PATIENT SAFETY REPORT

Patient Safety...Powered by WISER!

Summer 2020
About WISER

The Winter Institute for Simulation, Education, and Research (WISER) is a world class multidisciplinary training, development, and research facility. WISER is critical infrastructure of the University of Pittsburgh and the UPMC Health System with a mission to create education and training programs, along with patient safety solutions including those utilizing simulation-based modalities to provide a safer environment for patients of the UPMC Health System and its affiliates.

WISER Mission Statement

The Winter Institute for Simulation, Education, and Research (WISER) is dedicated to the advancement of healthcare simulation and education to improve patient safety, education, mentorship, systems design, and research to enhance the high-quality delivery of healthcare.

Objectives

- Enhance patient safety through state of the art educational and assessment methodologies and techniques
- Create innovative education programs for healthcare providers ranging from students through practicing professionals
- Improve the quality and efficiency of healthcare delivery through incorporation of modern educational and assessment methods through our integration with the UPMC Health System
- Research the use of healthcare simulation and other instructional and assessment methods by providing infrastructure and serving as a collaborative partner
- Contribute to the development, training, and mentorship of future generations of healthcare educators and researchers interested in simulation-based programs
Overview

Over the past 24 months, 700 of the 3,500 classes conducted with WISER were directly related to patient safety. This safety focus directly reached over 5,000 different participants totaling over 10,000 learning encounters. While this reports focuses directly on safety related courses, all of the programs we conduct are directed at improving the quality of care provided to our patients.
Message from the Director

Thank you for your interest in the patient safety efforts of the Winter Institute for Simulation, Education, and Research (WISER) during these challenging times.

Over the last 25 years WISER has developed into a leader in the provision of infrastructure to catalyze educational efforts for participants ranging from students of health sciences through practicing physicians and healthcare providers. In addition to educational efforts, we also provide sophisticated analysis of aspects of healthcare systems that allow for target improvement opportunities and serve as a laboratory to conduct research on education and system-based improvement.

We are excited for our contributions to improving the quality and safety of healthcare and are looking forward to the challenges of the future. We are similarly proud of our ability to step up and play an important role in the UPMC response to the COVID-19 Pandemic.

Our current catalog lists over 300 courses that are supported by WISER and that provide educational activities at target audiences ranging from students to practicing professionals. Our patient safety activities are designed to provide education that contribute directly to improving the quality and safety of care that is delivered to patients. This report is designed to highlight some of the exceptional work that WISER has been engaged in that focuses on our patient safety programs.

WISER serves as a health system wide resource to create, implement, and evaluate educational and operational programs that are often directed at patient safety efforts. Education programs target the development of knowledge and skills of healthcare providers and teams. We also assist in creating and implementing operational programs that are designed to evaluate the systems that provide care for patients and render meaningful feedback on improvement opportunities that are discovered. Further, the expertise of WISER curricular design, operations, administration, and best practices in education and simulation-based education ensures that solutions are created that provide effective outcomes driven by efficient design.

Whether it is an endeavor designed to ensure the proper performance of a procedure by resident physician or teaching teams of healthcare providers better communication skills, or a program designed to discover latent threats to patient safety at a specific hospital, WISER has assumed a leading role across the UPMC Health System in partnering with local leadership to create and implement such initiatives.

WISER engages in a unique collaborative process with practicing physicians, nurses, and other healthcare providers to create programs and solutions for hospitals to allow such activities to come to fruition. We have developed our team and tools to assist local experts overcome various barriers that exist amongst the complexity and work required to plan and conduct such activities.

Through the collaborations with local quality and safety leaders, and our integration into the Wolff Center, WISER has been able to assist in identifying areas of opportunity within the realm of patient safety and quality improvement. Leveraging our expertise, tools, and process, we then assist in the creation and facilitation of the solution.

We welcome your review of our patient safety programs and remain open to suggestions for future endeavors, questions, or comments on our current offerings.

My very best regards,

Paul E. Phrampus, MD FACEP FSSH CPPS
Director, Winter Institute for Simulation, Education and Research (WISER)
WISER serves as an invaluable patient safety resource to the UPMC Health System. WISER leverages deep expertise in healthcare education, simulation, assessment, and project management to provide the system with well-integrated programs that are designed to address the identification of latent threats and provide training in various areas of crisis resource management.

