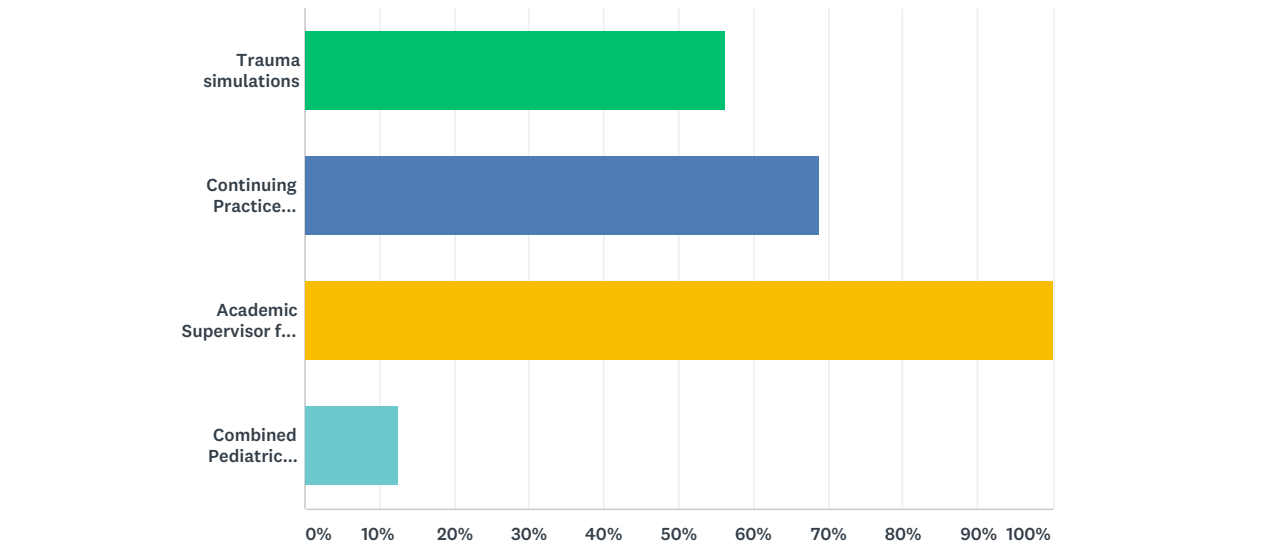


Q1 Have you participated in simulations held in our ED (in situ simulations)? Select all that apply

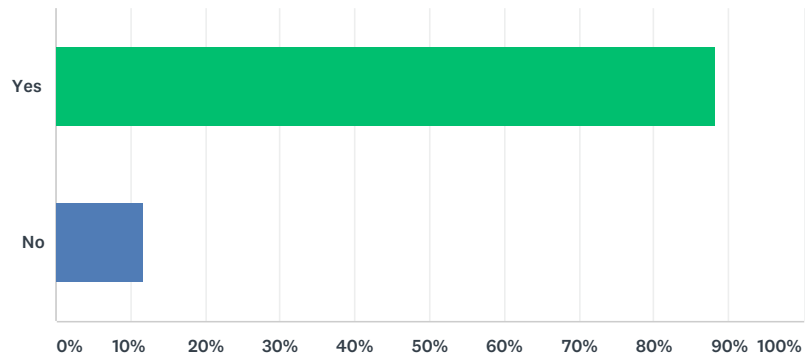
Answered: 16 Skipped: 1



ANSWER CHOICES	RESPONSES	
Trauma simulations	56.25%	9
Continuing Practice (Staff-level) Simulation (***)note that in this survey, this is the main type of simulation we are seeking feedback on) (held q4weeks)	68.75%	11
Academic Supervisor for Resident Simulations	100.00%	16
Combined Pediatric Emergency/NICU/Obs+Gyne Megacode Simulations (held 1-2 times a year)	12.50%	2
Total Respondents: 16		

Q2 Did your professional training include regular simulation training (in situ or simulation center based) as part of its curriculum?

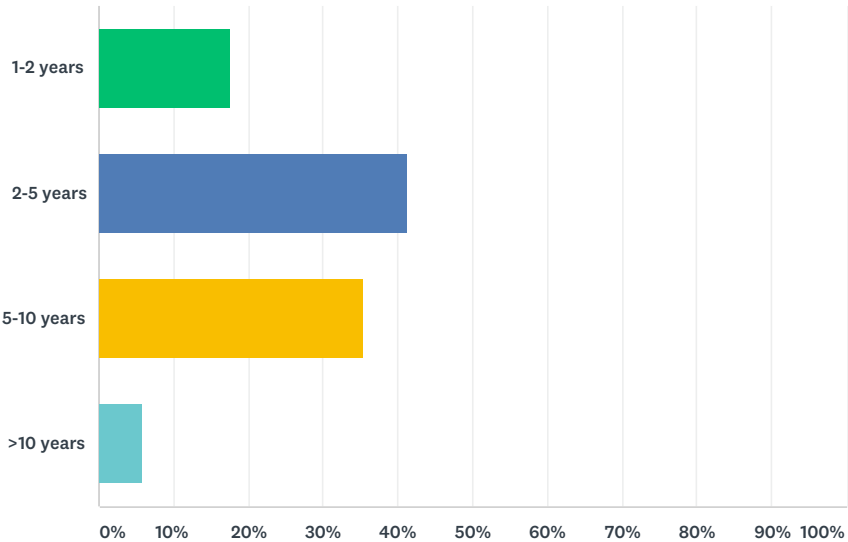
Answered: 17 Skipped: 0



ANSWER CHOICES		RESPONSES	
Yes		88.24%	15
No		11.76%	2
Total Respondents: 17			

Q3 How many total years have you been practicing/working in a Pediatric Emergency Setting? Include time not at McMaster. Do not include years of training in your total.

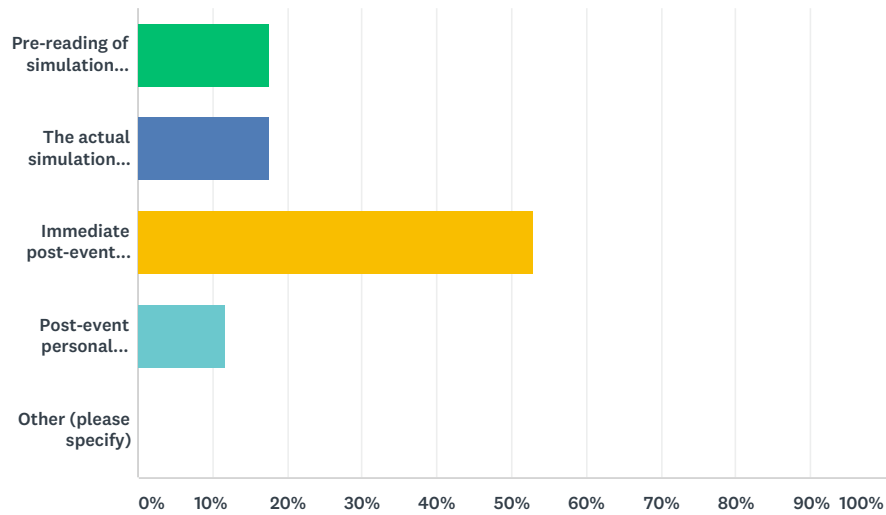
Answered: 17 Skipped: 0



ANSWER CHOICES		RESPONSES	
1-2 years		17.65%	3
2-5 years		41.18%	7
5-10 years		35.29%	6
>10 years		5.88%	1
TOTAL			17

Q4 What component of simulation contributes the most to your learning when you participate in our Continuing Practice Simulations?

