PROJECT MANAGEMENT PLAN

FOR

NON-TECHNICAL SKILLS TRAINING
IN
SYNTHETIC LEARNING ENVIRONMENTS

Document information

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Version	Date	Description
1	1 May 2008	First Draft (based on v2 SIAA template)
2	4 July 2008	Second Draft (based on PM meeting)
3	6 July 2008	Comments by Chair, Project Board
4	10 July 2008	Revision based on comments and draft Quality Plan
5	16 July 2008	Final comments on draft received
6	24 July 2008	Submitted to Project Board for approval
7	11 Dec 2008	Combine Phase 2 milestones Curricula Distribution & Curricula Sharing (refer Change Register).

Document approval

This document requires the following approval:

Name	Title	Organisation
Dr Leonie WATTERSON	Project Board, Project Board	Australian Society for Simulation in Healthcare

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Introduction

Purpose of Document

The purpose of this Project Management Plan (the Plan) is to document the key project baseline including the objectives, project organisation and the adopted management approach.

This Plan is for Non-Technical Skills Training in Synthetic Learning Environments (the Project) which is being conducted by the Australian Society for Simulation in Healthcare (ASSH), a chapter of the Simulation Industry Association of Australia (SIAA).

The Plan will establish an agreement for the governance of the Project by key people; and it establishes a common understanding of the project objectives and the approach adopted to meet those objectives.

Structure of the Document

This document will cover the following key areas:

- Management Summary
- Project Scope and Objectives
- Timeframe and Milestones
- Budget and Costs
- Risk Management
- Issues Management
- Quality Plan
- Project Stakeholder Plan
- Project Organisation and Management.

Intended Audience

The intended audience is all personnel who have a role in the delivery of the Project. The document is a reference guide to the management of the Project.

Management Summary

PROJECT SYNOPSIS

The aim of the project is to promote specialist training in synthetic learning environments, particularly development of non-technical skills (NTS) relevant to accredited specialist training.

The project is funded by the Commonwealth of Australia as represented by the Department of Health and Ageing (DOHA).

The initial funding agreement was between DOHA and Queensland Health. This agreement was signed in June 2007.

A Deed of Novation was signed in June 2008 between the DOHA, Queensland Health and the Simulation Industry Association of Australia (SIAA). This novation transfers project ownership to the SIAA.

This Plan covers project activities from the period of Novation.

PROJECT BACKGROUND

Non-technical skills (NTS) are recognised to underpin safe and effective clinical practice. Most specialist training colleges have responded to evidence supporting the relevance of NTS by emphasising NTS in their respective training curricula.

Simulation has an established role in providing learning for NTS. A variety of learning technologies and learning methods, available in synthetic learning environments have been used for this application.

Simulation has numerous benefits which can be used strategically in curricula design to enhance workplace learning. These include the following:

- Basic competencies can be addressed prior to learners practising on actual patients
- Specific competencies may be acquired, refreshed or finessed by addressing them in a detailed manner
- Learning technologies may be used as an alternative to patients where employing actual patients is unethical, unacceptable or logistically difficult
- Learning encounters may be standardised, and
- Learning encounters may be enhanced with reflective practice which contributes to deeper learning and change in practice.

Notwithstanding this, the level of engagement with, and utilisation of, simulation varies amongst the different specialist colleges. Overall, simulation is under-utilised by all specialties. Even the specialties that have adopted simulation can do more to integrate its applications into the implementation of training curricula. Other specialties could benefit from the achievements of these early adopters to enhance learning in their specialty. Simulation-based training for

NTS could potentially be incorporated to a greater extent than currently exists into the training programs of each of the medical specialist colleges.

The causes of variation are multi-factorial. Factors contributing to low utilization include:

- Low awareness of its potential
- Low engagement by stakeholders
- Inadequate understanding by curriculum designers and clinical teachers of how it can be incorporated into curricula and training activities
- Lack of knowledge of factors underpinning purchasing decisions and evaluation of its impact and value for money
- Perceived (or actual) lack of infrastructure, funding and other resources, and
- Lack of awareness of (or access to) appropriate learning technologies and facilities.

