SIMULATION CENTER

2018 Annual Report





The Simulation Center serves the entire healthcare system providing simulation services to advance system-wide patient safety and quality improvement initiatives.

Established in 2010, The Simulation Center is continuing to grow a Devolved Model of Simulation that expands the reach of simulation with several new satellite centers and in-situ programs being established in 2017. In addition, our Maternal Morbidity Reduction program, which began in 2018, will provide for the construction of mini-obstetrical labs at six of our acute care facilities. This allows better access locally to NYC Health + Hospitals' clinicians, administrators, educators, and support staff.

Currently, the Center hub and newly established satellite centers offers courses that have been developed based on an examination of root cause analysis, claims data, and hospital performance data. Team training is an integral part of the course design and delivery. The "in-situ" or unit-based simulation program is growing in selected units throughout the hospital system. Better patient outcomes and improvement in staff satisfaction have been seen in the areas where these programs have been established.

The Simulation Center Hub 1400 Pelham Parkway South Building 4, 2nd Floor, Room 200 Bronx, NY 10461

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EXECUTIVE SUMMARY



Simulation Center staff and fellows attend a workshop led by Dr. Michael DeVita.

Calendar Year 2018 marks The Simulation Center's eighth year of service to the clinicians and staff of New York City Health + Hospitals. The Simulation Center's core mission is to support the service of the Health + Hospitals system through more efficient clinical skills acquisition, teamwork and communication training and process improvement to improve patient care in both inpatient and ambulatory care settings. In March 2018, we welcomed Dr. Lisa Barker from the Jump Trading Simulation Center in Peoria, Illinois. Dr. Barker and her team in Peoria are leading the way in exploring Return on Investment (ROI) in healthcare simulation. The NYC Health + Hospitals Simulation Center was one of the large system simulation programs that partnered with the Peoria Center to develop the ROI Board game. We had an excellent day with Dr. Barker, the

simulation fellows and invited guests learning more about how to prioritize programs and think more deeply about return on investment.

The simulation program continues to expand in the number of NYC Health + Hospital staff who are engaged in simulation, the areas of healthcare we are touching with simulation and the way The Simulation Center is deploying simulation. To date, we have built a cadre of 50 simulation instructors who provide simulation in various forms to clinicians and staff throughout the system and the number is growing with 12 new simulation fellows who graduated from our Simulation Fellowship in 2018. We believe that the only way to meet our 2017-2021 strategic plan goals of active satellite simulation centers established in most acute facilities (including Corrections

Health Services and Henry J Carter Specialty Hospital & Nursing Facility) is to promulgate the growth of experienced simulation educators.

One of the most popular ways that simulation was deployed at the hub center at Jacobi in 2018 was through Grand Rounds. This is an innovative use of simulation whereby large numbers of participants can be trained. In 2018, there were 777 Grand Rounds training encounters for both Emergency Medicine and Pediatrics. The next leading courses were the Central Line Placement and Skills course with a total of 272 participants over 31 courses, followed by the course for multiprofessional CAUTI trainers, with 56 participants over seven courses. The Introduction to Debriefing course remains in demand with 46 NYC Health + Hospitals interprofessional staff

EXECUTIVE SUMMARY CONTINUED



Dr. Mitchell Katz, President and CEO of NYC Health + Hospitals, visits The Simulation Center Hub.

members completing the course. The art of debriefing, we believe, will have a major impact on improving the Health System's culture of teamwork and communication around patient-centered care. Calendar Year 2018 brought over 3,000 learners to The Simulation Center. The Simulation Center was instrumental in the successful roll out of 2 Performance Improvement projects in 2018.

The Simulation Center continues to push simulation into all of the acute care facilities in a "devolved" model of simulation. With The Simulation Center as the hub at Jacobi, satellite Centers have now been established in Elmhurst, Harlem, Lincoln and Correctional Health providing

simulation training to learners within those facilities, eliminating the need to travel to the hub at Jacobi Medical Center. There are satellite centers in the planning stages at Bellevue, King's County and Metropolitan.