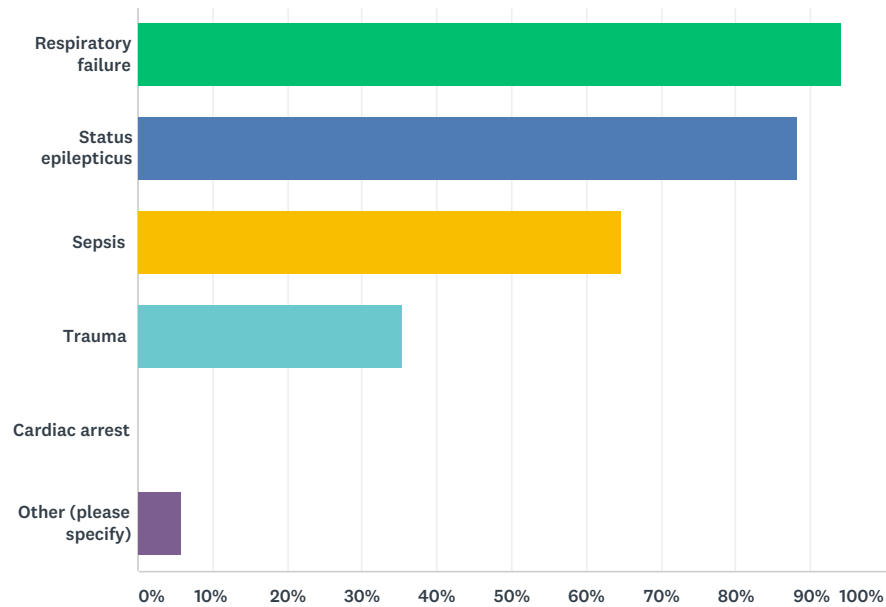
Answered: 17 Skipped: 0



ANSWER CHOICES	RESPONSES	
Pre-reading of simulation topic prior the simulation	17.65%	3
The actual simulation event	17.65%	3
Immediate post-event debriefing	52.94%	9
Post-event personal reflection, and readings on personal time	11.76%	2
Other (please specify)	0.00%	0
TOTAL		17

Q5 What are the three (3) most common resuscitations that you have encountered in actual clinical practice working in the McMaster Pediatric Emergency Department?

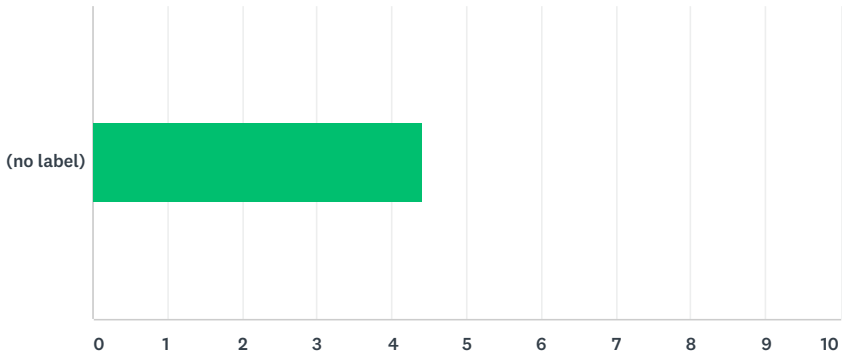
Answered: 17 Skipped: 0



ANSWER CHOICES	RESPONSES	
Respiratory failure	94.12%	16
Status epilepticus	88.24%	15
Sepsis	64.71%	11
Trauma	35.29%	6
Cardiac arrest	0.00%	0
Other (please specify)	5.88%	1
Total Respondents: 17		

Q6 Do you agree that it is important to cover rare but critical resuscitations (e.g. TCA overdose, difficult airway) in our simulations?

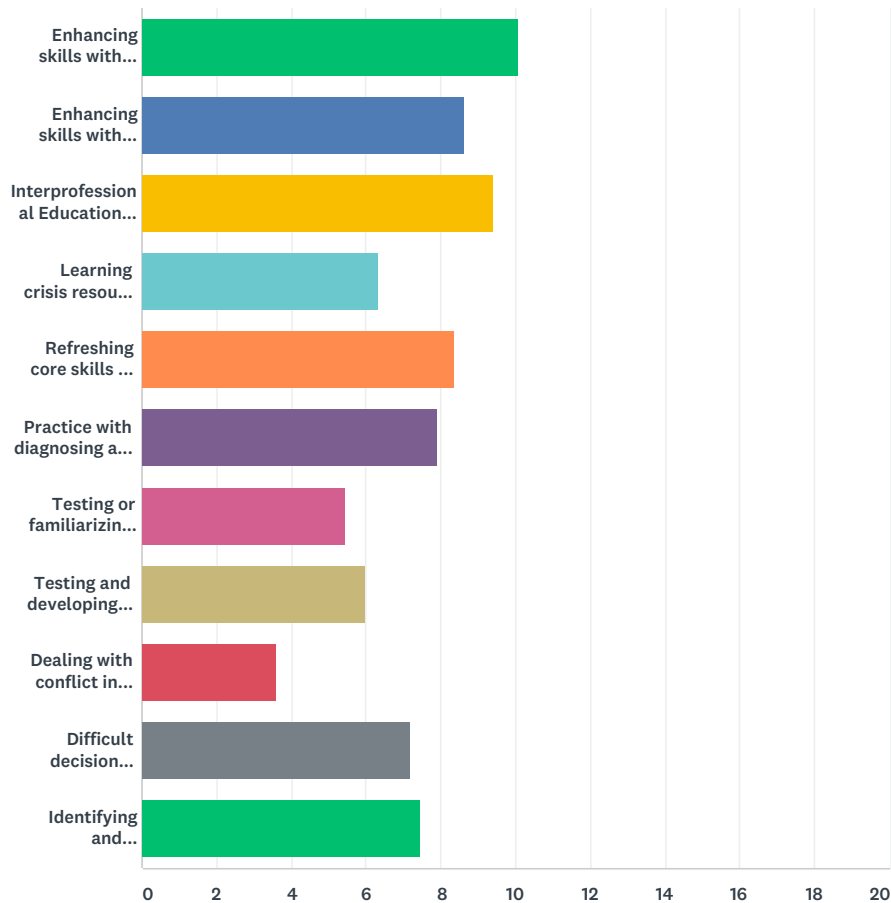
Answered: 17 Skipped: 0



	STRONGLY DISAGREE	DISAGREE	NEUTRAL	AGREE	STRONGLY AGREE	TOTAL	WEIGHTED AVERAGE
(no label)	0.00% 0	0.00% 0	0.00% 0	58.82% 10	41.18% 7	17	4.41

Q7 What objectives or skills would you like to work on in future Continuing Practice Simulations? Please rank your top five (5) choices, with 1 being most important.

