

SCENARIO-BASED GROUP TRAINING: OUTPATIENT EXAM ROOM DISASTER WALKTHROUGH

Activity Guide for Trainers

Duration: 20–30 minutes

Format: In-person, facilitator-led walkthrough of a simulated outpatient exam room

Objective

To simulate a realistic outpatient care environment with multiple infection prevention hazards and engage staff in identifying, correcting, and discussing safe practices. This hands-on, scenario-based activity helps staff apply infection control principles in dynamic outpatient settings—from routine exams to procedures and patient transitions.

Target Audience

- Clinical staff (nurses, CNAs, medical assistants)
- Support staff (housekeeping, dietary, etc.)
- New hires during onboarding
- Staff participating in continuing education or annual trainings

Learning Goals

By the end of this activity, participants will be able to:

- Identify infection prevention risks in a typical outpatient exam room
- Apply best practices for PPE use, hand hygiene, and room setup
- Demonstrate environmental awareness and clinical judgment in routine outpatient care
- Reinforce team-based responsibility for patient and staff safety

Materials Needed

- Staged exam room or simulated outpatient space
- PPE supplies: gloves, gowns, masks, face shields
- Hand hygiene stations (real or simulated)
- Props for “disaster” setup (see on next page)
- Signage: standard precautions, isolation indicators, hand hygiene reminders
- Flipchart/whiteboard for discussion
- Sign-in sheet (for attendance records)

Key Messages to Reinforce

- Outpatient care has real infection risks—even without isolation signs or obvious wounds
- PPE, hand hygiene, and surface cleaning are essential in every patient encounter
- Shared spaces (exam tables, computers, tools) require intentional hygiene
- Infection prevention is a team responsibility, not just a clinical one

INSTRUCTIONS

Preparation: Staging the “Outpatient Disaster Room”

Create a realistic outpatient room with intentional infection control issues. Include a mix of clinical, environmental, and behavioral red flags.

Sample Hazards to Include:

- Used gloves on countertop or exam table
- PPE discarded improperly or stored incorrectly
- Stethoscope placed on a dirty surface or reused without cleaning
- Biohazard bin overflowing or lid open
- Open containers of supplies (e.g., cotton balls, gauze) exposed
- No visible hand sanitizer or soap dispenser empty
- PPE worn incorrectly (e.g., mask under chin, gown not tied) on mannequin or dummy
- Food or drink left in the clinical space
- Cleaning supplies stored near patient care tools
- Patient chart left open or visible on screen
- Patient scenario signage (e.g., “Immunocompromised,” “Respiratory Symptoms,” “New Wound Dressing Needed”)

Facilitation Steps

1. Introduction (2–3 minutes)

- Introduce the purpose: to spot infection control issues in a simulated outpatient care setting
- Emphasize the goal of applying infection prevention knowledge to everyday clinical scenarios—not just complex cases
- Reinforce that this is a safe space for learning and discussion

2. Group Walkthrough & Observation (15–20 minutes)

- Divide participants into small groups (2–5)
- Guide each group through the room and ask them to:
 - Identify infection prevention risks
 - Decide what actions should be taken (e.g., clean, remove, wear, store)
 - Discuss what PPE should be worn, when to perform hand hygiene, and how to prepare for patient care
 - Reflect on how these issues could affect patient and staff safety

Facilitator Tip: Encourage open-ended questions:

- “What’s unsafe here?”
- “What would you do before seeing the next patient?”
- “How would this affect a high-risk patient?”
- “Would you call for assistance or clean it yourself?”

Record repeated concerns or particularly teachable moments on the whiteboard/flipchart.

INSTRUCTIONS

3. Debrief & Reflection (5–7 minutes)

- As a group, review the issues identified
- Clarify any misunderstandings or misconceptions
- Reinforce best practices for:
 - Donning/doffing PPE
 - Room preparation and turnover
 - Use and storage of supplies
 - Infection prevention during basic procedures (vitals, assessments, injections, wound checks)
- Ask:
 - “How does this relate to what we see every day?”
 - “What small habit changes could improve safety?”
 - “What’s one takeaway you’ll apply today?”