergency situations in the facility.

Scope:

All persons within the center.

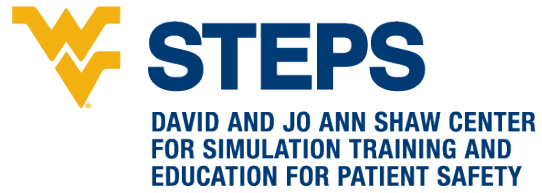
Responsibilities:

STEPS Director and all persons using the STEPS Simulation Center.

Definitions: None required for this policy.

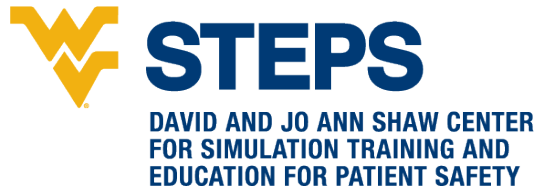
Procedures:

- Whereas it is impossible to account for all types of emergencies within a single policy, the intent of this policy is to issue guidance on the general concepts of responding to any general emergency. As with all aspects of this policy manual, the overall policies written and approved by the WVU Health Sciences Center Administration, and West Virginia University overall supersede those written here in the event of a conflict.
- Should an emergency arise in the center, notify those around you that an emergency exists and, if appropriate, evacuate to a safe location. Should there be a greater danger in leaving your present location, it is permissible to shelter in place. If it is safe for you to do so, assist those with difficulty mobilizing to do the same. Never place yourself in danger to stay behind and help.



Policy: SA02
Adopted: February 24, 2017
Reviewed/Revised: March 2024
Author: Jason Craig
Approver: Daniel Summers

- From a safe location, activate the emergency response system, and request the appropriate assistance.



Policy: SA02
Adopted: February 24, 2017
Reviewed/Revised: March 2024
Author: Jason Craig
Approver: Daniel Summers

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	February 24, 2017
2.0	New Policy Format	July 23, 2018

SA03: Fire Alarm

Purpose:

To promote an orderly and safe response to a fire or fire alarm activation in the facility.

Scope:

All persons within the center.

Responsibilities:

STEPS Director and all persons using the STEPS Simulation Center.

Definitions: None required for this policy.

Procedures:

As with all aspects of this policy manual, the overall policies written and approved by the WVU Health Sciences Center Administration, and West Virginia University overall supersede those written here in the event of a conflict.

Should the fire alarm activate in the center, ensure that those around you heard the alarm as well and proceed to evacuate the building, following the prescribed exit path posted in your area. Should there be a greater danger in following that route, take an alternative one. If it is safe for you to do so, assist those with difficulty mobilizing to do the same. Never place yourself in danger to stay behind and help.

Do not attempt to re-enter the building until authorized to do so.

Should you be present when a small fire occurs, notify those around you of a fire. Have someone pull the fire alarm and/or activate the emergency response system. If you believe the fire is small enough to be extinguished with a fire extinguisher, you may

attempt to do so if you have been trained in its use. Use the fire extinguisher using the PASS method:

P: Pull – Pull the safety Pin

A: Aim – Aim the nozzle at the base of the fire.

S: Squeeze – Squeeze the lever to discharge the extinguishing product.

S. Sweep – Sweep the nozzle back and forth at the base of the fire.

If you believe the fire is too large to be extinguished by an extinguisher, safely evacuate with the rest of the personnel.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	February 24, 2017
2.0	New Policy Format	July 23, 2018

SA04: First Aid Kit

Purpose:

The purpose of this policy is to document the purpose and location of the First Aid Kit

Scope:

This policy applies to all faculty, staff, and learners who utilize STEPS.

Responsibilities:

- **WVU STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **STEPS Administrative Assistant**
 - **STEPS Leadership**
 - **STEPS Staff/Learners/Faculty**

- **Employee Responsibilities**
 - Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)

- **STEPS Administrative Assistant**
 - Provides First Aid Kit upon request
 - Activates Emergency Response System if requested
 - Notifies STEPS Leadership immediately if First Aid Kit is requested.

