South Carolina Department of Labor, Licensing and Regulation
South Carolina Board of Nursing
Synergy Business Park • Kingstree Building • 110 Centerview Dr. • Columbia, SC 29210
NURSEBOARD@llr.sc.gov • 803-896-4300 • www.llr.sc.gov/nurse

Position Statement: Use of Simulation in Pre-Licensure Nursing Programs

Formulated: July 2018

Revised: July 2024

Reviewed:

Definitions

Debriefing: a reflective experience following a simulation facilitated using an evidence-based debriefing model to identify and close gaps in learning and performance (INACSL Standards Committee, 2021; Lioce et al., 2020). It includes active reflection, cognitive reframing, and transfer of learning to future situations.

Evaluation: Method to determine the quality of a simulation-based learning experience. This includes formative, summative, process, or program evaluation (Lioce et al., 2020).

Pre-Briefing: The sharing of data before the simulation-based learning experience to prepare the learner to meet the scenario objectives (Lioce, et al., 2020).

Simulation: an experiential learning technique designed to replicate real-life situations in an immersive, interactive manner (INACSL Standards Committee, 2021; Lioce et al., 2020)

Simulation-Based Learning Experience: A framework of simulation activities using different modalities to simulate real-life situations. (Lioce, et al., 2020). Examples of modalities include virtual simulation, low to high-fidelity, telehealth, virtual reality, simulated patients, hybrid, etc.

Traditional Clinical Experience: practice in any healthcare delivery setting where the student provides direct care to patients under the supervision of an instructor or preceptor (NCSBN, 2023).

Simulation Substitution Guidelines for Pre-Licensure Nursing Programs

- Programmatic outcomes and course learning objectives shall guide the integration of simulation into the nursing curriculum. Programs shall document how simulation activities are linked to programmatic outcomes through curriculum mapping.
- The program may use simulation as a substitute for traditional clinical experiences, not to exceed 50% of its clinical hours for a given course/clinical specialty. Simulations must adhere to the National Council of State Boards of Nursing Simulation Guidelines (NCSBN, 2023) and be balanced with clinical experiences based on the availability of clinical sites and the quality of hands-on experiences.

- Based on the most recent evidence, a simulation-based learning experience can effectively be used as a quality clinical experience if designed according to healthcare simulation standards of best practice (Dolan et al., 2021; Padilha et al., 2019, NCSBN, 2023)
- Programs substituting simulation for traditional clinical experiences must adopt and adhere to the most up-to-date version of the International Nursing Association for Clinical Simulation and Learning (INACSL) Standards of Best Practice:
  Simulation in their entirety (INACSL Standards Committee, 2021).
- Based on the most recent evidence, simulations can replace clinical in a 2:1 ratio if following INACSL standards of best practice. (Sullivan et al., 2019).
- Programs incorporating human roles (standardized participants) must also adhere to the Association of Standardized Patient Educators (ASPE) Standards of Best Practice (Lewis et al., 2017).
- The program shall have adequate fiscal, human, and material resources and equipment to meet the objectives and outcomes of the simulation.
- The program faculty are prepared and qualified to facilitate the simulation and debriefing through documented formal training and ongoing professional development in the use of simulation.
- The program has an administrative commitment to support the sustainability of maintaining best practices, including ongoing faculty training and evaluation of simulation program outcomes. It is recommended that the simulation faculty and/or staff pursue certification to show competence and continuing education.
- The program shall identify and adhere to policies and processes governing best practices of simulation-based learning, including but not limited to:
  - Pre-Briefing
    - Mechanisms to protect and address physical and psychological safety
    - Confidentiality procedures
  - Facilitation: Qualified faculty and simulation lab personnel, oriented and trained using established policies and procedures.
  - Evidence-based simulation design
  - Debriefing methodology
  - Professional Integrity: Upholds Healthcare Simulationist Code of Ethics.
  - Evaluation: Simulation quality assurance measures including evaluation using standardized and reliable instruments (ex. SET-M).
- The program shall provide evidence of compliance to these standards to the SCBON on an annual basis by completing the simulation survey provided to the Deans & Directors.

References

Dolan, H., Amidon, B. J., & Gephart, S. M. (2021). Evidentiary and theoretical foundations for virtual simulation in nursing education. *Journal of Professional Nursing*, *37*(5), 810–815. https://doi.org/10.1016/j.profnurs.2021.06.001

INACSL Standards Committee. (2021). Healthcare Simulation Standards of Best Practice™. *Clinical Simulation in Nursing, https://doi.org/10.1016/j.ecns.2021.08.018.*

Lewis, K.L., Bohnert, C.A., Gammon, W.L., Holzer, H., Lyman, L., Smith, C., Thompson, T.M., Wallace, A., & Gliva-McConvey, G. (2017). The Association of Standardized Patient Educators Standards of Best Practice. *Advances in Simulation, 2*(10), 1-8.

Lioce L. (Ed.), Lopreiato J. (Founding Ed.), Downing D., Chang T.P., Robertson J.M., Anderson M., Diaz D.A., and Spain A.E. (Assoc. Eds.) and the Terminology and Concepts Working Group (2020), Healthcare Simulation Dictionary –Second Edition. Rockville, MD: Agency for Healthcare Research and Quality; September 2020. AHRQ Publication No. 20-0019. DOI: https://doi.org/10.23970/simulationv2.

NCSBN Simulation Guidelines for prelicensure nursing education programs. (2023). https://www.ncsbn.org/public-files/16_Simulation_Guidelines.pdf

Padilha, J. M., Machado, P. P., Ribeiro, A., Ramos, J., & Costa, P. (2019). Clinical Virtual Simulation in Nursing Education: Randomized controlled trial. *Journal of Medical Internet Research*, *21*(3). https://doi.org/10.2196/11529

Sullivan, N., Swoboda, S. M., Breymier, T., Lucas, L., Sarasnick, J., Rutherford-Hemming, T., Budhathoki, C., & Kardong-Edgren, S. (Suzie). (2019). Emerging evidence toward a 2:1 clinical to simulation ratio: A study comparing the traditional clinical and simulation settings. *Clinical Simulation in Nursing*, *30*, 34–41. https://doi.org/10.1016/j.ecns.2019.03.003