

# IMSH DAILY

DAY ONE | January 11, 2026

## PRESIDENTIAL REFLECTIONS

**C**ompleting his term as the 20th President of the Society for Simulation in Healthcare (SSH), Jared Kutzin, PhD, DNP, MS, MPH, RN, FSSH, FAAN, reflected on the Society's progress, priorities, and emerging opportunities over the past year.

Kutzin opened by highlighting the recently finalized memorandum of understanding between SSH and SESAM, the Society for Simulation in Europe, describing it as a milestone that underscores SSH's commitment to international collaboration and strategic alignment.

Building on this momentum, he emphasized the Society's expanding global footprint. "We've deepened our engagement with partner societies and significantly grown our affiliations," he noted. "New organizations, including the African Simulation Network, have joined SSH as affiliates, and we've seen substantial growth in our Commission for International Simulation Accreditation (CISA). This year, we will add three new CISA organizations to the one established last year, bringing the total to four accrediting bodies authorized to



Jared Kutzin

accredit simulation programs worldwide using SSH standards."

Alongside this international growth, Kutzin pointed to important, but less visible, organizational advances. "Many of these changes happen behind the scenes, but they are critical," he said. He highlighted the implementation of >

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# IMSH

Society for Simulation in Healthcare

JANUARY 10 – 14, 2026 | SAN ANTONIO, TX

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#IMSH2026



See the **SSH Events App** for Schedule Updates

## WELCOME TO SAN ANTONIO

**T**he IMSH 2026 Planning Team welcomes you to San Antonio and IMSH 2026!

Co-chairs John E. Alex, MD, CHSE-A, CHSOS-A, RDMS, FACEP, FAAEM, Amy Follmer, CHSOS-A, CHSE, FSSH, and Syretta Spears, CHSOS-A, CHSE, have worked for well over a year to create this event packed with opportunities to learn, network, and collaborate, and they are excited about returning to San Antonio and celebrating the UNBOUND theme with attendees. >

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# UNBOUND

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# TODAY AT IMSH



**Sunday, January 11**

**IMSH Connections Program (Sign up in Registration)**  
Lila Cockrell Theater – 8:00-9:30 am

**SSH Corporate Roundtable Learning Labs**  
Rooms 301A, 221D – 9:30-10:30 am

**Convention Center Tour**  
Meet at Registration – 9:45-10:45 am

**Opening Plenary Session – The Chad Epps Lecture featuring Tania Katan**  
Stars at Night Ballroom – 11:00 am-12:15 pm

**Exhibit Hall Grand Opening**  
Exhibit Hall – 12:30-6:00 pm

**Lunch**  
Exhibit Hall – 12:30-2:00 pm

**Technology Experiential Area**  
Exhibit Hall – 12:30-6:00 pm

**Research Posters Displayed**  
Exhibit Hall – 12:30-6:00 pm

**What's New in Sim Showcase**  
Exhibit Hall Theatre – 2:00-2:50 pm

**Cornhole Tournament (Registration and fee required; proceeds benefit SSH fund)**  
Exhibit Hall – 2:00-6:00 pm

**Accreditation Celebration (Open to all SSH Accredited Programs)**  
Lila Cockrell Theater – 2:30-4:00 pm

**Corporate Roundtable Product & Technology Showcase on the IMSH Press Box Stage**  
Exhibit Hall – 3:55-5:00 pm



**See the SSH Events App for schedule and topic updates**



SSH Board of Directors



Jared Kutzin, SSH President



Attendee excitement for IMSH 2026

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# TECH FORUM GENERATES STRATEGIES

MSH kicked into high gear early with Friday afternoon's Technology Forum: **Unleashing Potential – Removing Barriers to Technology Integration.**

As representatives of the Technology Planning Committee, Bob Armstrong, MS, FSSH, and Carrie Gigray, MSHS, CHSE, CHSOS, NRP, welcomed attendees to the Day One opening session by establishing a foundation for discussions, beginning with the expressed belief that everyone participating in the Technology Forum is intelligent, capable, cares about doing their best, and wants to improve, then adding aspects of interprofessional collaboration, including mutual respect, synergy, and communication.

Gigray encouraged the audience to "speak their truth" while "employing active listening" and "being present," adding that facilitators were involved in the process to ensure balanced participation from all roles and backgrounds.

In addition, identified facilitator responsibilities included human verification of AI results that would be generated in each specific area.

While noting the impossibility of individual introductions of the entire audience, Armstrong got participation started by eliciting audience input ranging from longest distance traveled to attend IMSH (the consensus seemed to be from Melbourne, Australia) to raised hands to identify sim operators, administrators, clinicians, and others.

"The value of this event is you," Armstrong said, urging all to participate in the breakout sessions to come.

He explained that the forum would be exploring barriers to healthcare simulation technology adoption in two different ways: technology modalities and user groups.

The stated objective of the Breakout 1 technology modalities session was to identify the core technical and logistical barriers to implementing specific technologies in healthcare simulation. Sessions included AI standalone tools, manikin-based simulation, XR / AR / MR, haptics and wearables, 3D printing, and serious games.

