### **Durham VA Healthcare System**



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The Durham VA Health Care System (DVA HCS) is a 271-bed, level IA, tertiary care, referral, and teaching facility located in Durham, NC adjacent to our academic affiliate Duke University Medical Center. DVA HCS maintains academic affiliations with many academic institutions, including Duke University, University of North Carolina at Chapel Hill, Campbell University, Watts School of Nursing, Durham Technical Community College, Vance Granville Community College, North Carolina Central University, and North Carolina State University.

The DVA HCS Simulation Program is led by an interprofessional team that uses simulation and other educational tools to improve the quality of care provided to Veterans nationwide. We educate nurses, physicians, respiratory therapists, chaplains, and other interprofessional facility staff and trainees. Together we explore innovative ways to improve communication, teamwork, patient safety, and systems redesign issues that impact overall healthcare delivery and performance. With strong connections to our academic affiliates, VISN 6, SimLEARN, and professional associations, our Simulation Program is recognized as a national leader in simulation practice, education, systems integration, and research.

Our Mission: The DVA HCS Simulation Program educates staff to provide excellence in Veteran care through healthcare simulation learning modalities.

Our Vision: We are committed to achieving the benchmark of excellence in simulation-based education, training, and process improvement within the VA Medical Centers throughout the nation. We are committed to integrating the Data Driven model throughout all future immersive and team-based training. We will continue to incorporate the best clinical practices, implement process improvement initiatives, challenge existing healthcare education, and engage in translational patient safety research to improve outcomes for our Veteran patient population.

Our Values: We are dedicated to actively driving a culture of safety by promoting a non-threatening learning environment, conducting interprofessional training on various units throughout the medical center, empowering all staff to maximize their practice, and promoting excellence in teamwork, communication, clinical, and leadership skills.

#### Several examples of past fellows' work:

Jeffrey Longnion, MD (2014-2015), an anesthesiologist specializing in pain management, served during our first year of the Fellowship. During his Fellowship year, Dr. Longnion was instrumental in instituting dedicated central line simulation teaching and practice time for medicine residents, which he led weekly with several other physician colleagues. Dr. Longnion also facilitated simulation and operating room experiences for physicians and respiratory therapists participating in Out of OR Airway Management (OOORAM), ensuring that they had optimal practice and learning time. He also developed a computer program which interfaced with the Laerdal SimMan 3G manikin that produced visual representation of key data points during simulation codes, including time to defibrillation and adequacy of chest compressions. This visual representation of parameters during simulated codes facilitated debriefing as it clearly showed team performance and targeted areas for improvement. Dr. Longnion served in a clinical capacity with the Anesthesiology Service during his Fellowship year. Though Dr.

Longnion was offered a position at the Durham VA after Fellowship graduation, he subsequently relocated to Boise, ID, where he is currently Chief of Anesthesia Service at the Boise VA.

Margaret March, MDiv (2014-2015), a chaplain with interests in human relational simulations, also served during the first year of our Fellowship. She collaborated with the hospital nursing leadership to develop a policy on family presence during code blue procedures and other emergencies, which remains in effect today. Ms. March developed simulations to teach chaplain residents and interns how to appropriately handle family presence, including evaluating exclusion criteria. Ms. March also developed simulation for suicide prevention, built DecisionSim teaching modules, collaborated on improving the integration of the chaplain role into the code team and other response teams, and published articles on her work in the chaplain peer-supported journal, PlainViews. Ms. March also presented at regional conferences and the International Meeting for Simulation in Healthcare (IMSH) in 2015. During her fellowship year, she completed requirements for Clinical Pastoral Education (CPE) units during clinical time with the Chaplain Service. Upon Fellowship graduation, she remained at the Durham VA as a Without Compensation (WOC) employee and worked at our academic affiliate Duke University as a hospice chaplain.

Adrienne Koch, MDiv (2016-2017), also a chaplain with interests in human relational simulations, continued offering and refining the simulations that Ms. March started. Ms. Koch developed simulations focused on using Plutchik's wheel of emotions and taught interprofessional learners how to identify, feel, and handle emotions in a measured manner. She also spearheaded an interagency group of hospital chaplains from DVA HCS, Duke University Hospital, and Duke Regional Hospital to host a community pastor simulation education session to help them learn ways to maneuver the complex hospital environment when visiting hospitalized parishioners. Ms. Koch presented at regional conferences, for Duke AHEAD educational sessions, and at IMSH in 2017. Like Ms. March, she completed CPE requirements during clinical time with the Chaplain Service. She also became an ordained Episcopal priest during her Fellowship year, and upon Fellowship graduation accepted a job at North Carolina State University as a chaplain for the student body.