The Inpatient Crisis Response System Evaluation (ICRSE) is utilized to perform onsite assessments of floor staff, response teams, and systems designed to provide response to inpatients who are experiencing unexpected medical deterioration. WISER collaborates with local safety and unit leaders to identify scenarios/situations that need to be evaluated and targeted for potential improvement. Scenarios such as cardiac arrest, stroke, heart attack, anaphylaxis, difficult airway, and pediatric emergencies have been simulated. WISER conducts a simulation of the identified events in the actual care facility, records the results, and allows time for a quick onsite debriefing. Following these sessions, WISER performs an extensive analysis of the event and provides a formal report back to the unit and safety leadership to help to focus areas of opportunity for improvement in policies, systems design, as well as educational efforts. Many of the latent threats, issues identified, and recommended changes serve as a platform to allow the rest of the system to learn and avoid patient harm.

Main goals:

1. Monitor the functionality of complex systems designed to respond to patient emergencies
2. Identify system attributes that are particularly successful
3. Identify latent threats to patient safety
4. Identify trends and deficiencies to allow for targeted educational, policy, and procedural based interventions
5. Promote a culture of safety and continuous quality improvement
The ICU Crisis Response Training Program (ICU CRT) is a structured mock code program designed to meet the unique needs of the intensive care unit environment. Through a series of simulated mock crises and structured debriefings, ICU CRT participants receive direct feedback to improve their response to patient crises within the ICU environment. This structure also allows ICU unit managers to identify opportunities for improvement and focus change resources appropriately.

“Just wanted you to know the value of the simulations [ICU CRT] in the CICU since we have started.... Right now we have residents, fellows, the attending, nurses from the SICU and CICU, as well as educators and leadership involved in the simulations.... Codes on the unit have gone from organized chaos to a very systematic organized event. We are actually calling out what jobs people are choosing when the code starts keeping everyone organized and knowing what their responsibilities are. The nurses and residents have a better respect for each other and communicate more effectively during stressful situations with the use of your simulations.... Thank you again for your support and help with this irreplaceable learning!”

In collaboration with experts at UPMC Children’s Hospital of Pittsburgh (CHP), the Management of Pediatric Emergencies (MOPE) program focuses on the unique needs of the pediatric patient in non-pediatric hospitals. MOPE is designed to provide participants the opportunity to assess, diagnose, and treat pediatric patient emergencies. UPMC McKeesport now utilizes this program as part of their annual nursing competencies for ED nurses. Recently, nurses from this program had a difficult pediatric patient to manage that required resuscitation. They were able to successfully resuscitate the patient and transfer him to UPMC Children’s Hospital of Pittsburgh.

“I felt everyone did an amazing job and feel as though I benefited the most from this day over any ULearn or pervious similar education topic.”

Over the last two years, we have conducted 103 onsite evaluations at 10 UPMC facilities and directly interacted with 2,666 unique healthcare providers through this program.
A vital need of the system is the development of communication and team training programs. In today’s multi-disciplinary healthcare environment, even the best trained clinician is only as good as their communication and teamwork skills. WISER has worked with a multi-disciplinary group of subject matter experts to develop high quality communication and team training educational programs for both residents and practicing clinicians. A combination of well-designed curriculum, assessment tools, and facilitation make the following programs exemplars.

Obstetric crisis situations present unique challenges. Specialty teams often require specific educational programming to improve their communication and teamwork skills. As an example, the Obstetric Crisis Team Training course is designed to promote patient safety by training obstetric teams to navigate patient crises related to obstetrical patients. The course trains obstetricians, anesthesiology team members, nurses, newborn response team members, critical care physicians, and others to work together to deliver outstanding patient care in emergent situations.
Providing the best quality of care for a trauma patient involves the coordination of a highly specialized team of trauma surgeons, emergency physicians, nurses, and other healthcare providers. For teams to be able to perform effectively in extremely high stakes situations, practicing as a team is imperative. The **Trauma Team Training** program is designed to teach a multidisciplinary team approach to trauma patient evaluation, treatment, and resuscitation. This includes coordinating the care and handoff of critically ill patients to various healthcare teams. Through a series of trauma-based simulations, this program provides the opportunity to focus on communication, teamwork, and medical management in a low stakes environment.

Behavioral health inpatients at UPMC Western Psychiatric Hospital (WPH) require a unique set of critical response team skills. The **Condition Response for Psychiatry Residents** course is designed to teach PGY-1 Psychiatry residents (Condition first responders) the skills to effectively manage crisis situations of psychiatric inpatients. A blended learning approach is used to provide communication and clinical response skills to manage scenarios that are commonly encountered at WPH. All scenarios conclude with a Critical Care Medicine (CCM) team member to practice hand-off and a debriefing of critical points associated with the initial stabilization and determination of final disposition, all of which ensures continuing safety and care of the patient.

