NAAC CRITERIA -8 NURSING PART 2022-2023

8.1 - NURSING INDICATOR

- 8.1.1 Training in the clinical skills and simulation labs are organized with reference to acquisition and enhancement of skills in basic and advance procedures such as BLS/ALS, Venepuncture, ET intubation/suctioning, central line insertion procedures (PG- as per clinical specialty).
- 8.1.2 Number of fulltime teachers who have acquired additional postgraduate Degrees/Diplomas/Fellowships/ Master trainer certifications beyond the eligibility requirements from Universities/ Recognized Centers/ /Professional bodies in India or abroad. (Eg: additional PG degree, Ph D, Fellowships, Master trainer certifications etc.)
- 8.1.3 Students are exposed to quality of care and patient safety procedures including infection prevention and control practices as practiced by the teaching hospital in didactic and practical sessions during their clinical postings.
- 8.1.4 Number of first year students, provided with prophylactic immunization against communicable diseases like Hepatitis-B during their clinical work during the year.
- 8.1.5 Is the teaching hospital / clinical laboratory accredited by any National Accrediting Agency? NABH Accreditation of the teaching hospital NABL Accreditation of the laboratories ISO Certification of the departments / divisions Other Recognized Accreditation / Certifications.
- 8.1.6 Describe how the College facilities were utilized by students from other institutions (PG/UG/GNM) for administrative/educational visits and critical evaluation during the year.
- 8.1.7 College undertakes community oriented activities.
- 8.1.8 Number of full time faculty serving in various committees of the University/ Technical advisory group/ Core Committee members of various committees of Govt/WHO/INC/State/National Bodies during the year. (Memberships included in 1.1.2 should not be included).

> 8.1.1. Training in the clinical skills and simulations labs are organised with reference to acquisition and enhancement of skills in basic advance procedures such as BLS / ALS, Venepuncture, ET intubation / Suctioning, Central line insertion procedures (PG- as per clinical Speciality).



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Prepared by: Quality Cell	Approved by: Management

Policy No: BES/AM/ Policy on use of clinical skills and simulation

Policy on use of clinical skills and simulation labs

Purpose:

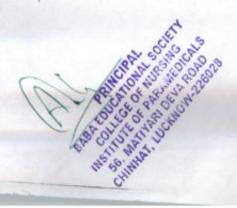
Medical education is increasingly focused on achieving competency in clinical skills and diagnostic reasoning, emphasizing approaches that enhance patient safety and the quality of care. Simulation training is an essential link between medical student training and clinical experience and has proven to be an effective tool for assessing technical skills, critical thinking, and team-orientated behavior throughout medical training.

There have been a number of drivers to the increased uptake and interest in simulation-based education.

- · Society and patient expectations have changed so that it is no longer seen as appropriate to practice on patients. Healthcare practitioners are expected to be competent before performing on a patient.
- There have been numerous changes to healthcare delivery including; the move to ambulatory and community settings, increased acuity within hospitals, day surgery etc, all of which mean that there has been a reduction in opportunities for healthcare workers to gain experience in the same breadth of patient care.
- Reductions in working hours for healthcare practitioners also impacts on opportunities for learning.
- The safety movement has raised awareness of adverse event management and the need for training in this area of critical incidents/ adverse events.
- New technologies in medicine have required different approaches to training e.g. endoscopic surgery.

Advantages of Simulation Labs:

- There is a decreased risk to patients as skills are learnt away from the patient prior to transferring them back to the health setting.
- Simulation promotes self reflection and the ability to learn from mistakes in a safe environment.
- There is the opportunity to practice skills repeatedly.
- Scenarios can be created to suit the learning objectives. There isn't a reliance on finding a patient with that condition. This makes the education experience focus on the learner's needs:
- Critical incidents or crisis situations that occur rarely but require a high level of preparedness can be practiced easily.







Responsibility: HODs, Head of the Institute & Management

Policy:

- Management and organization shall ensure that simulation resources can be used effectively, maintained appropriately and are accessible to a range of users.
- Management and organization shall ensure that there are sufficient numbers of trained technicians and skilled educators to deliver high quality simulation-based learning experiences.
- Management and organization shall ensure that there is a strong evidence base that informs the
 practice of simulation-based education and training, and its development into the future.
- Maintenance and protocols of the CSLs shall be followed by all of its users.
- Everyone Using CSLs shall follow safety measures at all times
- Maintain cleanliness of the area
- Any damage or malfunction of mannequins or equipment shall be reported to lab faculty immediately.
- All students shall sign confidentiality agreement before skill laboratory use and will be reminded through the course of the confidentiality issues.

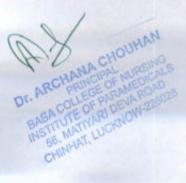




BABA EDUCATIONAL SOCIETY INSTITUTE OF PARAMEDICALS COLLEGE OF NURSING ADVANCED PROCEDURES- VENEPUNCTURE







BABA EDUCATIONAL SOCIETY INSTITUTE OF PARAMEDICALS COLLEGE OF NURSING ADVANCED PROCEDURES- ET INTUBATION/SECTIONING











BABA EDUCATIONAL SOCIETY INSTITUTE OF PARAMEDICALS COLLEGE OF NURSING

ADVANCED PROCEDURE- CENTRAL LINE INSERTION