That was followed later Friday afternoon with Breakout 2, in which user groups were to identify the unique program, cultural, and practical challenges faced by specific roles in healthcare



Carrie Gigray and Bob Armstrong

simulation. Roles included nursing, health systems, medicine, allied health, advanced practice providers, and EMS / prehospital.

"We want you to share your knowledge," Armstrong said, "because that's the whole point of identifying those barriers to technology. So find the groups and help advise the discussion."

He added, "Everybody here knows something that somebody else doesn't know. So there's no stress in participating. We're all here to talk."

Armstrong and Gigray then got the audience participation aspects of the technology event started with a decidedly low-tech beach ball that was served into the audience containing some sample questions that audience members could answer back to the technology committee members on stage. Examples ranged from what technology someone was most curious about to someone's favorite non-electronic technology.

Armstrong's responses often returned the questions in the forms of what the audience member came to IMSH for and what they hoped to get out of the Tech Forum.

The beachball exercise also helped to expand discussions to specific individual requests ranging from digital literacy related to medications, to interest in new learning objectives that can be added or achieved with new AR [augmented reality], VR [virtual reality], and MR [mixed reality] technologies, to how to build a healthcare simulation business case for return on investment in implementing these new technologies.

Each of the breakout groups initially had the responsibility to report back at the end of Friday afternoon's sessions with two to three specific barriers, strategies, and collaboration needs. However, reflective of the dynamic nature of the proceedings, the formal sharing of results was slipped to Saturday morning. Instead, Armstrong hosted an impromptu "first look" analysis of how the forum's first day unfolded.

"How did we do today?" he asked. "Or what was one of the most interesting insights you heard today?"

The query drew slightly tentative responses on a wide range of healthcare topics. In one example, an Emergency Medical Technician shared her surprise over the dramatic EMT program changes over the last few years in terms of length and content and how simulation might be used to facilitate efforts.

Another representative example reflected comments from a breakout session participant who identified shared challenges in the integration of disparate AI tools and [getting] systems to work together. This was followed closely by an attendee from the manikin breakout session who identified the need to better leverage data from manikins.

"How often today did data come up as a topic?" Armstrong inquired of the audience. "After all, AI is nothing without the data. But it's got to be the right data to be useful data."

He went on to address the critical need for trust in AI and a range of potential complications stemming from a resource-constrained world.

Another participant addressed the realities of ROI that had surfaced earlier in the forum introduction. Identifying themselves as "from technology," they said, "I'm only three or four months into simulation, and I'm trying to create a product that would work. And I was surprised that there is no study that actually shows ROI for simulation with technology."

According to event planners, once the barriers to healthcare simulation technologies have been identified and categorized, a shared body of knowledge will be used to create practical solutions and innovative strategies for overcoming those barriers. The longer-term goal is the preparation of a post-event white paper or report, summarizing the identified barriers, stakeholder perspectives, and actionable recommendations for improving technology integration in simulation-based education. 

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## SIMULATION SURVEY

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**Share your insights in our Healthcare  
Simulation Survey.**

All participants will receive a report of the results and be entered into a drawing for a **IMSH 2027 Conference Pass.**

Your feedback helps strengthen data-driven progress in the simulation field.



Continued from page 1

< > a new project management and reporting system for staff and volunteer leaders, which strengthens accountability, improves coordination, and ensures more efficient and timely progress toward SSH's five-year strategic plan.

Kutzin also reflected on the active role of the SSH Board and Society leaders, noting their participation in national and international conferences, advocacy efforts on Capitol Hill, and engagement with key stakeholders to advance the role of simulation in healthcare.

"The Board has played a vital role in shaping our global partnerships," he explained. "We've established a strategic partnership working group to improve communication and coordination, another example of how new structures and processes are helping us better deliver on our mission and vision."

When asked about emerging trends in healthcare simulation, Kutzin pointed immediately to artificial intelligence. "We can't talk about the future of simulation without talking about AI," he said, while also emphasizing the continued growth of competency-based education and global collaboration.

"Our international partnerships increasingly demonstrate the value of simulation for education and patient safety, not only in developed nations, but across developing re-

gions as well," he noted. Drawing on personal examples from India, Nepal, and Tanzania, Kutzin cited work from the Safer Births project, published in *The New England Journal of Medicine*, showing meaningful improvements in patient outcomes through simulation-based interventions. "This is a powerful trend, with simulation expanding globally and producing measurable, real-world impact."

Kutzin also discussed the SSH-DAISY Team Award for Simulation, which recognizes a team that exemplifies compassionate care, collaboration, and excellence in healthcare simulation education or practice and was created to highlight the real-world impact that simulation can have.

Looking ahead, Kutzin identified funding and sustainability as both challenges and opportunities. "Funding is foundational," he said. "We must continue to position simulation as an essential patient safety tool at the local, regional, and national levels." He also underscored the need for sustainable practices, including partnerships with industry to recycle and upcycle simulation equipment. "If equipment is no longer perfect but still functional, can we redirect it to developing regions? Can we work with vendors to design more modular, repairable simulators rather than discarding them? These are opportunities we should be actively pursuing."