The **Anesthesia Crisis Leadership Training Resident & SRNA** course is designed to teach all anesthesiology residents, fellows, and SRNAs the principles of crisis management in the operating room including crisis prevention, recognition, intervention, and the principles of leadership including resource allocation and management. Using a multi-disciplinary approach, participants develop an understanding of potential medical errors and practice crisis-management skills through a series of scenarios and structured debriefings.

“Team collaboration. OBs, RNs and Anesthesia all think differently but seek to serve one purpose/patient. It is critical to hear the different points of view from each member of the team.”

“Imperative way to ensure good outcomes in the hospital.”

“Helped me define my role and improve communication with team.”
While many practicing clinicians understand the intricacies of the medical management of a crisis, they often lack the communication or team leadership skills that allow effective mitigation of a patient’s situation. **Crisis Team Training** uses a blended learning approach to allow respiratory therapists, residents, attending physicians, and nurses to confront a series of different crisis events to demonstrate the underlying principles of effective team functionality. By the end of this training, a team that has never worked together will become an effective crisis response team using communication and teamwork skills that are highlighted through both didactics and practice with simulation cases.

> "As a student nurse anesthetist at the University of Pittsburgh, I have been involved in multiple simulation events at WISER. It was during my pediatric rotation that I was able to fully appreciate my time spent there. During the middle of a “routine” ileostomy creation, my two-year old patient began to desaturate and the ventilator started to alarm. Being the sole anesthesia provider in the room, I was able to navigate the situation calmly and expediently thanks especially to my Anesthesia Crisis Leadership Training. During the subsequent debriefing with the attending anesthesiologist, he commended me on both my management of the event and my direct communication."

> "This was the first time that I was required to independently navigate a crisis in the anesthesia environment and I felt nervous but well prepared. I attribute my success to the ability to rehearse similar situations in the WISER environment."

> "A few weeks ago I had a patient with a carcinoid tumor for resection who had a carcinoid crisis shortly after incision. The classic symptoms were observed: flushing, hypotension and tachycardia. The patient was also experiencing diarrhea pre-operatively. I had an Octreotide bolus and infusion in the OR. Within 10-15 minutes of the bolus and initiation of the infusion the patient was hemodynamically stable and the flushing had subsided. The anesthesiologist was asking me about the usage and dosages for the drug."

> "This experience in the OR would have been unfamiliar and/or misdiagnosed if it was not for my simulation education at WISER!"

**Over the past 24 months,**

- 21 Crisis Team Training classes have been conducted across several UPMC hospitals to hone the training of their response teams.
- WISER has collaborated to conduct 29 Obstetric Crisis Team Training classes.
There are many patient care skills that require training beyond the traditional apprenticeship model due to their quantifiable impact on patient safety outcomes. While certain skills are rarely utilized, they are critical and clinicians need to have sufficient opportunities to practice to maintain their competency.

WISER provides expertly designed curriculum focusing on various skills to train participants and provide essential feedback in a safe learning environment. The educational programs help prepare the physicians and other healthcare providers for the actual clinical environment. WISER has numerous programs in this category, however some of our most impactful patient safety programs are described here.

Physicians, resident physicians, and SRNAs that may place central lines in the health system participate in WISER's *Central Venous Cannulation Training Program*. This program focuses on proper central line placement. Using online curriculum combined with hands-on training, participants learn how to safely

“Really great hands on experience and felt a lot more comfortable after this session”
“The repetition was very helpful. Getting the chance to go through the motions over and over instills confidence, and makes it easier to step up when we have an opportunity in clinical.”
insert central lines with patient safety emphasized at every opportunity. Central line infections continue to be an outcome that may be minimized through the proper training of healthcare providers.

Feeding tube placement is a skill that requires both psychomotor and cognitive skills. Improper feeding tube placement can have serious adverse effects on the patient. The **Insertion of Feeding Tubes** course provides residents with the knowledge required to safely place feeding tubes. Using the WISER online learning platform, resident physicians and other healthcare providers learn the safest practices and hospital policies associated with bedside feeding tube insertion.

In order to safely sedate pediatric patients in emergent situations, clinicians need to be acutely aware of the appropriate indications, contraindications, and dosing of sedatives. Combined with didactic education and a series of simulations, resident physicians learn how to safely practice clinical decision making and sedation procedures in WISER’s **Pediatric Procedural Sedation for Emergent Situations** course.

