Policy Title	Clinical Simulation & Learning Center Use & Guidelines
Policy Number:	ADM 8.01
Department:	SCHS
Functional Area:	Clinical Simulation & Learning
Contributing Department	
Approved by:	RHEI Leadership Team
Effective Date:	8/1/2024
Version:	1
Status:	Approved
Manual	To be entered by Compliance360 System administrators or N/A if not in C360
Section	ADM 8

I. Mission, Vision and Values

This policy reflects our commitment to human dignity, integrity, compassion, stewardship, and service by guiding decisions and actions that uphold respect for all individuals and promote excellence in our work.

This policy aligns with our mission of extending the compassionate ministry of Jesus by improving the health and well-being of our communities and providing good help to those in need, especially the poor, dying, and underserved by ensuring that our practices support ethical, effective, and accountable service across all areas of the organization.

II. Policy

Clinical Simulation staff and nursing faculty support nursing student learning in the Clinical Simulation & Learning Center (CSLC) by providing space, equipment, and assistance as requested for practice and/or remediation of psychomotor nursing skills and clinical simulation experiences.

III. Purpose

Establish safe and evidence-based practices for the use of CSLC resources.

IV. Scope

All students, faculty and staff utilizing the CSLC.

V. Policy Details

All persons utilizing the CSLC will be provided with an orientation to the facilities, equipment and expectations for practice. The students will be provided this orientation during their first semester prior to using the CSLC. Other participants will be oriented prior to their simulation lab or event.

Students will receive the Guidelines for Responsible Use of the Clinical Simulation & Learning Center. Participants will be expected to sign indicating understanding of the guidelines and sign the confidentiality form.

Please see policy ADM 8.03 – Confidentiality in CSLC for additional information.

Students who desire practice may do so during open lab hours or by appointment. Open lab hours are posted on the bulletin boards outside of each lab. For an appointment at other times, please contact one of the CSLC faculty or staff.

Students who require remediation of psychomotor nursing skills must be referred by their instructor. Upon referral, the student will make an appointment with the CSLC faculty listed on the referral form. The student is expected to arrive on time to all practice or remediation appointments.

Select equipment may be checked out by students. Please see policy ADM 8.02 – CSLC Equipment Use and Storage for additional information.

VI. Definitions

None

VII. Attachments

N/A

VIII. Related Policies and Procedures

ADM 8.02 - CSLC Equipment Use and Storage ADM
ADM 8.03 - Confidentiality in CSLC

IX. Regulatory Notices

Nothing in this policy creates a contractual relationship between Southside College of Health Sciences (SCHS), a department owned and controlled by Bon Secours Mercy Health Petersburg, LLC (d/b/a Southside Medical Center), and any party. SCHS, in its sole discretion, reserves the right to amend, terminate or discontinue this policy at any time, with or without advance notice.

X. Version Control

Version	Effective Date	Next Review Date	Description	Supersedes, if applicable	Prepared By
1.0	5/1/2008	N/A	Initial Policy	N/A	Dean, CSCL
1.1	4/26/2021	N/A	Revisions	1.0	Dean, CSCL

1.2	9/7/2022	N/A	Standardized for RHEI	1.1	Dean, CSCL
1.2	6/23/2024	6/23/2027	Reviewed – No Changes	1.2	Dean, CSCL
1	6/23/2024	6/23/2027	Version Changed – BSMH Template Adopted	1.2	Dean, CSCL

This policy/procedure/guideline is not intended to establish a standard of clinical or non-clinical care or practice. Rather, this policy/procedure/guideline creates a general tool to help guide decision-making with the understanding that different action(s) may be necessary in response to the totality of the circumstances presented.

Sites revised 05/06/2025- Bon Secours Mercy Health adopts the above policy, procedure, policy & procedure, guideline, manual / reference guide / instructions, or principle / standard / guidance document for all Bon Secours Mercy Health entities including, but not limited to, facilities doing business as Mercy Health – St. Vincent Medical Center, St. Vincent – St. Charles Hospital, St. Vincent – St. Anne Hospital, Mercy Health – Perrysburg Medical Center, Mercy Health – Tiffin Hospital, Mercy Health – Willard Hospital, Mercy Health – Defiance Hospital, Mercy Health Allen Hospital LLC, Mercy Health - Lorain Hospital, Mercy Health St. Elizabeth Youngstown Hospital, Mercy Health St. Joseph Warren Hospital, Mercy Health - St. Elizabeth Boardman Hospital, Mercy Health - St. Rita's Medical Center, Mercy Health – Springfield Regional Medical Center, Mercy Health - Urbana Hospital, Mercy Health - Anderson Hospital, Mercy Health - Clermont Hospital, Mercy Health – Fairfield Hospital, Mercy Health - West Hospital, The Jewish Hospital – Mercy Health, Mercy Health – Kings Mills Hospital, LLC, Mercy Health - Lourdes Hospital LLC, Mercy Health – Marcum and Wallace Hospital, Chesapeake Hospital Corporation DBA Rappahannock General, Maryview Hospital, Bon Secours Richmond Community, Bon Secours Memorial Regional Medical Center, Bon Secours – St. Mary's Hospital, Bon Secours St. Francis Health System, Bon Secours St. Francis Medical Center, Bon Secours Mary Immaculate Hospital, Bon Secours - Southside Medical Center, Bon Secours Mercy Health Franklin, LLC, Southern Virginia Medical Center, and Bon Secours Harbour View Medical Center. This also may apply to Bon Secours Mercy Health Medical Group LLC and its medical group affiliates.