



Health Science Simulation Center Policy Manual

Updated & Revised November 2025

Table of Contents – Health Science Simulation Center Policy Manual

Contents

1. GENERAL INFORMATION.....	9
1.1 Purpose of the Manual	9
1.2 Scope of Operations.....	9
1.3 Mission, Vision, and Values.....	9
1.4 Definitions and Terminology.....	10
1.5 Governance & Organizational Structure.....	11
2. GOVERNANCE & LEADERSHIP	12
2.1 Institutional Alignment	12
2.2 Governance Structure.....	12
2.3 Advisory & Committee Structure.....	13
2.3.1 Program Leaders Group (PLG).....	13
2.3.2 Internal Committees	13
2.3.3 External Partners.....	14
2.4 Policy Authority and Scope	14
2.5 Policy Development & Revision Process.....	14
2.6 Decision-Making and Escalation Pathways.....	15
2.6.1 Operational Decisions	15
2.6.2 Educational Decisions	15
2.6.3 Safety Decisions	15
2.6.4 Conflict Resolution.....	16
2.7 Succession Planning	16
2.8 External Compliance & Accreditation Alignment	16

3. ADMINISTRATIVE OPERATIONS.....	17
3.1 Personnel Roles and Responsibilities.....	17
3.1.1 Simulation Program Director	17
3.1.2 Simulation Assistants / Adjunct Faculty.....	17
3.2 Personnel Development and Annual Evaluation	18
3.2.1 Professional Development.....	18
3.2.2 Performance Evaluation.....	18
3.3 Hours of Operation	18
3.3.1 Standard Hours	19
3.3.2 After-Hours Access.....	19
3.3.3 Closure Protocols	19
3.4 Communications and Information Management	19
3.4.1 Internal Communication	19
3.4.2 External Communication.....	20
3.4.3 Public Information & Requests	20
3.5 Confidentiality, Privacy, and FERPA Compliance.....	20
3.5.1 Learner Confidentiality	20
3.5.2 Data Storage & Access	20
3.5.3 Video Recording Consent.....	20
3.6 Document Control & Version Management	20
3.6.1 Document Ownership.....	21
3.6.2 Version Control.....	21
3.6.3 Storage & Distribution	21
3.6.4 Annual Review.....	21
4. SIMULATION PROGRAM & EDUCATIONAL STANDARDS	22
4.1 Educational Philosophy.....	22
4.2 Alignment with National Standards.....	22
4.2.1 SSH Accreditation Standards.....	22

4.2.2 INACSL Healthcare Simulation Standards of Best Practice™ 22

4.2.3 HSSC-Specific Guidance 23

4.3 Curriculum Design and Scenario Development 23

 4.3.1 Scenario Development Requirements 23

 4.3.2 Faculty Responsibilities 24

 4.3.3 Review and Approval Process 24

 4.3.4 HSSC Staff Support 24

4.4 Prebriefing and Psychological Safety 24

4.5 Facilitation 25

 4.5.1 Facilitator Training Requirements 25

4.6 Debriefing..... 26

4.7 Assessment vs. Evaluation 26

 4.7.1 Assessment (Individual Performance Measurement)..... 26

 4.7.2 Evaluation (Program or Course Improvement) 26

 4.7.3 Documentation Requirements..... 26

4.8 Scenario Review & Continuous Quality Improvement (CQI)..... 27

 4.8.1 Continuous Quality Improvement Activities..... 27

 4.8.2 Documentation 27

 4.8.3 Curriculum Alignment 27

5. SCHEDULING & RESOURCE ALLOCATION 28

 5.1 Scheduling Procedures..... 28

 5.1.1 Scheduling Authority..... 28

 5.1.2 Scheduling Requests 28

 5.1.3 Advance Notice Requirements..... 28

 5.2 Scheduling Priority System..... 28

 5.3 Use of Space and Resources 30

 5.3.1 General Use Policies..... 30

 5.3.2 Room Reservation Requirements 30

5.3.3 Equipment & Technology Use 30

5.4 Resource Allocation Standards 30

 5.4.1 Equipment Allocation..... 30

 5.4.2 Standardized Patients (SPs)..... 31

 5.4.3 Shared or High-Demand Equipment..... 31

5.5 Cancellations & Scheduling Changes 31

 5.5.1 Faculty/Program Cancellations 31

 5.5.2 HSSC-Initiated Cancellations 32

 5.5.3 No-Show Events 32

5.6 Equipment/Manikin Downtime and Backup Plans 32

 5.6.1 Reporting Downtime..... 32

 5.6.2 Equipment Failure Protocol 32

 5.6.3 Backup Plans May Include: 32

 5.6.4 Documentation Requirements..... 33

5.7 Environmental Preparedness and Room Turnover 33

 5.7.1 Setup 33

 5.7.2 Turnover 33

6. FACILITIES OPERATIONS 34

 6.1 Physical Space Overview 34

 6.2 Facility Use Guidelines 34

 6.2.1 General Behavior Expectations 34

 6.2.2 Environmental Safety Requirements 34

 6.3 Equipment Management 35

 6.3.1 Permitted Use 35

 6.3.2 Maintenance and Service 35

 6.3.3 Consumables and Supplies 35

 6.4 Inventory Management 36

 6.4.1 Supply Storage 36

6.4.2 Equipment Check-Out 36

6.5 Facility Maintenance and Repairs 36

 6.5.1 Reporting Problems 36

 6.5.2 Coordination with Facilities Management..... 36

 6.5.3 Facility Readiness 36

6.6 Audiovisual & Recording Systems 37

 6.6.1 AV System Use Requirements 37

 6.6.2 Recording Guidelines 37

 6.6.3 Technical Support..... 38

6.7 Facility Cleanliness and Room Turnover 38

 6.7.1 Responsibilities of HSSC Staff..... 38

 6.7.2 Responsibilities of Faculty and Learners 38

 6.7.3 Biohazard and Contamination Protocols 39

6.8 Emergency Preparedness in the Facilities..... 39

7. CONDUCT, INTEGRITY & HUMAN INTERACTIONS..... 40

 7.1 Standards of Conduct..... 40

 7.2 Professional Integrity 40

 7.3 Respect, Equity, and Inclusion..... 41

 7.4 Psychological Safety & Confidentiality 41

 7.4.1 Confidentiality Agreement..... 41

 7.4.2 Psychological Safety Practices..... 42

 7.5 Conflict of Interest 42

 7.6 Public Relations & Media 42

 7.7 Marketing and Information Dissemination..... 43

8. FISCAL PRACTICES 44

 8.1 Budget Management 44

 8.1.1 Budget Authority..... 44

 8.1.2 Budget Components 44

8.1.3 Annual Budget Planning.....	44
8.2 Purchasing & Approvals	45
8.2.1 Purchasing Authority	45
8.2.2 Equipment Purchases.....	45
8.2.3 Consumables & Supplies.....	45
8.2.4 Vendor Relationships	45
8.3 Fee Structure and Material Contributions	45
8.3.1 External Partner Fees	46
8.3.2 Material Contributions or Donations.....	46
8.3.3 Fee Communication	46
8.4 Fiscal Reporting & Documentation	46
8.4.1 Required Fiscal Documentation Includes:.....	46
8.4.2 Grants & External Funding.....	47
8.4.3 Annual Financial Review	47
8.5 Long-Term Resource Planning.....	47
9. SAFETY & RISK MANAGEMENT	48
9.1 Safety Philosophy	48
9.2 Physical Safety.....	48
9.2.1 General Safety Expectations	48
9.2.2 Fire & Emergency Procedures.....	48
9.2.3 Equipment Safety.....	49
9.3 Psychological Safety	49
9.3.1 Prebriefing Requirements	49
9.3.2 Facilitator Responsibilities	49
9.3.3 Learner Responsibilities.....	49
9.4 Hazardous Materials & Infection Control.....	50
9.4.1 Hazardous Materials	50
9.4.2 Infection Control	50

