The presenters have nothing to disclose.
Reflection

“For the things we have to learn before we can do them, we learn by doing them.”

Aristotle

Objectives

- Describe how high-fidelity simulation can improve nurse resident performance when caring for the deteriorating patient
- Describe how high fidelity simulation can improve nurse resident confidence when caring for the deteriorating patient
- Describe the process to implement a simulation experience in own setting

Description of Nurse Residency Program

- Hired into the Nurse Residency Program (NRP)
- 3 cohorts per year, size based on need
- One year program
- 16 weeks; 2-8 week rotations
- Innovative program elements
Demographics of New Graduate Residents

- 144 hired since 2010
- 97% BSN or MSN prepared
- 20% males/80% female
- 50% second-degree nurses
- 50% internal transfers into NRP

Establishing Academic Partnership

- In 2007, Sharp HealthCare supports San Diego State University’s (SDSU) School of Nursing
- The NRP Manager and hospital CNS partners with SDSU’s Simulation Lab Center Director
- Partnership built September 2012

Simulation Lab Setting

- Facility built to replicate hospital environment

“The greatest reward is the moment during the exercise when I see the light go on in a nurse resident’s head. That moment of realization, when the nurse understands, ‘this is really happening and I have to act’ is priceless.”

(Center Director)
Professional Role Component

Why Simulation?

- Supports New Graduate Nurse Residents
- Uses high-fidelity simulation - 2 case scenarios specific to organization:
  - Aims to help nurses recognize and manage deteriorating patients
- Focuses on:
  - Managing patients' responses to therapy
  - Teamwork
  - Interactions with family members

Knowledge
- Problem Solving
- Performance Objectives
- Learner Satisfaction
- Fidelity
- Critical Thinking
- Student Support
- Self Confidence
- Debriefing

Teacher Characteristics
- Student Characteristics
- Educational Practices

Outcomes
- Contextual Elements
- Design Elements

National League for Nursing/Jeffries Framework for Designing, Implementing and Evaluating Simulations

- Supports New Graduate Nurse Residents
- Uses high-fidelity simulation - 2 case scenarios specific to organization:
  - Aims to help nurses recognize and manage deteriorating patients
- Focuses on:
  - Managing patients' responses to therapy
  - Teamwork
  - Interactions with family members
Patient deterioration scenario
Tailored to Rapid Response/Code Blue Data
- Some patients coded
- Some patients transferred to ICU

Primary RN
Charge RN
Resource RN
Rapid Response RN
Residents in Action

Video #1
Video #2
Video #3

Process – Debrief

- Discovery of knowledge
- Generate emotions/feelings
  (Affective Domain)
- Analysis and synthesis
- Clarifies misperceptions/incorrect information
- Reframes the experience
- Stimulates the Cognitive thinking process
  (Cognitive Domain)

Unfortunately, often overlooked... BUT SO IMPORTANT!

Reflective Learning

- What happened?
- What did I see myself doing?
- What will I do differently?
- How do my actions relate to standards?
There is an academic practice gap in nursing that is being addressed by simulation laboratory training.

Nursing research supports that simulation training is helpful in developing participants' clinical practice. The literature also supports that simulation training helps new graduate nurses with: 1) gaining valuable skills in resource utilization; 2) being aware of organizational guidelines and procedures; and 3) building a sense of camaraderie among colleagues.

At the recent simulation training at San Diego State University, please reflect upon your performance. What did you learn and what would you do differently next time?

C.R. - October 10, 2012 at 7:52 PM
The one thing that sticks out to me that I would personally improve on is being more assertive with making the call that the patient is pulseless.

A.M. - October 11, 2012 at 1:59 PM
I will be completely honest and share that I am quite the critic when it comes to simulation learning. I felt way more confident going into this sim lab than any other that I participated in during school now that I am used to speaking with physicians, interpreting labs, and critically thinking in stressful situations.

S.D. - October 14, 2012 at 7:31 PM
First and foremost, I have learned that we as nurses must always trust our gut when it comes to certain situations. If it sounds like a duck, looks like a duck, and acts like a duck, then it must be one.

E.N. - October 15, 2012 at 11:02 PM
Since this experience, I have decided to take some time during my shift to go over the crash cart and just attempt to become more familiar with it so that I can save my patient’s life. I also think it would be important to recognize the signs of a patient deteriorating sooner so that I can call Rapid Response earlier and hopefully prevent a code from happening at all.

R.A. - October 16, 2012 at 9:46 PM
The beauty of simulation lab is that it is an environment where we can make mistakes and not feel too terribly bad about it!

K.G. - October 20, 2012 at 12:32 PM
As a graduate from SDSU, this experience was exciting. It was interesting to see the difference in my performance in simulation in the past as a student and currently as a registered nurse.
Data — Survey Demographics

- **Gender**
  - 14% male
  - 86% female
- **Mean Age**
  - 29.8 years
- **Ethnicity**
  - 3% Black
  - 14% Asian
  - 14% Hispanic
  - 69% White

(20; 79% response rate)

- **Education Level**
  - 6% Associate Degree
  - ADN to BSN programs
  - 6% Master of Science
  - 88% Bachelor of Science
- **Previous Simulation Lab experience**
  - 97%
- **Previous health care experience**
  - 63%

Data — Survey Questions

How confident are you in...

1. Your ability to observe and monitor objective and subjective data to uncover useful clinical information?
2. Your ability to recognize deviations from expected assessment findings?
3. Your ability to seek information from the patient and/or family to assist you in planning your interventions?
4. Your ability to focus in on the most relevant pieces of data when formulating your plan of care?
5. Recognizing trends (current patient data compared to previous knowledge)?
6. Responding calmly and confidentially in a stressful situation?
7. Communicating clearly and effectively with team members and families?
8. Developing customized interventions based on patient’s previous responses to interventions?
9. Your overall nursing skills (kinesthetic skills)?
10. A leadership role with a coding patient?
11. Your ability to give report to a physician?
12. Your ability to communicate with family members who are highly emotional?
13. Your delegation skills?
14. Your ability to accurately self-reflect and evaluate your overall clinical performance?
15. Identifying your strengths and/or weaknesses?

Data - Change in Confidence Levels

[Graph showing change in confidence levels over time]
Lessons Learned

- Deteriorating Patient
  - Code Blue
  - Transfer to ICU
- Organization-specific case studies
- Formal debrief process
- Confidence Level
- Ride the Trolley

Developing a Simulation Lab Experience

- Determine purpose and goals of training
- Consider experience level of participants
- Consider knowledge, skills and behavior to be addressed
- Consider technology (and site) available
  - Low fidelity
  - High fidelity
  - Partnering with an academic institution
- Determine feedback method
  - Debrief
  - Video
  - Reflection

In Summary, We...

- Described how high-fidelity simulation can improve nurse resident performance when caring for the deteriorating patient
- Described how high-fidelity simulation can improve nurse resident performance when caring for the deteriorating patient
- Described the process to implement a simulation experience in own setting
Questions?

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References