Change management theory predicts that new practices will be more successfully adopted and sustained if a strategic approach is employed. Applying this to medical training, simulation may be better utilised by increasing awareness amongst stakeholders, engaging early adopters to champion it and drive change within their specialty, and establishing a sustainable model for delivery which overcomes some of the identified obstacles.

PROJECT STAKEHOLDERS

DOHA	The Department of Health and Ageing has a diverse set of responsibilities, but throughout there is a common purpose: Better health and active ageing for all Australians.
SIAA	The SIAA is a not-for-profit body concerned with the use of simulation in the military, commercial aviation and industry. It was formed to provide a focus and a forum for those involved in simulation technology in Australia, to allow for discussion and distribution of information, and to further advance the research, development and use of simulation technologies and practices in Australia society, industry, academia and government.
ASSH	ASSH (ASSH) is formally affiliated with the SIAA, formally becoming a Chapter of it in 2007. ASSH represents the interests of healthcare related simulation across Australia. There are many people involved directly in the Project, many others that influence the Project and other initiatives which influence the Project. These people / projects are called stakeholders or stakeholder groups; i.e. they have a "stake" in the Project.

STAKEHOLDER ANALYSIS

Stakeholder	Needs	Importance	Communications Strategy	Measures for engagement success
DOHA	DOHA needs Project progress reports. DOHA needs Project activities to be consistent with the funding agreement.	Critical	➢ Progress reports submitted in accordance with Funding Agreement. ➢ Meeting with DOHA officers (or provision of additional progress reports) to provide key project updates. ➢ ASSH Website to contain information updates on the Project. ➢ Feedback via the overarching government initiative with which the Project is derived: The Expanded Specialist Training Project (ESTP) and its main communication forum, the Enhanced Medical Education Advisory Committee (EMEAC), which ASSH is represented on.	➢ Continued funding
SIAA	SIAA needs Project activities to be consistent with the funding agreement.	Critical	➢ Project Manager to provide the linkage between the Project and SIAA. ➢ ASSH Website to contain information updates on the Project.	➢ Continued support for the Project
ASSH Executive	ASSH needs to achieve expected project results Objectives	Influencer	➢ Project Manager to provide the linkage between the Project and SIAA. ➢ ASSH Website to contain information updates on the Project. ➢ Progress reports.	➢ Continued support for the Project
Project Board	The Project Board needs to achieve expected project	Influencer	➢ Project management meetings.	➢ Project deliverables

Stakeholder	Needs	Importance	Communications Strategy	Measures for engagement success
	results Objectives		➢ Progress reports.	are realised
ASSH members	ASSH needs to achieve expected project results Objectives	Important	➢ ASSH Website to contain information updates on the Project. ➢ Presentation at meetings	➢ Project deliverables are realised
Target audience /Specialist colleges and affiliates	Specialist colleges need to be persuaded of the value of the project	Important	➢ ASSH Website to contain information updates on the Project. ➢ Feedback to specialist colleges and associated stakeholders directly and via EMEAC. ➢ Presentation at meetings	➢ The colleges have a perception that the project is successful and useful to them.

Note: Critical Stakeholders can stop the Project; Influencer can influence a Critical Stakeholder; and Important Stakeholders are important to the Project however are neither an Influencer or Critical Stakeholder.

EXPECTED PROJECT RESULTS

Deliverable	Approval Criteria	Approvers
Project Management Plan (including Project Schedule)	• Provides a robust project governance framework. • Based on approved Project Management Plan template.	Project Board
Risk Management Plan	• Provides a robust project governance framework. • Based on approved Project Management Plan template.	Project Board
Risk Register	• Approach to risk identification is consistent with Risk Management Plan. • Based on approved Risk Register template.	Project Board
Probity Register	• Approach to probity management is consistent with Probity Management Plan. • Conflict of Interest and Confidentiality declarations are signed by people with Declared Roles in the Project.	Project Board
Curricula mapping	• Consultant contracted to perform the Mapping Curricula activities. • Consultant delivers against contract obligations, including reports and discrete deliverables listed in criteria of reports. • Pilots completed according to contracts.	Project Board Project Board Project Board
Curricula sharing	• Identified opportunities for distributing simulation curricula. • Constraints identified for distributing simulation curricula. • Key principles underlying successful models for distributing simulation curricula identified.	Project Board
DOHA Progress report from the Project Board, circa October 2008	• Progress report (not required by the funding agreement) deemed by the Project Board to be worthwhile.	Project Owner
DOHA Final Report from the Project Board	• Final Report accepted by DOHA.	Project Owner

TIMEFRAME CONSTRAINTS

Project Timeframe Constraints are linked to the funding agreement. These constraints will impact the Project Schedule.