- **STEPS Leadership**
 - Responds to emergency when notified by Administrative Assistant
 - Makes decision to notify additional university resources and/or departments
 - Ensures First Aid Kit is restocked after use
 - Regularly inspects First Aid Kit and replaces expired, missing, or damaged items

- **Staff/Learners/Faculty**

- Renders First Aid appropriate to training level and scope of practice
- Notifies STEPS Leadership if not done by Administrative Assistant

Definitions: STEPS Administrative Assistant – Anyone occupying the desk in the reception area.

Procedures:

- As Simulation Education equipment is not designated and/or intended for actual patient use, a First Aid Kit dedicated to this purpose will be maintained within STEPS and stored in the copy room in the STEPS Reception Area.
- This kit is intended to assist in providing basic first aid care until personnel functioning in a patient care capacity arrives to treat the emergency. It is not intended to imply the ability to function beyond University Policy or perform actions beyond an individual's scope of practice.
- If anyone within STEPS identifies an emergency requiring Basic First Aid, they will proceed to the STEPS Reception Area and request the First Aid Kit from the Administrative Assistant. If it is not safe to leave the victim and no one else is available to retrieve the kit, any phone in the center can be used to call the front desk by dialing 3-7837. If calling from a mobile phone, the front desk may be reached by dialing 304-293-7837.
- If the First Aid Kit is requested/used, the Administrative Assistant will activate the Emergency Response System, if requested. Whether or not it is requested, the Administrative Assistant will immediately notify STEPS Leadership as soon as possible.
- STEPS Leadership will immediately go to the location of the emergency. Once the emergency has been appropriately addressed, STEPS Leadership will restock the First Aid Kit.

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Jason Craig

Author

October 17, 2023

Date

X Daniel Summers

Approver

October 17, 2023

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	October 17, 2023

ST01: Standardized Patient Conduct

Purpose:

The purpose of this policy is to outline the expectations of the program for maintaining a quality atmosphere for our learners.

Scope:

All SPs, GTA, and MUTAs are expected to adhere to the following at all times present in STEPS for learning activities.

Responsibilities:

- **WVU STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **Standardized Patient Educator is responsible for evaluating SP conduct**

- **Employee Responsibilities**
 - Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **Medical Director or designee**
 - **Director or designee**
 - **Other**

Definitions:

Term or Acronym/Abbreviation	Definition
SP	Standardized Patient

Term or Acronym/Abbreviation	Definition
GTA	Gynecological Teaching Assistant
MUTA	Male Urogenital Teaching Assistant
ADEE	Assistant Director Education & Evaluation

Procedures:

SP Realism:

- Do not speak with students “out of role” before or during the simulation—you should not be seen by any of the students unless you are “in role.”
- At end of encounter complete checklist and feedback form using checklist and feedback guide.
- Please do not walk in the hall or chat at the door between sessions.

Assessment:

- Check over each checklist/form for completeness
- Feedback forms must be given to the staff after the session and at the lunch break during the CPX.

Teaching Sessions:

- For small group sessions (i.e., clinical group for MS I) talk with the facilitator before or after the session in the hallway to discuss items on checklist/do not conduct this business in front of the student group.

Confidentiality:

- **Student Confidentiality** No student performance is to be discussed with anyone by name or identifying specifics other than with SP program staff and Health Science Center (HSC) faculty. We must maintain total privacy for our students at all times.
- **SP/GTA/MUTA Confidentiality** Any observations of any SP or GTA performance during training or teaching sessions are to be kept in the strictest confidence. I will not discuss SP/GTA performance other than with the SP program staff and HSC faculty.
- **Confidential Materials** The cases/checklists/forms used for in the SP program are the property of West Virginia University School of Medicine. These cases/checklist/forms are to be used by SP and SP program staff for assigned events only. Do not leave your confidential materials (cases/checklists/instructions) or any other material in the exam rooms. Give these to the proctor or SP educator at end of encounter.