9.5 Emergency Procedures	50
9.5.1 Medical Emergency.....	50
9.5.2 Security Threat or Behavioral Incident	51
9.5.3 Power Outage or Utility Failure.....	51
9.6 Incident Reporting.....	51
9.6.1 Types of Reportable Incidents.....	51
9.6.2 Reporting Process	51
9.6.3 Documentation & Follow-Up	52
9.7 Equipment Failure & Risk Mitigation	52
9.7.1 Immediate Response.....	52
9.7.2 Preventive Measures.....	52
9.8 Safe Handling of Simulation Medications & Supplies	53
9.9 Special Populations (SPs & Guests).....	53
APPENDICES	54
APPENDIX A — ORGANIZATIONAL CHARTS	54
A.1 Description of Organizational Structure	54
A.2 Health Science Simulation Center (HSSC) Personnel Structure.....	55
APPENDIX B — FLOOR PLANS	56
Appendix B.1 Saunders Health Science Center.....	56
Appendix B.2 Health Science Simulation Center Main Area.....	57

1. GENERAL INFORMATION

1.1 Purpose of the Manual

This manual outlines the policies and procedures governing operations of the Casper College Health Science Simulation Center (HSSC). It provides clear expectations for administration, simulation education, safety, scheduling, and resource management. The content aligns with current Society for Simulation in Healthcare (SSH) Accreditation Standards and Casper College institutional policies. All HSSC users and staff are expected to follow the procedures described in this manual.

The manual is reviewed annually and updated as needed to maintain compliance with evolving accreditation standards, institutional requirements, and best practices in healthcare simulation.

1.2 Scope of Operations

The Health Science Simulation Center supports simulation-based education, assessment, and skills development for Casper College School of Health Science programs and approved external partners. Policies in this manual apply to:

- HSSC staff
- Faculty and instructors
- Students and participants
- External educational or clinical entities using the Center

1.3 Mission, Vision, and Values

Mission Statement

The mission of the Health Science Simulation Center is to improve healthcare practice by elevating the understanding, skills, and collaboration of students and professionals through informed, multimodal, interprofessional simulation education in a state-of-the-art facility.

Vision Statement

To be an accredited provider of healthcare simulation education and to be recognized as contributing to the competent, confident, reflective, and ethical practice of healthcare professionals.

Core Values

- **Integrity:** Commitment to honesty and consistency in all simulation operations.
- **Safety:** Psychological and physical safety for all participants.
- **Collaboration:** Interprofessional teamwork as a foundation of effective healthcare education.
- **Respect & Inclusion:** Equitable access and treatment for all participants, faculty, and staff.
- **Excellence:** Continuous quality improvement based on current research and best practices.

1.4 Definitions and Terminology

- **HSSC:** Health Science Simulation Center
- **Simulation Program:** Administrative and educational structure overseeing simulation operations
- **Simulation Event:** A learning experience that involves a simulation scenario, task training, or skills practice
- **Scenario:** A planned simulation activity designed to meet specific learning objectives
- **Participant:** Any learner involved in a simulation event
- **Instructor/Facilitator:** Faculty or staff guiding simulation activities
- **Prebriefing:** Preparatory activities before a simulation to establish expectations and psychological safety
- **Debriefing:** Facilitated reflective discussion following simulation
- **Served Entity:** Any program or department supported by the HSSC
- **Standardized Patient (SP):** Person trained to portray a patient or role in a simulation

Acronyms (e.g., IPE, FERPA, LMS) are maintained but streamlined for clarity.

1.5 Governance & Organizational Structure

The HSSC operates under the **School of Health Science (SoHS)** and adheres to all Casper College policies and procedures. Key leadership and governance structures include:

- **Dean, School of Health Science:** Provides administrative oversight.
- **Simulation Program Director:** Oversees simulation education, quality, and strategic direction.
- **Simulation Assistants / Adjunct Simulation Instructors:** Support educational and operational functions.
- **Advisory Participation:** Simulation reports and updates occur through Program Leaders Group (PLG) and other institutional committees as required.

Organizational charts appear in [Appendix A](#).

2. GOVERNANCE & LEADERSHIP

2.1 Institutional Alignment

The Health Science Simulation Center (HSSC) operates under the authority of the **Casper College School of Health Science (SoHS)**. All policies, procedures, and decisions within the Simulation Center must support and align with:

- Casper College institutional policies
- School of Health Science strategic goals
- SSH Accreditation Standards (Core, Operations, and Teaching/Education domains)
- National simulation best practices (INACSL Healthcare Simulation Standards of Best Practice™)

2.2 Governance Structure

The HSSC governance structure ensures effective oversight of operations, simulation program quality, fiscal responsibility, and safe learning environments.

Primary governance components include:

- 1. Casper College School of Health Science (SoHS) Administration**
 - Provides overarching authority, policy oversight, and financial supervision.
- 2. Dean, School of Health Science**
 - Supervises the Simulation Program Director.
 - Ensures alignment with college and SoHS mission, strategic plans, and accreditation requirements.
 - Serves as final authority on personnel decisions, major resource allocation, and policy approval.
- 3. Simulation Program Director**
 - Responsible for strategic direction, accreditation compliance, educational quality, staff supervision, and operational policy enforcement.

- Serves as the primary liaison to institutional committees, accreditation bodies, and external partners.
- Oversees simulation program development, facilitator training, and quality improvement activities.
- Provides administrative support. Assists with scheduling, communications, and data/document management
- Manages day-to-day technical operations, equipment, supplies, repair workflows, and learning environment readiness

4. Simulation Assistants / Adjunct Simulation Faculty

- Support simulation event delivery, act as confederates or SPs when needed, and assist with equipment setup.
- Participate in ongoing training and evaluation to meet HSSC and accreditation standards.
- Ensures AV systems, manikins, and technology meet functional and safety standards.
- Coordinates simulation setup/breakdown and provides operational support during events.

2.3 Advisory & Committee Structure

The HSSC participates in the college's shared governance model through established committees and communication pathways.

2.3.1 Program Leaders Group (PLG)

- Comprised of program directors within the SoHS
- Advises on curricular integration, scheduling needs, and resource prioritization
- Reviews policy updates and strategic initiatives related to simulation
- Provides program-level feedback to ensure alignment with accreditation and curriculum outcomes

2.3.2 Internal Committees

- Simulation Steering Committee

Simulation representation on committees is assigned by the Dean or Program Director.

2.3.3 External Partners

External users (EMS, clinical partners, community healthcare agencies) are included as advisory collaborators when simulation supports their training needs. They do not have decision-making authority over the HSSC.

2.4 Policy Authority and Scope

The HSSC operates within the governance framework of Casper College. All Simulation Center-specific policies and procedures are developed to align with, and are subordinate to, Casper College institutional policies.

Policies not explicitly addressed within this Simulation Center Policy and Procedures Manual are governed by applicable Casper College policies. In the event of a conflict between Simulation Center policies and Casper College institutional policies, the Casper College policy shall take precedence.

The [Casper College Policy Manual](#) is available here.

2.5 Policy Development & Revision Process

The HSSC maintains a systematic and transparent process for developing, revising, and approving policies.