Reflecting on the International Meeting on Simulation in Healthcare (IMSH), Kutzin de-

scribed the conference as both energizing and transformative. "IMSH is an opportunity to connect, to learn, and to bring critical ideas back to your own institution," he said. "That translation, turning insight into action, is where real impact happens."

Summarizing his message to attendees, Kutzin encouraged them to fully engage with the conference's theme, UNBOUND. "This isn't about being limitless," he explained. "It's about challenging assumptions, pushing boundaries, and not being tethered to past ways of thinking." He acknowledged the diversity of innovation across the field, from virtual and augmented reality to AI, while emphasizing that SSH offers many pathways for members to find community and purpose.

"Be involved," he concluded. "IMSH has grown tremendously over 26 years, and that growth brings incredible opportunity. Reach out to Sections, SIGs, Affinity Groups, Fellows, and long-time members. Some of the most meaningful moments don't happen in formal sessions; they happen in hallways, exhibit halls, and conversations over coffee. Sit with someone new. Put your phone down. Engage. To borrow from the UNBOUND theme, 'unbind' yourself from the technology for a moment and invest in the human connections that make this community so powerful." 🌟

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< > With 800 educational sessions, a bustling Exhibit Hall featuring 145 exhibitors from 20 countries highlighting the latest healthcare simulation technology, and many other activities throughout, the Planning Team has strived to ensure that this vibrant event meets attendees' needs in a variety of ways.

All three Co-chairs expressed their gratitude to the SSH staff for their support in the planning process. "We were so well-supported by the SSH staff, it has made the process feel like a breeze," said Follmer. "They're always available, keeping things moving forward, and they're just all so good at the pieces that they do related to it. They really help support the Planning Team in making IMSH the conference that it is."

Alex described the theme development and the related imagery as "touch points" that stood out in the planning process. "We knew we were coming off the [IMSH] 25th anniver-

sary, and we wanted to be very mindful and respectful of everything that this community has accomplished in the past 25 years," he explained. "Recognizing that, we also wanted to look forward to what's next. Technology is advancing tremendously; the world is changing. So, where do we want to go in the next 25 years? And that's when we really started talking about breaking down silos. The pandemic showed us that we're not limited by borders and boundaries and bodies of water anymore. We can really expand our reach globally with some of the innovative ideas that came out of the pandemic. And that's

where UNBOUND came from. We're not held to traditional barriers."

Follmer added, "The future of simulation really is this limitless opportunity. At this point, there's not anything holding us down that won't allow us to keep moving the field forward and growing the global healthcare simulation community, and we want to celebrate that."

"Our logo looks like confetti," she continued. "We want to celebrate what the next 25 years are bringing."

"It's a bright, thoughtful future," Spears said, and with the team's acknowledgement that the UNBOUND theme has the >

**“What we are going to challenge everybody with is to hold on to those ideas, at least one or two, and go back and work on that. Don’t let those ideas fade. Don’t let the excitement fade.”**

<> potential to mean different things to different people, she added, "We wanted the theme to be something that was thought-provoking, that could strike up conversations among attendees of the conference, asking, 'What are your thoughts?' or 'What does that mean to you?'"

One challenging aspect of the planning process, according to Alex, was selecting the content from "all the fantastic submissions, and choosing equitably to make sure that everything was equally represented and that there was something for everybody."

Choosing the keynote speakers was another thoughtful and deliberate process, Follmer noted. "It was so hard to narrow that down, as there were so many great options," she said, while looking for the right fit with the theme and "ensuring that the speakers we were inviting really represent what we want our audience members to take home."

Spears added, "I think because there were so many choices, and then just the energy of all of them, trying to find the right fit for the right day and lecture was a challenge, but it was fun trying to make sure we met every attendee's needs when it came to presenters."

"All three of us are really excited to hear them speak," Alex said. "We chose them very intentionally, and it's a great lineup."

Follmer said that another IMSH highlight, and something that embodies the spirit of the healthcare simulation community, is SimVentors. "It's just such a great opportunity to look at people's really innovative ideas and creations, and it goes back to our theme. As a whole, our profession is openly sharing ideas. No one's closing things off. It's 'unbound,' where so many people share their inventions and freely hand out information – 'Here's the QR code to the setup guide I made,' or 'Here's my email. Please reach out if you need additional help making this.'"

Alex echoed that idea. "What has always impressed me is how open everyone is to sharing," he said. "We are a technology-based community, and you would think intuitively that that is very proprietary – 'I've got this great idea. I'm going to hold on to it.' And you just don't see that. It is free-sharing, open. It's 'Hey, if you've got a problem, here's how I solved it. You want my slide deck from the lecture I just gave? Or the instructions on how to 3-D print this innovative device that I just came up with?' Almost unanimously,



IMSH 2026 Planning Team Co-chairs (l to r) Syretta Spears, Amy Follmer, John Alex

it's shared openly and freely, and it's really impressive to see."

Additionally, there are fun events that benefit the SSH Fund. Alex pointed to the SimFit 5K Run, Walk, and Roll held earlier this morning, and this afternoon's Second Annual Cornhole Tournament, as opportunities to support the Fund while connecting with colleagues.