Answered: 17 Skipped: 0

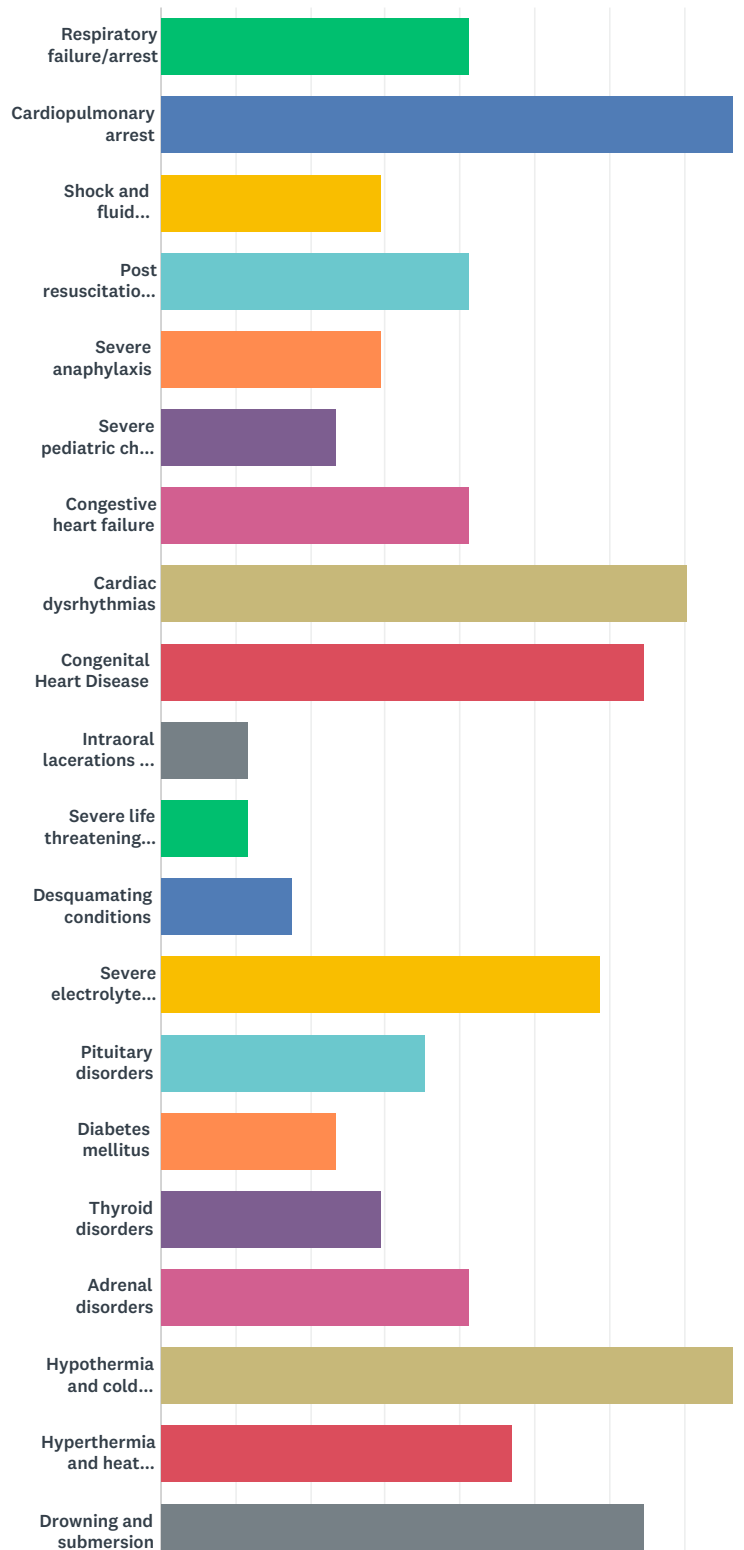


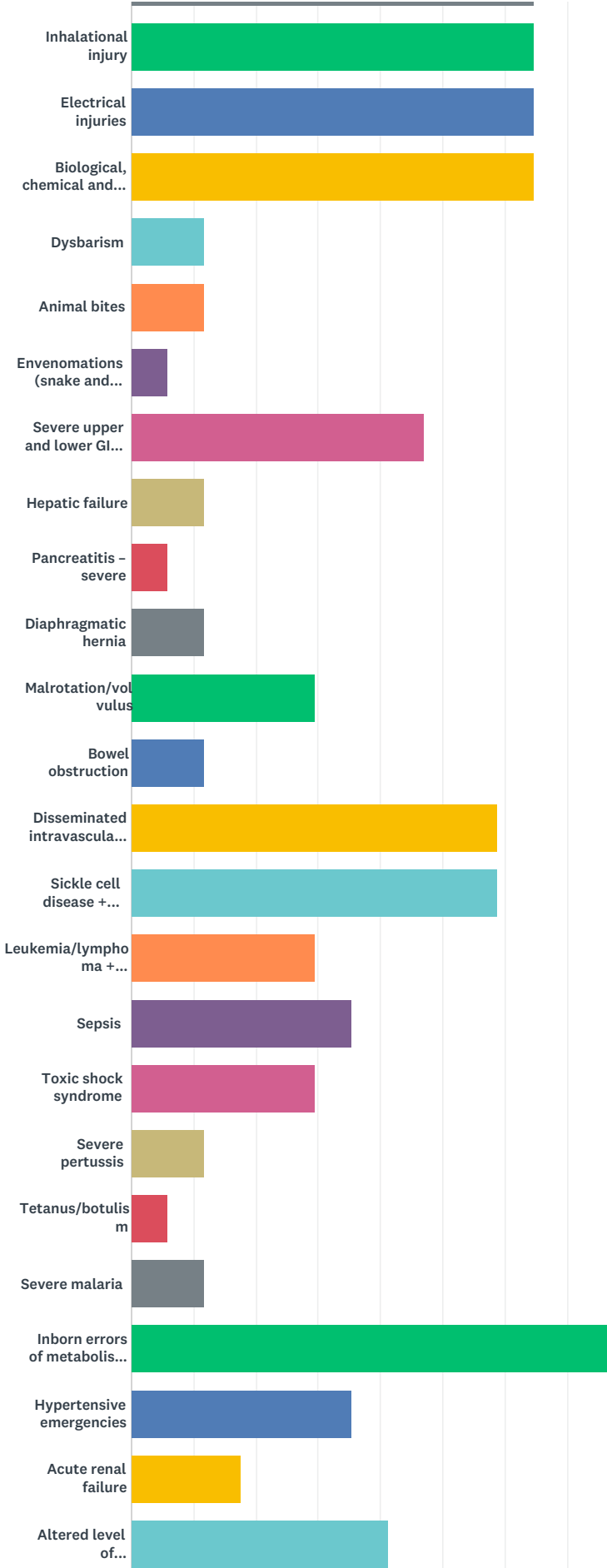
	1	2	3	4	5	6	7	8	9	10	11	TOTAL
Enhancing skills with critical Pediatric Emergency procedures (e.g. chest tube insertion, intubation, casting)	50.00% 7	21.43% 3	21.43% 3	0.00% 0	7.14% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	14
Enhancing skills with critical but rare Pediatric Emergency procedures (e.g. pericardiocentesis, burr holes, surgical airways)	14.29% 2	28.57% 4	14.29% 2	21.43% 3	7.14% 1	7.14% 1	0.00% 0	7.14% 1	0.00% 0	0.00% 0	0.00% 0	14
Interprofessional Education, Teamwork and Communication skills in crisis scenarios	41.67% 5	16.67% 2	33.33% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8.33% 1	0.00% 0	12