Policy Development & Revision Steps

1. **Drafting:**
Policies may be proposed or updated by HSSC staff, faculty, or administrative leadership.
2. **Internal Review:**
Drafts are reviewed by the Simulation Program Director for consistency with SSH standards and institutional requirements.
3. **Stakeholder Feedback:**
Depending on the policy's impact, input may be solicited from:
 - SoHS faculty
 - PLG
 - Operational staff

- Institutional partners (e.g., IT, safety teams)
4. **Approval:**
Final versions are approved by:
- Simulation Program Director
 - Dean, School of Health Science
5. **Publication:**
Updated policies are added to the Policy Revision Log, disseminated to users, and stored electronically.
-

2.6 Decision-Making and Escalation Pathways

Clear decision-making pathways ensure effective operation and timely conflict resolution.

2.6.1 Operational Decisions

Most daily decisions are made by:

- Simulation Program Director (programmatic, educational, scheduling logistics, equipment, setup, and staffing matters)

2.6.2 Educational Decisions

Facilitator decisions related to learner performance, scenario content, or safety concerns are escalated to:

- Course/Program Director
- Simulation Program Director

2.6.3 Safety Decisions

Any issue impacting physical or psychological safety should be escalated immediately to:

- Simulation Program Director
- Dean, if urgent or unresolved

Incident documentation is required (per [Section 9](#)).

2.6.4 Conflict Resolution

Documentation if needed. Conflicts among staff, faculty, or learners may escalate to:

- Simulation Program Director
 - School of Health Science Dean
-

2.7 Succession Planning

The HSSC maintains role-based documentation to support continuity during leadership transition or sudden staff absence.

Each key operational function has:

- Documented standard procedures
 - Cross-trained personnel (as available)
 - Shared access to critical operational information (passwords stored per CC IT policy; scheduling shared drives; inventory logs, etc.)
-

2.8 External Compliance & Accreditation Alignment

The HSSC adheres to external compliance expectations including:

- SSH Accreditation Standards
- INACSL Healthcare Simulation Standards of Best Practice™
- [FERPA](#) and applicable privacy regulations
- Casper College safety and facilities management policies
- State and national guidelines for educational practices

3. ADMINISTRATIVE OPERATIONS

3.1 Personnel Roles and Responsibilities

All personnel involved in simulation activities must understand their responsibilities to ensure safe, effective, and consistent operations. Staff are expected to adhere to institutional policies, HSSC guidelines, and SSH accreditation standards.

3.1.1 Simulation Program Director

Responsible for the simulation program's strategic direction, accreditation compliance, educational quality, and oversight of staff.

Primary responsibilities include:

- Ensuring alignment with SSH Standards
- Overseeing simulation program curriculum and educational practices
- Supervising personnel and managing performance evaluations
- Monitoring quality improvement and reporting outcome metrics
- Coordinating with SoHS leadership and institutional committees
- Approving scheduling priorities, policies, and major operational decisions
- Administrative support: support scheduling, documentation, communication, and resource coordination
- Supporting data security and proper use of recording systems
- Reporting equipment failures and coordinating repairs

3.1.2 Simulation Assistants / Adjunct Faculty

Provide instructional or operational support.

Primary responsibilities include:

- Preparing rooms, simulators, and equipment for simulation events
- Maintaining technology systems and AV infrastructure
- Managing inventory and supplies
- Troubleshooting technical issues during simulations
- Running manikins and assisting with scenario flow

-
- Acting as standardized patients or confederates when assigned
 - Supporting prebriefing and debriefing activities
 - Assisting with room turnover and equipment reset
 - Participating in ongoing faculty development as required
-

3.2 Personnel Development and Annual Evaluation

The HSSC ensures all personnel receive appropriate professional development and periodic performance evaluation.

3.2.1 Professional Development

Staff involved in simulation-based education must participate in ongoing training aligned with SSH expectations. Development may include:

- Faculty development workshops
- Simulation facilitation training
- Debriefing skills development
- Technical training for operating simulators and AV systems
- Conferences, webinars, and credentialing

3.2.2 Performance Evaluation

The Simulation Program Director conducts annual evaluations. Evaluations consider:

- Job-specific performance
 - Educational and operational effectiveness
 - Professional conduct
 - Adherence to institutional and HSSC policies
 - Participation in professional development
-

3.3 Hours of Operation

HSSC core hours are set to meet program needs and ensure safe staffing.

3.3.1 Standard Hours

- Monday–Friday 8 a.m. to 4 p.m.
 - Monday mornings and Friday afternoons are reserved for downtime
- Extended hours available upon approval by the Simulation Program Director

3.3.2 After-Hours Access

After-hours use of the HSSC must be:

- Requested in advance
- Approved by the Simulation Program Director
- Supported by adequate staffing
 - Unsupervised access is not permitted due to safety and equipment considerations.

3.3.3 Closure Protocols

The Simulation Program Director (or Dean, if needed) may close the center due to:

- College closures
- Safety concerns
- Equipment failures
- Staffing limitations
 - Affected groups will be notified promptly.

3.4 Communications and Information Management

3.4.1 Internal Communication

Clear communication is essential for safe and effective simulation operations. The HSSC uses the following channels:

- Casper College email
- Shared electronic drives
- In-person briefings/huddles as needed

3.4.2 External Communication

External partners must coordinate simulation activities through the Simulation Program Director or designated administrative staff.

3.4.3 Public Information & Requests

All media or public relation inquiries follow [Casper College's institutional communications policies](#).

Simulation staff may not release photos, videos, names, or identifiable information without written authorization.

3.5 Confidentiality, Privacy, and FERPA Compliance

The HSSC complies with [FERPA and Casper College privacy policies](#).

3.5.1 Learner Confidentiality

All performance-related information, video recordings, debriefing discussions, and assessments are confidential and may not be shared outside authorized faculty or evaluators.

3.5.2 Data Storage & Access

Simulation data—written, audio, and video—must be stored:

- On secure Casper College systems
- With restricted access based on role
- Only for the duration necessary to fulfill the educational or assessment purpose

3.5.3 Video Recording Consent

Participants must be notified when recordings occur. Programs relying on video for grading or assessment must follow institutional consent procedures.

3.6 Document Control & Version Management

The HSSC ensures all policies, procedures, and forms are current and controlled.

3.6.1 Document Ownership

The Simulation Program Director is responsible for maintaining the official repository of HSSC policies and associated documents.

3.6.2 Version Control

All documents must include:

- Title
- Effective date
- Revision date
- Version number
- Author or responsible party
- Approval authority

3.6.3 Storage & Distribution

Documents are stored electronically on secure drives accessible to authorized personnel. Outdated versions must be archived but clearly marked as superseded.

3.6.4 Annual Review

An annual comprehensive review ensures all content remains aligned with:

- SSH Standards
- Institutional policy
- Accreditation or regulatory changes
- Best practices

4. SIMULATION PROGRAM & EDUCATIONAL STANDARDS

4.1 Educational Philosophy

The Health Science Simulation Center (HSSC) provides evidence-based, learner-centered simulation experiences that promote clinical judgment, psychomotor skill development, interprofessional communication, and safe patient care.

Simulation-based education at Casper College is grounded in:

- Experiential learning theory
- Adult learning principles
- Psychological safety
- Structured prebriefing and debriefing
- Deliberate practice
- Objective, measurable outcomes

Basic Assumption

The Simulation Center offers a *Basic Assumption* underlying all simulation education offerings supported by the HSSC. All personnel are encouraged to operate under and to promote the assumption that:

“All participants are intelligent, capable, motivated to improve, and willing to help.”