One of the new features at IMSH this year is the translation app available for sessions. By scanning the room's QR code, Follmer explained, attendees can choose from more than 200 languages and read live captions on their phones as the presenter speaks.

Citing another new aspect of IMSH 2026, Follmer continued, "We modified session lengths, so we no longer have 90-minute sessions; 60-minute sessions are the longest, and we did that to create more time slots for more courses so that we could allow for more wonderful content to be presented." She noted that for those sessions containing more content than a 60-minute period allows, there are opportunities for a "part one and part two."

Follmer's message to IMSH attendees is to "embrace the theme, UNBOUND. Whether it means meeting someone you wouldn't normally meet or going to a session or topic you wouldn't normally attend, let yourself be

'unbound' for the conference and take in as much as you can."

Spears built on that concept, encouraging participants at IMSH to be "unbound" in getting to know people. While some might feel reluctant or even intimidated to approach someone that they've seen on social media, for example, Spears said, "Know that everyone is there to share, and just go for it. Make that connection; keep that connection. Know that sometimes, honestly, because of the size of our conference, which is great, it can be a little overwhelming, but it's all good, and you can make a great experience out of it."

Alex emphasized that all three Planning Team Co-chairs are willingly approachable at IMSH. "If you have any questions, we will be happy to answer them or guide you in the right direction," he said. "We're here to help."

He noted that, especially for first-time attendees, "the amount of people, content, excitement, collaboration, and networking" can be overwhelming. "But it's overwhelming in a good way," Alex said, "and by the time you leave, you are glowing with ideas to take back. What we are going to challenge everybody with is to hold on to those ideas, at least one or two, and go back and work on that. Don't let those ideas fade. Don't let the excitement fade." 



# IMMERSIVES PROVIDE UNIQUE LEARNING OPPORTUNITIES

One of the early sets of professional development opportunities available at IMSH 2026 featured more than a dozen pre-conference immersive courses. Available topics ranged from *Accreditation: Core, Education, and Human Simulation Standards* and CHSE and CHSOS courses to technology offerings like *3D Printing in Healthcare Simulation: From Introduction to Printing*.

One of this year's unique offerings took attendees off-site, to the SSH-Accredited Center for Simulation Innovation, University of Texas at San Antonio, for an event titled *From Vision to Reality: Building and Implementing a Successful XR Lab for Healthcare Simulation*.

Approximately 30 IMSH attendees were greeted by Center Director James Cleveland, PhD, RN, who guided welcoming personal introductions from both visiting audience and UT staff.

Cleveland explained his role and responsibilities as Center Director, and the terminology identifying various simulation capabilities across the campus.

"How we deliver is definitely working hand in glove with our faculty," he began. "We work with the University, we work with the community, we work with research, and we work with graduate and undergraduate programs."

He took visitors on a walking tour of the Center, explaining that when he arrived 17 years ago, the infrastructure was "more or less a skills lab," with low fidelity simulation.

"That's what we had," he said. "But since then, along with the money that came in, and

working with community partners and everyone else, we became a 17,000-square-foot simulation center. We're the largest academic center in the region and accredited."

He directed attention toward "the original sim room," noting, "We called it a simulation center. And as you're walking through, these are the skills rooms. They accommodate 16 to 20 students at two students per bed. And this is just where they do their skill basics."

He brought the group through the medical-surgical center, observing that the configuration allows for four different learning spaces and adding, "It can be used as a prioritization space when people are better skilled and have to make priorities when ATLS [Advanced Trauma Life Support] is taught in here. People can be remote and watch their students and watch the events. We can record. And we can actually port out to a conference room where people can see different simulations live in real time. And it really does help, as far as recording students, practicing self-grading, and then submitting a finished product. It really does help quite a bit."

Down the hall was a fully-functional apartment space configured with a bed, carpeted floor and all of the common apartment furniture.

"This simulation space is a 'death and dying' apartment, which can be used for physical therapy visits, helping people get out of bed, and helping them get to the restroom. Again, it's a fully-functional apartment."

Nearby was a conference room and control room, where all main simulations were conducted under control of the facility.

Additional features included two ICUs [Intensive Care Units], a pediatrics lab, and a VR immersive room, which he identified as the center's "newest add-on."

The immersive visit then shifted back to a classroom setting, where Tess McKinney, owner of Firework Media Studio, LLC-XRenegades, provided her experience, her thoughts, and opportunities surrounding the creation of an XR lab.

"I know you guys went around the room and said whether or not you've used VR," she said. "Who in here has actually been on a headset and uses it? That's good. Lots of times I've been in rooms where no one's used it and no one has a clue."

McKinney then offered a brief VR introduction for those visitors who were not employing the technology. She began by clarifying differences between VR, AR and XR, adding, "AR, VR and MR [Mixed Reality] are essentially all covered under XR. And only VR has to be in a headset."

She identified four different categories of VR, explaining differences and offering application examples for the participants. The categories included non-immersive VR, semi-immersive VR, fully-immersive VR, and collaborative VR.

Careful to avoid any product endorsements, she also offered a few representative examples of both VR and MR headsets.