The Project Timeframe Constraints are:

Timeframe Constraints	Due By
The Final Report is due on or before	30 April 2009
Project Completion Date	31 May 2009

MAJOR ROLES

The following table details the major roles in the Project:

Roles	Name
Project Sponsor	DOHA
Project Owner	SIAA
Project Board	Dr Leonie Watterson Chair, ASSH Chair, Project Board Graham Beaumont (ASSH) Peter Hill (SIAA) Peter Cantwell (SIAA)
Project Manager	Anthony Rowley ECKnowledge
Project Advisor	Vacant
Project Officer	Vacant
Project Suppliers	• St Vincent's Hospital, Melbourne (Main consultant)
	• St Vincent's Hospital, Sydney (Pilot provider 1)
	• Monash University, Melbourne (Pilot provider 2)
	• QinetiQ/University of Queensland (Pilot provider 3)
	• Qld Skills Development Centre (Curricula Distribution, Curricula Sharing)

Project Scope and Objectives

PROJECT OBJECTIVES

Specific objectives include:

1	**Inform key stakeholders** from specialist colleges about simulation-based training for NTS and the potential to develop this to address the contextual needs of their respective specialist disciplines.
2	**Achieve engagement by the colleges to develop**, or further advance, simulation applications to support NTS training, which are contextually relevant in their specialty. Effective engagement would be demonstrated by commitment from the colleges to participate in the project activities; identification of champions within individual colleges and evidence of consultation in achievement of project outcomes 3 and 4.
3	**Provide a detailed report on training needs** of greater than six specialist colleges relevant to NTS to inform future curricula design and training initiatives.
4	**Develop curricula maps for the same specialist colleges** outlining priorities for competency development, appropriate simulation applications and vertical and horizontal integration with the existing vocational training program(s).
5	**Mentor the same specialist colleges as in 3 and 4** as they participate in pilot training activities.

CRITERIA FOR SUCCESS

The criteria for success are:

- Fulfilling obligations contained in the funding agreement, and
- Having the project perceived by the Target audience /Specialist colleges and affiliates to have been of value in respect to the main project aim to promote specialist training in synthetic learning environments, particularly development of non-technical skills (NTS) relevant to accredited specialist training.

PROJECT SCOPE

Project Inclusion

The Project's inclusions are activities associated with fulfilling the obligations of the funding agreement post-Novation.

Project Exclusions

Activities excluded from the Project are any pre-Novation activities (i.e. activities which were the responsibility of Queensland Health).

Timeframe and Milestones

WORK BREAKDOWN STRUCTURE (WBS)

Milestone	Deliverable	Tasks
Establish Project Governance	• Project Management Plan • Project Quality Plan • Risk Management Plan • Risk Register • Issues Register • Change Register • Contract Management Plan	• Build Project Management Plan • Establish the agreed Project Schedule Baseline. • Build Risk Management Plan • Build Project Quality Plan • Build Contract Management Plan • Establish project management systems • Identify any baseline risks
PHASE 1 – Project Resources	• Contract consultant to undertake curricula mapping	• Contract consultant to undertake curricula mapping
	• Contract providers to undertake pilots	• Contract with pilot participants
	• Contract consultant to undertake curricula distribution	• Contract SDC to undertake curricula distribution

