

How iRIS has transformed simulation at CPUT, South Africa



Background

The Cape Peninsula University of Technology sits at the heart of technology education and innovation in Africa. This internationally acclaimed institution is the only university of technology in the Western Cape and the largest university in the region. The Faculty of Health and Wellness Sciences houses the state-of-the-art Immersive Clinical Simulation Centre which replicates emergency scenarios, such as road accidents, and is used for learning as well as assessment purposes.

The Challenge

As Subject Matter Experts (SMEs), staff develop the majority of simulation content, with other healthcare professionals engaged to provide additional high quality content based on relevant expertise and experience. The Centre seeks to develop Inter-Professional Education scenarios, bringing frequent collaboration across Emergency Medicine Science and other Health Care professionals.

Before iRIS the only standard format for scenarios was an MS Word template. Scenarios and their resources would typically be emailed between authors for development, or even exchanged via USB memory stick.

The Consequence

- **Ongoing confusion** over versions of scenarios and their resources
- **Different versions** would be stored on network drives, but as multiple authors with diverse backgrounds contributed, the format used to author the scenario would change, creating yet more confusion.
- **And more work:** impact on the Simulation team was significant, requiring additional time and effort when configuring the simulation labs to run a scenario.
- With email as the primary form of management and communication, Simulation Technologists would also often receive scenarios only the day before they were due to run - leaving little time to prepare the simulation suite and collate necessary resources.
- In addition, SMEs are not education specialists, and they typically required time-intensive one-on-one support to develop scenarios that were educationally sound. This placed a significant additional burden on the already time-pressured Simulation team.³

“ **confusion different versions**
more work additional time and effort
required intensive one-on-one support
little time to prepare ”

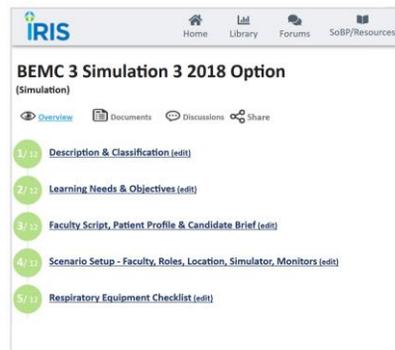
The Solution

John Meyer, Lecturer in Emergency Medical Sciences, knew things had to change. The Immersive Clinical Simulation Centre needed a solution to improve the quality of scenarios, make authoring more efficient and reduce the pressures on the simulation team.

Enter iRIS... an intuitive, collaborative, cost-effective web-based platform that improves the quality of Scenarios and makes authoring easier and more efficient. Hosted online, iRIS requires only a browser for access, so has a minimal IT footprint and is easy to deploy.

The Results

John Meyer, Lecturer in Emergency Medical Sciences says “iRIS has given us the centralised repository for scenarios that we needed. Its easy-to-use, step-by-step wizard guides our clinicians and simulation professionals to consider how clinical knowledge is translated in to high quality educational content. It brings the education back in to scenarios. Clinicians are not always educators and they need support in writing educational content. iRIS turns clinicians in to educators, without the need for one of us from the simulation team to constantly work with them face to face. Together we collaborate online, and it frees up our time.



Search Title	Search Created By
Assessment Planner	03/05/2018
Behavioural Emergencies	11/10/2017
BEMC 2 Final Simulation	16/10/2018
BEMC 2 Patient Assessment	06/02/2018
BEMC 3 - Status Epilepticus	14/03/2018
BEMC 3 Cardiac Arrest 1	27/09/2018
BEMC 3 OBGY Post Partum Haemor	02/05/2018
BEMC 3 Seizure- Refractory Sta	06/03/2018
BEMC 3 Simulation 1	20/09/2018
BEMC 3 Simulation 3 2018 Optio	30/10/2018

Showing 1 to 10 of 79 entries

Since we implemented iRIS, all of our scenarios are now in a standardised format and housed in iRIS. If it isn't in iRIS, then it isn't approved for use with our students. We upload all of the resources required to run a scenario directly in to iRIS, including the scripts from LLEAP for our Laerdal manikins. It has made our operation so much more efficient as we know exactly where all the resources for a scenario are.

The quality of our scenarios is improved by the process that iRIS has given us in authoring content. Our Simulation Technologists have easy access to scenarios well in advance of running them so that they know exactly how our labs need to be configured.

The time we have gained back from no longer having to search emails for up to date versions of scenarios and their resources or spend so much time face to face supporting clinicians has enabled the simulation team to expand our scope. We now develop scenarios for new and exciting situations that our students previously would not have been able to experience.

The support from the iRIS team has been second to none, from implementation to induction, and continued support. They listen to our feedback and keep us well appraised of future developments. On these they have welcomed our input. As the global iRIS community grows we are enjoying the opportunity to collaborate and share scenarios with other institutions.”

“guides our clinicians and simulation professionals frees up our time
 centralised repository we collaborate online a standardised format
 if it isn't in iRIS it isn't approved so much more efficient
 quality of scenarios is improved easy access expanded our scope
 support from the iRIS team has been second to none”

The Future

“iRIS gives us a completeness to our scenarios and has helped standardise how we present simulation to the world. As we continue to use iRIS, we are finding it easy to duplicate and revise scenarios for use with different learner groups and so intend to apply simulation to a wider range of courses in the Faculty and develop more complex IPE scenarios. Future plans include collaboration with a private hospital group on the development of new scenarios – something which would not have been possible without iRIS to facilitate the entire collaboration. The constant evolution of iRIS is exciting. As we are seeing integration with other simulation technologies it constantly creates easier cost-effective ways for us to do things whilst always improving the quality of our work. We look forward to iRIS benefiting the simulation community for a long time to come.”

John Meyer, Lecturer in Emergency Medical Sciences