2018 saw the establishment of the Maternal Mortality Reduction program through a large grant from NYC City Hall and a smaller grant from the New York State Department of Health. Through these grants the NYC Health + Hospitals Simulation Center was in a position to hire four full time staff consisting of two Nurse Educators and two Coordinating Managers. This has been a wonderful addition to The Simulation Center core team and will enable support and data collection

for this program. Six obstetric minisimulation labs will also be established at Harlem, Lincoln, Jacobi, Bellevue, King's County and Elmhurst.

The Simulation Center works closely with all of the units of the Medical & Professional Affairs division of the hospital system and quickly responds to emergent needs by developing simulations to drive new policy guidelines and address knowledge, teamwork and communication gaps. This "modus operandi" sets the New York City Health + Hospitals Simulation Center apart from other simulation programs.

SIMULATION HUB UTILIZATION – CY 2018

COURSES BY VOLUME					
Sim Center Course / Event	# of Sessions Conducted	# of Staff Training Encounters			
Active Shooter Drill	4	71			
Adult Cardiac Code Team	14	129			
Advanced Airway Skills	7	71			
Advanced Trauma Life Support Cert/Recert Program (Jacobi)	7	107			
Airway Skills for Critical Care Unit (Jacobi)	1	9			
Attending Boot Camp (Jacobi EM)	1	29			
Bard Midline Training	11	41			
C.N.A. Agency Orientation	6	40			
CAUTI In-service Nurses (Jacobi, NCB)	7	56			
Central Line Placement Skills	31	272			
Code Team 2.0	10				
Critical Care Simulation Session	3	69 44			
Debriefing for BH Teams Train the Trainer	13	57			
EM Conference (Jacobi)	2	67			
Emergent Deliveries	1	4			
EMS Trauma Collaborative Training (Jacobi)	1	3			
Frontline Facility Special Pathogens Training	4	73			
Full Scale Mass Casualty Drill (Lincoln)	1	81			
Grand Rounds (EM and Peds, Jacobi and Metropolitan)	29	777			
Grand Rounds Small Group (Jacobi)	5	35			
Hypertension Simulation Videotaping Session	1	3			
ICARE Training (Jacobi Nursing Ed.)	1	7			
Introduction to Debriefing	6	46			
IV Insertion (Coler)	9	45			
Medical Students Simulation Session (Jacobi)	1	7			
Jacobi EM Nursing Competency	1	10			
Neonatal Resuscitation Program (Jacobi, North Central Bronx)	11	91			
Nursing Central Line Maintenance	1	14			
Nursing Orientation (Jacobi)	1	28			
Obstetric Emergencies for PA Pilot	1	3			
Obstetrical Emergencies	7	36			
Pediatrics in Ambulatory Care	1	10			
Pediatric Airway Skills	7	48			
Pediatric Code Team	11	71			
Practice: Central Line Skills	1	1			
Practice: Glidescope Skills	1	1			
Pressure Injury Prevention and Wound Care	1	15			
Shoulder Dystocia Teamwork and Skills	3	12			
Special Pathogens Program Planning Session	1	5			
, , , , , , , , , , , , , , , , , , , ,	•	78			
Stop the Bleed	10				
Surgical Airway for Dentistry (Jacobi)	2	26			
Teamwork & Communication in Acute Care and Common Emergencies	16	230			
Trauma Resuscitation (Jacobi Surgery)	8	46			
Unit Based Simulation: EM/Trauma (Jacobi, FDNY)	3	38			
Unit Based Simulation: Pediatrics (Lincoln)	1	5			
Unit Based Simulation: Surgery (Jacobi)	1	17			
Virtual Reality Simulation: Bronchoscopy	7	21			
Virtual Reality Simulation: Endoscopy	11	28			
Virtual Reality Simulation: Laparoscopy	41	41			
Wound Management Symposium (meeting)	1	41			
Grand Total	325	3,059			