Other key elements of her overview highlighted the power of partnerships in establishing a VR lab, VR applications with new technologies like haptics, and a number of specific questions that someone should ask themselves before starting to develop a VR lab. Questions included: What is the real purpose of this VR lab? Do we have support? Do we know how to find the right software and hardware packages? How many students, faculty and staff will need access? And how do we measure how to keep it once we have the immersive tech?

One clear message emphasized by McKinney was that the process should never begin with buying the equipment but should be part of a well-planned process.

Additional afternoon briefing topics included: Building and Implementing a Successful XR Lab for Baccalaureate-Level Nursing Students; Dental Care VR with the School of Dentistry; and Wrap-up Discussions. 

# I HAVE MY SAFETY LABELS: WHAT'S NEXT?

**S**imulation warning labels are a useful first step toward reducing the risk of adverse events and unintended consequences of simulation-based education activities. It is important to label simulation supplies and equipment to draw attention to the fact that the item should not be used on a patient. This might include medications that look real but are “demo” versions, expired or unsterile supplies, and decommissioned medical equipment.

These labels are available on the Society for Simulation in Healthcare website [ssih.org] and are for sale at IMSH.

Successful labeling might begin outside of your sim program. If you receive expired equipment and supplies from clinical units that are removing them from inventory, pro-

vide labels to these donors and ask them to apply the warning label. This could prevent a well-meaning colleague from putting the item back in the supply cabinet. During inventory checks, institute a check for warning labels to catch any new items that might have been obtained.

Simulation is a complex activity, and it is difficult to anticipate all potential risks. Here are some things to consider based on incidents shared with the Foundation for Healthcare Simulation Safety.

## Include safety instructions during simulation orientation and prebriefing.

### This could include:

- What to do if a real emergency takes place, saying, “This is not a simulation.”
- How to call for help during the simulation while avoiding



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- summoning emergency services.
- False 911 calls and false code team activations are common.
- Safe equipment operation: Is the defibrillator active?
- Encouraging participants to speak up if they see any unsafe conditions.

## Manage higher-risk activities, e.g., in situ simulations or complex simulations:

- Include all team members and stakeholders in safety planning.
- Inform staff, patients, and visitors of planned drills.
- If emergency equipment is being used, e.g., a code cart or emergency airway cart, ensure that the clinicians know how to access it in case of an actual emergency. Ensure prompt restocking and return to use after the simulation.
- Use signage and simulation team uniforms, if possible, to reduce the risk that the simulation is mistaken for a real event.
- Consider assigning a safety officer to observe for unsafe or unexpected events.

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# HOSPITAL-BASED SIMULATION: 'UNBOUND' INNOVATION, COLLABORATION, AND COMMUNITY

**T**he Hospital-Based Simulation Program (HBSP) Section continues to thrive as a dynamic hub for innovation, professional development, and collaborative scholarship for our over 700 members.

This year, our webinar series expanded to reflect the evolving needs of our community, offering timely, high-impact sessions on topics such as artificial intelligence in simulation and grant writing strategies; others highlighted the work of the Value-Based Affinity Group and explored Sim Zones, a zone-based design with implications for learner engagement and safety.

Beyond webinars, our two active workgroups are making meaningful strides.

The Latent Safety Threats Workgroup will present its findings at IMSH [Tuesday, January 13, 2:45-3:45 pm, Room 007B], showcasing practical strategies for identifying and mitigating threats in clinical environments. Its work reflects a commitment to safety-driven simulation and interdisciplinary collaboration.

Meanwhile, the Metrics Delphi Study Workgroup is immersed in data collection, advancing a rigorous research initiative to define and refine consensus-driven categories of work for simulation programs. Its efforts eventually aim to establish benchmarks that will elevate program evaluation and impact staffing across institutions.

IMSH 2026 will host a live section meeting for HBSP members [Monday, January 12, 7:00-8:15 am, Room 302C]. It's a chance to reconnect, share updates, and celebrate our collective progress. Expect a blend of scholarship and camaraderie, with opportunities to meet workgroup members, explore new initiatives, and enjoy some fun and games along the way.

Following the section meeting, join us at the Section/SIG/Affinity Group Open House [Monday, January 12, 9:45-10:45 am, Third Floor Prefunction Space].

Whether you're a seasoned simulationist or new to hospital-based education, this community offers a space to grow, contribute, and be inspired. We invite you to join our webinars, engage with our workgroups, and be part of the conversation shaping the future of hospital-based simulation. 🌟

- Contributed by Lori Greer, Whitney Smith, Debbie Wakeham, HBSP Leadership Team



## DESIGNING SIMULATIONS AFFINITY GROUP IS BREAKING BOUNDARIES

**T**he Designing Simulations Affinity Group (AG) was formed in Fall 2024 to break boundaries and establish a dedicated space for simulationists to share and advance their simulation design practice. Our mission is to connect simulationists for collaborative development and dissemination of resources and expertise, thereby advancing simulation design at our respective institutions.

In 2025, our leadership team, Sarah Greywitt, Lisa Steele, Manuel Calderon, and Andrea Bryner, received an overwhelming response, welcoming approximately 55 people to our inaugural IMSH meeting. Over

the past year, we have continued to engage with simulationists during our monthly virtual "Casual Conversations" events. These informal discussions serve as a space for anyone involved in simulation to learn more about what simulation design is, explore practices, discuss challenges, and learn from one another.