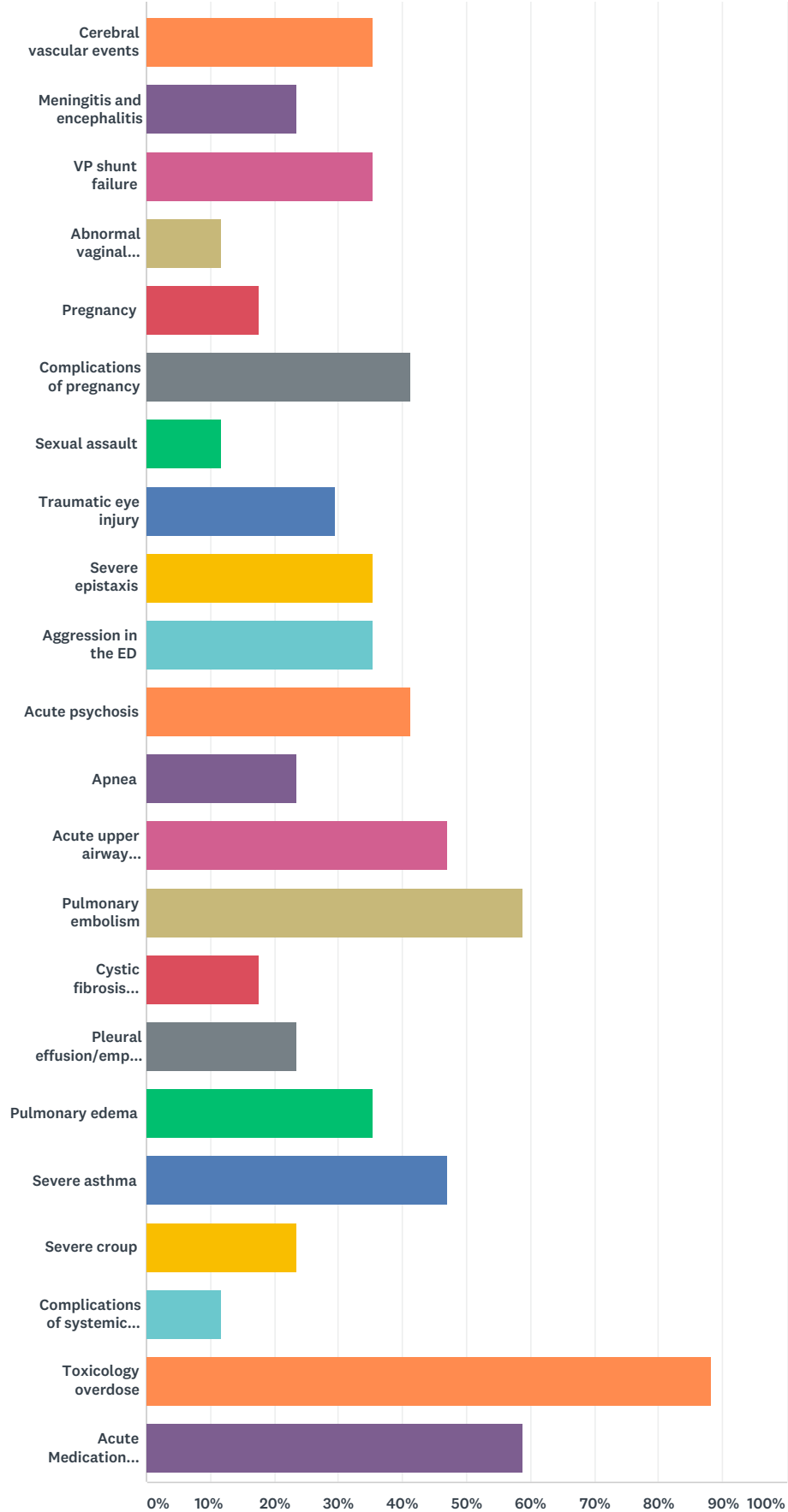
Learning crisis resource management skills in resuscitations	0.00% 0	0.00% 0	16.67% 1	33.33% 2	16.67% 1	0.00% 0	16.67% 1	0.00% 0	0.00% 0	0.00% 0	16.67% 1	6
Refreshing core skills and algorithms in Pediatric Emergency care (i.e. PALS, NRP, CPR, Defibrillation)	9.09% 1	27.27% 3	27.27% 3	18.18% 2	9.09% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9.09% 1	11
Practice with diagnosing and managing rare pediatric resuscitations.	10.00% 1	10.00% 1	10.00% 1	10.00% 1	50.00% 5	10.00% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	0.00% 0	10
Testing or familiarizing yourself with new protocols, order sets or pathways	0.00% 0	0.00% 0	0.00% 0	28.57% 2	14.29% 1	0.00% 0	28.57% 2	14.29% 1	0.00% 0	0.00% 0	14.29% 1	7
Testing and developing quality improvement measures before implementing them into ED care.	0.00% 0	0.00% 0	12.50% 1	25.00% 2	12.50% 1	0.00% 0	12.50% 1	25.00% 2	12.50% 1	0.00% 0	0.00% 0	8
Dealing with conflict in acute care situations (interprofessional, or between patients/families and healthcare teams)	0.00% 0	0.00% 0	0.00% 0	0.00% 0	20.00% 1	0.00% 0	0.00% 0	0.00% 0	60.00% 3	20.00% 1	0.00% 0	5
Difficult decision making/diagnostic dilemmas during resuscitations	0.00% 0	30.00% 3	10.00% 1	20.00% 2	10.00% 1	10.00% 1	0.00% 0	0.00% 0	0.00% 0	20.00% 2	0.00% 0	10
Identifying and highlighting safety gaps	9.09% 1	9.09% 1	9.09% 1	27.27% 3	27.27% 3	9.09% 1	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9.09% 1	11

Q8 Please select from the following list, clinical presentations where you feel there is an educational need to address with future Continuing Practice Simulations. Please select all that apply. (NB*** These options are from the 2013 Royal College of Physicians and Surgeons of Canada objectives for training in Pediatric Emergency Medicine)

