

## Starting Simulation from Scratch

### Course Description:

Are you looking to start your own simulations at your EM program, but don't know where to start or where to get the funding? Community hospitals often face challenges in developing a viable in-house simulation program. This discussion will help provide ideas and tips for the EM programs that may not have the resources/funding to build a large simulation center.

The primary take home message in this Lightning Lecture is that in-house simulation is possible in smaller community hospital settings. This discussion will focus on the two major challenges in getting simulation started in community hospitals:

- I. Support from GME and Hospital
- II. Acquiring initial funding for simulation and task trainer equipment

### Course Objectives:

1. Provide key tips to get support from GME and hospital for starting in-house simulation.
2. Provide ideas on initial funding sources for acquiring task trainer equipment.
3. Provide ideas on initial funding sources for acquiring simulation equipment.

### Course Outline:

- I. Acquiring GME and Hospital Support
  - A. Why should they care about Simulation?
    1. Focus on PATIENT SAFETY
    2. Resident Education
    3. Procedural Competency
  - B. The Approach
    1. Find a "NEED"
    2. Determine your learner(s)
    3. Prepare a proposal
    4. Find the Decision Makers

5. Deliver the proposal and be ready to defend it

## II. Finding Funding for Task Trainers and Simulation Equipment

### A. Determine a "NEED" and be realistic

1. How many learners are involved?
2. How many faculty will be required?
3. How much space is available for use and for storage?
4. How much will it cost?

### B. Funding Options

#### 1. Graduate Medical Education

- a) Focus on procedural competency and medical education
- b) Find a "Need" that can be utilized across multiple residencies/fellowships

#### 2. Hospital System/Institution

- a) Providing task trainers and sim equipment will decrease risk to learners and patients
- b) Find a "Need" that can be utilized across multiple hospital departments (such as staff physicians, consulting services, and nursing)

#### 3. Hospital Departments that use resident services (EM, IM, Pediatrics, etc)

- a) Departments should have a duty to support resident education

#### 4. Donors

- a) Seek donors from within or outside of the department or hospital
- b) Catching the "Big Fish" is wonderful, but not always necessary

#### 5. Grants

- a) Hospital System Grants
- b) Other Grant Opportunities

#### 6. Residency Fund (if possible)

- a) An option for specific items of limited expense.
- b) Restrictions usually do apply