Additionally, we welcome speakers to share their institutional practices in simulation design at our quarterly meetings. Highlights from 2025 include:

- March: Applying an Instructional Design Framework to Simulation Design. Sarah Greywitt, Dr. Tom Noeller, and Dr. Lisa Steele demonstrated how Grant Wiggins

and Jay McTighe's Backward Design framework is being used for simulation design at MetroHealth. This session synthesized the framework with the International Nursing Association for Clinical Simulation and Learning (INACSL) Healthcare Simulation Standards of Best Practice (HSSOBP) for Simulation Design.

- September: Manuel Calderon presented Designing High-Fidelity Simulation to Deliver Trainings to Organ Procurement Organizations, discussing his work at LifeGift.

As we move forward, we are interested in continuing conversations about simulation design, and welcoming new approaches and speakers. If you would like to speak at one of our quarterly meetings, please reach out to leadership: Chair Sarah Greywitt at [sgreywitt@metrohealth.org](mailto:sgreywitt@metrohealth.org); Vice Chair Dr. Lisa Steele at [LeadWithSteele@gmail.com](mailto:LeadWithSteele@gmail.com).

Join us at the Designing Simulations AG meeting [Sunday, January 11, 8:30-9:30 am, Room 303A] and at the Section/SIG/AG Open House [Tuesday, January 13, 11:00 am - 12:00 pm, Third Floor Prefunction Space].

Join us also via SimConnect to receive monthly updates and invitations to our virtual meetings, and access to materials in our bank of resources being developed as a collaborative effort of the affinity group membership. 🌟

- By Sarah Greywitt and Dr. Lisa Steele

# PROCESS FOR DEVELOPING THE SSH ADVOCACY STRATEGIC FRAMEWORK

**Y**our Advocacy Committee has been busy establishing the Society for Simulation in Healthcare's (SSH) approach to championing healthcare simulation and superior patient outcomes at every level. To this end, we created the SSH Advocacy Strategic Framework, which will guide the Society's efforts over the coming years.

The SSH Advocacy Strategic Framework emerged through a systematic, iterative development process that transformed the Board's guidance into an actionable plan. Our approach began with the Advocacy Committee's July 2025 face-to-face meeting, where members brainstormed strategic pathways for advancing healthcare simulation. This collaborative session identified advocacy targets across external policy, public awareness, global stewardship, and internal capacity domains.

Building on this foundation, we conducted Congressional visits to discuss funding.

These meetings specifically addressed the SSH-NTSA [National Training and Simulation Association] initiative titled The Simulation-based Emergency Preparedness Network (SEPNet), reinforcing the critical connection between simulation training and national emergency readiness.

The Committee's initial development phase involved synthesizing meeting outputs into a comprehensive strategic framework document. We organized nine distinct pathways, enhancing each with strategic objectives, implementation timelines, and measurable outcomes. This restructuring created clear linkages between the committee's three core objectives: standardized advocacy, governmental outreach, and global collaboration.

A critical evolution occurred when we integrated two foundational documents providing both legitimacy and structure to advocacy efforts. The 2024 Global Consensus

Statement, representing 50 societies across 67 countries, became the "what," defining universal priorities and evidence-based recommendations. The 2025 SSH and SESAM [Society for Simulation in Europe] MOU became the "how," providing the formal partnership structure for coordinated advocacy and shared tools development.

The final framework successfully bridges high-level strategy with operational execution. It positions SSH's advocacy efforts within a global context, leveraging unprecedented momentum created by international consensus and formal partnership structures. This comprehensive approach ensures stakeholders at all levels can understand and engage with the strategic pathways advancing healthcare simulation worldwide.

Next steps include creating standardized advocacy messaging and advocacy tool kits to help SSH members carry the advocacy message to their region, state, and country; working to expand federal funding for healthcare simulation-based projects; and working with SESAM to grow healthcare simulation programs and collaboration internationally. 



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# EXHIBIT HALL SPOTLIGHT

With Sunday afternoon's official opening of the Exhibit Hall, the IMSH 2026 experience will expand to include myriad learning opportunities in a new setting that has been enhanced to include a number of upgraded and inaugural features.

"One of our new features involves the launching of our first IMSH Exhibitor Guide," offered Olivia Fleenor, Senior Meetings & Exhibits Coordinator for the Society for Simulation in Healthcare. "It's a full-on 56-page product guide that provides benefits to both exhibitors and attendees."

Exhibitors' listings are included in their booth purchase, with the opportunity to submit one product or technology that they want to highlight. Optional upgrade opportunities range from company logos to additional featured product advertisements. The guide also identifies several different companies that are doing giveaways or special events, another new feature at IMSH 2026.

Attendees received a copy of the Exhibitor Guide in their bags at registration, with the guide intended to help them navigate the Exhibit Hall and look for different products and technologies that might be of particular interest to them. That help will be extremely valuable in the IMSH 2026 Exhibit Hall, which includes 145 exhibitors from 20 different countries.