Answered: 17 Skipped: 0







ANSWER CHOICES

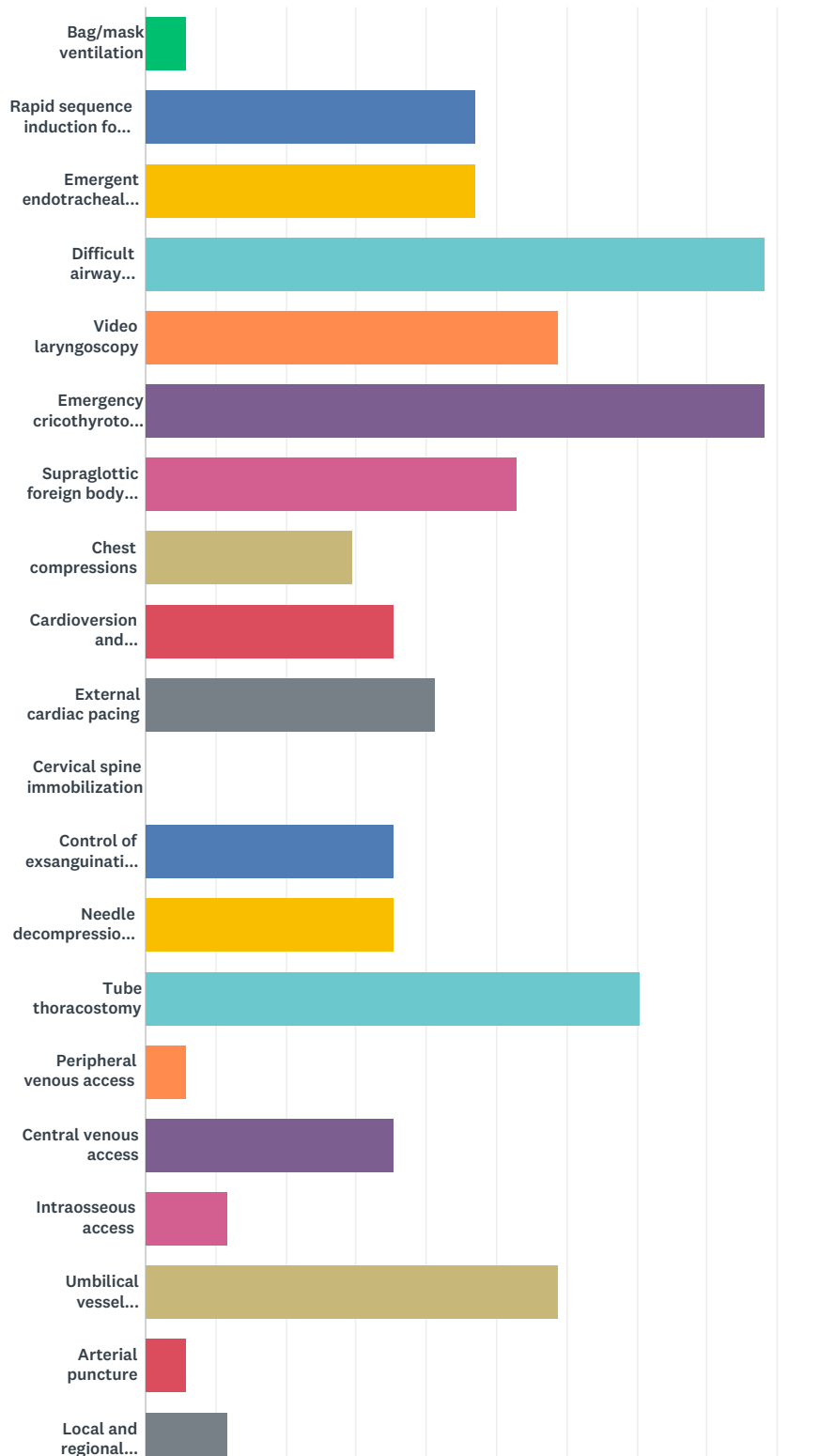
RESPONSES

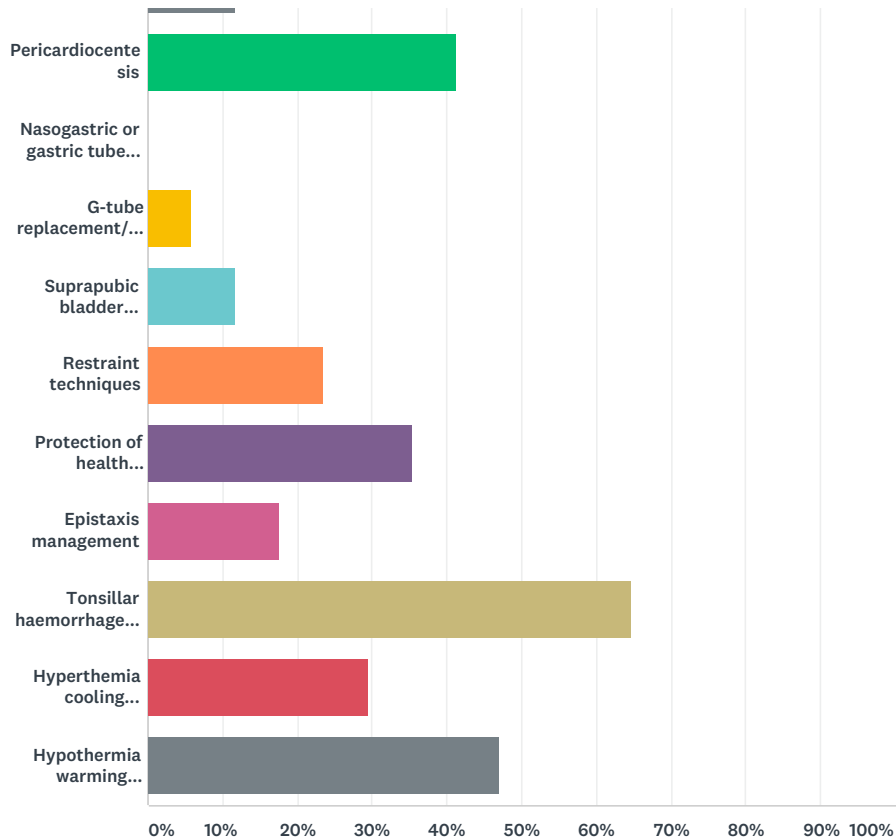
Respiratory failure/arrest	41.18%	7
Cardiopulmonary arrest	76.47%	13
Shock and fluid resuscitation	29.41%	5
Post resuscitation management	41.18%	7
Severe anaphylaxis	29.41%	5
Severe pediatric chest pain	23.53%	4
Congestive heart failure	41.18%	7
Cardiac dysrhythmias	70.59%	12
Congenital Heart Disease	64.71%	11
Intraoral lacerations and soft tissue injuries	11.76%	2
Severe life threatening rashes	11.76%	2
Desquamating conditions	17.65%	3
Severe electrolyte disturbances (sodium, potassium, calcium)	58.82%	10
Pituitary disorders	35.29%	6
Diabetes mellitus	23.53%	4
Thyroid disorders	29.41%	5
Adrenal disorders	41.18%	7
Hypothermia and cold related injuries	76.47%	13
Hyperthermia and heat related illnesses	47.06%	8
Drowning and submersion	64.71%	11
Inhalational injury	64.71%	11
Electrical injuries	64.71%	11
Biological, chemical and radiation exposures	64.71%	11
Dysbarism	11.76%	2
Animal bites	11.76%	2
Envenomations (snake and marine)	5.88%	1
Severe upper and lower GI bleed	47.06%	8
Hepatic failure	11.76%	2
Pancreatitis – severe	5.88%	1
Diaphragmatic hernia	11.76%	2
Malrotation/volvulus	29.41%	5
Bowel obstruction	11.76%	2
Disseminated intravascular coagulation	58.82%	10
Sickle cell disease + complications	58.82%	10
Leukemia/lymphoma + complications	29.41%	5
Sepsis	35.29%	6
Toxic shock syndrome	29.41%	5
Severe pertussis	11.76%	2
Tetanus/botulism	5.88%	1
Severe malaria	11.76%	2