Milestone	Deliverable	Tasks
PHASE 2 - Curricula Mapping **(Evidence)**	• Literature Review • 1st Curricula Mapping Progress Report	• Search and collection of Australian published NTS literature • Search and collection of International published NTS literature • Work with Simulation and education centres nationally to collect Grey Literature • Work with Simulation and education centres Internationally to collect Grey Literature • Drafting of Literature Review • Completion of Literature Review
PHASE 2 - Curricula Mapping **(Engagement)**	• Self Assessment Readiness Tool • Results of Self Assessment. • 2nd Curricula Mapping Progress Report.	• Establish list of key contacts at specialist training colleges • Contacted through formal correspondence (letter) followed by phone calls to College Presidents and Directors of Education • Development of Self Assessment Readiness Tool • Face to face meetings with College Presidents and Directors of Education to informally identify possible training needs • Trialling of Self Assessment Readiness Tool • Implementation of Self Assessment Readiness Tool
PHASE 2 - Curricula Mapping **(Resource Development)**	Training Needs Analysis (TNA) • TNA questionnaire • Training Needs Analysis Report Curriculum Mapping • Curriculum maps for selected specialist training colleges • 3rd Curricula Mapping Progress Report	Training Needs Analysis (TNA) • Development of questionnaire • Testing / Piloting of TNA • Implementation of TNA • Collection and data input • Analysis of data • Report Writing Curriculum Mapping • Interviews with education committee and educational supervisors to identify NTS in hidden curriculum • Develop scope and sequence chart for NTS curriculum • Finalise in depth curriculum maps attributing possible methods of teaching NTS using simulation • Correspond with external simulation providers needs of each college • Analysis of data • Report Writing

Milestone	Deliverable	Tasks
PHASE 2 - Curricula Mapping (**Adoption**)	• Evaluation Criteria • Evaluation Tool • Evaluation of Pilots Report • Final Curricula Mapping Progress Report	• Development of Evaluation criteria • Development and testing of evaluation tool • Complete evaluation tool • Liaise with specialist training colleges and simulation providers • Attend and undertake evaluation of pilot programs
PHASE 2 (**Pilots**)	• St Vincent's Hospital, Sydney Pilot • Monash University, Melbourne Pilot • QinetiQ/University of Queensland Pilot	• Present at Forum • Design course outlines in collaboration with consultant and allocated specialist college • Undertake Pilot • Prepare course materials for report
PHASE 2 - Curricula Distribution & Sharing	• Report on Curricula Distribution Models	• Literary review • Develop recommendations for Curricula Distribution Models • Host a forum for simulation providers • Identify constraints associated with distributing simulation curricula • Identify key principles underlying successful models for distributing simulation curricula identified.
Final Report	• DOHA Final Report	• Develop Draft Report • Seek Project Board approval • Transmit Final Report to SIAA (for submission to DOHA)

PROJECT SCHEDULE BASELINE

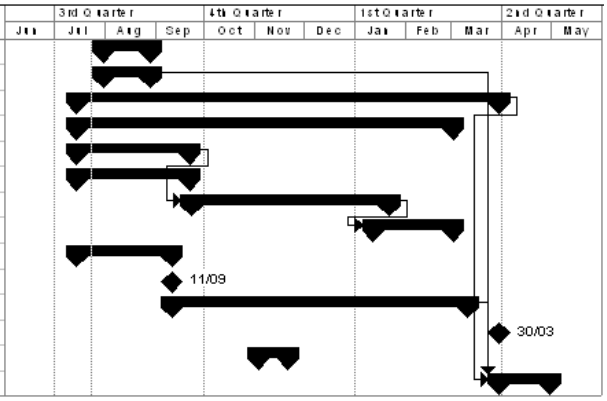
The Project Schedule is a timeline of activities based on the Work Breakdown Structure.

The Project Schedule Baseline contains the estimated effort of tasks and therefore the estimated completion of all Milestones.

The Project Schedule Baseline should be established at the start of the Project. The Project Schedule Baseline will not be changed during the Project.

