Clinical Simulation Business Practices For Audiovisual Recordings

Background: Audiovisual recordings of clinical simulations are routinely used in clinical simulation learning sessions to provide the learner with insight on individual and team performance. These recordings are intended to support a psychologically safe, risk-free environment for learning and performance improvement. In support of this principle, VHA is adopting policy that required medical centers and other VA sites using simulation to adhere to the following procedures:

1) Principle: Clinical simulation training sites are psychologically safe, risk-free environments for learning and improving performance.
2) Consent: Employees participating in simulations will be asked to provide voluntary consent (VA form 10-3203 – see sample attachment) prior to the recording of any simulation (or group of simulations) in which they are a party.
    A. Audiovisual recording of clinical simulations is *strongly encouraged* due to the insight gained by learners from viewing their actions during simulations.
    B. An employee may choose to not provide written consent, however, the participant may be excluded from sessions in which others have consented to recording. [1]
    C. The consent described above is not a broad consent for other uses of the recording (see 3.A. and 3.B. below).
3) Other Uses: Other uses of the audiovisual recordings may advance organizational learning and research. However, appropriate steps should be taken to ensure that these uses are disclosed and consented.
    A. Research: Researchers are responsible for obtaining appropriate separate consent as determined by the Institutional Review Board and Research prior to audiovisual recording.
    B. Future uses outside of the initial consent: Audiovisual recordings for other uses (e.g., replay of the recording in front of broader clinical audiences; replay of the recording for marketing purposes) must be separately disclosed and consented prior to the recording (VA form 10-3203). The form should contain information about the intended repurposing and broad use of the recording and the intended period of retention.
    C. Disciplinary Actions: Audiovisual recording will not be used for disciplinary action and will not adversely impact annual appraisals or employee reviews.
4) Retention: The audiovisual recordings of clinical simulations for training purposes will be kept for 10 days,[2] then destroyed in an appropriate manner.
    A. Clinical simulation is defined as a rehearsal for the purposes of records management.

[1] Where possible, and where it does not interfere with the simulation experiences of others, consideration shall be given to accommodating employees who wish to participate in simulation learning sessions without audiovisual recording.
[2] Of the end of the program – whichever is first.

B. The responsibility for destruction resides with the simulation program director.
C. Retention of audiovisual recordings obtained for other uses (e.g., research or marketing uses) must be disclosed and consented to by the participant, and the period of records retention is defined by the context (RCS 10-1).

5) Recording of Unannounced In-situ Simulation Events (e.g., mock codes or mock rapid response team calls conducted in an actual clinical environment): Facility leadership should prospectively inform team members (e.g. code team, rapid response team, etc.) and their department leadership about the training sessions (mock codes, etc.). Mock events will be readily apparent to team members upon arrival, as the "patient" will be a plastic mannequin.
   A. Information about the clinical simulation training shall be provided both in writing and at "town hall meetings" targeted to relevant personnel.
      1. Consent forms (VA form 10-3203) for recording would be presented to and signed by any potential learners (typically “team” members) during the town hall meeting (i.e., prior to the mock situation). The consent is for a future event with an unspecified date.
      2. These prospective consents will be retained by the instructor in accordance with VHA records procedures.
   B. Written information about the training session will be available at each mock event to share with any team member if requested.
      1. In the circumstance where consent is not received from a participant, then the recorded event is immediately destroyed and may not be used in debriefing.