4.2 Alignment with National Standards

The HSSC adheres to nationally recognized simulation standards, including:

4.2.1 SSH Accreditation Standards

- Core
- Teaching / Education

4.2.2 INACSL Healthcare Simulation Standards of Best Practice™

HSSC specifically aligns with:

- Prebriefing

-
- Facilitation
 - Debriefing
 - Simulation Design
 - Operations
 - Professional Integrity
 - Outcome & Objective Evaluation
 - Professional Development

4.2.3 HSSC-Specific Guidance

Where simulation practices are adapted to local needs, they must still align with national standards and institutional policies.

4.3 Curriculum Design and Scenario Development

All simulation activities must follow a consistent and evidence-based design framework.

4.3.1 Scenario Development Requirements

All scenarios must be developed using the official HSSC scenario template. Scenarios submitted via email, paper documents, or other formats will be returned to faculty for completion in the required format.

Each simulation event must include:

- Learning objectives (measurable and aligned with program outcomes)
- Description of the patient and context
- Critical actions and expected learner performance
- Cues and triggers
- Fidelity level and required equipment
- Prebriefing plan
- Debriefing plan
- Assessment tools (if applicable)
- Scenario revision history

4.3.2 Faculty Responsibilities

Faculty are responsible for:

- Ensuring objectives align with curriculum
- Developing and writing new scenarios to meet specific curricular needs
- Updating scenarios annually or as needed
- Participating in training for scenario writing
- Submitting scenarios by deadlines determined by the HSSC
- Ensuring scenarios are culturally sensitive and inclusive

4.3.3 Review and Approval Process

All new or revised scenarios undergo review by:

- Simulation Program Director
- Simulation Assistants
- Additional reviewers if required

4.3.4 HSSC Staff Support

HSSC staff provide operational and technical support including equipment setup, scenario programming, manikin operation, and logistical coordination. Clinical scenario development and content creation are faculty responsibilities requiring discipline-specific expertise and curricular alignment that reside within academic programs.

4.4 Prebriefing and Psychological Safety

Prebriefing establishes expectations, safety, and learner readiness.

Every simulation must include a prebriefing that covers:

- Learning objectives
- Roles and limitations of the manikin or SP
- Confidentiality agreement (“what happens in sim stays in sim”, HIPAA)
- Psychological safety statement
- Technology orientation

- Expectations for behavior and professionalism

Use of a standardized script or template is recommended.

4.5 Facilitation

Simulation facilitators must use evidence-based methods appropriate for the learners' level, program objectives, and scenario design.

Facilitator responsibilities include:

- Maintaining psychological safety
- Using clear, neutral communication
- Adjusting scenario flow based on learner actions
- Ensuring scenario objectives are met
- Remaining trained and competent in accordance with HSSC standards

All facilitators must complete required simulation faculty development as indicated by the Simulation Program Director.

4.5.1 Facilitator Training Requirements

All simulation facilitators must complete HSSC-approved facilitator training before independently facilitating any simulation-based learning activity. Required training includes:

- Introduction to healthcare simulation methodology
- Prebriefing and psychological safety
- Scenario facilitation strategies
- Debriefing methods based on national standards (e.g., PEARLS, GAS, or other approved frameworks)
- Use of simulation equipment and AV systems
- Assessment and feedback strategies (if applicable)

Refresher training is available as determined by the Simulation Program Director to ensure alignment with SSH and INACSL Standards of Best Practice™.

4.6 Debriefing

Debriefing is essential for reflective learning and must adhere to national best practices.

Required components include:

- A structured framework
- A safe and supportive environment
- Reflection on actions, thought processes, and teamwork
- Identification of performance gaps
- Reinforcement of correct clinical reasoning and behavior
- Facilitator competence in debriefing

Video-Assisted Debriefing

May be used when appropriate and follows privacy and FERPA restrictions.

4.7 Assessment vs. Evaluation

The HSSC distinguishes between:

4.7.1 Assessment (Individual Performance Measurement)

- Used for grading or high-stakes decisions
- Requires validated tools
- Requires trained and calibrated evaluators
- May include checklists, rating scales, or competency rubrics

4.7.2 Evaluation (Program or Course Improvement)

- Collects feedback on the activity or program
- Not used for learner grading
- Supports quality improvement (QI)

4.7.3 Documentation Requirements

Assessment data and evaluation forms must be stored per institutional policy and SSH privacy standards.

4.8 Scenario Review & Continuous Quality Improvement (CQI)

Simulation scenarios and programs undergo routine review to ensure relevance, accuracy, and effectiveness.

4.8.1 Continuous Quality Improvement Activities

CQI activities may include:

- Annual scenario review
- Facilitator feedback
- Learner evaluation analysis
- Update of equipment or clinical guidelines
- Assessment tool validation or revision
- Review of safety issues or event reports

4.8.2 Documentation

All CQI activities must be documented and stored with:

- Revision dates
- Reviewer names
- Summary of changes

4.8.3 Curriculum Alignment

Scenarios must remain aligned with program outcomes, national practice guidelines, and accreditation requirements.

5. SCHEDULING & RESOURCE ALLOCATION

5.1 Scheduling Procedures

The Health Science Simulation Center (HSSC) schedules simulation activities in a fair, transparent, and organized manner to ensure appropriate access for all programs.

5.1.1 Scheduling Authority

The Simulation Program Director oversees all scheduling decisions.

5.1.2 Scheduling Requests

Simulation requests must be submitted using the [approved scheduling process](#), which may include:

- An online scheduling form
- A departmental request submitted directly to HSSC staff

Requests must include:

- Course name and faculty contact
- Scenario(s) requested
- Number of learners
- Preferred dates and times
- Special equipment or standardized patient needs

5.1.3 Advance Notice Requirements

To ensure preparedness and safety, requests must be submitted **at least 4–6 weeks prior** to the event.

High-stakes assessments, interprofessional events, or large groups may require more notice.

5.2 Scheduling Priority System

To ensure equitable and mission-aligned use of simulation resources, the HSSC follows a priority system:

Priority 1 — Casper College Health Science Programs (Credit-Bearing)

Includes:

- Nursing
- Paramedic Technology/EMS
- Respiratory Therapy
- OTA/OT
- Medical Laboratory Technician
- Radiography
- Pharmacy Technician
- Other SoHS credit programs

Priority 2 — Casper College Non-Credit Health Programs

Examples:

- Continuing education courses
- Skill refreshers
- Workforce development training

Priority 3 — External Partners and Community Groups

Examples:

- Fire/EMS agency training
- Hospital partners
- Allied health groups
- Regional educational organizations

External partners may be subject to fees ([per Section 8](#)).

Priority 4 — Demonstrations, Tours

Approved recruitment activities, or community events may be scheduled secondary to educational priorities.

Tours

Requests for organized tours must be submitted two weeks in advance of the day of the tour. Unscheduled tours will be accommodated at the discretion of HSSC staff.

5.3 Use of Space and Resources

5.3.1 General Use Policies

All spaces must be used respectfully, professionally, and for approved activities only.

Key expectations:

- Rooms must be returned to a “ready state”
- Equipment must not be moved without approval
- Consumables must be used responsibly
- Food/drink restrictions must be followed where posted

5.3.2 Room Reservation Requirements

No simulation space may be used without a confirmed reservation.

“Drop-in” or unscheduled use is not permitted due to safety and equipment protection.

5.3.3 Equipment & Technology Use

Only trained personnel may operate:

- High-fidelity manikins
- AV systems
- Recording platforms
- Specialty equipment (ventilators, pumps, monitors, etc.)

Training is provided by the Simulation Staff.