Inborn errors of metabolism and metabolic catastrophe	76.47%	13
Hypertensive emergencies	35.29%	6
Acute renal failure	17.65%	3
Altered level of consciousness	41.18%	7
Cerebral vascular events	35.29%	6
Meningitis and encephalitis	23.53%	4
VP shunt failure	35.29%	6
Abnormal vaginal bleeding	11.76%	2
Pregnancy	17.65%	3
Complications of pregnancy	41.18%	7
Sexual assault	11.76%	2
Traumatic eye injury	29.41%	5
Severe epistaxis	35.29%	6
Aggression in the ED	35.29%	6
Acute psychosis	41.18%	7
Apnea	23.53%	4
Acute upper airway obstruction	47.06%	8
Pulmonary embolism	58.82%	10
Cystic fibrosis exacerbations	17.65%	3
Pleural effusion/empyema	23.53%	4
Pulmonary edema	35.29%	6
Severe asthma	47.06%	8
Severe croup	23.53%	4
Complications of systemic lupus erythematosus/rheumatoid arthritis	11.76%	2
Toxicology overdose	88.24%	15
Acute Medication Withdrawal	58.82%	10
Total Respondents: 17		

Q9 Please indicate what critical resuscitative procedures you feel like you wish to address in future Continuing Practice Simulations. Select all that apply. (NB*Options from this list are a selected from procedural skills expected from the 2013 Royal College of Physicians and Surgeons of Canada objectives for training in Pediatric Emergency Medicine)**

Answered: 17 Skipped: 0





ANSWER CHOICES	RESPONSES	
Bag/mask ventilation	5.88%	1
Rapid sequence induction for intubation	47.06%	8
Emergent endotracheal intubation	47.06%	8
Difficult airway management	88.24%	15
Video laryngoscopy	58.82%	10
Emergency cricothyrotomy and transtracheal ventilation	88.24%	15
Supraglottic foreign body removal	52.94%	9
Chest compressions	29.41%	5
Cardioversion and defibrillation	35.29%	6
External cardiac pacing	41.18%	7
Cervical spine immobilization	0.00%	0
Control of exsanguinating external haemorrhage	35.29%	6
Needle decompression of chest	35.29%	6
Tube thoracostomy	70.59%	12
Peripheral venous access	5.88%	1
Central venous access	35.29%	6
Intraosseous access	11.76%	2
Umbilical vessel catheterization	58.82%	10
Arterial puncture	5.88%	1
Local and regional anesthesia	11.76%	2

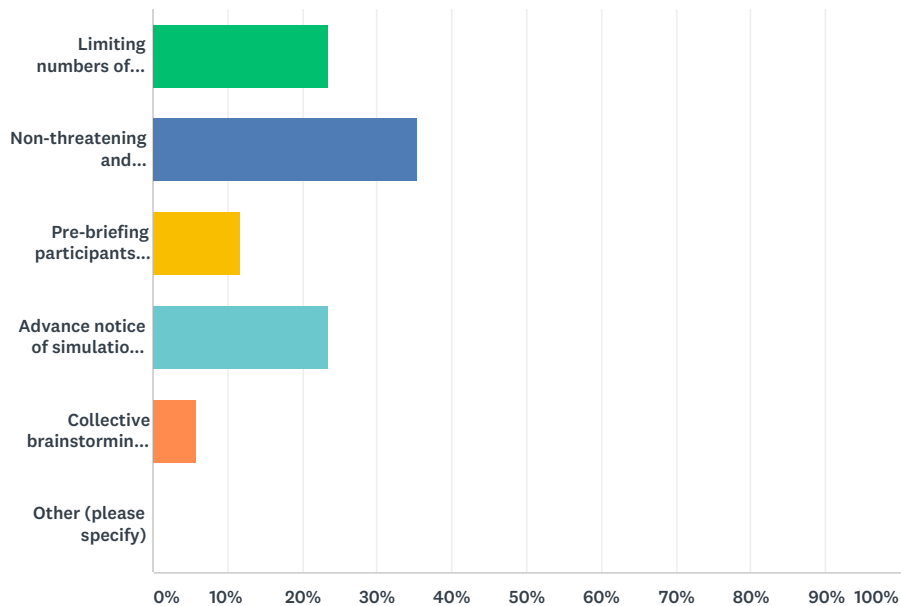
Pericardiocentesis	41.18%	7
Nasogastric or gastric tube insertion	0.00%	0
G-tube replacement/access	5.88%	1
Suprapubic bladder catheterization	11.76%	2
Restraint techniques	23.53%	4
Protection of health professionals from hazardous exposures	35.29%	6
Epistaxis management	17.65%	3
Tonsillar haemorrhage management	64.71%	11
Hyperthermia cooling procedures	29.41%	5
Hypothermia warming procedures	47.06%	8
Total Respondents: 17		

Q10 Please indicate any additional topics, scenarios or procedures you would like to cover that were not included in prior questions

Answered: 3 Skipped: 14

Q11 Psychological safety (Part 1 of 2). We recognize simulation can be a threatening and anxiety producing experience for any participant, regardless of background. Above all, we are committed to protecting your psychological safety. Knowing that stress can never be fully eliminated from simulation, please select from the following actions we have previously done and should continue doing to make simulation more psychologically safe. Select your top choice.