>“Great course, especially liked the scenarios which were appropriately challenging and realistic.”

When patients are undergoing radiological studies, there are risks involved that have the potential to develop into life threatening situations. Fortunately, these risks are uncommon, but they do occur. Unfortunately, most radiology attending physicians, residents, nurses, and technicians do not receive the training necessary to identify, communicate, and respond to these situations. The **Radiology Contrast Reaction** course was developed to address these training needs to keep patients safe. A combination of online modules and onsite training scenarios provide the participants with opportunities to learn how to recognize and respond to these emergent situations. Interestingly, the need for this improvement opportunity was identified by resident physicians, who, with a faculty mentor and the WISER team, created the initial program. The program is now being deployed system wide.
“Your WISER contrast reaction class really helped me out today. I was called by the MR techs at Magee about a patient having some trouble breathing immediately after getting contrast for a breast MR. When I got down there to evaluate, the patient did indeed seem to be having an anaphylactic reaction and so I called a condition C. However, thanks to your course I felt pretty comfortable handling the situation till the ED doc arrived, and I even self-administered epi prior to the code team arrival (first time ever!). I know 100% that had it not been for that course I would not have felt nearly as comfortable as I did, and probably wouldn’t have known how to even give the IV epi. The patient was stabilized and was taken to the ED and has since been discharged. So, thanks again and keep up the good work!”

“This is the single best and most practical course I have taken at UPMC. Thank you.”

“I think of all the mandatory training I have taken over 23 years of practice, this is by far the most useful, the most necessary and the most well done, practical course I have ever participated in.”

In response to a need to reduce infections and injuries associated with urinary catheters, WISER partnered with several experts to create a suite of urinary catheter insertion training programs. Foley Cath courses provide best practices in urinary catheter insertion and removal through various combinations of online didactics and onsite training. The typical training program of hospitals enrolls their learners into our online learning platform and then provide hands-on training on their units with simulated models.

In the past two years, there have been 343 nurses and patient care technicians trained along with 62 surgical residents by the Foley Catheter suite of courses.

The Improving Emergency Response to Post-Partum Hemorrhage course is designed to train resident interns and new nurses how to properly respond to a post-partum hemorrhage (PPH) event. It was recognized that new trainees and staff are uncomfortable and unfamiliar with managing these events. Through online curriculum and onsite scenarios and debriefings, the participants responded to a simulated PPH event using a patient simulator and local equipment. This interdisciplinary event focused on the
providers’ abilities to identify the clinical aspects of PPH, respond to PPH situations using a standardized hemorrhage management plan, and effectively communicate with an interprofessional team. This effort was led by a PGY-3 resident and her attending mentor.

**Sepsis**

Sepsis is an elusive disease that requires the need for increased awareness, recognition, and rapid treatment for this vulnerable population of patients; this has led to WISER partnering to create several programs to help combat the disease. **MICU Sepsis Response - Shadyside** is a course directed to the MICU staff at UPMC Shadyside that respond to the hospital sepsis codes. The goal is to provide nursing staff with education and training for sepsis response. **Sepsis Response - St. Margaret** was developed to train the newly created sepsis response team at UPMC St. Margaret (SMH) in the recognition and response to sepsis. The simulation portion include multiple scenarios that focus on evaluations of the Sepsis System Response criteria, along with rapid intervention and care for the deteriorating patient. As part of a QI project at SMH, this program involves longitudinal knowledge/attitude assessment of the team at various intervals post- simulation event. Data collection before, during, and after the simulation is streamlined through the Simulation Information Management System (SIMS) and the Event Logging Application (ELA), both developed by WISER.

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The initial launch of Sepsis Response programs has trained 50 nurses in this critical skill area.
The presentation of patients with an unexpected difficult airway is not a common event, but its proper management becomes a life-saving procedure with only minutes to act. Physicians and Nurse Anesthetists need to practice the recognition, clinical decision making, treatment, and the use of required airway devices when managing such patients. Understanding both the cognitive and psychomotor skills needed to successfully treat a difficult airway allows healthcare providers to provide life-saving care.