5.4 Resource Allocation Standards

5.4.1 Equipment Allocation

Equipment availability may limit scheduling. In such cases, priority is based on:

1. Educational requirement (accreditation or curriculum)
2. Learner safety
3. Program-level priority ([see Section 5.2](#))

5.4.2 Standardized Patients (SPs)

Volunteer Standardized Patients (SPs) are used as needed for specific simulation scenarios. No invasive examinations or procedures are permitted for SP-based scenarios and volunteers are to remain fully clothed during scenarios. Volunteers are not financially compensated.

Recruitment

Instructors are the primary recruiters of Standardized Patients based on familiarity with requirements for individual scenarios.

Documentation

All SPs must sign a release form provided by the Simulation Program indicating consent to AV recording and a commitment to confidentiality. This release is to be archived by the Sim Program.

SP use is dependent on:

- Scenario appropriateness
- Budget and staffing
- SP availability
- Training and preparation time

5.4.3 Shared or High-Demand Equipment

Requests to use HSSC equipment outside the center must be submitted two weeks in advance of the day of delivery. Refer to [Casper College Equipment Use Policy](#).

5.5 Cancellations & Scheduling Changes

5.5.1 Faculty/Program Cancellations

To allow adequate resource reallocation, cancellations require notice:

- **Minimum 7 days' notice** for standard events
- **14 days' notice** for complex events, SP activities, or assessments

Repeated cancellations may affect future scheduling priority.

5.5.2 HSSC-Initiated Cancellations

The center may cancel due to:

- Equipment failure
- Safety concerns
- Unexpected staff absence
- Facility closure

When possible, the HSSC provides alternative dates or formats.

5.5.3 No-Show Events

If a group fails to arrive without notice, documentation will be sent to:

- Course faculty
- Program Director
- Dean (if repeated)

5.6 Equipment/Manikin Downtime and Backup Plans

5.6.1 Reporting Downtime

Any equipment malfunction must be reported immediately to:

- Simulation Program Director

5.6.2 Equipment Failure Protocol

The Program Director will:

- Troubleshoot
- Document the issue
- Notify faculty
- Implement backup plans as needed

5.6.3 Backup Plans May Include:

- Switching to a different manikin
- Adjusting fidelity

-
- Using task trainers
 - Hybrid simulation appointments
 - Rescheduling if required

5.6.4 Documentation Requirements

All equipment issues must be logged for quality improvement and maintenance tracking.

5.7 Environmental Preparedness and Room Turnover

5.7.1 Setup

HSSC staff are responsible for:

- Preparing the room according to the scenario specification
- Ensuring safety (items secured, equipment functioning)
- Maintaining confidentiality of scenario materials

5.7.2 Turnover

After each event:

- Rooms are cleaned and reset
- Supplies restocked
- Equipment checked for readiness

Faculty are expected to assist by ensuring learners leave space tidy and follow cues from HSSC staff.

6. FACILITIES OPERATIONS

6.1 Physical Space Overview

The Health Science Simulation Center (HSSC) includes a variety of instructional and operational spaces designed to support simulation-based education. These may include:

- Simulation rooms (acute care, outpatient, specialty labs, etc.)
- Control rooms
- Debriefing rooms
- Storage and prep areas
- Administrative offices

Each space is used intentionally to support safety, learning objectives, and fidelity requirements.

6.2 Facility Use Guidelines

All users of the HSSC are responsible for maintaining a safe, professional, and educationally appropriate environment.

6.2.1 General Behavior Expectations

- Professional conduct is required at all times.
- Only authorized personnel may access simulation or control rooms.
- No food or drink is permitted near simulators, computers, or specialty equipment unless approved.
- Furniture and equipment may not be moved without permission from HSSC staff.
- Personal belongings should be kept in designated areas.

6.2.2 Environmental Safety Requirements

To maintain safe operations, users must:

- Report any spills, hazards, or safety concerns immediately.
- Ensure cables, cords, and equipment remain secured.
- Follow signage and staff instructions regarding restricted zones.
- Adhere to institutional safety protocols (fire safety, chemical use, first aid procedures).

6.3 Equipment Management

Equipment includes simulators, task trainers, furnishings, monitors, and specialty devices.

6.3.1 Permitted Use

Only trained and authorized personnel may operate:

- High-fidelity manikins
- Ventilators and respiratory equipment
- Infusion pumps
- Monitors and defibrillators
- AV/recording systems

Students may not manipulate or adjust these without supervision.

6.3.2 Maintenance and Service

The Program Director is responsible for:

- Troubleshooting and repair requests
- Warranty/service coordination
- Preventive maintenance scheduling

The Simulation Assistants are responsible for:

- Routine maintenance (cleaning, calibration, firmware updates)
 - Updating maintenance schedule/inventory lists in shared Google Drive

If equipment is damaged or malfunctioning, users must notify staff immediately.

6.3.3 Consumables and Supplies

Consumables (dressings, syringes, IV supplies, medications, etc.) are monitored and stocked by HSSC staff.

Faculty should notify HSSC of specialized supply needs at least **two weeks prior** to simulation use.

6.4 Inventory Management

The HSSC maintains a comprehensive and organized inventory of simulation equipment, supplies, and consumables.

6.4.1 Supply Storage

Supplies are stored in designated areas and labeled clearly. Unauthorized removal of supplies is prohibited.

6.4.2 Equipment Check-Out

Portable simulation equipment or loaned items must be checked out through [established procedures](#).

External groups may be subject to fees ([see Section 8](#)).

6.5 Facility Maintenance and Repairs

6.5.1 Reporting Problems

Facility-related issues (lighting, power, HVAC, structural concerns, water leaks) must be reported promptly to the Simulation Program Director.

6.5.2 Coordination with Facilities Management

HSSC staff coordinate with college Facilities to ensure:

- Environmental safety
- Timely repairs
- Proper cleaning schedules
- Compliance with institutional building management policies

6.5.3 Facility Readiness

The Program Director performs routine checks to ensure:

- Rooms are prepared for use
- Equipment is functional
- Safety hazards are mitigated

6.6 Audiovisual & Recording Systems

AV systems support learning, debriefing, and assessment while protecting privacy and data security.

6.6.1 AV System Use Requirements

Only trained users may:

- Operate cameras
- Initiate recordings
- Playback for debriefing
- Access stored files

6.6.2 Recording Guidelines

Recording within the HSSC is used exclusively for educational, quality improvement, training, and accreditation purposes. All video, audio, and photographic recordings must follow the guidelines below:

6.6.2.1 Required Student Consent

All students participating in simulation-based activities must sign the [HSSC Student Guidelines & Release Form](#) prior to participating in any simulation event.

This form includes explicit consent for the use of the participant's:

- Name
- Voice
- Photograph
- Video recording
- Likeness

The consent authorizes Casper College Health Science Simulation Center (HSSC) to use these materials without reservation or limitation, with the understanding that participants will not receive compensation.

Recordings are:

- The property of Casper College
- Stored securely within the HSSC
- Used only for accreditation, education, and training
- Destroyed according to HSSC and Casper College [data policies](#)

6.6.2.2 Recording Authorization & Privacy Standards

- Recordings must be disclosed to learners in advance.
- Only trained personnel may initiate or access recordings.
- Recordings may not be shared, copied, or distributed outside authorized educational use.
- FERPA and institutional privacy policies apply at all times.

6.6.2.3 Storage and Access

- All recordings must be stored on secure Casper College systems.
- Access is restricted to authorized faculty and staff with a legitimate educational purpose.
- Recordings must not be stored on personal devices, removable media, or non-approved platforms.

6.6.3 Technical Support

All AV system issues should be reported immediately to the Program Director. AV downtime will be managed using established backup plans ([Section 5.6](#)).

6.7 Facility Cleanliness and Room Turnover

Maintaining clean, organized, and ready-to-use spaces is essential for safety and fidelity.