The Project Schedule Baseline is:

Task Name	Duration	Start	Finish
PHASE 1	21 days	Thu 31/07/08	Fri 29/08/08
Project Redesign	21 days	Thu 31/07/08	Fri 29/08/08
PHASE 2	184 days	Tue 15/07/08	Mon 30/03/09
Curricula Mapping	164 days	Tue 15/07/08	Mon 2/03/09
Evidence	49 days	Tue 15/07/08	Mon 22/09/08
Engagement	49 days	Tue 15/07/08	Mon 22/09/08
Resource Development	87 days	Tue 23/09/08	Thu 22/01/09
Adoption	35 days	Mon 12/01/09	Mon 2/03/09
Curricula Distribution	42 days	Tue 15/07/08	Thu 11/09/08
Curricula Sharing	0 days	Thu 11/09/08	Thu 11/09/08
Site pilot training	129 days	Thu 11/09/08	Tue 10/03/09
Pilot training final report	0 days	Mon 30/03/09	Mon 30/03/09
Interim DOHA Report	14 days	Mon 3/11/08	Fri 21/11/08
Final Report	23 days	Mon 30/03/09	Thu 30/04/09



PROJECT SCHEDULE ACTUAL

The Project Schedule may change during the project.

At the completion of the Project the 'Actual' Project Schedule is known.

Having both the Project Schedule Baseline and the Actual Project Schedule achieved provides the basis for Project Evaluation.

Budget and Costs

PROJECT BUDGET BASELINE

The Project Budget Baseline contains the estimated cost of completing the Project.

The Project Budget Baseline is:

All amounts exclusive of GST

	2007/08	2008/09	Whole project
1. Management committee activities and costs related to whole project	**$111,034**	**$144,045**	**$255,079**
Breakdown prices are indicative only.			
ASSH executive officer	87,894	87,805	175,699
SIAA executive officer	0	4,000	4,000
Administration officer	6,000	12,000	18,000
Honoraria for management committee chair. Allow $100 per hour for 2 hours per week for 78 weeks	11,440	5,740	17,180
Catering	0	500	500
Advertising, Stationery & Printing	0	5,000	5,000
Auditor	0	2,000	2,000
Communication (Telephone & Postage)	0	2,000	2,000
Honoraria for ASSH executive committee members to attend official functions. Allow $1000 per day for 5 members for 2 events	0	10,000	10,000
Independent Consultant for assessment committee and probity advice	5,000	10,000	15,000
Travel and living related expenses for management subcommittee [1]	700	5,000	5,700

4. Forum related to curricula mapping project	**$1,500**	**$33,500**	**$35,000**
Breakdown prices are indicative only.			
Consultant honoraria – Allow normal state public service award for relevant salary or equivalent up to $1000 per day for presenters and facilitators excluding contracted consultancy team	0	5,000	5,000
Conference facility and catering	1500	1,500	3,000
Overnight accommodation and daily expenses for project team and key stakeholders to attend meetings and project specific activities. Allow $250 per person per day	0	27,000	27,000
Project management costs represented in whole project costs	0	0	0

4. Consultancy: Curricula mapping project.	**0**	**$233,635**	**$233,635**
Refer St Vincent's Hospital, Melbourne contract for detailed breakdown			

5. Curricula sharing project (Managed by SDC)	**0**	**$40,400**	**$40,400**
This is the total allocation for the activity. Breakdown prices are indicative only.			
Travel related expenses [2].	0	15,000	15,000
Conference facility and catering	0	3,000	3,000
Salary – Senior Lecturer (Level C) 5 days per week for 8 weeks @ $409.46 (on-costs included) per day – for literature review, project coordination, convening forum, data analysis, report generation.	0	15,900	15,900
Consultant honoraria – Allow normal state public service award for relevant salary or equivalent up to $1000 per day for presenters and facilitators not including management subcommittee	0	5,000	5,000
Stationery, printing	0	1,000	1,000
Communication	0	500	500
6. Site pilot training	**0**	**$120,000**	**$120,000**
This is the total allocation for the activity.			
SUBTOTAL	**$112,534**	**$571,580**	**$684,114**

1. Inclusive of: (1) costs of air travel to attend meetings and project specific activities (including mapping forum, sharing forum and pilot training activities). All domestic airfares costed at economy rates. Allow average of a $500 per flight) (2) Costs of car related travel for same groups. (Allow taxi, parking charges and mileage for privately owned vehicle). Permit costs of alternative public transport. Not inclusive of insurance costs for privately owned vehicle.
2. Inclusive of: (1) costs of air travel to attend meetings and project specific activities by consultancy team (including forum and pilot training activities) and key stakeholders (not including forum or pilot training activities).All domestic airfares costed at economy rates. Allow average of a $500 per flight) (2) Costs of car related travel for same groups. (Allow taxi, parking charges and mileage for privately owned vehicle). Permit costs of alternative public transport. Not inclusive of insurance costs for privately owned vehicle

PROJECT EXPENDITURE ACTUAL

During the Project, expenditure may differ from the Project Budget.

