Policy Title	Clinical Simulation & Learning Center Equipment Use & Storage
Policy Number:	ADM 8.02
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 & Learning Center Equipment Use & Storage

III. Purpose

The Clinical Simulation & Learning Center (CSLC) will provide equipment and supplies to all participants in CSLC activities to best simulate actual clinical conditions.

IV. Scope

All participants in CSLC activities

V. Policy Details

Secure location(s) will be provided for the storage of simulation equipment and supplies. The location(s) will be in a temperature-controlled environment to preserve longevity. Equipment and supplies stored in these locations will be appropriately stored per manufacturer guidelines and meet regulatory compliance

with regard to storage safety. All Clinical Simulation & Learning Center (CSLC) personnel shall have access to the location(s) and may grant Health system educators and faculty access on a per case basis. Equipment may be checked out for use outside of the CSLC by following the approved equipment request process. Participants must sign out equipment and return in the timeframe agreed upon.

Students should follow the equipment procedure below:

1. Students are not to practice on the electronic-equipped manikins without the assistance of the CSLC personnel.

2. Report malfunctioning or broken equipment (e.g. IV pumps, feeding pumps, models, manikins, or monitors) to CSLC personnel promptly so that it can be repaired or replaced.

3. To maintain fully charged batteries, keep all electronic equipment and monitors plugged into an electrical outlet at all times.

4. Students and faculty must obtain CSLC personnel approval to check out equipment for practice or community service.

5. Below is a list of equipment that may be checked out from the CSLC for a limited time period:

    - Blood pressure cuff
    - Stethoscope, including teaching stethoscope
    - Scales
    - Reflex hammer/tuning fork
    - Denver II kits
    - Glo-germ lotion or powder, travel light, and children's hand washing video
    - Other equipment as designated by clinical instructors.

VI. Definitions

None

VII. Attachments

N/A

VIII. Related Policies and Procedures

ADM 8.05 Clinical Simulation & Learning Center Equipment Maintenance

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	11/13/2019	N/A	Revisions	N/A	Dean, CSLC
1.0	2/24/2021	N/A	Approved AC	1.0	Dean, CSLC
1.1	9/7/2022	N/A	Revised to include RHEI	1.0	Dean, CSLC
1.1	3/5/2024	3/5/2027	Reviewed – No Changes	1.1	Dean, CSLC
1	3/5/2024	3/5/2027	Version Changed – BSMH Template Adopted	1.1	Dean, CSLC

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.