

ANNUAL REPORT

FY 2014-2015

Director Summary



OPERATING HIGHLIGHTS

As operations for the 2014-2015 academic year come to a close, the simulation center accomplished 1,900 hours of simulation activities and 19,000 hours of total participant hours to a total of 7,000 participants. Dr. Anne Beissel, a neonatologist visiting from Lyon, France has completed her 1 year Medical Simulation Fellowship.

FINANCIAL HIGHLIGHTS

Through financial reform and working with Medical Education, we are now able to correctly quantify and assess the overall operations in regard to utilization percentage. The

residency programs continue to drive the center's deficit as a function of operations. Additionally, our unit was asked to look at our financial operations to find ways to slender the budget; through that work, I now believe that we operate a lean operation.

Furthermore, we have been working with the Advancement team to seek out donors for ongoing and expansive operations in the future.

STRATEGIC HIGHLIGHTS

The strategic plan that was collaboratively built by key stakeholders (2013) is approximately 90% complete. As we press toward the future with re-accreditation of the School of Medicine and new leadership, we will anticipate and look forward to creating a new strategic plan to drive operational and strategic goals and objectives in the future.

LOOKING AHEAD

We are broadening simulation activities in the curriculum. We will be adding an additional simulation session in Microbiology, Biochemistry, and Neuroscience. All Total, that adds an additional four (4) hours of active learning for the first year medical students and an additional two (2) hours of active learning for the second year medical students. Moreover, we continue to look for opportunities (e.g. – intercessions) to add or increase active learning into the medical student curriculum.

We continue to broaden our years of simulation expertise within the international medical simulation community. Last year we were awarded a 2^{nd} place honor for a research abstract in program innovation for the International Meeting for Simulation in Healthcare (IMSH). We have submitted two (2) requests for podium presentations and four (4) research abstracts for the next IMSH conference.

Cameron Ricks, MD

Director

Statistics

Percentage by Month

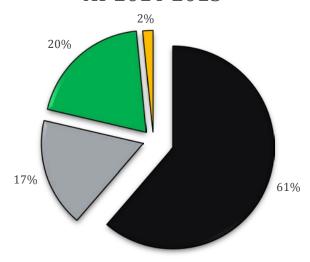
Month	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
SOM	32.1%	46.1%	75.5%	49.9%	73.7%	56.5%	85.5%	79.5%	50.1%	66.8%	83.4%	34.3%
Residencies	19.9%	16.2%	16.8%	17.9%	12.1%	21.9%	9.8%	16.0%	18.6%	21.2%	13.4%	28.8%
Outside	48.0%	37.7%	7.8%	30.4%	8.3%	19.9%	0.0%	4.6%	31.3%	8.1%	3.3%	36.9%
Nursing	0.0%	0.0%	0.0%	1.8%	5.9%	1.7%	4.7%	0.0%	0.0%	3.9%	0.0%	0.0%
TOTALS	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

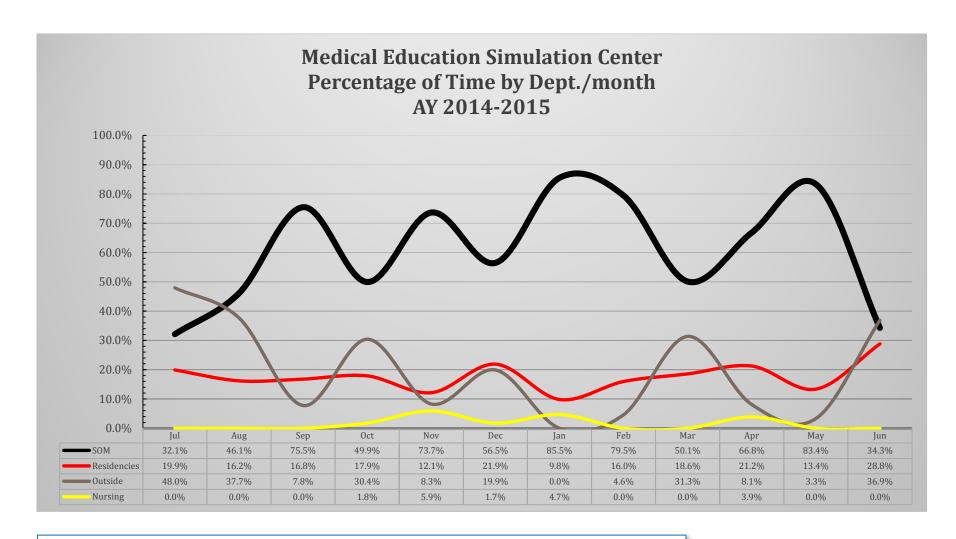
SOM	
	61%
Residencies	17%
Outside	20%
Nursing	2%

This represents the total time/month as allocated by department type.