Professionalism:

- **Preparation** It is your professional obligation to come to the encounter/exam/session prepared. This includes knowing the details of the case and case checklist, suitable/clean attire, and appropriate hygiene.
- **Availability** You must be available for full time requested.
- **Punctuality** It is recommended that you arrive for your encounter at least 15 minutes prior to the start.
- **Cell phones:** Please be sure to silence your cell phones before a student encounter. We ask that you do NOT answer calls or texts while a student is in the room. You may, however, use phones between sessions as long as neighboring students are not disturbed.

Attire:

- **History & Physical** Men should wear only a gown and shorts. Women should wear a gown, shorts, and either a sports bra or tank top. If you get chilly, you can bring a wrap blanket or sweater.
 - **Ultrasound** Men should wear only a gown and loose fitting shorts. Women should wear a gown, loose fitting shorts, and either a sports bra or tank top.

References:

WVU P&P for SP Program

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Lee Ann Miller

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	12/14/2016
1.1	The SOP template was updated	12/18/2017
1.2	SOP template was updated, Author signature line re-inserted	1/29/2018
2.0	Updated to common STEPS format policy	7/19/2018

ST02: Standardized Patient Onboarding

Purpose:

The purpose of this policy is to outline the procedure for hiring and initiating new Standardized Patients.

Scope:

All SPs, SPETA, GTA, and MUTAs must complete the process prior to their first paid encounter .

Responsibilities:

- **STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **SP Educator is responsible for interviewing and onboarding**
 - **Medical Director** will provide examination to GTA or MUTA who do not have a primary care physician.
- **Employee Responsibilities**
 - Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **Medical Director or designee**
 - **Director or designee**
 - **Other**

Definitions:

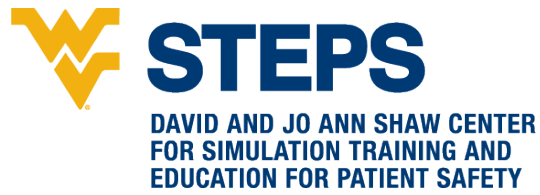
Term or Acronym/Abbreviation	Definition
SP	Standardized Patient
SPETA	Standardized Physical Exam Teaching Associate

Term or Acronym/Abbreviation	Definition
GTA	Gynecological Teaching Assistant
MUTA	Male Urogenital Teaching Assistant
ADEE	Assistant Director Education & Evaluation

Procedures:

- Most SPs and SPETAs are recruited by word of mouth. In addition, GTA and MUTA are recruited by signage or social media. Successful SP/SPETAs/GTAs/MUTAs must:
 - Be comfortable with their health and dealing with health professionals.
 - Be willing to be videotaped for educational purposes.
 - Not have any biases against anyone based on their gender, race, religion, national origin, physical characteristics, etc.
 - Be reliable and punctual to scheduled events.
 - Keep all case information confidential.
 - Repeatedly portray a patient case with accuracy as trained by WVU Faculty or staff.
 - Remember what the student who examined you did and then record it on a checklist.
 - Have strong written and verbal communication skills.
 - Want to contribute to the training process of excellent physicians.

Interested individuals will complete an online application and speak with the Standardized Patient Educator on the phone or via video conference. New SP names will be shared with HR and will be contacted to complete a background check and



Policy: ST02
Adopted: May 2, 2017
Reviewed/Revised: March 2024
Author: Lee Ann Miller
Approver: Daniel Summers

complete employment paperwork. Once an SP is hired and paperwork is complete, they will attend a one hour in-person orientation session at the STEPS center.

References:

WVU P&P for SP Program

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Lee Ann Miller

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	May 2, 2017
2.0	Updated to common STEPS format policy	July 19, 2018
2.1	Updated policy language	December 20, 2022

ST03: Standardized Patient Payment

Purpose:

The purpose of this policy is to outline the pay schedule for our casual employees.

Scope:

All SPs, SPETA, GTA, and MUTAs are paid by the following rules.