STAFF ENGAGEMENT AT THE SIMULATION CENTER HUB

STAFF ENGAGEMENT BY FACILITY OVERALL			
Facility	Number of Staff Engaged		
Jacobi	1,767		
NCB	173		
Lincoln	187		
Metropolitan	184		
Kings County	115		
Other (Non HHC)*	115		
Woodhull	112		
Elmhurst	107		
Harlem	83		
Queens	60		
Coler	46		
Coney Island	42		
Bellevue	39		
Central Office	8		
Cumberland	3		
East New York	3		
Morrisania	3		
Carter	2		
Correctional Health	2		
Renaissance	2		
Belvis	1		
Gotham Sydenham	1		
Homecare	1		
McKinney	1		
Sea View	1		
Gouverneur	1		
Grand Total	3,059		

ACUTE CARE FACILITY** TRAINING ENCOUNTERS BY TITLE				
Facility	Number of Staff Engaged			
Activity Therapist	2			
Administration/Management/ Leadership	54			
Advanced Practice RNs (CNM, NP, CRNA)	50			
Attending	284			
Fellow	32			
Infection Preventionist	1			
LPN	4			
Non-Clinical	52			
Nurse Educator	2			
Other	29			
PA	70			
Patient Care Associate (e.g. tech, aide, escort, volunteer)	61			
Psychologist	10			
Resident	1,675			
RN	396			
RT	8			
Social/Case Worker	15			
Student (e.g. Medical, PA, Paramedic, etc)	159			
Support Services (e.g. Engineering, Maintenance, Housekeeping, Hospital Police, etc.)	16			
Grand Total	2,920			

^{*}Other (Non HHC) include FDNY, Johns Hopkins, Montefiore, St. Barnabas, LiveOnNY.

^{**}The 11 acute care facilities are Jacobi, North Central Bronx, Lincoln, Metropolitan, Kings County, Woodhull, Elmhurst, Harlem, Queens, Coney Island and Bellevue.

ACUTE CARE FACILITY BREAKDOWN BY TITLE											
	Bellevue	Coney Island	Elmhurst	Harlem	Jacobi	Kings County	Lincoln	Metro- politan	North Central Bronx	Queens	Woodhul
Activity Therapist										1	1
Administration/ Management/ Leadership			4	1	27	6	15		18	1	
Advanced Practice RNs (CNM, NP, CRNA)					14					2	
Attending	1		10	15	193	5	30	7	3	4	
Fellow			2		16	13		1			
Infection Preventionist								1			
LPN				1	2						
Non-Clinical					34	6	11		1		
Nurse Educator			1		1						
Other					6		15	5	3		
PA					45			11	6	4	1
Patient Care Associate (e.g. tech, aide,escort, volunteer)			1		56			1	2		
Psychologist	2		2	2	1	1			1	1	
Resident	31	37	81	60	1,008	81	69	113	74	43	91
RN	4	3	6	2	229	3	38	6	59	4	17
RT		2			4		2				
Social/Case Worker	1				11		1				2
Student (e.g. Medical, PA, Paramedic, etc)				2	99			39	17		
Support Services (e.g. Engineering, Maintenance, Housekeeping, Hospital Police, etc.)					10		8				
Grand Total	39	42	107	83	1,756	115	187	184	184	60	112

SATELLITE CENTERS



Harlem Hospital Satellite Simulation Center: The simulation team at Harlem Hospital Center has had a productive year focusing its efforts to explore applications of simulation in process improvement, and getting involved in nursing orientation as well as teamwork training within units. The team ran two Malignant Hyperthermia cases exploring preparedness and safety within its operating rooms. Nursing orientation is now a ripe place for simulation activities at Harlem, moving new trainees from the classroom to application of clinical skills. Teamwork programs have been focusing on emergencies in the trauma setting and OB/GYN, considering the importance of roles and latent safety threats. Process has been explored through simulation and transport as well as being involved in Epic roll out. We look forward to engaging the community in the coming year and considering how to measure the impact of educational interventions.