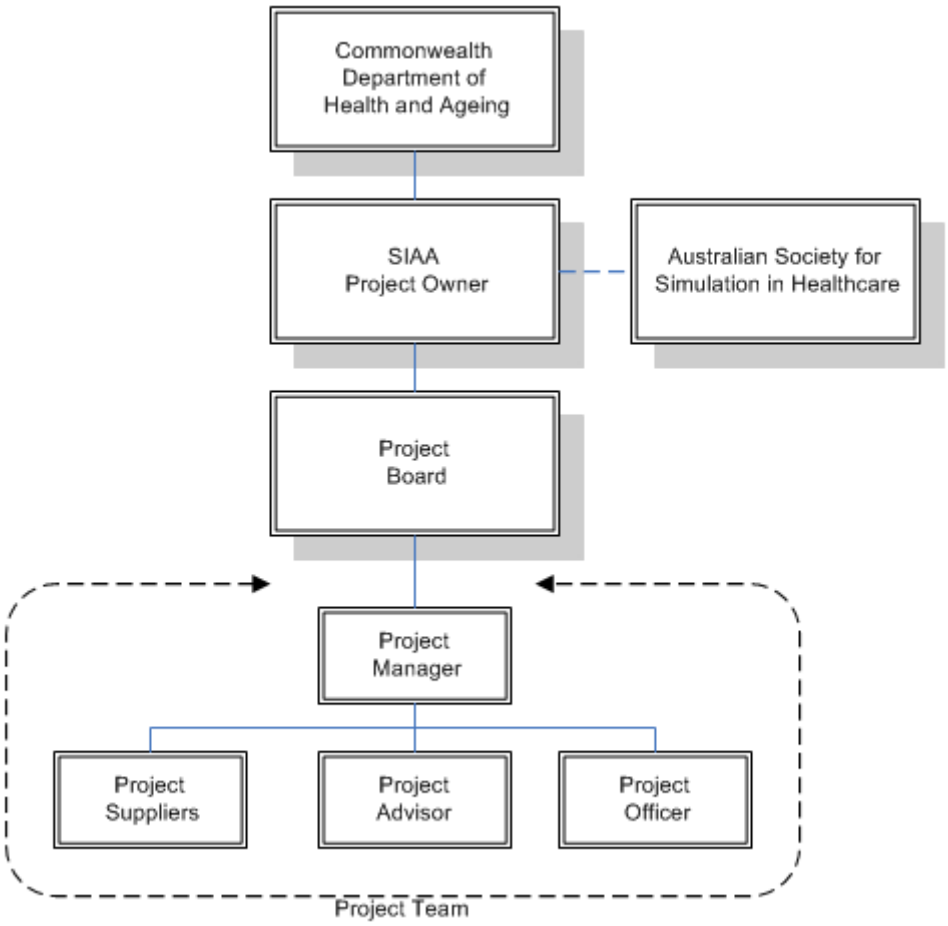
During the Project (and at the completion of the Project) the 'Actual' Project Expenditure is known.

Having both the Project Budget Baseline and the Actual Expenditure provides the basis for Project Evaluation.

Project Organisation and Management

The aim of this section is to briefly outline the major roles of participants and their responsibilities to ensure that all lines of communication have been clearly defined and agreed.

PROJECT ORGANISATION



ROLES AND RESPONSIBILITIES

The following lists the roles and responsibilities covered in the organisation chart.

