**NAHMAN Simulation – 70 minutes – Facilitator’s Script**

Students will be placed in small teams of about 6-7. There should be three groups in each breakout room.

**Pre-Brief - Set up of the activity – 5 minutes**

This is where the facilitator will lay out the process, share the case file with the students, allow them to ask questions, etc.

***Facilitator script – feel free to read out loud to students***

*You are working at a multidisciplinary diabetic clinic*

*Nahman is your patient – He has complained to the director indicating that he is receiving conflicting advice on how to manage his exercise routine with this Type 1 diabetes. The Nurse gave the advice to 'stop exercising as it could kill you'. The Physiotherapy Technologist gave 'wishy washy advice that wasn't clear'. The Social Service Worker gave the advice to 'keep exercising because it is good for your mental health’.*

*Each team will have time to prepare for the appointment with Nahman. Each team needs to provide Nahman with the correct advice regarding exercise. Each team needs to guide Nahman on how to live with his diabetes (examples - motivation, social support, and cognitive way of thinking)*

*Each simulation is 10 minutes.*

*After the three simulations, a debrief is completed.*

*I will be back in 10 minutes to start the simulation. Please be ready.*

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**Pre-Brief - Team meeting - 10 minutes**

Students work within their small multidisciplinary team to prepare for the intervention.

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**SIMULATION – meeting with Nahman – 3 x 10 minutes**

Students will now see Nahman (role played by teacher/facilitator) in the context of a diabetes clinical setting.

Nahman enters the room.

Students will pass through the simulation in their multidisciplinary teams. There will be a ‘trigger’ within the simulation. At around the 5-minute mark, Nahman will start to become more difficult (see 3 variations below).

The team will have to navigate/manage the scenario.

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| Nahman in Simulation 1 | **Angry, oppositional, pissed off, minimizing ( sarcastic negative tone, can use your nonverbals- overly direct eye contact, foot / finger tapping, huffing and puffing, etc.)**  Things you can say as Nahman V1   * “ You gotta be kidding me, I have 3 different conflicting forms of advice!?! I feel like crap and it’s all your fault **(points at nursing team)**. You people are incompetent.      * “Don’t you people ever speak to each other? You would think you might want to do that before asking someone to come in multiple times and miss work- like I can afford to do that!” * How on earth do you expect me to get better if I don’t exercise a little bit? * Each one of you gave me different instructions and I am still in pain?” * And in what universe can someone have enough energy to exercise when their blood sugar is all over the map? * “You made plans for me that assumes I actually have time in my day to eat right and afford groceries and take time out of my busy work schedule to get a proper lunch. Maybe your life works that way but mine doesn’t.” * “Just fix the pain and let me get back to my job, I need to keep roof over my head and try to pay for all of this expensive food some of you are insisting I eat, I am not rich you know.” * “ I think you should refer me to another place, I don’t trust you if you can’t come up with a plan that makes logical sense.” |
| Nahman in Simulation 2 | **Defeated, no hope, giving up, catastrophizing, labeling as a bad person**  **Things you can say as Nahman V2** (Soft quiet tone, very little eye contact, head down, shrugging shoulders, deep sigh, head shaking, poor posture)   * “ I must be really stupid, I didn’t understand all of your instructions. I think I tried all of your advice and nothing is work, particularly to exercise everyday.” **( directed at social service )** * “I try and try again and I just can’t do it. I am in too much pain” * “As usual I don’t have enough energy, this diabetes is going to be the death of me. I am so exhausted at the end of the day I can’t cook like this”. * “I am not organized enough to plan out every meal and 45 minutes of cardio a day, and stretching. It is overwhelming. I can barely get out of bed and to work on time a lot of days, I have no idea how you expect me to keep this schedule up.” * “ I work like a dog to try to keep a roof over my head. I don’t really have money for expensive food or to take meal breaks.” * “I feel like everyone asks to much of me- like it is easy and it is not. Maybe it is for some people but I’m not as strong/ dedicated as most people” * “ I am not fit enough to pull these exercises off.” * “No matter what I try nothing ever works anyway.” * “ I am thinking I am probably wasting your time and this might be one of the reasons why you have given me conflicting information, to get rid of me. I don’t blame you, clearly I cannot be fixed.” * “I think I will just tough it out and not bother coming back, there is no point anyway. I think the damage is done and I just have to learn to live with it.” |
| Nahman in Simulation 3 | **Anxious Client: Unsure, confused, has way too many questions, anxious, overwhelmed, worried** (fidgety,talking faster, has to repeat instructions over and over again, starts focusing on the future and goes off on a tangent, spotty eye contact, quizzical looks, poor attention, tense, shoulders up.)   * “Umm yeah so I can’t keep any of this straight. I went home with all of these instructions, nurses said don’t exercise and take meds. Social service workers said exercise all of the time and eat well, physiotherapy said “exercise, but not too much, eat, but don’t over do it”- So I don’t know I tried each one for 2 days each and yeah no change.” * “Is there supposed to be a change? Am I doing something wrong?” * **( to Physiotherapy)** So like what exactly does some exercise mean and try to eat well most of the time? Is this like exercise once a week? How many minutes exactly? * What if the exercise makes me feel more pain? Is there a maximum? A minimum number of reps, or is it more important about how many minutes? * “I guess if I don’t exercise I am going to be in pain- right? Seems like a catch –22.I am just not sure.” * “I don’t want to make the pain worse because I won’t be able to exercise at all” * “How much am I supposed to eat beforehand? Or was that afterwards? What if I eat beforehand and my sugar goes all wonky, should I keep exercising? Should I skip exercise if my sugar is off all day and do not have enough energy, or not?” * “ I gotta get this right, I don’t want to be going to the gym or work and people thinking I am drug addict because I have to inject insulin every 5 minutes and carry around needles- can you imagine- how embarrassing?! I’d probably lose my job.” * “ We need to hurry this up. I have to feel better and be in less pain. I could lose my job you know, and then how would I be able to afford food and rent? I can barely afford it now anyway.” * “ What if I have to skip breakfast or exercise in the morning? I cannot afford to lose my job? Is this going to make a big difference?” |

**3x 10-minute scenarios – 30 minutes passes**

**Debrief – 30 minutes**

Facilitator the debriefs the activity with all 20 students.

Facilitator debrief questions.

1. How did that go? How do you feel? Did that go the way you thought it would?
2. What did you learn about teamwork? What did you learn about roles within a team?
3. What did you learn about collaborative practice?
4. What did you learn about yourself?
5. Will it always go this way?
6. Etc.

Make sure that some key takeaways are pulled out of the debrief conversation. Also, make sure that one (or two) students know the one (or two) key takeaways they will share back in the main room.