



Institute of Medical Simulation



SIMS Simulation Educators Training (SIMS SET)

Dates available:

- 23 & 24 July 2024, 8.30am 5.30pm
- 14 & 15 November 2024, 8.30am 5.30pm
- 20 & 21 February 2025, 8.30am 5.30pm

Academia, 20 College Road, Singapore 169856 (Located in SGH Campus)

INTRODUCTION

The two-day SIMS SET faculty workshop is designed for educators who are interested in designing and running high quality simulation-based programs. Participants work in small groups with close instructor interaction and will have the opportunity to conduct a simulation exercise followed by debrief.

OBJECTIVES

At the end of the session, participants will:

- Understand the art of communicating feedback & reflective learning
- Understand the techniques to prepare & conduct a simulation exercise
- · Acquire the skills of debriefing a simulation
- To be able to reflect & be consciously aware of the complexities of the healthcare environment & the need for inter-professional education
- To understand & appreciate the various professions & their patient care roles & skills
- Planning transitions of care & forming a shared mental model in the scenarios during the course
- Enhance collegiality & collaboration with a view to improve patient safety

OUTLINE

- Familiarisation of participants with the simulation manikin & environment
- Roles of the simulation instructor
- Designing & running of scenarios
- Utilising effective debriefing techniques

WHO SHOULD ATTEND

Healthcare professionals who are interested to use simulation as a teaching tool

COURSE FEE

S\$1417.00 w/GST (\$1300)

CME POINTS

8 CME Points

REGISTRATION

SingHealth Educators to apply for Faculty Development Funding via Education Grant Call:

- For Medical Professions, please indicate your interest through your respective ACPs.
- For Nursing, please indicate your interest through College of Clinical Nursing (nursing@singhealthacademy.edu.sg).
- For Allied Health, please indicate your interest through College of Allied Health (alliedhealth@singhealthacademy.edu.sg).

For all others, please email the attached registration form to: sims@singhealth.com.sg

For withdrawals / postponement, please email in to sims@singhealth.com.sq at least 3 weeks before the course date to avoid penalty.















Institute of Medical Simulation

SIMS SET REGISTRATION FORM

Please fill in with all the information required and $\ensuremath{\square}$ at the appropriate boxes.

SECTION A: COURSE DE	TAILS									
Course Date	□ 23 & 24 July 2024 (8.30am – 5.30pm)									
	☐ 14 & 15 November 2024 (8.30am – 5.30pm)									
(Please tick)	☐ 20 & 21 February 2025	(8.30am – 5.30pm)								
SECTION B: REGISTRATI	ON DETAILS									
Participant Name	:	Professional Reg. No.	:							
Institution		 Department								
(As of course date)		(As of course date)	·							
Job Designation	:	Contact No.	:							
Official Email Address		Meals (Food provided is	☐ Kindly tick for Vegetarian							
(Issued by Institution)	:	Halal Certified)	: option							
For Non-SingHealth Staff and Residents only: By ticking this box and providing the information set out here, I hereby;										
- consent to disclose my personal data for the delivery of the courses/programmes I have registered with SingHealth Duke-NUS Institute of Medica										
Simulation (SIMS), as well as for the dissemination of marketing materials on upcoming events.										
- confirm that I have read and understood the SingHealth Data Protection Policy, which is made available at http://www.singhealth.com.sg/pdpa (hard copies are also available upon request).										
		aw my consent on the disclosure / usage of my	personal data and that the request would							
be processed in two calend										
		upersede or replace any other consents which additional to any rights which SingHealth may ha								
related corporations and ac	athorised service providers, and are a	additional to any rights which shigheath may he	ave at law, to collect, use of disclose.							
SECTION C. DAVMENT N	METHOD (Please select 1 op	tion)								
		dolly								
(1) By Faculty Develop	oment Funding	(2) By Invoice (Others)	☐ (3) Internet Banking							
For option (2), please pro	ovide all required information	n below for invoice creation.								

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Billing Address	:					
Contact person (Attention to) :					
Contact No	:			ACRA/ UEN No.	:	
Email address	:					
Additional Details (if any)	:	Cost Centre	:	Process Code	:	
		Internal Order	:	PO No	•	
CANCELLATION POLICY: Can	cellat	ions and Postpone	ement – must l	oe advised in writing or via en	nail	

i.e. Course on 16 December 2023

Informed after 23 November 2023

Informed by 23 November 2023

Replacement of eligible participants is allowed.

Company Name

Informed SIMS:

More than 3 weeks*

Less than 3 weeks*

• SIMS reserves the right to cancel the course and fully refund the participants should unforeseen circumstances necessitate it.

Amount refundable:

Full refund

No refund





Department



*Working days refer to Mon -

Fri (excluding course day &

public holidays)