"I think those are impressive numbers," Fleenor said, "especially when they are presented against the current global economic climate. In fact, some might have predicted that we would have less of a global presence this year. But we haven't seen that. So that's been a huge positive for us. Moreover, we also have two dozen first-time IMSH exhibitors."

Fleenor observed that another aspect of the Exhibit Hall that was piloted last year is the Sim Showcase, which will be held in the Exhibit Hall Theater.

"It was very successful last year, and basically it was birthed from the fact that there were so many companies that were utilizing IMSH to deliver or launch their new

products, new rollouts, or versions of their already existing products or technologies," she said. "Since they were using IMSH to unveil those new products, we thought it would be really cool to highlight those folks and give them a stage outside of their booth to present that new product to attendees. So that's what we did last year and we are running it again this year. We have seven companies that are participating this year, and this gives them an exclusive opportunity to get up on the stage and present to attendees the new technology or product roll out that they're unveiling. That's the criteria. They must be unveiling it for the first time ever at IMSH. It can't have been seen before. In fact, they are not allowed to unveil it, send marketing emails, or anything else prior to IMSH. So that's super exciting."

Another first at IMSH 2026 is the Corporate Roundtable Product and Technology Showcase, a series of "rapid-fire" demonstrations that will be conducted live on the IMSH Press Box stage.

"It's happening across four different sessions, Sunday through Tuesday, in the Press Box, where members of the SSH Corporate Roundtable will be doing 20-minute long demonstrations of a variety of products and technologies. This was an initiative that was actually created by the Corporate Roundtable, where members had a desire to be able to host demonstrations outside of their booth. Unlike the Sim Showcase, these demonstrations do not necessarily need to be focused on something that is being unveiled at IMSH. But this gives companies the opportunity to do demonstrations, still on the Exhibit Hall floor, but outside of their booth, where they might capture a different audience, or a larger audience than might fit in their booth."

Another initiative that has emerged from the Corporate Roundtable looks to bridge gaps between vendors and end-users in sim centers and hospitals.

Fleenor said that the initiative, dubbed the Research & Development Workshop, was spearheaded by Wendy LaGrange, immediate past chair of the Corporate Roundtable.

"She delivered a Research & Development Workshop last year, which was extremely well received," Fleenor said. "This year the Corporate Roundtable is again developing and delivering a workshop [Monday, January 12, 2:45 - 3:45 pm, Room 304C], but the effort has been fine-tuned to the target audience of SimVendors under a market development program concept where members of the Corporate Roundtable will mentor inventors and guide them, if you will, toward the creation of a five-year plan. Some will achieve it, and in far less than five years. Some may take a little bit longer. But it's about helping and guiding them. For some inventors, it's to guide them back out on the IMSH show floor in some way. For others, their plan might look like industry either buying the invention or bring you in as a consultant to their team to further develop it."

Fleenor said, "My takeaway message to attendees is, when you have downtime, remember to visit the Exhibit Hall. We know how excited everyone is to come to IMSH as an attendee. Well, our vendors and exhibitors are just as excited to be here. Many of them refer to IMSH as their 'Simulation Super Bowl.' So it's a huge deal."

She concluded, "If this is your first time on the IMSH show floor, you might feel slightly intimidated and/or nervous. Don't be afraid. The exhibitors and vendors want you to come into their booth. They want to engage with you, even if you are not that person that they can directly sell to. It doesn't matter. They want to give you that demonstration and teach you about what they have to offer." 🌟

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# THE CORPORATE ROUNDTABLE

## Connecting Industry and the Simulation Community at IMSH 2026

**A**s we gather in San Antonio for IMSH 2026, we see the power of collaboration all around us. It is seen across disciplines, through shared knowledge, in mentorship, and in our collective efforts to advance healthcare simulation and patient safety. Our field thrives when educators, clinicians, operations specialists, researchers, industry innovators, and corporate partners work side by side.

The Corporate Roundtable (CR) was created to bring industry partners and the simulation community closer together by providing a forum for exchanging ideas, fostering meaningful relationships, and maintaining an open line of communication that supports the goals we all share. As members of industry, we aim to deliver effective tools and solutions to the field, and the best way to do that is by listening closely to what matters most to you.

### Supporting the Society for Simulation in Healthcare's (SSH) Strategic Goals

Industry partners bring perspectives rooted in product development, emerging technologies, research, and a unique perspective of market needs. Each year, when setting the committee goals, we reflect on what has worked well, where improvement is needed, and where we can best contribute in the year ahead. Every goal and initiative we develop is built to be in alignment with the Society's overarching strategic priorities and long-term objectives; across education, innovation, advocacy, and global engagement.

At IMSH 2025, the CR delivered the inaugural Product Development Workshop, featuring an incredible panel of industry leaders who shared insights on the R&D process – from needs assessment and product design to global deployment. Built to encourage collaboration between industry and the simulation community, this workshop laid the groundwork for ongoing mentorship and shared learning.

This year's R&D Workshop continues that momentum by featuring the SimVendors program participants, with past winners and emerging innovators sharing their stories and receiving feedback from the community. Join us for Defining the Technology Gap in Simulation Education: Creating Solutions and Bringing New Products to Market [Monday, January 12, 2:45-3:45 pm, Room 304C].