Lincoln Medical Center Satellite Simulation Center:

In 2018, the Lincoln Medical Center Satellite Simulation Center added two new staff members, Sandra Kam and Magdalena Buen. We continue to do regular trainings for physicians, students, and nurses and have a new team of trained residents conducting scenarios and debriefings. In addition to our regular trainings, we have increased OB drills to twice a month with good attendance and low cancellation rates. We centralized

and streamlined BLS/ACLS/PALS process with the intent of starting to offer courses for outside institutions and purchased a new mannequin "Alex" for history taking and physical examination/procedure skills. Lastly, we were able to host a Simulation fair at our center for Simulation in Healthcare week with good attendance from staff! The learners were interprofessional groups of Medicine and Nursing.



Correctional Health Services Satellite Simulation Center: In 2018, the Correctional Health Services Satellite Simulation Center worked on using simulation for annual competencies and re-education. We have also started running medical emergency simulation. In addition, we have completed trainings for ACLS and BLS certifications. This year we also participated in our first Simulation Week Fair and had a great turnout!



Elmhurst Hospital Satellite Simulation Center: This year's exciting activity includes a re-vamped residency simulation curriculum, comprised of initiation of a monthly simulation conference and procedure workshop and formalization of small group simulation sessions. Dr. Lillian Wong continues to spearhead bi-weekly resident simulation sessions at Elmhurst for additional individualized training.

Other highlights include the second annual "Resuscapalooza" Simulation Series, aka Resuscitation ABCD: High Yield Simulation, held as a primer for all rising PGY2s. New in-situ simulations held weekly are another exciting addition. Lastly, Dr. Suzanne Bentley and Ms. Lorraine Boehm received the Healthcare Simulation Commendation Award from NYC Health and Hospitals Simulation Center on April 25, 2018.

SECOND ANNUAL SIMULATION SYMPOSIUM

The second annual NYC Health + Hospitals simulation symposium was well received, the theme being Inspiring Growth: Leading Trends in Simulation & Debriefing. The symposium was designed for new and experienced healthcare practitioners, administrators, educators and researchers. The symposium provided an innovative showcase of global trends in healthcare simulation, and demonstrated how the right leadership, teamed with effective simulation and debriefing, can improve safety, quality, cost effectiveness, and efficiency in healthcare. Experts from all healthcare disciplines inspired attendees to reimagine current practice through the use of simulation strategies.

In addition to the inspiring presentations, we presented our annual awards for simulation achievements. The winners were:

- Ricardo Perez for leading regular simulation and debriefing sessions for Behavioral Health Teams at NYC Health + Hospitals/Lincoln.
- Andrew Restivo for leading Emergency Medicine Grand Rounds each month as well as bi weekly small group simulation sessions for the past four years at The Simulation Center hub at NYC Health + Hospitals/Jacobi.
- Nehad Shabarek for leading the Lincoln Simulation Center Simulation Week 2017 Fair & bi-weekly mock code practice, particularly in departments where codes are rare at NYC Health + Hospitals/Lincoln.
- Sheila Robinson and the NYC Health

 Hospitals/Queens C-Suite Team

 for being the first leadership executives to participate as a team in the

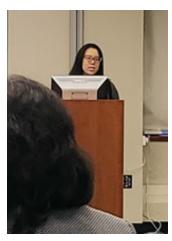
 "Introduction to Debriefing" course.
- Rohan Reid and the NYC Health +
 Hospitals/Queens Behavioral Health
 Team where the most staff were trained
 in the first month of the health system
 Debriefing for Behavioral Health Teams
 Performance Improvement project.

- Srinivas Reddy and Edward Chao &the NYC Health + Hospitals/Jacobi Trauma Team for incorporating bi-weekly simulation sessions focusing on trauma resuscitation into the surgical residency program at NYC Health + Hospitals/ Jacobi.
- Suzanne Bentley and Lorraine Boehm & the NYC Health + Hospitals/Elmhurst Simulation Team for the establishment of the Elmhurst satellite Simulation Center at NYC Health + Hospitals/ Elmhurst where courses are delivered on a daily basis, both core courses from the simulation hub at Jacobi and courses developed locally to meet the needs of Elmhurst healthcare teams.
- Komal Bajaj and Michael
 Meguerdichian, Simulation Center
 Clinical Directors who created the
 PEARLS Healthcare Debriefing Tool
 cognitive aid which was published in
 Academic Medicine, the premier journal
 in healthcare education.