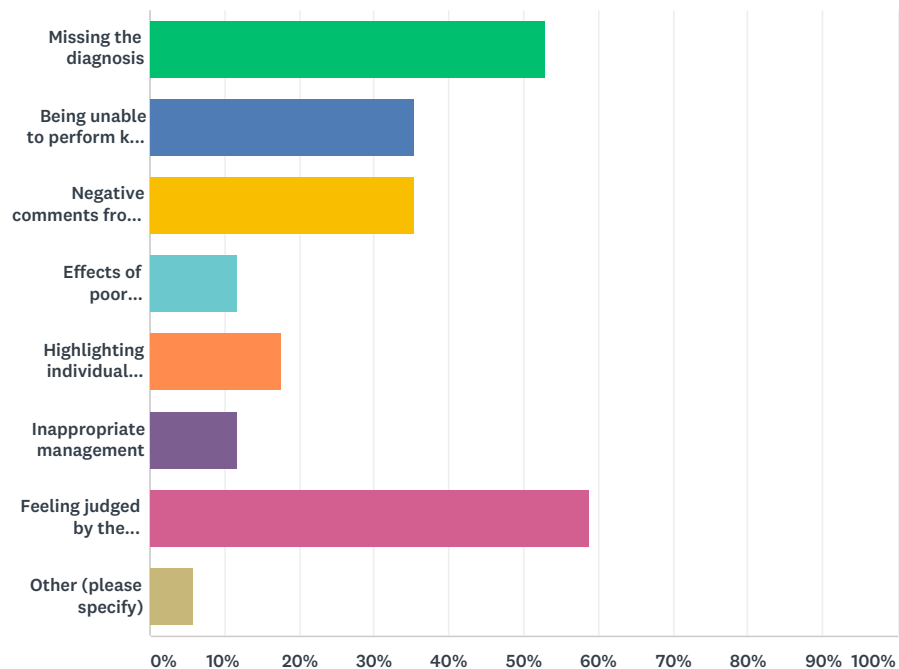
Answered: 17 Skipped: 0



ANSWER CHOICES	RESPONSES	
Limiting numbers of observers in a simulation	23.53%	4
Non-threatening and non-patronizing debriefing style	35.29%	6
Pre-briefing participants to set up of simulation and overarching objectives of the simulation before the event occurs (i.e. introduction to room, mannequin and facilitators)	11.76%	2
Advance notice of simulation topics	23.53%	4
Collective brainstorming of solutions to problems/concerns raised by simulation activities	5.88%	1
Other (please specify)	0.00%	0
TOTAL		17

Q12 Psychological safety (Part 2 of 2). What do you feel is most anxiety provoking about in situ simulation? Select all that apply

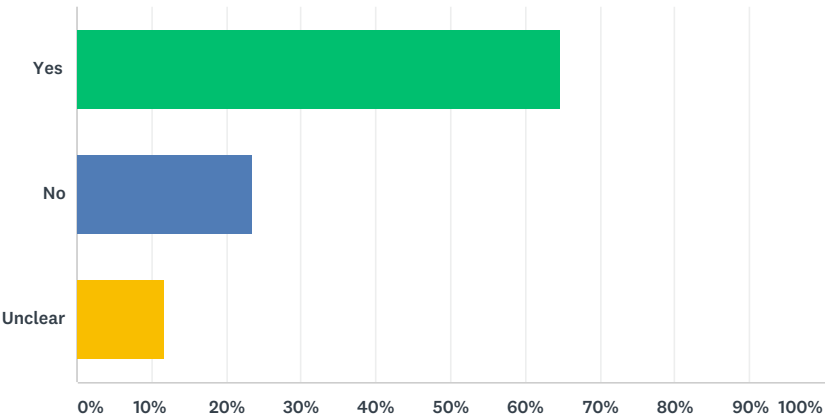
Answered: 17 Skipped: 0



ANSWER CHOICES	RESPONSES	
Missing the diagnosis	52.94%	9
Being unable to perform key critical tasks	35.29%	6
Negative comments from peers and interprofessional colleagues	35.29%	6
Effects of poor performance on employment status	11.76%	2
Highlighting individual performance gaps	17.65%	3
Inappropriate management	11.76%	2
Feeling judged by the simulation team	58.82%	10
Other (please specify)	5.88%	1
Total Respondents: 17		

Q13 Agree or disagree? Advance notice of simulation topics (Part 1 of 2). If it does not interfere with the simulation objectives, participants should be made aware of the general topic of simulation a minimum of 24h before the exercise

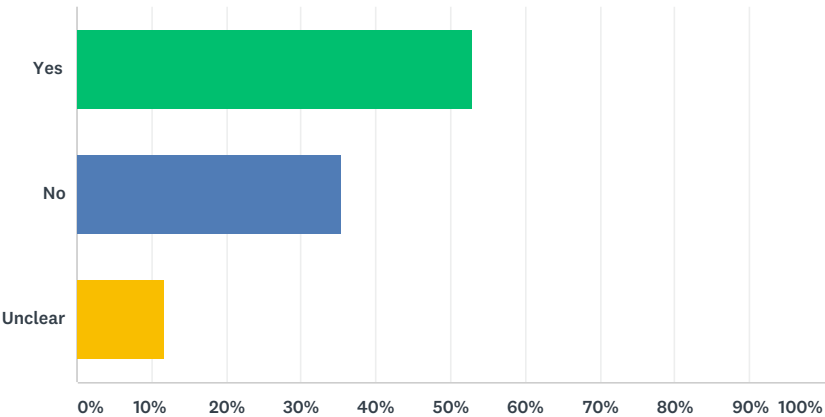
Answered: 17 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	64.71%	11
No	23.53%	4
Unclear	11.76%	2
Total Respondents: 17		

Q14 Agree or disagree? Advance notice of simulation topics (Part 2 of 2). If an objective of the simulation is to test system response and quality improvement, participants should not be made of aware of the general topic of simulation in advance.

Answered: 17 Skipped: 0

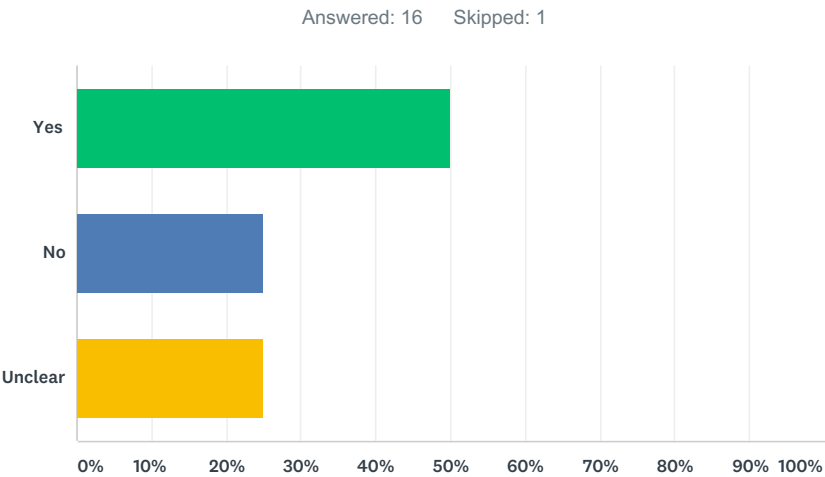


ANSWER CHOICES	RESPONSES	
Yes	52.94%	9
No	35.29%	6
Unclear	11.76%	2
Total Respondents: 17		

Q15 We recognize there are occasions where scheduled in situ simulations need to be postponed/cancelled (especially in a busy ED). Balancing that simulations are costly, and resource intensive to hold, please comment on 1-3 situations where you feel a scheduled in situ simulation activities should ED be postponed/cancelled.