6.7.1 Responsibilities of HSSC Staff

- Clean and reset rooms after simulation events
- Wipe down simulators and equipment
- Restock consumables
- Inspect manikins for damage or required maintenance
- Debriefing spaces reset to a neutral state

6.7.2 Responsibilities of Faculty and Learners

Faculty and learners must:

- Dispose of waste properly
- Return equipment or props to designated areas
- Maintain professional behavior in shared spaces

- Follow HSSC instructions for room exit procedures

6.7.3 Biohazard and Contamination Protocols

If any biological hazard or contamination risk occurs:

- Evacuate the area if needed
- Alert HSSC staff immediately
- Follow institutional hazardous material protocols
- Document the incident per [Section 9](#)

6.8 Emergency Preparedness in the Facilities

The HSSC adheres to college-wide emergency procedures, including:

- Fire evacuation
- Severe weather
- Power outages
- Medical emergencies
- Security threats

Emergency diagrams and instructions must be posted and visible. HSSC staff ensure all simulation participants are familiar with emergency routes and actions.

7. CONDUCT, INTEGRITY & HUMAN INTERACTIONS

7.1 Standards of Conduct

All individuals using the Health Science Simulation Center (HSSC)—including students, faculty, staff, standardized patients, and external partners—are expected to behave professionally and respectfully.

Required behaviors include:

- Maintaining professional communication and demeanor
- Respecting the learning environment and equipment
- Responding to feedback constructively
- Collaborating with peers and interprofessional team members
- Following simulation policies, procedures, and safety guidelines

Prohibited behaviors include:

- Disruptive conduct
 - Unsafe actions or misuse of equipment
 - Harassment, discrimination, or intimidation
 - Recording simulation activities without explicit authorization
 - Tampering with simulation equipment
 - Removing supplies or equipment without permission
-

7.2 Professional Integrity

Professional integrity is essential to maintaining credibility, fairness, and safety in simulation-based education.

Expectations include:

- Honesty in participation and performance
- Adherence to scenario confidentiality ([see 7.4](#))
- Accurate completion of evaluations and assessments
- Respecting academic integrity and avoiding cheating
- Reporting safety concerns, equipment issues, or policy violations promptly

Violation of integrity standards may result in remediation, loss of simulation privileges, academic consequences, or disciplinary action per Casper College policy.

7.3 Respect, Equity, and Inclusion

The HSSC is committed to fostering an environment that promotes respect, psychological safety, and equitable learning opportunities for all participants.

The HSSC prohibits:

- Discrimination based on race, ethnicity, gender, sexual orientation, disability, age, religion, or other protected characteristics
- Harassment or microaggressions
- Exclusionary or hostile behavior
- Derogatory comments or actions toward learners, staff, or standardized patients

The HSSC supports:

- Inclusive language
- Trauma-informed educational practices
- Accessibility accommodations
- Representation of diverse patient populations in scenarios

7.4 Psychological Safety & Confidentiality

Psychological safety allows learners to make errors, reflect, and grow without fear of humiliation or punishment.

7.4.1 Confidentiality Agreement

All participants must agree to the confidentiality statement.

This includes:

- Protecting the integrity of scenarios
- Not sharing peer performance
- Not discussing sensitive content outside debriefing
- Keeping recordings and assessment data confidential

Students sign the [HSSC Student Guidelines & Release Form](#) (referenced in [Section 6.6.2.1](#)), which includes consent to recording and expectations for confidentiality.

7.4.2 Psychological Safety Practices

Facilitators and staff will:

- Encourage learner participation
 - Use supportive, respectful communication
 - Avoid shaming or punitive language
 - Provide justification for feedback
 - Intervene immediately if psychological safety is compromised
-

7.5 Conflict of Interest

The HSSC maintains ethical boundaries to prevent conflicts of interest in simulation activities.

Examples of conflicts include:

- A faculty member assessing performance of a student with whom they have a close personal relationship
- A staff member receiving gifts or compensation from vendors
- Preferential scheduling or resource allocation for select programs

Required actions:

- Conflicts must be disclosed to the Simulation Program Director
 - Alternative evaluators or facilitators will be assigned when necessary
 - Staff must follow [Casper College's conflict-of-interest policy](#)
-

7.6 Public Relations & Media

All media interactions must comply with [Casper College's communication](#) and privacy policies.

Requirements include:

- Media or photography in the HSSC requires prior approval from the Dean or Casper College Public Relations
- Learner identities cannot be released without appropriate consent
- No photos or videos may be taken on personal devices

-
- Social media content must be professional and non-identifiable

Violations may result in disciplinary action.

7.7 Marketing and Information Dissemination

All Health Science Simulation Center (HSSC) marketing material is subject to [Casper College policy](#)

8. FISCAL PRACTICES

8.1 Budget Management

The Health Science Simulation Center (HSSC) operates within the fiscal structure of the Casper College School of Health Science (SoHS).

Budget oversight ensures responsible use of institutional resources, sustainability of simulation operations, and compliance with accreditation standards.

8.1.1 Budget Authority

- The Dean of the School of Health Science has ultimate oversight of all HSSC financial matters.
- The Simulation Program Director manages day-to-day budget planning, purchasing decisions, and long-term fiscal needs aligned with program goals.

8.1.2 Budget Components

The HSSC budget may include:

- Personnel salary and benefits
- Equipment acquisition and replacement
- Consumable and reusable supplies
- Service contracts and warranties
- Professional development and credentialing
- Software licenses and AV platforms
- Maintenance and repairs
- Accreditation-related fees

8.1.3 Annual Budget Planning

Each fiscal year, the Simulation Program Director submits:

- Projected needs
- Equipment replacement forecasts
- Program growth considerations
- Accreditation requirements
- Professional development costs

The Dean reviews and approves the final budget.

8.2 Purchasing & Approvals

Purchasing decisions must follow [Casper College procurement policies](#) and ensure responsible stewardship of funds.

8.2.1 Purchasing Authority

- Purchases below institutional thresholds may be approved by the Simulation Program Director.
- Higher-value items require Dean or institutional approval per college policy.
- All purchases must be necessary, reasonable, and aligned with HSSC goals.

8.2.2 Equipment Purchases

Purchasing considerations include:

- Compatibility with existing systems
- Total cost of ownership
- Service contracts or warranties
- Vendor reliability
- Educational value

8.2.3 Consumables & Supplies

Consumable purchases must support scheduled educational activities and be forecasted based on program needs.

8.2.4 Vendor Relationships

Staff must avoid conflicts of interest and adhere to institutional ethics policies. No gifts, incentives, or personal benefits may be accepted from vendors.

8.3 Fee Structure and Material Contributions

The HSSC may assess fees for external use or for specialized simulation activities.

8.3.1 External Partner Fees

External partners (EMS agencies, hospitals, community organizations, etc.) may be charged for:

- Facility use
- Equipment or manikin use
- Standardized patients
- Staffing and operational support
- Specialty scenarios or customized training

Fees are determined by the Simulation Program Director and approved by the Dean.

8.3.2 Material Contributions or Donations

All donations must comply with [Casper College's gift and donation policies](#) and be approved through appropriate institutional channels. Donations do **not** guarantee scheduling priority or influence over program decisions.

8.3.3 Fee Communication

All fees must be communicated in writing before the simulation event is scheduled.

8.4 Fiscal Reporting & Documentation

Fiscal transparency is required for accreditation, sustainability, and institutional accountability.

