Sentara Medical Group (SMG) is comprised of over 170 primary care and specialty practices across Hampton Roads Virginia, Northern Virginia, and Northeastern North Carolina.

In 2012, the Nursing and Regulatory Department of SMG performed a gap analysis to assess staff educational needs. Focus areas identified included:
- Medication Safety
- Infection Prevention
- Emergency situation management

This information was used to develop an orientation program for newly hired clinical staff (RNs, LPNs, and MAs). In addition, an annual skills assessment program, using simulation, was developed and offered on site at physician practices.

Historically care in many ambulatory settings was provided by LPNs and MAs. In SMG there has been a focus on increasing the presence of RNs in medical offices.

In 2013 RNs were 14% of the new staff and in 2014 it increased to 17%. In 2015 RNs account for 28% of our new staff.

Simulation in the Ambulatory Setting
In the ambulatory setting much of what the clinical staff does is task oriented. The clinical interactions with patients are episodic and short in duration. Learning to take a BP, administer an injection or perform an ear irrigation may be accomplished using a “task trainer”.

Simulation can be used to represent experiences that staff may confront in real life situations. It allows psychomotor skills to be evaluated and validated.

Anatomical models can be used to teach skills such as injections, IV starts and PPD placement. Models can also be used for ear irrigation, suture/staple removal or ace wraps. Low tech “human look a-likes” allow for role playing during mega code scenarios.

Simulation allows new and current staff to practice skills as well as validate competencies during orientation. The task trainers give staff the ability to use real instruments to practice basic skills

Skills Stations
- Medication Safety
- IM injections
- PPD placement
- Pediatric injections
- AED Use
- Ear Irrigations
- Wound care and Unna Boot
- Blood pressure readings
- Emergency situation management
- Nebulizer and oxygen use
- Suture and staple removal
- Peripheral IV training with dressing changes

Clinical Orientation Program
- May 2013, SMG presented our first clinical orientation for all of the staff of the Northern Virginia sites, included were skills stations to validate competency. This was the first opportunity to use the simulation equipment with clinical staff (RNs, LPNs, and MAs) from the SMG practices.
- Clinical orientation includes 8 hours of classroom training including “hands on” skills competency evaluation using “task trainers”. In addition, staff work with a preceptor to complete a role specific core competency checklist. Over 400 staff have attended the new hire orientation program since 2013.

Annual Skills Competency Validation
- In addition to orientation, annual skills competency assessment for the clinical staff is offered at SMG practices. The skill stations are based on the practice specialty. Staff competency is validated for injections, wound care, ear irrigation, blood pressure readings, AED use, and emergency situation management.
- Medication administration is reviewed if medications are administered within the practice. Pediatric injection simulation is offered at all pediatric sites.
- In 2013, over 250 staff from 70 practice sites participated. In 2014 over 320 staff attended, and in 2015 over 450 staff attended.

Program Evaluation
- An electronic survey is completed by staff attending orientation. Response has been positive regarding use of simulation for skills competency validation.
- An Education Needs Assessment is completed annually by staff to help determine new education opportunities.

Significance
- Simulation has a significant role in the orientation of newly hired clinical staff and the annual assessment of staff competency.
- Low tech and mobile simulation equipment facilitates skills competency validation for a large geographically challenging clinical staff model.

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