	Roles	Responsibilities
Project Governance	Project Board	The Project Board is responsible for business issues associated with the Project. This includes budget strategies, monitoring risks, probity management, quality and timelines. The Board will be the primary reporting channel to provide assurance to the Project Sponsor and key stakeholders on Project progress.
	Project Manager	The Project Manager will manage across all functional teams during the Project. This position will have primary responsibility for ensuring Milestones are achieved. The Project Manager will have day-to-day management of the Project Office, including: • preparation of the Project Management Plan and Project Schedule • ensuring resources are delivered in accordance with the Project Management Plan • management of any contractual obligations • performance reporting • managing project risk • managing project quality • attending Project Board meetings, and • providing Project reports.
	Project Advisor	The Project Advisor will assist the Project Manager to establish an effective project governance framework.
Project Suppliers	St Vincent's Health, Melbourne	The supplier will promote simulation-based training of non-technical skills (NTS) in medical specialist training programs. The supplier will work cooperatively to host a one day forum; and work with up to four independent simulation providers to deliver specified pilot training activities. The supplier will oversee pilot training programs for the purpose of providing an independent evaluation of them. The supplier will provide deliverables associated with the following milestone: • PHASE 2 - Curricula Mapping (Evidence) • PHASE 2 - Curricula Mapping (Engagement) • PHASE 2 - Curricula Mapping (Resource Development) • PHASE 2 - Curricula Mapping (Adoption) • PHASE 2 - Curricula Distribution

Roles	Responsibilities
St Vincent's Hospital , Sydney	Await deliverables in subcontract
Monash University	Await deliverables in subcontract
Qinetiq/University of Qld	Await deliverables in subcontract

PROJECT CONTROLS

Change Management

Change management refers to changes of project scope, activities, budget, and timeframes. Any project changes are subject to agreement by the Project Board and are to be documented in Project Board minutes. Changes to the Project will be recorded in a Change Register.

Management Reporting

This section briefly covers the agreed management reporting process that will be followed throughout the life of the Project. The management reporting process will use a standard set of templates.

Document Name	Frequency	Author	Recipient/s
Project Management Meeting Minutes	• Outcome of Project Management Meetings	Project Manager	• Project Team • Project Board
Issues Register	• Tabled at Project Management Meetings and Project Board Meetings	Project Manager	• Project Team
Risk Register	• Tabled at Project Management Meetings and Project Board Meetings	Project Manager	• Project Team
Performance Management	• Tabled at Project Board Meetings	Project Manager	• Project Board
Project Status Report	• Tabled at Project Board Meetings	Project Manager	• Project Board

Risk Management

A separate Risk Management Plan has been developed which forms part of the governance for this Project. The Risk Management Plan provides the framework for managing risks associated with the Project.

The Risk Register will be reviewed and updated at each Project Management meeting. Any new risks will be added to the Risk Register at the time of identification. The Risk Register will be tabled at each Project Board meeting.

Issues Management

A systematic approach to issues management will assist in identifying any potential problems and allow early remedial action to be taken. This will also allow timely reporting to the Project Board and other stakeholders.

The Issues Register will be reviewed and updated at each Project Management meeting. Any new issues will be added to the Issues Register at the time of identification. The Risk Register will be tabled at each Project Board meeting.

Project suppliers are responsible for issue resolution associated with their responsibilities.

Project Quality Plan

The Quality Management Plan requires a Project Quality Plan to be developed.

The Project Quality Plan is:

Deliverable	Quality Event	Quality Materials	Quality Metrics	Purpose
• Project Quality Plan • Risk Management Plan • Risk Register • Issues Register • Change Register • Contract Management Plan	Multi person Review	• SIAA Templates	• All elements of the Template have been completed	Ensure the information is accurate and well constructed prior to submission to Project Board.
• Project Management Plan	Multi person Review	• SIAA Templates	• All elements of the Template have been completed • Contents of the Plan must accurately reflects the project definition	Ensure the information is accurate and well constructed prior to submission to Project Board.
• Contract consultant to undertake curricula mapping • Contract providers to undertake pilots • Contract consultant to undertake curricula distribution	Multi person Review		• Contracts must accurately reflect the deliverables expected to be produced by the supplier	Ensure contracts are correct prior to signing.
• Literature Review	Expert Review		• Content must reflect an extensive review of published and grey literature • Content must inform the specialist training colleges as to how simulation is currently being used	To provide evidence to colleges as to the use of simulation as an educational tool for the teaching of NTS.