WISER has a variety of Difficult Airway Management programs that are custom designed to match the practice needs of a variety of different members of the care teams in their respective environments. The WISER Difficult Airway Management series reaches hospitalists, anesthesiologists, emergency physicians, nurse anesthetists, critical care medicine fellows, emergency medicine residents, and anesthesia residents. Listed below are our courses from our airway management initiatives:

- Airway Management for Hospitalists
- Difficult Airway Management Anesthesiology Certified Registered Nurse Anesthetists
- Difficult Airway Management Critical Care Medicine Fellows
- Emergency Physician Airway Management
- Advanced Emergency Physician Airway Management for Residents

Collectively, over the past 24 months, WISER has conducted 67 difficult airway courses reaching 364 unique participants.

“Most valuable aspects: Real case studies with ‘real feel’ simulation.”

“Working through simulation makes you think under a time crunch.”

“I thought the course was one of the most beneficial workshops in the program. Definitely useful for clinical practice and I feel more confident after going through this course.”
WISER programming reaches healthcare providers in a variety of ways. Many of the latent threats identified by the WISER ICRSE program (previously highlighted) uncovered a lack of knowledge associated with emergency responder skills, details of hospital policy, procedures, and equipment associated with early recognition and interventions of an unplanned inpatient medical crisis.

In response, WISER co-developed the the First 5 Minutes program with a team of clinical subject matter experts. The First 5 Minutes is a simulation-based educational training program designed for training professional nurses, respiratory therapists, and other healthcare providers in the early recognition and treatment of emergently ill patients prior to code team arrival. This course is currently conducted at 8 UPMC hospitals and has significant impact on patient safety outcomes by filling the gap for nurses and care technicians to significantly improve the safety of this patient population.

Over the past 24 months, 250 First 5 Minutes classes have been conducted and provided vital education for 1,627 participants.
The UPMC Critical Response Team (CRT) responds to the care of patients with highly communicable diseases, such as Ebola. WISER partnered with subject matter experts to develop onboarding and competency programs to train the CRT team. Five programs, collectively referred to as the Clinical Response Team Training program, utilize many modalities including online content, standardized patients, partial task trainers, and manikins to meet the learning objectives. Each one is designed to address specific needs of the CRT. All programs emphasize the critical importance of protecting the healthcare provider, by providing a strong focus on the proper donning, waste management, and doffing of the team.

WISER assumed the lead role in coordinating the creation of system-wide training endeavors to prepare UPMC to respond to the world-wide threat of Ebola. Our integrated efforts in simulations and post-activity analysis associated with drills, monitored by CDC and the Pennsylvania Department of Health (DOH), were critical contributions leading to UPMC becoming a DOH certified Ebola Treatment/Assessment Center.

Course Director Eric Poach - UPMC Training Coordinator, Emergency Preparedness:

“The support the WISER Center provided to the UPMC Clinical Response team during initial training and on-going competency training has proven to be one of the keys to the successful designation of the UPMC Infectious Disease Unit as one of the 7 Ebola Treatment Centers in Pennsylvania.”

“The exercise design team provided realistic scenarios that tested the Team members ability to care for a patient with a highly infectious disease.”

“Due to the use of the immediate feedback provided by the simulations, all of the Team members improved their performance during each consecutive exercise.”
The use of ultrasound is rapidly being adopted as a tool that significantly improves patient safety in a variety of different procedures. It is important to note that critical life-threatening injuries can occur without the proper use of ultrasound. However, the comprehensive use of ultrasound has not been consistently incorporated into residency training or professional development opportunities for practicing clinicians. Thus, it is an area of medicine that is still in the “See one, do one, teach one” era of development. Since critical patient care decision making can be predicated on the interpretation of bedside, point-of-care ultrasound images, it is essential that all who use the technology are competent.

To address the ever-growing need, WISER has collaborated with ultrasound experts in anesthesiology, critical care medicine, emergency medicine, and cardiology to develop world class programming. The following are several of WISER’s ultrasound programs designed to teach essential skills to residents, fellows, and attending physicians.
Anesthesiology Perioperative Ultrasound Workshop and Critical Care Medicine Fellows Critical Care Ultrasound

Courses that provide pulmonary, cardiac, Focused Assessment with Sonography in Trauma (FAST), and vascular point-of-care ultrasound.

Introduction to Clinical Ultrasound: Vascular Access & FAST

Provides emergency medicine physicians training opportunities with the use of clinical ultrasound for vascular access and the FAST exam.

Introduction to Emergency and Critical Care Ultrasonography

Immersive 2-day program to introduce physicians to the implementation of focused ultrasound exams in emergency and critical care theaters. A multi-modal, mastery-based approach is used for topics including focused cardiac, lung, pleural, abdominal, and vascular ultrasound techniques.