8.4.1 Required Fiscal Documentation Includes:

- Purchase requests
- Invoices and receipts
- Vendor agreements
- Service contracts
- Budget reports
- Fee collection documentation
- Donation or grant documentation

8.4.2 Grants & External Funding

If the HSSC receives grant support:

- Funds must be used in accordance with the grant scope
- Reporting must follow grant guidelines and institutional policies
- Purchases must comply with institutional procurement requirements

8.4.3 Annual Financial Review

The Simulation Program Director and Dean review:

- Budget performance
- Resource utilization
- Major expenditures
- Needs for the upcoming year
- Accreditation-related fiscal requirements

This audit supports long-term sustainability and compliance.

8.5 Long-Term Resource Planning

SSH requires simulation programs to demonstrate sustainability.

Long-term planning includes:

- Equipment replacement planning cycles
- Software and AV system upgrades
- Preventive maintenance scheduling
- Staffing needs and workforce development
- Simulation program growth projections

These plans inform the annual budget process and strategic planning efforts.

9. SAFETY & RISK MANAGEMENT

9.1 Safety Philosophy

The Health Science Simulation Center (HSSC) is committed to maintaining a safe, controlled environment that supports both physical and psychological safety for all learners, faculty, standardized patients (SPs), staff, and visitors.

Safety is a shared responsibility among:

- HSSC personnel
- Faculty
- Students
- External partners
- Casper College emergency and facilities staff

9.2 Physical Safety

9.2.1 General Safety Expectations

The HSSC is subject to [Casper College Safety and Security](#) policies and procedures in this regard.

All individuals in the HSSC must:

- Follow posted safety signage and institutional safety protocols
- Use equipment only as trained and intended
- Maintain clear walkways and avoid tripping hazards
- Immediately report hazards, spills, or injuries
- Wear appropriate attire and personal protective equipment when required
- Follow infection control guidelines for hands-on activities

9.2.2 Fire & Emergency Procedures

In the event of a fire alarm or emergency evacuation:

- Stop all simulation activities
- Follow evacuation routes posted in each room
- Leave the building promptly
- Gather at designated assembly areas

- Follow directions from college safety personnel

9.2.3 Equipment Safety

Simulators and equipment must be operated only by trained, authorized personnel. Safety risks include:

- Electrical cables
- Moving parts
- Oxygen or compressed gas cylinders
- Sharps or simulated sharps
- Heavy or mobile equipment

If unsafe conditions arise, the Program Director will stop the activity and implement corrective actions.

9.3 Psychological Safety

9.3.1 Prebriefing Requirements

Every simulation begins with a standardized prebrief that reinforces:

- Confidentiality
- Respectful communication
- The learning-focused environment
- Expectations for behavior
- Permission to make mistakes
- No punitive consequences for learning errors

9.3.2 Facilitator Responsibilities

Facilitators must:

- Use supportive and nonjudgmental communication
- Intervene if conflict or distress arises
- Modify scenarios if learners appear overwhelmed
- Ensure debriefing maintains respect and sensitivity

9.3.3 Learner Responsibilities

Learners must:

-
- Treat peers respectfully
 - Maintain confidentiality
 - Communicate concerns promptly to faculty or HSSC staff
-

9.4 Hazardous Materials & Infection Control

The HSSC follows all [Casper College policies](#) regarding chemical safety, sharps, biological materials, and cleaning protocols.

9.4.1 Hazardous Materials

Only trained personnel may access or use:

- Cleaning chemicals
- Simulated blood or body fluids
- Lubricants, adhesives, or silicone products
- Battery-powered or electric components

All materials must be stored according to manufacturer and institutional guidelines.

9.4.2 Infection Control

Although simulations rarely involve biological contaminants, the following principles apply:

- Use gloves when appropriate
 - Follow hand hygiene policies
 - Clean and disinfect equipment after use
 - Replace single-use items after each learner group
 - Place sharps in sharps bins
-

9.5 Emergency Procedures

9.5.1 Medical Emergency

If someone becomes ill or injured:

- Stop the simulation immediately

- Call 911 if needed
- Notify the Simulation Program Director
- Follow [institutional injury reporting procedures](#)

Important:

Simulation equipment (including manikins) must not be used for real patient care.

9.5.2 Security Threat or Behavioral Incident

In case of violence, threats, or unsafe behavior:

- Prioritize personal safety
- Follow [Casper College emergency action protocols](#)
- Contact [Campus Security](#)
 - Campus Security can be reached at 307-268-2688
- Document the incident

9.5.3 Power Outage or Utility Failure

- Stop activities immediately
- Faculty and learners may exit safely or await instructions
- HSSC staff secure equipment
- Restart simulation only after power is restored and safety is confirmed

9.6 Incident Reporting

9.6.1 Types of Reportable Incidents

Incidents include but are not limited to:

- Injury or potential injury
- Psychological safety concerns
- Equipment failure causing interruption
- Environmental hazards
- Unsafe behavior or policy violations
- Breach of confidentiality or privacy

9.6.2 Reporting Process

All incidents must be reported to HSSC staff using the [designated incident form](#).

Steps include:

1. Immediate verbal notification to the Program Director
2. Completion of incident documentation
3. Review by Simulation Program Director
4. Escalation to Dean or college safety departments as needed

9.6.3 Documentation & Follow-Up

- Incidents must be documented within 24 hours
- Follow-up actions will be assigned based on severity
- Corrective actions may include training, policy revision, or equipment repair
- Records are maintained per institutional policy

9.7 Equipment Failure & Risk Mitigation

Risk mitigation protects the learning process and ensures continuity.

9.7.1 Immediate Response

If equipment fails during simulation:

- Stop the scenario if safety is compromised
- Switch to backup strategies (as described in [Section 5.6](#))
- Document the issue

9.7.2 Preventive Measures

HSSC staff conduct regular checks to ensure:

- Devices are functioning properly
- Batteries are charged
- Service contracts are current
- High-use equipment is inspected frequently

This supports safe operations and accreditation readiness.

9.8 Safe Handling of Simulation Medications & Supplies

All medications used in simulation are non-clinical teaching supplies and are **not for human use**.

Required protocols:

- Only simulated or deactivated medications may be used
- Real controlled substances are not permitted
- Fake labels must clearly indicate "For Simulation Use Only"
- Learners must follow realistic medication safety practices
- Errors occurring in simulation must be addressed through debriefing, not punitive action

9.9 Special Populations (SPs & Guests)

Standardized patients (SPs), visitors, minors, and observers must adhere to all HSSC safety policies.

Requirements include:

- SPs must receive an orientation and safety briefing
- Guests must be supervised at all times
- Minors must be accompanied by a responsible adult
- Photography and recording are strictly prohibited unless authorized