We were privileged this year with two distinguished keynote speakers, Dr. Christine Park and Dr. Jillann Farmer.

Dr. Christine Park is a Clinical Professor in anesthesiology and co-Director of the Clinical Performance Center at the University of Illinois, Chicago, as well as the Immediate Past President, Society for Simulation in Healthcare. Dr. Park has a wealth of knowledge of Healthcare Simulation and different leadership perspectives and gave a stirring keynote talk on Simulation Leadership.

Dr. Jillann Farmer came to us from the United Nations where she serves as Director of Medical Services and leads the global healthcare teams which the United Nations deploys around the world. Dr. Farmer gave a notably inspiring talk about her journey as a leader of medical services in the United Nations.



Dr. Christine Park



Dr. Michael Meguerdichian



Dr. Jillann Farmer

SIMULATION FELLOWSHIP 2018



2018 Fellows and Simulation Center Staff.



The H+H Simulation Fellowship has had a record number of participants this year, with 14 fellows from across H+H. Fellows have engaged in projects focusing on obstetric emergencies, mass casualties, learning retention in PAs, pediatric sepsis, patient experience among others. The program benefited from both national and international visiting professors lending new perspectives and approaches to the complexity of medical culture, conversation, process and quality. We look forward to taking the feedback and lessons learned this year to continue to grow and polish for the incoming class.

Simulation Fellows Tricia Yusaf and Ryan Fraleigh practice OB skills.

VISITING PROFESSOR PROGRAM

The vibrant visiting professor program continued in 2018 with three highly regarded professors within Healthcare Simulation leading inspiring workshops for the NYC Health + Hospitals simulation program. The first, in March 2018, was Dr. Lisa Barker from the Jump Trading Simulation Center in Peoria, Illinois. Dr. Barker and her team in Peoria are leading the way in exploring Return on Investment (ROI) in healthcare simulation. The NYC Health + Hospitals Simulation Center was one of the large system simulation programs that partnered with the Peoria Center to develop the ROI Board game. We had an excellent day with Dr. Barker, the simulation fellows and invited guests learning more about how to prioritize

programs and think more deeply about return on investment in simulation.

In September, the program was fortunate to have a fellow Australian Professor and colleague, Dr Victoria Brazil. Victoria has coined the terminology "translational simulation" and gave us a thought provoking day on how to use simulation most effectively to transform culture within health facility units through the use of translation simulation or in-situ simulation. Finally, in December, we were honored to have Dr. Adam Cheng. Dr. Cheng is a leader in both debriefing and simulation research. Staff, fellows and invited guests were treated to an insightful day from Dr. Cheng.



Dr. Lisa Barker



Dr. Victoria Brazil



Visiting Professor Dr. Victoria Brazil with members of our staff and our 2018 Simulation Center Fellows.



Dr. Adam Cheng

SECOND ANNUAL HEALTHCARE SIMULATION WEEK



Simulation Fellow Barbara Dill and Dr. Anjoinette Minors demonstrate normal delivery.

NYC Health + Hospitals Simulation Center celebrated Simulation in Healthcare Week to raise awareness for the value of education with deliberate practice in the healthcare field, and to recognize all of the amazing simulation activities occurring throughout NYC Health + Hospitals facilities.

This year, we celebrated with simulation fairs in nine different H+H facilities: Jacobi, Harlem, Coney Island, Lincoln, Kings County, Queens, Bellevue, Elmhurst, and Correctional Health. We were amazed to see how each facility prepared for this event. They engaged different departments and programs including Nursing, Emergency Medicine, Obstetrics, Pediatrics, Neonatal ICU, Behavioral Health, Patient Safety, Fire Safety, Environmental Services, Hospital Police, Helping Healers Heal, and Public Relations to showcase how each department is using simulation to educate their staff and promote a culture of safety.

The feedback we received from participants was impressive. They were excited to see the many ways simulation can be applied in the healthcare setting and were eager to know how they can participate in future simulation activities!