Responsibilities:

- **STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **SP is responsible for checking in and out for each event.**
 - **SP Educator is responsible for reviewing electronic timesheets for payment.**
 - **Administrative Associate is responsible for submitting pay requisition.**
- **Employee Responsibilities**
 - Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **Medical Director or designee**
 - **Director or designee**
 - **Other**

Definitions:

Term or Acronym/Abbreviation	Definition
SP	Standardized Patient
SPETA	Standardized Physical Exam Teaching Associate

Term or Acronym/Abbreviation	Definition
GTA	Gynecological Teaching Assistant
MUTA	Male Urogenital Teaching Assistant
ADEE	Assistant Director Education & Evaluation

Procedures:

Payment is processed every two weeks. Checks are distributed via direct deposit through the WVU Casual Worker Program.

Standardized Patients are paid a flat rate of:

\$15.00 an hour for training, ultrasound, or travel.

\$20.00 an hour for an SP/SPETA encounter.

Gynecological Teaching Associates (GTAs) and Male Urogenital Teaching Associates (MUTAs) are paid:

\$100.00 flat rate upon successful completion of training.

\$100.00/hr GTA/MUTA/SANE sessions.

All SP and subsequent GTA/MUTA training events are paid \$15 per hour.

All SPs, SPETAs, GTAs, MUTAs, who conduct training events are paid \$20 per hour in the event that:

- a. SP shows up unscheduled – no pay
- b. SP shows up erroneously scheduled – pay for time requested
- c. SP shows up scheduled but not needed – pay for time requested

- d. SP participates but sent home early – pay for time requested
- e. SP on standby – no pay
- f. Minimum advance notice without pay – anytime the day before

References:

WVU P&P for SP Program

Approval to Issue: Please sign and date in spaces provided below to indicate your approval for issuance of this SOP.

X Lee Ann Miller

Author

July 23, 2018

Date

X Daniel Summers

Approver

July 23, 2018

Date

Chronological Revision History

Version	Modification	Date
1.0	New SOP	May 2, 2017
2.0	Updated to common STEPS format policy	July 23, 2018
2.1	Updated policy language	December 20, 2022

ST04: Standardized Patient Quality Assurance

Purpose:

The purpose of this policy is to outline the expectations of the program for maintaining accuracy and accountability among our SPs.

Scope:

All SPs, SPETA, GTA, and MUTAs are paid by the following rules.

Responsibilities:

- **STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **SP Educator is responsible for identifying QA/QI activities**
- **Employee Responsibilities**
 - Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **Medical Director or designee**
 - **Director or designee**
 - **Other**

Definitions:

Term or Acronym/Abbreviation	Definition
SP	Standardized Patient
SPETA	Standardized Physical Exam Teaching Associate
GTA	Gynecological Teaching Assistant
MUTA	Male Urogenital Teaching Assistant
ADEE	Assistant Director Education & Evaluation

Procedures:

Quality assurance is maintained using several methods:

- Student/preceptor evaluations
- Direct/scheduled/random observation during training and during sessions
- Videotape review by staff or peer
- Periodic check in or in-service

Feedback to individuals is in a timely manner by email or phone call.

When necessary, remediation is provided by verbal or written instruction followed by replication of the session, and observation checkoff.

References:

WVU P&P for SP Program

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Chronological Revision History

Version	Modification	Date
1.0	New SOP	May 2, 2017
2.0	Updated to common STEPS format policy	July 23, 2018
2.1	Updated policy language	December 20, 2022

ST05: Standardized Patient Scheduling

Purpose:

The purpose of this policy is to outline the scheduling procedure for our casual employees

Scope:

All SPs, SPETA, GTA, and MUTAs are paid by the following rules.

Responsibilities:

- **STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **SP Educator is responsible for selecting potential SPs for calendar events.**
 - **SP Educator is responsible for contacting SP for events and dealing with cancellations.**
 - **SP is responsible for providing availability response in a timely manner.**
- **Employee Responsibilities**
 - Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **Medical Director or designee**
 - **Director or designee**
 - **Other**

Definitions:

Term or Acronym/Abbreviation	Definition
SP	Standardized Patient
SPETA	Standardized Physical Exam Teaching Associate

Term or Acronym/Abbreviation	Definition
GTA	Gynecological Teaching Assistant
MUTA	Male Urogenital Teaching Assistant
ADEE	Assistant Director Education & Evaluation

Procedures:

The STEPS calendar dictates days and times for SP encounters. The frequency of individual scheduling is based on demographic needs, annual hour caps, and specific departmental needs. Prior to each encounter SPs receive a list of dates and times for which they can schedule themselves. They are responsible for signing up of events that they can work the entire scheduled time. SPs will then receive specific case information about the encounters for which they are scheduled.