Marame Gattan, MD (2016-2017), an emergency medicine physician with interests in patient safety, quality management, and interprofessional teaching, collaborated with the Duke University Emergency Department residency program on simulation learning experiences for EM residents, pharmacists, and physician assistants during their monthly educational conferences. Dr. Gattan also collaborated with other VA EM physicians to offer procedural task training sessions and airway education for medicine and EM residents as they rotate through the VA. Like Ms. Koch, Dr. Gattan presented at regional conferences, for Duke AHEAD educational sessions, and at IMSH in 2017. She researched and created realistic simulation adjuncts using ballistics gel and other materials. She also experimented with various ways that technology could enhance simulations. During her fellowship year, she served in a clinical capacity in the VA Emergency Department and accepted a job there upon Fellowship graduation, where she continues to work clinically and as simulation faculty.

Ethan Burch, MS (2017-2018), a digital media specialist and game designer with interests designing learning that is fun, collaborated with the University of North Carolina (UNC) School of Pharmacy Simulation Program to develop a natural-language based human simulation avatar program to teach pharmacy students how to interact with patients throughout the lifespan. He

also developed virtual reality mindfulness training for new employees and other staff. In addition, Mr. Burch developed a separate virtual reality program with the Duke School of Nursing to help distance students in the nurse practitioner program learn how to perform musculoskeletal injections. Mr. Burch also partnered with the Associate Director for Educational Gaming at the VHA Employee Education System (EES) eLearning team on the development of a suicide prevention online education module. Mr. Burch accepted a job at the UNC School of Pharmacy Simulation Program upon graduation of the Fellowship.

Bradley Eisenberg, PharmD (2018-2019), a pharmacist with interests in enhancing ways that patient education is implemented, developed simulations using Standardized Patients to train new graduate nurses and other staff on how to optimize patient interviews to increase adherence to medication management. Like Mr. Burch, Dr. Eisenberg collaborated with the UNC School of Pharmacy Simulation Program on their human simulation avatar program. With his pharmacy background, Dr. Eisenberg was able to bring his subject matter expertise to the UNC simulation team, consisting mainly of programmers. He wrote and tested patient-centered scripts for the avatar to use while interacting with students. In addition, he collaborated on simulations to help our DVA HCS police practice naloxone administration. Dr. Eisenberg also wrote a grant application to gain increased financial support for the School of Pharmacy Simulation Program. Upon Fellowship graduation, Dr. Eisenberg remained connected to the School of Pharmacy Simulation Program through their grant-funded projects.

#### Co-Director bios:

# Mary E. Holtschneider, MEd, MPA, BSN, RN, NPDA-BC, NREMT-P, CPTD, Simulation Education Coordinator, Co-Director Interprofessional Advanced Fellowship in Clinical Simulation, VISN 6 Simulation Champion

Ms. Holtschneider is an experienced healthcare simulation educator in both the hospital and academic settings whose nursing clinical background includes trauma, emergency, and critical care. She leads the national VA Association for Nurses in Professional Development (ANPD) Affiliate group and regularly teaches certification preparation courses for those in this nursing specialty role. Ms. Holtschneider serves as VISN 6 Simulation Champion and is the 2014 recipient of the SimLEARN VA Under Secretary for Health's Excellence in Clinical Simulation Training, Education and Research Practice Award, the 2019 ANPD Leader Award, and one of the North Carolina Great 100 Nurses of 2019.

## Chan W. Park, MD, FAAEM, Director, Simulation Education, Co-Director, Interprofessional Advanced Fellowship in Clinical Simulation

Chan W. Park, MD is the Director of Simulation Education and the Co-Director of the Interprofessional Advanced Fellowship in Clinical Simulation at the Durham Veterans Affairs Health Care System (VAHCS). He also serves as a faculty member of the Duke Leadership Education And Development (LEAD) program, senior faculty advisor for the Feagin Leadership

Program, and holds a position of Adjunct Assistant Professor of Emergency Medicine at the Duke University Medical Center.

Dr. Park obtained his M.D. at the Albert Einstein College of Medicine in 1999 and trained under the United States Health Professions Scholarship Program. Upon graduation, he served in the U.S. Navy from 1999-2009, during which time he also completed his residency training in Emergency Medicine at the Naval Medical Center in San Diego, CA. As a Naval Medical Officer, Dr. Park was deployed to the Persian Gulf and Ramadii, Iraq, during Operation Iraqi Freedom and Operation Enduring Freedom. He has held Assistant Professor positions in Emergency Medicine at the Naval Medical Center Portsmouth, Virginia Commonwealth University, and now at the Duke University Medical Center.

Dr. Park is committed to advancing the interprofessional learning environment and innovative approaches to enhancing individual and team performance. Promoting concrete experience, reflective observation, abstract conceptualization, and active experimentation, Dr. Park firmly embraces the Kolb model for adult experiential learning. Dr. Park and his colleagues work in close collaboration with faculty from the nation's leading Veterans Affairs Medical Centers, Duke University, and University of North Carolina Health Care Systems, as well as leaders from the Graduate Medical Education programs to identify and critically appraise competency domains that improve leadership, interprofessionalism, and team performance.