Deputy Mayor Herminia Palacio visits Harlem Hospital to observe the Maternal Mortality Reduction Project scenario during Sim Week.

IN-SITU SUMMARY



Trauma residents performing a simulation.

Our Simulation In-situ program has evolved over the past 5 years and this year was our most successful year yet. We were able to collaborate with a number of different departments to run in-situ simulations including the Jacobi Medical Center Emergency and Trauma Departments, who are now running a combined monthly

in-situ drill. By practicing together, the teams have been able to improve their communication skills during real trauma emergencies.

The Simulation Center also rolled out the Maternal Mortality Reduction In-situ program (OB-ACLS) which involves the collaboration of multiple departments including obstetrics, anesthesia, pediatrics, and the rapid response teams.

This rollout has improved the preparedness for uncommon obstetric emergencies and has proven to be extremely beneficial to the participating teams.

MATERNAL MORTALITY REDUCTION PROGRAM



The new Maternal Mortality Reduction Program training debuted at NYC Health + Hospitals/Harlem during Healthcare Simulation Week.

In 2018, the NYC Health +Hospitals Simulation Center received a large grant from City Hall to reduce Maternal Mortality and Morbidity in NYC. Through this grant, the NYC Health + Hospitals Simulation Center was in a position to hire four full time staff consisting of two Nurse Educators and two Coordinating Managers. This has been a wonderful addition to The Simulation Center core team and will enable educational support and data collection for this program. Six obstetric mini-simulation labs will also be established at Harlem, Lincoln, Jacobi, Bellevue, Kings County and Elmhurst. These labs were all in the planning/construction stages in 2018 and are scheduled to be opened in 2019 and 2020.

In 2018, Dr. Daisy Grueso gave Grand Rounds on Obstetric Advanced Life

Support (OB-ALS) to all 11 NYC Health + Hospitals Obstetrics departments to commence awareness of the program. In-situ, or unit based simulations, were commenced in each labor and delivery and postpartum ward following education and assembly of a core team at each facility.

The Simulation Center also received a grant from the New York State Department of Health to develop curriculum to help educate other NYC hospitals regarding this city-wide initiative. This three-year grant will involve The Simulation Center training three educators from twenty three facilities in NYC, a combination of public and private facilities, to commence their own in-situ simulation programs in Women's Health.

We look forward to this program gaining more momentum in 2019.

# of OB	# of Staff
In-Situ	Training
Sessions	Encounters
27	262

Focus of CY18 activity included Grand Rounds education about the project, recruitment and onboarding of 4 new FTE to support the project, and identification and formalization of core teams at each of the 11 facilities to support the project.

SCHOLARLY SPOTLIGHT

The H+H Simulation team continues its efforts to participate and contribute to the larger simulation education community. One particular publication that premiered in Advances In Simulation, pushes the theoretical envelope regarding acquiring debriefing skills. Titled Cognitive Load Theory for Debriefing Simulations: Implications

for Faculty Development, the paper offers tactics through the lens of cognitive load theory and provides a toolkit for faculty development.

The task of, and learning the skills of debriefing, offers many different mental workloads. Balancing the task of engaging in debriefing conversations, managing lesson

objectives, facilitating varied learners and mitigating potential distractors to learning requires supporting frameworks. Moving forward we hope this theoretical paper translates into studies validating the framework measured by the quality of the debriefings.



Collaborative learning with Visiting Professor Adam Cheng.

SPECIAL SECTION: DR. MICHAELA KOLBE, PHD

The NYC Health + Hospitals Simulation Center was fortunate to host Dr. Michaela Kolbe, PhD as a visiting professor in March 2017. Dr. Kolbe has been studying team processes in healthcare for many years. Her particular research interest includes the social dynamics of "speaking up" across the authority gradient and across disciplines. Michaela has a PhD in psychology and is a member of the faculty at ETH Zurich as well as the director of the Simulation Center for the University Hospital Zurich. She publishes widely in psychological, healthcare, and simulation journals and books and is a member of the Editorial Board of BMJ STEL and Associate Editor of Advances in Simulation.