The CR, with feedback from the IMSH Visioning Group, also recognized a need for more focused product demonstrations in the Exhibit Hall; opportunities for deeper conversations than booth interactions often allow. In response, we are pleased to introduce the Corporate Roundtable Product & Technology Showcase, featuring short demonstrations and dedicated time for discussions about the simulation solutions CR member companies are offering. These sessions will take place on the Press Box Stage in the Exhibit Hall and are listed in the conference scheduler. Please join us!

### Outreach to Members of Industry

The Corporate Roundtable brings industry partners into ongoing conversations that support SSH's mission and the needs of the simulation community. Participation offers companies a way to stay connected to emerging priorities, contribute perspectives that strengthen collaboration, and better understand the challenges and opportunities shaping the field. If your organization would like to learn more about Corporate Roundtable membership, please reach out.

### Looking Ahead

Looking into 2026, the Corporate Roundtable remains committed to supporting the Society's mission, its members, and colleagues who make the healthcare simulation community so strong. IMSH is a reminder of what we can accomplish when we share ideas, learn from one another, and work toward common goals. We're genuinely grateful and honored by the chance to contribute to this work and look forward to continuing these conversations and this collaboration throughout the year. 

### We'll see you in the Exhibit Hall!

- The Corporate Roundtable Executive Committee

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# THE VALUE-BASED SIMULATION AFFINITY GROUP AIMS TO LEVERAGE COLLECTIVE EXPERTISE

**H**ave you had difficulty growing your simulation program? What are your next steps? Do you wonder how to show your simulation program's value? We've all been there – crying in the cafeteria because simulation is not loved by others as much as we love it. Hope and improvement are on the horizon!

The Value-Based Simulation (VBS) Affinity Group (AG) aims to demonstrate the value simulation-based interventions provide to healthcare institutions. By creating collaborations between simulation programs, we aim to leverage collective

expertise and experience for the betterment of the global healthcare simulation community.

There are six types of data related to simulation that can be collected. The figure below is from a recent publication in *Advances in Simulation* (Barker, 2025) that names the six categories and gives a short description of each one.

What types of data is your simulation program collecting? What data do your leaders want? Because you won't have all desired data, you must also make connections with other departments such as patient safety, quality, risk management, finance, and others

to prevent silos that always isolate improvement efforts.

Educators typically aim to improve competency (Acquired Expertise). Patient Safety and Quality folks want to improve patient care delivery (Workplace Performance). The Chief Financial Officer will definitely want a Return On Investment calculation (Value Analyses). Because all types of simulation have value, you must discover what your leaders want and collect that type of information.

Everyone wants to demonstrate the value of their simulation-based interventions. However, no central resource exists to assist you in demonstrating the value of your program because value truly is local. While there will not be a "one-size-fits-all" solution, this Affinity Group can provide collaborations to help you successfully demonstrate value.

Build collaborative relationships. Have those tough conversations with your leaders. Talk to departmental leaders. Obtain training to collect, calculate, and display needed information.

Innovation will come! You will be "unbound" with past experience and begin to show the value of simulation in your local community. Then collaborate with other simulationists. This is a global effort to improve how simulation is used in healthcare. 🌎

## Service Products

What activities were delivered in alignment with organizational strategy? Who engaged in the activities and to what extent? What resources were invested?

## Acquired Expertise

What technical, behavioral skills and knowledge competencies have been advanced and/or verified?

## System Benefit

What systemic improvements in care quality, care equity, patient/care team experience, patient safety, efficiencies and/or revenue have been realized as a result of the simulation activity?



## Program Perceptions

What are the experiences and beliefs around the simulation activities and their associated data?

## Workplace Performance

What insights have been collected around clinical behaviors and their environmental influences (direction, supports, incentives)? How have simulation activities improved the workplace?

## Value Analyses

Was the measure outcome worth the investment required? How did the activities compare to alternatives?

The value-based simulation in healthcare (VBSH) model – graphical abstract

## FEDERAL SIMULATION PROFESSIONALS UNITE TO ADVANCE INNOVATION

**A**t the intersection of service, science, and simulation, the SSH Federal Medical Simulation Affinity Group is breaking barriers and building bridges across the US federal health system. This dynamic group brings together educators and operators from the Departments of Defense, Veterans Affairs, Health and Human Services, Homeland Security, and allied foreign military organizations to redefine what's possible in healthcare simulation.

United by a shared mission – to provide a collaborative forum for networking, research, and the exchange of best practices – these professionals are driving innovation that transcends

institutional boundaries. Whether developing trauma-informed care scenarios, advancing readiness training, or integrating emerging technologies, their work enhances simulation-based education and improves outcomes for both patients and providers.

The group's strength lies in its diversity. By connecting professionals across agencies and disciplines, it fosters a culture of collaboration that accelerates the adoption of evidence-based practices. These connections are more than professional exchanges; they are incubators of progress. Members support one another, share lessons learned, and champion solutions that keep simulation agile, mission-ready, and responsive to evolving healthcare challenges. 🌎



Helen Mills, Chair, Federal Medical Simulation Affinity Group

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