On average, the School of Medicine functions/activities represented 61% of the total time

Percentage of Usage AY 2014-2015

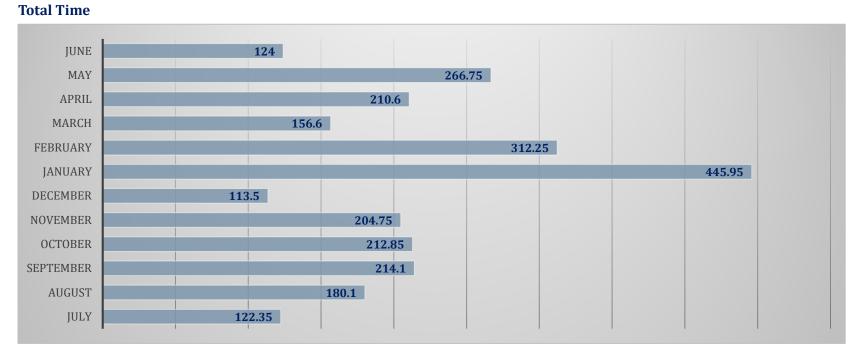




This is another visual representation the total time/month as allocated by department type. This graphic shows the monthly fluxuation in utilization by the various departments over the academic year.

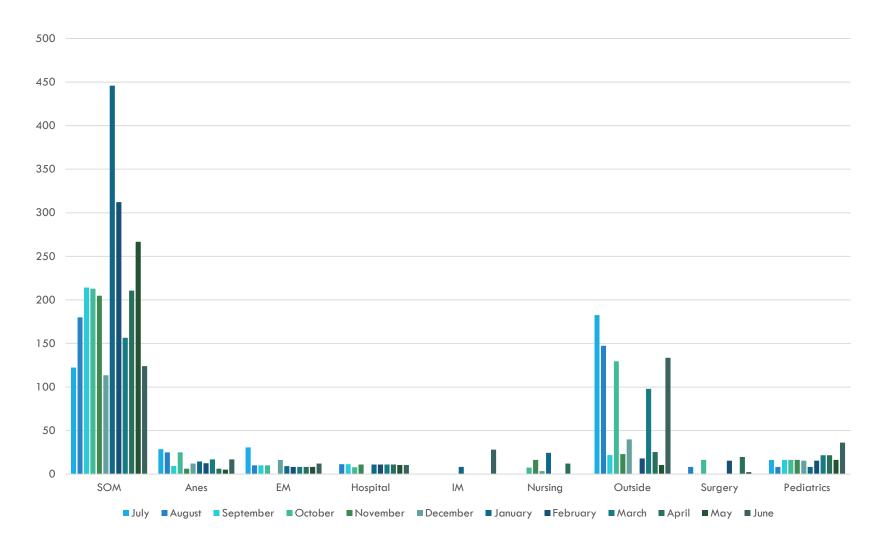
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School of Medicine Usage (by Month)

