POLICY
1) Simulation activities will be evaluated by learners in a systematic and routine manner.

DEFINITIONS
1) Lead Simulation Educator/ Faculty/Facilitator [referred to in this document simply as “Lead Faculty/Facilitator”]: The Simulation Educator/ Faculty/Facilitator that carries primary responsibility for the activity, serves as the main point of contact, and is responsible for recruiting other Simulation Faculty/Facilitators and content experts as needed
2) Learner - Student, resident, or healthcare professional engaged in a simulation-based educational or assessment activity

PROCEDURE
1) Simulation activity at CHIPS will be evaluated by Learners on a regular basis, as determined by the Directors of Education and/or Assessment.
2) After the simulation, Learners will complete the CHIPS Simulation Evaluation, attached as Appendix A, either as hard copy or electronically. To avoid survey fatigue and/or confusion with multiple requests, any other learner evaluation of the simulation educational event must be pre-approved by the Directors of Education and/or Assessment.
3) Learner Evaluations collected by hard copy will be entered into the electronic database by CHIPS staff.
4) Learner Evaluations will be reviewed by appropriate CHIPS Educational staff and, as needed, an improvement plan implemented.
5) A summary of Learner Evaluations will be sent to the Sim Educator/ Lead Faculty.
6) Under appropriate IRB approval, Learner Evaluation data may be used for scholarly activity.

APPENDICES:
Appendix A: CHIPS Simulation Evaluation

APPROVAL HISTORY
Appendix A
SIMULATION EVALUATION

1. I am a:
   - Student
   - Resident
   - Fellow
   - Hospital Staff

2. Please indicate your agreement with the following statements:

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>This experience will improve my performance in the actual clinic setting.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>This debriefing and/or feedback was valuable.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>The objectives for this simulation were met.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>The instructor/faculty was effective in facilitating the simulation.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>This simulation was a valuable learning experience.</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
</tbody>
</table>

3. Please indicate your agreement with the following statements:

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The length of time for the simulation was appropriate.</td>
<td></td>
<td>Too Short</td>
</tr>
<tr>
<td>The length of time for the debriefing and/or feedback was appropriate.</td>
<td></td>
<td>Too Long</td>
</tr>
</tbody>
</table>

4. Two things I liked about or learned from this simulation:

5. Two things I wish we had focused on or that could be improved:

6. Comments/Suggestions/Recommendations:

   [ ] I do not wish for this anonymous information to be used for research or presentation.