Making Bad Things Happen for Good Reasons

A practical approach to mock emergencies

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Objectives

1. Discuss benefits of mock emergencies for multidisciplinary team building
2. Create a realistic mock emergency scenario
3. Run a mock emergency exercise
4. Perform an effective post emergency debrief
Team Building Challenge

SO WHAT’S IT GOING TO BE: PAINTBALL CORONARY, OR RAFT BUILDING HERNIA?
Why Sim?
Building Clinical Skills
HALO


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Team Building
Team Building

- Trust
- Effective Communication
- Commitment
- Accountability
- Results
Trust

I’ve got your back!
Communication

Hierarchy

Social Structure

Superior’s Receptivity
Scenario
Ability to Manage Crisis

The secret of crisis management is not good vs. bad, it’s preventing the bad from getting worse.

Andy Gilman

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# Planning Your Sim

## SCENARIO TEMPLATE

<table>
<thead>
<tr>
<th>Learning Objectives:</th>
<th>Observable Actions:</th>
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<tbody>
<tr>
<td>1</td>
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<table>
<thead>
<tr>
<th>Staging:</th>
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<tr>
<td>Environmental:</td>
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<th>Equipment:</th>
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<th>Psychological</th>
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<th>Narrative</th>
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<th>Notes:</th>
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Learning Objectives:

1 Communication of GOCD vs. potentially reversible cause of death

2 Recognize over-sedation
Observable Actions:

• Decision making – chest compressions
• Discussion re: GOCD vs potentially reversible condition
• State – over sedation/requires reversal
• Decide which/both agents to give
• Check reversal dose Narcan
• Check reversal dose Anexate
<table>
<thead>
<tr>
<th>Staging:</th>
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<tbody>
<tr>
<td>Environmental:</td>
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<tr>
<td>Chart with GOCD</td>
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<tr>
<td>Procedural sedation sheet</td>
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<tr>
<td>Equipment:</td>
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<tr>
<td>Code box</td>
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<tr>
<td>Contrast reaction kit/drug</td>
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<tr>
<td>cupboard</td>
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<tr>
<td>Psychological</td>
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<tr>
<td>Pre-brief</td>
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<tr>
<td><strong>Narrative</strong></td>
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<tr>
<td>• 67 year old female inpatient</td>
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<tr>
<td>• Advanced cholangiocarcinoma</td>
</tr>
<tr>
<td>• Obstructed bile ducts</td>
</tr>
<tr>
<td>• Biliary tube requested for pain relief (8-10/10)</td>
</tr>
<tr>
<td>• Stable, alert, oriented x 3</td>
</tr>
<tr>
<td>• V/S WNL (on monitor)</td>
</tr>
<tr>
<td>• Lab values WNL (on white board &amp; GODC = C1)</td>
</tr>
</tbody>
</table>
Run Your Sim
Run Your Sim
Observable Actions:

• State – over sedation/requires reversal
• Decide which/both agents to give
• Check reversal dose Narcan
• Check reversal dose Anexate
√ • Decision making – chest compressions
√ • Discussion re: GOCD vs potentially reversible condition

Notes:

• Good communication among members
• Matt T – good at closing loops
• Open discussion ahead of time - C1
• Reminders C1 has no chest compressions
Debrief

“Let us run the race where all may win, rejoicing in their successes — as our own — & mourning their failures, wherever they are — as our own. We are all one Nurse.”

Florence Nightingale 1873
Debrief

- Opening
- Feedback
- Learning Objectives
- ORIP:
  - Observe
  - Remark
  - Inquire
  - Probe
Debrief

Well?

Work on?

Take Home lessons
Take Home Points

- Remember your objectives
  - Steer your sim to meet them
- The sim will not go as you envisioned
  - Get out of it what you need
- Debrief
  - Celebrate the good
  - Address the bad
    - Non-judgementally
Questions & Comments

KEEP CALM AND ASK QUESTIONS
References

1. Brindley, P.G., Suen, G.I. & Drummond, J. (). Medical simulation: “See one, do one, teach one…just not on my Mom” Part One: Why simulation should be a priority. Canadian Journal of Respiratory Therapy
References