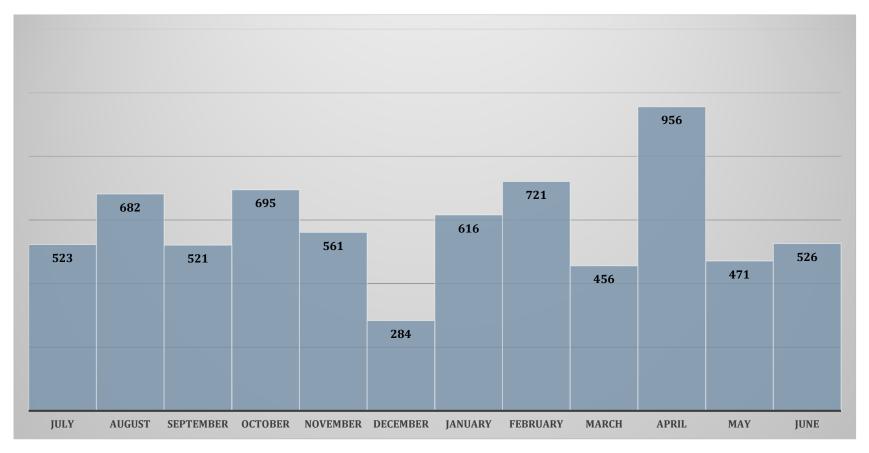


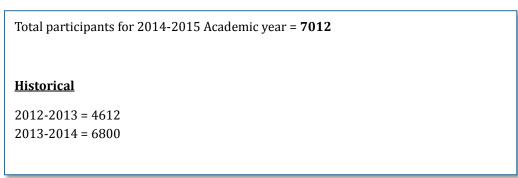
Total time 2563.8 hours over the course of the academic year for SOM related activities.

Usage of Simulation Center SOM vs. other departments Total Time

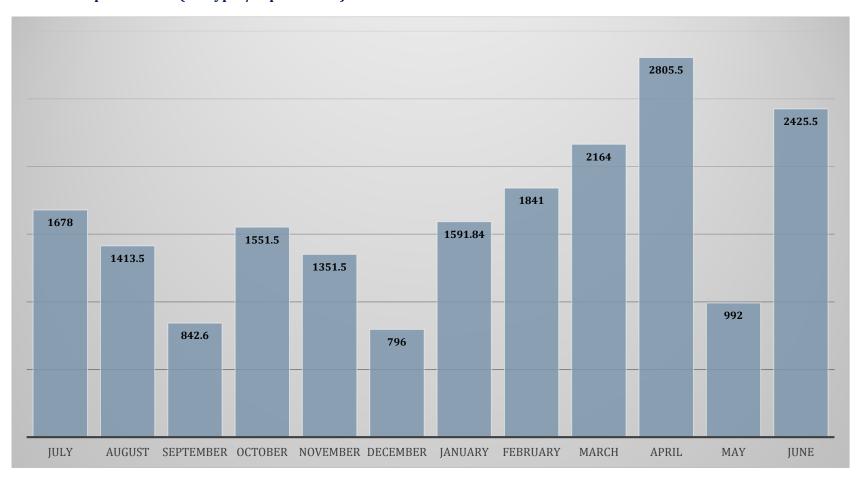


Total Participants (all Types/departments)



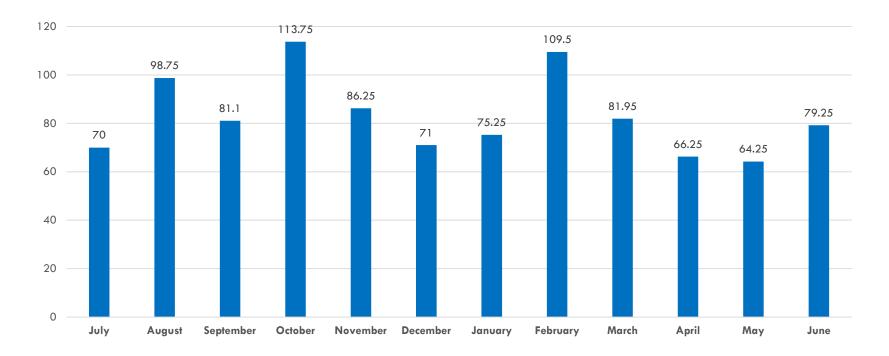


Total Participants Hours (all Types/departments)



This graphic represents the total student contact time for all students regardless of department or affiliation.

Simulation Preparation Time (all departments/all activities)



This graphic represents the total number of hours/month that the simulation staff is preparing for simulation-related activities.