Echocardiography Scanning

Cardiology residents learn to use both the transthoracic and transesophageal probes on a high technology ultrasound simulator to obtain standard views and to identify and recognize common cardiac pathologies.

Perioperative Transesophageal Echocardiography: Basic and Advanced Simulation Training

Anesthesiology and cardio-thoracic anesthesiology fellows are taught the basics of obtaining standard views and recognizing normal images as well as basic pathology using Trans-Esophageal Echo (TEE).

“Great super relevant topic, feel happy to have this available to us.”

“Excellent, high yield course. Well organized. Great educators/faculty. Appreciated the small learner to teacher ratio for hands on portions. Will recommend course to colleagues.”

“I would absolutely recommend this course to other EM physicians even if they have received formal US training. It enhanced and expanded my knowledge base and will likely change my use of US in my practice.”

“Amazing course, high yield, should be taught at the beginning of the year. Practice altering.”

Over the past 24 months, 41 ultrasound classes have been conducted, reaching 242 participants for a total of 1,209 encounter hours.
Effective integration of simulation-based healthcare education programs into residency curriculum is key to providing residents with opportunities to practice technical and non-technical skills that have significant impact on patient safety. In addition, assessment of these residents prior to practicing on actual patients is essential to supporting patient safety measures. WISER continues to collaborate with a variety of UPMC residency programs, including emergency medicine, anesthesiology, critical care medicine, general surgery, cardiothoracic surgery, plastic surgery, internal medicine, psychiatry, pediatrics, and physical medicine and rehab to effectively assimilate learning and assessment opportunities into their curriculum.

For example, CA1 Anesthesiology residents are required to pass an orientation program that covers a multitude of topics. The CA1 Introduction to Anesthesiology Simulation uses simulation to help resident physicians prove competence in the skills necessary for their first day of clinical care providing anesthesia in the operating room. The residents practice airway management skills, rehearse intravenous inductions of general anesthesia, establishing maintenance of anesthesia, manage emergencies, and must pass a faculty observed assessment. They also practice operating room set up, anesthesia machine check, and PACU transport and admission.

In addition, CA1 residents are required to participate in CA1 Anesthesiology Resident Basic Crisis Resource Management. The goal of this course is to have residents develop skills associated with principles of crisis
resource management in a variety of common changes in the physiological status in patients having general anesthesia.

In addition to anesthesiology residents, critical care medicine fellows in the Multidisciplinary Critical Care Training Program are required to attend **Critical Care Medicine Fellows Orientation** which focuses on basic airway assessment and management of the critically ill patient.

“I feel much more comfortable with an anesthesia machine, and conceptually how it works. Troubleshooting the anesthesia machine was probably most valuable part for me.”

“Excellent simulation, allowing for mistakes and learning opportunities to develop in a non-threatening environment.”

“Excellent simulations, helpful in representing real situations.”

Over the past 24 months, 17 required residency classes have been conducted, reaching 190 Resident Physicians for a total of 1,546 encounter hours.
During the COVID-19 Pandemic, WISER quickly responded with Just-In-Time efforts directly benefiting UPMC patients and staff

WISER provided the simulated environment and research support for the development of the **Individual Bio-Containment Units** developed in a partnership between the Department of Plastic Surgery, the University of Pittsburgh, and UPMC. This patent pending innovation enables healthcare providers to have a safe environment to ensure minimized exposure to aerosolized COVID-19 viral particles, while providing lifesaving therapies to patients.

WISER led the Just-in-Time production of the training videos that would allow our staff to be competently redeployed as medical screeners for people entering our hospitals.
On the Clinical Frontlines:

WISER engaged with the department of Emergency Medicine to create an innovative process of airway management that was provided to COVID-19 patients, with an increased focus on healthcare provider team safety. The simulation-based development approach allowed the rapid creation of the new processes, procedures, communication plans, and interdisciplinary teamwork. The findings and recommendations of the program was disseminated across the UPMC Health System.

Through a collaboration with UPMC Magee-Womens Hospital, WISER conducted in-situ readiness assessments in the patient care environment. With a focus on personal protective equipment (PPE) the hospital was able to ensure emergency response teams were able to provide the highest quality care, while keeping themselves and other staff members safe when providing urgent treatment needs to critically ill COVID-19 patients.
WISER
By The Numbers
in 2019:

2,003 Supported Classes
5,887 Unique Participants
17,050 Quizzes Administered
543 Unique Facilitators
66,471 Participant Hours
6,738 Encounter Hours