Michaela gave The Simulation Center staff and simulation fellows an insightful and thought-provoking day, beginning with research in healthcare simulation. She led us in a wonderful interactive and humorous session on the what, how, where and why of simulation research, completing the session with paradoxical recommendations

This was followed by a deep dive into the myths and facts of teamwork which really helped us understand more about what expert teamwork means and how it functions. We were honored to have Dr. Kolbe at the NYC Health + Hospitals Simulation Center.

2018 SIMULATION CENTER FELLOWS



Asha Roy:

"I am currently using simulation to assess needs gaps and how our ER team functions with trauma resuscitation and to refine how we conduct our 10 and 20 surveys."



Barbara Dill: "As director of Jacobi's Labor & Delivery unit, I have been immersed in in-situ training of OB-ACLS and reducing maternal mortality. As my fellowship year has been unfolding, I see so many ways simulation can be

utilized to enhance patient care and safety and improve outcomes. I am anxiously awaiting the ability to utilize the proposed JMC mini-lab on a routine basis to compliment departmental learning, process improvement, and quality initiatives."



Barbara Dilos: "I am currently involved in OB-ACLS in-situ simulations, pediatric and adult code in-situ simulations through the Elmhurst Hospital Simulation Center. Over the past three years I have been involved in Pediatric

and Adult Advanced Airway simulation courses and wish to develop interdepartmental Pediatric Code and Pediatric Advanced Airway simulation courses."



Daniel Barraez: I have developed a core team at NCB to start simulation. We meet once a month to discuss the issues at hand and how we can improve with the development of a curriculum and simulation. We have held sims on a variety of topics

including shoulder dystocia, preeclampsia, OB ACLS and hemorrhage.



Doreen Bennary:

"I am currently running simulation sessions for residents (pediatrics), PEM fellows and faculty as well as simulation for process improvement."



Emmerlisia Taylor:

"I am currently using simulation to address a need-based teaching deficit and to simulate awareness in different practices related to patient experience – customer service, deescalation of difficult

patients, employee scenarios, etc.."



Jerome Balbin: "The Simulation fellowship at NYC Health + Hospitals Simulation Center has provided me with the tools to create, deliver, and execute high-fidelity in-unit/ in-situ Simulations for the Jacobi Emergency Department to improve

our care to our level 1 trauma patients. It has been instrumental to improving interdisciplinary teamwork and communication. I hope to further use the skills I have acquired at NYC Health + Hospitals Simulation Center to continue more department-based Simulation initiatives to improve patient care and experience especially with interdepartmental relations. Just to name a few, we are developing Sim initiatives focusing on agitated patients, sepsis, faculty development, resident wellness, procedural training/recertification, and stroke codes. Ultimately, my goal is to become a leader in the field of Simulation and education which I believe is only possible because of the training and networking provided to me by the Simulation fellowship and NYC Health + Hospitals Simulation Center leadership and staff."

2018 SIMULATION CENTER FELLOWS CONTINUED



Joseph Oyibotsa: "Currently we use simulation at my facility to teach mock codes and practice medical and nursing skills with new and existing staff. We intend to use it in the future for ACLS, BLS, and learning opportunities during

new nursing/medical staff orientation."



Linda Russo: "Currently at King's County we are doing weekly resident Emergency Medicine simulation with monthly simulation with neurology residents, trauma residents, and pediatrics residents with a focus on medical knowledge and teamwork.

We are also doing bi-monthly medical student simulation with students rotating through emergency medicine, practicing recognition and treatment of airway and cardiac emergencies. Additionally we are doing insitu simulation on ED ward for workflow processes."



Mamie McIndoe: "Simulation provides an amazing opportunity to combine clinical skills and training with how we communicate with patients and families. Finding words that work and making a connection to our body language and the way

we say the words are one key to increasing patient satisfaction. I plan on supporting Elmhurst's simulations in that way. It's been an honor to be part of the fellowship program and especially to understand the mindset and perspective of our providers."