In the event of circumstances that prevent an SP coming to a scheduled session, SP will notify program staff as soon as possible.

STEPS staff will schedule a replacement. A pattern of last minute cancellations may impact selection for future events.

In the event of inclement weather, all WVU SP encounters will take place as scheduled UNLESS the University is closed.

References:

WVU P&P for SP Program

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Chronological Revision History

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1.0	New SOP	May 2, 2017
2.0	Updated to common STEPS format policy	July 23, 2018
2.1	Updated policy language	December 20, 2022

ST06: Standardized Patient Training

Purpose:

The purpose of this policy is to outline the training program for maintaining accuracy and accountability among our SPs.

Scope:

All SPs, SPETA, GTA, and MUTAs must complete training for each event they attend.

Responsibilities:

- **STEPS Group or Employee** (Specific roles and responsibilities for employees or groups of employees)
 - **SP Educator is responsible for training SPs.**
 - **GTA Trainer is responsible for keeping GTAs up to date.**
 - **MUTA Trainer is responsible for keeping MUTAs up to date.**
 - **Medical Director assesses GTA/MUTA competencies and curriculum updates.**
- **Employee Responsibilities**
 - Specific roles and responsibilities for employees if groups of employees are identified above. (examples are as follows)
 - **Medical Director or designee**
 - **Director or designee**
 - **Other**

Definitions:

Term or Acronym/Abbreviation	Definition
SP	Standardized Patient
SPETA	Standardized Physical Exam Teaching Associate
GTA	Gynecological Teaching Assistant

Term or Acronym/Abbreviation	Definition
MUTA	Male Urogenital Teaching Assistant
ADEE	Assistant Director Education & Evaluation

Procedures:

All cases/checklists and training materials are developed and created by SP program staff/HSC faculty and are the property of West Virginia University Health Science Center. These cases/checklist and all training materials are to be used exclusively by SP/SPETA/GTAs in the SP program. Upon resignation, all cases, checklists and any training materials are to be returned to SP program in the Health Science Center.

The program recognizes the various learning styles of the SP/SPETA/GTA/MUTA. If an individual SP/SPETA/GTA/MUTA develops materials that assist them in learning the cases/checklist and feels it would aid SP/SPETA/GTA/MUTA in training, they must submit the materials to the SP program staff.

Please do not distribute any materials without prior review by the SP educator.

Basic SP Training procedures:

- Initial training session to discuss case, checklist, and feedback options
- Home study
- Additional training of physical examination techniques (event/case specific)
- Dry run the case/checklist/reliability (it is expected the SP arrives for the dry run prepared to portray the case with detailed knowledge of case/checklist/feedback).

Basic SPETA Training procedures:

- Initial orientation and general training on SPETA protocol and presentation style

- Specific system breakdown and initial training on each system
- Annual review of each system prior to encounters with students

Basic SPETA Training procedures:

- Initial orientation and general training on SPETA protocol and presentation style
- Specific system breakdown and initial training on each system
- Annual review of each system prior to encounters with students

References:

WVU P&P for SP Program

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Date

Policy on Incidental Findings by Learners - June 2017

Our learners and equipment are not vetted for providing health care. Exams incurred are not intended to be diagnostic. We recommend any findings to be reported to the patient's primary care provider. STEPS has no financial responsibility for subsequent medical care. If abnormalities are found, the following information must be documented and stored in a private folder on the H: drive.

Patient name _____

Finding _____

When identified _____

Identified by whom _____

Reviewed by whom _____

Recommendations: Follow up with your primary care physician _____

Signed by physician or instructor _____ Date: _____

Chronological Revision History

Version	Modification	Date
1.0	New SOP	May 2, 2017
2.0	Updated to common STEPS format policy	July 23, 2018
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