



Division of Nursing
User Agreement for the Simulation Center

Persons using the Mount Marty Simulation Center will assure that they:
Please initial each requirement

- _____ Have attended a Gaumard training session
 - _____ Can turn the simulators and virtual monitors off/on and run a simulation scenario
 - _____ Can access the Gaumard website for support and resources
- _____ Identify specific scenario set-up and are actively involved in the set-up ahead of the competency event for their use
- _____ Make reservation for the use of the center through the Division of Nursing Office Manager (605- 668-1511)
- _____ Utilize the simulation check list for additional supplies
- _____ Provide specific simulation supplies (not available at Mt. Marty College) needed for the event
- _____ Leave the simulator/simulation/control/debriefing rooms clean, as they were found

Adhere to the following policies regarding the actual use of the Simulation Center and simulators:

- No food or drink in the simulation or control rooms
- No pens or markers used in the simulation rooms or near the simulators
- No Betadine used on the simulators
- No artificial nails and gloves must be worn when working with "Victoria"
- Only approved cleaning solutions used on the simulators
- Any equipment malfunction or abuse must be reported to the simulation coordinator immediately
- No personal cell phones or other personal items (purses, computers, back-packs) are allowed in the simulation or control rooms
- Mt. Marty College is not responsible for lost or stolen items
- No one under the age of 18 is allowed in the simulation, control or debriefing rooms

CONFIDENTIALITY STATEMENT

As a user of Mount Marty Simulation Center, I understand the importance of confidentiality with information concerning simulated patients and my peers. I will uphold the requirements of the Health Insurance Portability and Accountability Act (HIPAA) and any other federal and state laws regarding confidentiality. I agree that I will report any violations of confidentiality to the Simulation Coordinator.

I will observe the following guidelines:

- All patient and peer information is confidential and may not be shared, discussed or disclosed. Information is confidential regardless of the format: electronic, written, overheard, or observed.
- I may view, use, disclose, or copy information only as it relates to my competency. Any inappropriate viewing, discussing, or disclosure of this information is a violation of the Mount Marty confidentiality agreement and may be a violation of HIPAA and/or state and federal laws.
- The Mount Marty Simulation Center is considered a learning environment. All simulations should be treated in a professional manner. Simulations are to be used as an active learning strategy carried out in a safe and respectful learning environment.
- Mount Marty's simulators and simulation manikins are to be treated with dignity and respect, as if they were live patients.

I have read and will observe the guidelines for the use of the Mount Marty College Simulation Center.

Printed Name: _____

Signature: _____

Date: _____

Facility: _____