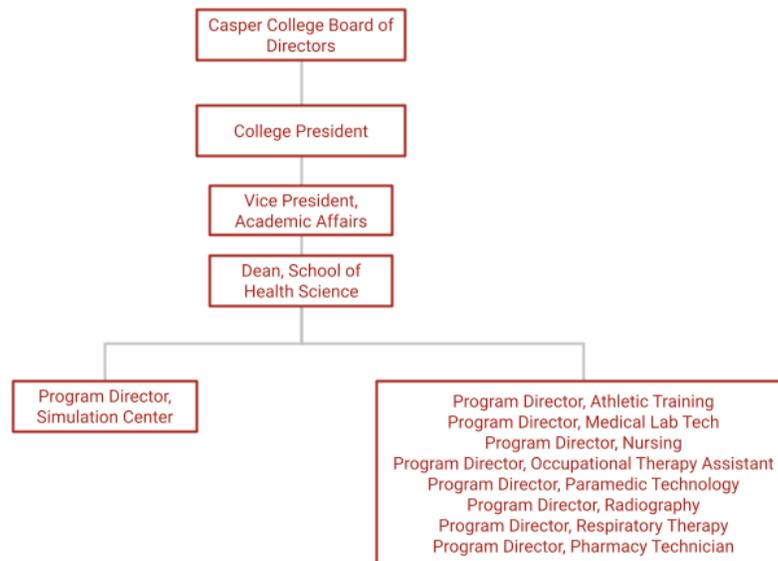
APPENDICES

APPENDIX A — ORGANIZATIONAL CHARTS

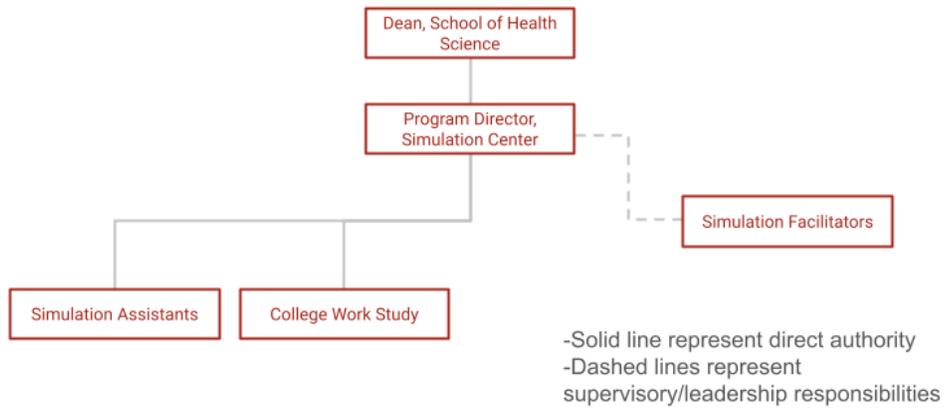
A.1 Description of Organizational Structure

The Health Science Simulation Center (HSSC) is housed within the Casper College School of Health Science (SoHS). The simulation program is overseen by the Dean and led by the Simulation Program Director, who is responsible for strategic planning, educational oversight, accreditation alignment, and personnel supervision. The Simulation Assistants manage daily operations, equipment, and technology. Additional simulation assistants, standardized patients, adjunct faculty, and administrative support staff contribute to simulation delivery as assigned.

Casper College School of Health Science Governance

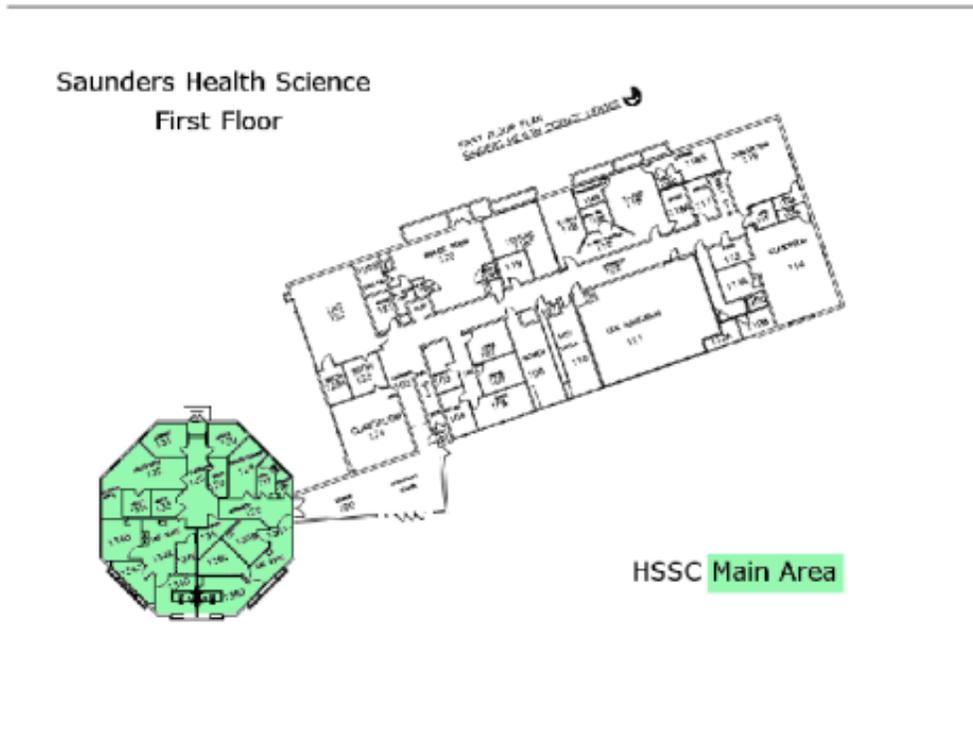


A.2 Health Science Simulation Center (HSSC) Personnel Structure



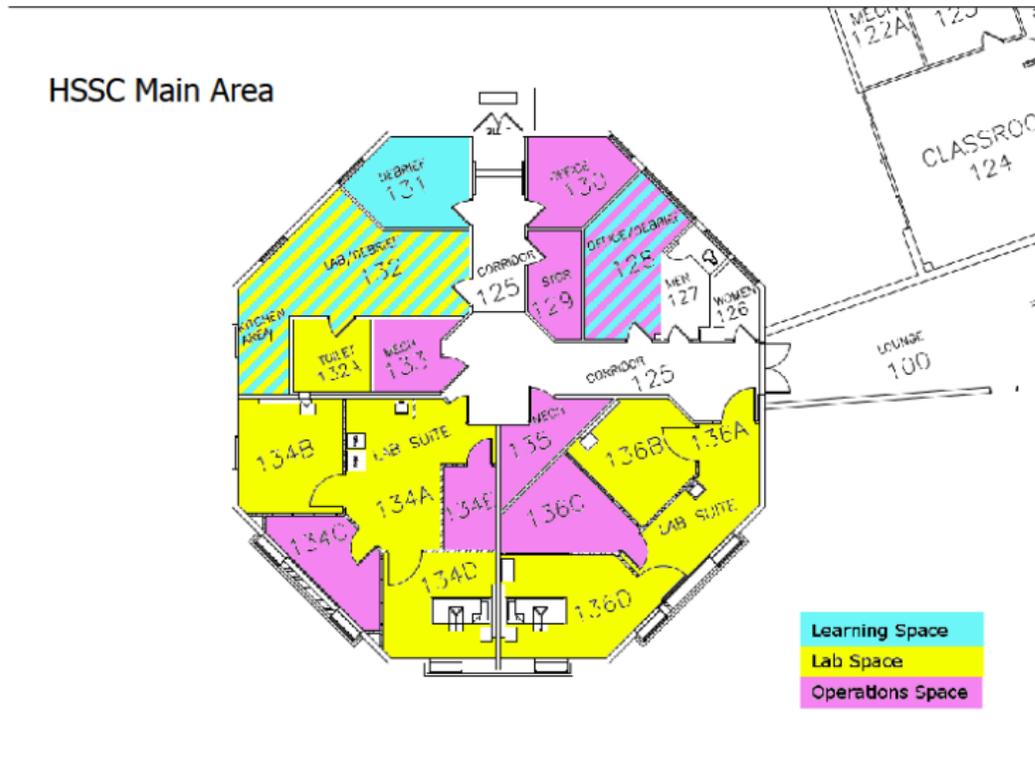
APPENDIX B — FLOOR PLANS

Appendix B.1 Saunders Health Science Center



HSSC Main Area Location: First Floor (Octagonal Area)

Appendix B.2 Health Science Simulation Center Main Area



Common Space: 125, 127, 127

Lab Space: 134, 136, 132

Learning Space: 128, 131, 132, 124

Operational Space: 128, 129, 131, 131, 133, 134C, 134E, 135, 136C

Approved by PLG 2/11/2026