Answered: 14 Skipped: 3

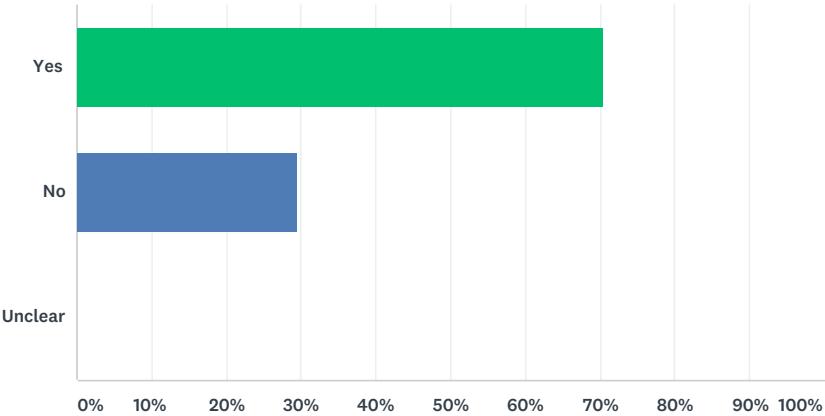
Q16 Would you be interested in joining our simulation team to help facilitate and develop future simulation scenarios for either our own department or as part of an outreach team? Please send an email to jamesseung@gmail.com if you are interested and we will be happy to chat!



ANSWER CHOICES	RESPONSES	
Yes	50.00%	8
No	25.00%	4
Unclear	25.00%	4
Total Respondents: 16		

Q17 Our Simulation team publishes a monthly newsletter highlighting knowledge points gained from our simulation activities, with the objective of reaching a broader audience than the participants who had the benefit of participating in simulation, and improving our learning. Have you previously read our SimBits newsletter?

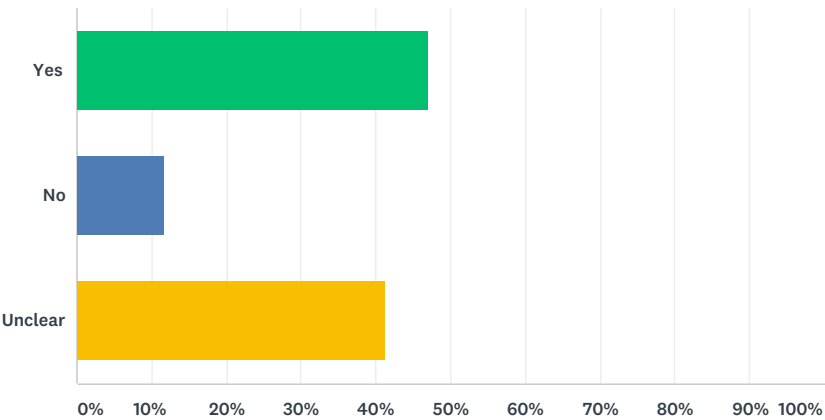
Answered: 17 Skipped: 0



ANSWER CHOICES		RESPONSES	
Yes		70.59%	12
No		29.41%	5
Unclear		0.00%	0
TOTAL			17

Q18 Does SimBits help your Continuing Professional Education if you did not actually participate in the simulation?

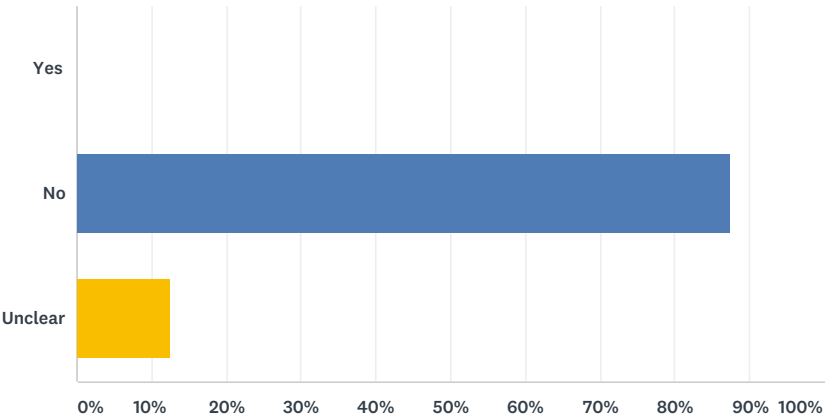
Answered: 17 Skipped: 0



ANSWER CHOICES		RESPONSES	
Yes		47.06%	8
No		11.76%	2
Unclear		41.18%	7
TOTAL			17

Q19 Do you feel threatened or unsafe from the content that is published in SimBits if you participated in the scenario?

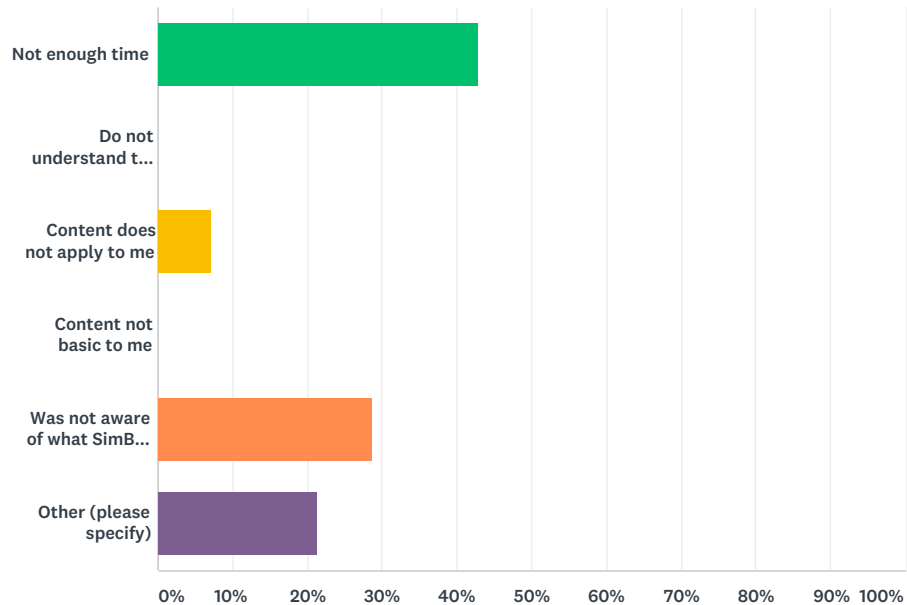
Answered: 16 Skipped: 1



ANSWER CHOICES		RESPONSES	
Yes		0.00%	0
No		87.50%	14
Unclear		12.50%	2
TOTAL			16

Q20 Please indicate barriers to reading SimBits. Select all that apply

Answered: 14 Skipped: 3



ANSWER CHOICES	RESPONSES	
Not enough time	42.86%	6
Do not understand the content	0.00%	0
Content does not apply to me	7.14%	1
Content not basic to me	0.00%	0
Was not aware of what SimBits is	28.57%	4
Other (please specify)	21.43%	3
Total Respondents: 14		