Marcia Clarke: "I am very excited to be a part of the NYC Health + Hospitals Simulation Center fellowship class of 2019. The experiential learning provided during pediatric in-situ simulation has been shown to improve performance and

confidence amongst healthcare providers. Using the principles of teamwork, communication, patient safety along with medical knowledge in a psychologically safe environment, my goal is to help bridge the gap between traditional learning and the hands-on approach to improve patient outcomes."



Ngozi Nwankpa: "The use of simulation in the Labor and Delivery suite at Harlem Hospital will help improve overall team performance, fine-tune the coordination of tasks, and enhance communication in clinical scenarios. I believe simulation

has the potential to shift culture as the concepts and behaviors that are practiced in small groups are applied more broadly throughout the hospital community."



Ryan Fraleigh: "At Lincoln, we have used simulation to successfully conduct a full-scale MCI/surge exercise in December 2018. The exercise utilized over 25 actors and simulated 50 patients in addition to the regular volume of the Emergency

Department. This is in addition to all the other classes, training, and in-situ simulation that occurs at the facility."



Tricia Yusaf: "Currently simulation is an integral part of patient safety and quality improvement on the Labor and Delivery unit at Queens Hospital. Some current simulations include: shoulder dystocia, postpartum hemorrhage, eclampsia, and

OB-ACLS. Simulation training of our resident physicians also adds safety to our unit and enhances their education as well."

THE SIMULATION CENTER RESOURCE TEAM



Katie Walker, MBA, RN Director/AVP Katie.Walker@nychhc.org



Komal Bajaj, MD, MS-HPEd Clinical Director Komal.Bajaj@nychhc.org



Juan Cruz, MICP **Education Manager** Juan.Cruz@nychhc.org



Joseph R. Masci, MD Research Director MasciJ@nychhc.org



Tatiana Malvoisin, MSMS Simulation Specialist Tatiana.Malvoisin @nychhc.org



Alex Lee, BS, RRT Simulation Specialist Alex-Sungbae.Lee @nychhc.org



Kimberley Miller, BBA Coordinating Manager Kimberley.Miller @nychhc.org



Michael Meguerdichian, MD, MHPED Clinical Director Medical Director at the Simulation Center/Harlem Michael.Meguerdichian @nychhc.org



Jessica Pohlman, MPA, NREMT-P, MEd Director of Operations Jessica.Pohlman @nychhc.org



Dajelyn Diaz, BA Assistant Systems Analyst DiazD20@nychhc.org



Oluwaseun Ajibade, RN Faculty: Coney Island Oluwaseun.Ajibade @nychhc.org



THE SIMULATION CENTER FACULTY

Regina Hammock, DO Faculty: Coney Island Regina.Hammock @nychhc.org



Kimberly Campbell-Taylor, RN Director of HCPPA/ Nurse Educator Kimberly.Campbell-Taylor @nychhc.org

Marlene Harford, RN

Director of HCPPA/

Nurse Educator

Marlene.Harford @nychhc.org



Suzanne Bentley, MD, MPH, FACEP Faculty: Elmhurst Suzanne.Bentley @nychhc.org



Thomas Parry, MD Faculty: Lincoln Simulation Center ParryT1@nychhc.org



Lorren Williams, MPA Coordinating Manager WilliamL46@nychhc.org



Lorraine D. Boehm, MSN Simulation Specialist BoehmL@nychhc.org



Andrew Restivo, MD Faculty: Jacobi Andrew.Restivo @nychhc.org



Ariel de Roche, MS Coordinating Manager DerochA1@nychhc.org



Andrew Ditchik, MD Faculty: Elmhurst DitchikA@nychhc.org



Nehad Shabarek, MD Medical Director: Lincoln Nehad.Shabarek @nychhc.org



Daisy Grueso, DO Faculty: Kings County **Hospital Center** Daisy.Grueso@nycchhc.org



David Viera, M.S., PA-C Director of Operations: Correctional Health VieraD@nychhc.org



Simulation Center Central
1400 Pelham Parkway South
Building 4, 2nd Floor, Room 200
Bronx, NY 10461
www.nychealthandhospitals.org/simulationcenter



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