Deliverable	Quality Event	Quality Materials	Quality Metrics	Purpose
• 1st Curricula Mapping Progress Report	Multi person Review	• Contract	• Deliverables must meet contractual requirements	Ensure the supplier is meeting contractual requirements and to determine project progress against baseline schedule.
• Self Assessment Readiness Tool	Expert Review		• Tool must collect quantitative and qualitative data regarding readiness for participation in simulation training of NTS	To ensure the Self Assessment Readiness Tool can be used to evaluate readiness to utilise simulation in the teaching of NTS.
• Results of Self Assessment	Expert Review		• Results must indicate two aspects: level of readiness and level of understanding of simulation	To ensure results assist ASSH in reviewing the college applications for participation in the pilot process.
• 2nd Curricula Mapping Progress Report	Multi person Review	• Contract	• Deliverables must meet contractual requirements	Ensure the supplier is meeting contractual requirements and to determine project progress against baseline schedule.
• Training Needs Analysis (TNA) Questionnaire	Expert Review		• The TNA questionnaire must collect data from representative groups within the college educational hierarchy • Survey approximately 50 supervisors, 50 trainees from various years and 20 education or simulation champions	To ensure the TNA questionnaire identifies 'champions of simulation'. To ensure the TNA questionnaire will result in determining current levels of confidence with various aspects of NTS training in order to identify areas of need.
• Training Needs Analysis (TNA) Report	Multi person Review		• The report must identify learning gaps, levels of education experience, the range of equipment used, settings of use, and the teaching resources required for current and future simulation based course development	To ensure the report informs the curriculum team to develop curriculum maps outlining the priorities for the training colleges. To ensure the report identifies any differences in needs between colleges, in particular variations that may be evident in various craft groups within a training college.

Deliverable	Quality Event	Quality Materials	Quality Metrics	Purpose
• Scope of sequence for Selected Specialist training colleges	Expert Review		• Outcomes must be based on using the data from the TNA and the literature review	To ensure priorities for simulation training of NTS are established and validated with each of the participating colleges.
• Curriculum maps for selected specialist training colleges	Expert Review		• Curriculum maps reflect needs	To ensure the curriculum maps and explanatory notes inform the subsequent pilot process.
• 3rd Curricula Mapping Progress Report	Multi person Review	• Contract	• Deliverables must meet contractual requirements	Ensure the supplier is meeting contractual requirements and to determine project progress against baseline schedule.
• Evaluation Criteria	Expert Review		• Criteria must assess program content, delivery methods, resources, viability and ease of implementation	Ensure the evaluation criteria links to required evaluation outcomes.
• Evaluation Tool	Expert Review		• The Tool must collect data for the evaluation • People undertaking evaluation must have a clear and consistent understanding of the evaluation process	Ensure an objective evaluation process is established.
• Evaluation of Pilots Report	Expert Review		• Consulting team attending each pilot program must not be the consultants involved in mentoring that college through the pilot process • The Evaluation Reports must reflect the evaluation of Pilots	Ensure the independent and objective nature of the evaluation process. Ensure data from each source is collated and recommendations made within a formal evaluation report for each pilot program.
• Final Curricula Mapping Progress Report	Multi person Review	• Contract	• Deliverables must meet contractual requirements	Ensure the supplier is meeting contractual requirements and to determine project progress against baseline schedule.
• Pilots Complete	Expert Review	• Contract	• Pilots must be conducted in accordance with contractual requirements	To ensure the project findings are applied. To encourage their ongoing engagement.

Deliverable	Quality Event	Quality Materials	Quality Metrics	Purpose
• Report on Curricula Distribution Models	Expert Review		• Report must identify opportunities for, constraints associated with, and key principles underlying successful models for distributing simulation curricula.	To ensure the Report on Curricula Distribution Models is linked to the aim of achieving uniform training standards, acceptable access to training and efficient and economical business models for simulation training.
• DOHA Final Report	Multi person Review	• Contract	• Deliverables must meet contractual requirements	Ensure SIAA has met contractual requirements and final project outcomes.