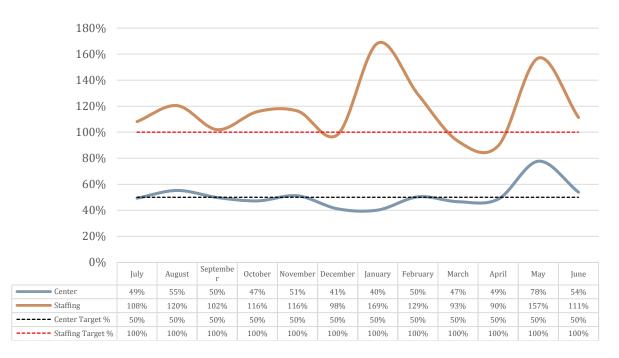
This includes reviewing the curriculum for the scheduled simulation activities, coordination with the facilitator/instructor. Preparing the simulator and/or environment, programming, and clean up after the session.

Simulation Center Utilization (center v. staff)

Utilization by Month

by Wollen		
Month	Center	Staffing
July	49%	108%
August	55%	120%
September	50%	102%
October	47%	116%
November	51%	116%
December	41%	98%
January	40%	169%
February	50%	129%
March	47%	93%
April	49%	90%
May	78%	157%
June	54%	111%

Overall Avg	51%	117%



Utilization of physical space and of staff is two different things; therefore, separate but comparative data is collected.

Overall, the average utilization of physical space (e.g. – the simulation center) was **51%**. The national average of physical space utilization last year was 57%. Our target physical space utilization was set at 50% because of the design limitations of the Medical Education Simulation center's four (4) simulation rooms to the two (2) debriefing rooms. Additional factors include the utilization of equipment in other locations outside of the simulation center.

The staffing utilization average reported at **117%**. This means that the simulation center simulation specialists are working above capacity when factoring in all simulation and background preparatory time. In 2012-2013 academic year, this staffing utilization reported at 106% with a total of 3 full time equivalent simulation specialists. The 117% is a direct result of the increased workload place upon the 2 full time equivalent staff.

Highlights

Increased Medical Student Core Simulation Sessions

- Added one (1) additional Biochemistry simulation session
- Added one (1) additional Microbiology simulation session
- Added one (1) additional Neuroscience simulation session

MS 1 Year ↑ two (2) hours of simulation

MS 2 Year ↑ four (4) hours of simulation

International Meeting on Simulation in Healthcare (IMSH)

 Won 2nd place for abstract in Program Innovation, published in December 2014 edition of Simulation in Healthcare Journal. Ricks, C., Beaulieu, K., Gohil, S., Rahman, A. High Fidelity Medical Student Microbiology Simulation. Presented at IMSH 2015. Published in Simulation in Healthcare: The Journal of the Society for Simulation in Healthcare, December 2014 (9:6), Pg. 464.

Published a simulation scenario case to MedEd Portal

Raphael D, Lin S, Canales C, Beaulieu K, Ricks C. Obstructive Mucus Plug in the Prone Position. MedEdPORTAL Publications; 2015. Available from: https://www.mededportal.org/publication/10016
http://dx.doi.org/10.15766/mep 2374-8265.10016

Submitted Presentations

- "Blazing a New Trail for Telesimulation in Medical Education" Podium Presentation submission for IMSH 2016. Pending approval
- "Simulation Fellowship: Our Experience" Podium Presentation submission for IMSH 2016. Pending approval

Submitted Abstracts

- Foley Skills Competency for 2nd Year Medical Students
- Emesis during Simulation: a low cost approach
- Pitfalls of International Tele simulation
- Residents as Teachers: a randomized controlled non-inferiority trial

Open Research/IRB

- Health Care Practitioners and Medical Simulation: a Comprehensive Analysis
- A retrospective analysis of Learning Decay: Medical Education
- Residents as Teachers: a randomized controlled non-inferiority trial
- A Trans-Atlantic High Fidelity Mannequin Based Tele Simulation Experience: a pilot study
- Foley Competency in Undergraduate Medical Education
- Assessment of a Simulation-Based Ventriculostomy Management Training Program for Anesthesiology Residents

Representative in international simulation organization

- Keith Beaulieu is a member of the Society for Simulation in Healthcare (SSH) Accreditation Committee
- Keith Beaulieu has been active in the expansion of the Society for Simulation in Healthcare (SSH) Accreditation program through his participation in the development of the accreditation standards' companion guides.
- Keith Beaulieu has represented UC Irvine on two (2) accreditation site reviews, both programs were accredited.

Contact Information

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