

# TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER School of Nursing

Social Work and Nursing Student
Simulation Experiences for
Highly-Sensitive,
Low-Exposure Patient Encounters



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## **ANCC**

#### **Continuing Nursing Education**



INACSL is an accredited ANCC provider.



## **ANCC** Required Disclosures

#### Conflict of interest

- Donna Paris, MSN, RN, CCRN-K reports no conflict of interest
- Kathryn Whitcomb, DNP, RN, CHSE reports no conflict of interest
- Robyn Faz, MSN, RN reports no conflict of interest
- Terran Keidl, BSN, RN reports no conflict of interest
- April Beckling, BSN, RN, CMSRN reports no conflict of interest
- Wayne Paris, PhD, LCSW reports no conflict of interest
- Ruth Bargainer, MSN, RN, CNE reports no conflict of interest
- Julia Greenawalt (INACSL Conference Administrator & Nurse Planner) reports no conflict of interest
- Leann Horsley (INACSL Lead Nurse Planner) reports no conflict of interest

#### Successful completion

- Attend 90% of session
- Complete online evaluation



## Objectives

- Upon completion of this presentation, participants will be able to:
  - Integrate interprofessional (IP) collaboration within the simulation experience
  - Design and plan highly-sensitive, low-exposure scenarios
  - Discuss strategies to involve community partners
  - Review debrief methods



## **SIMULATION OVERVIEW**



## Purpose

- Highly-sensitive, low-exposure encounters
- Increased prevalence:
  - Sexual assault
  - Infant abandonment
  - Child abuse
  - Toddler overdose
  - Suicidal ideation
  - Homelessness
- IP Collaboration



# **Core Competencies**

- Values/ethics
- Roles/responsibilities
- IP communication
- Teams and teamwork



# DESIGNING AND PLANNING THE SIMULATION EXPERIENCE



# **Community Partners**

- Faculty and students
  - Nursing
  - Pharmacy
  - Social work
- Nurse practitioners
- Nurse leaders
- Forensic nurses (SANE)
- Lab technicians
- Firemen/paramedics
- Standardized patients









#### Methods

- Ongoing IP simulation research
- Not a mass casualty disaster
- "Day in the life" of an emergency department





#### Methods

- Hybrid simulation
  - Standardized patients
    - Convey emotion
    - Communication
  - Manikins
    - Demonstration of forensic examination
    - Moulaged for child abuse
    - High acuity
    - Toddler overdose
    - Neonate (safe baby)



# INCORPORATING SOCIAL WORK INTO SIMULATION



# **Educational Objectives**

#### Nursing

- Assess patient
- Communicate effectively with IP team
- Perform interventions
- Make appropriate referrals

#### **Social Work**

- Assess for history
- Assess for abuse
  - Domestic
  - Physical
  - Emotional
- Contact protective services
- Discharge plans and referrals

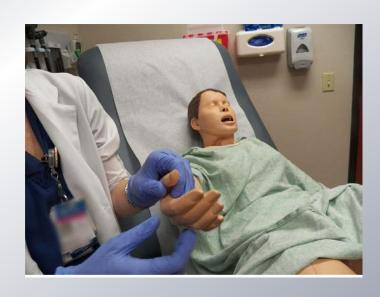




















## **DEBRIEF**



### **Debrief Sessions**

- All disciplines participated
- Nursing and SW more engaged in the conversation
- Identified limitations
  - Lack of communication
  - Treatment of the patient
- Debrief honest between disciplines
- Better understanding of importance of collaboration
- Could identify what they learned from one another



### Lessons Learned

- Freeze scenario (if needed)
- Complexity of some scenarios re-evaluated
- Debrief standardized patients following emotionally-charged scenarios
- Mini debriefs for highly sensitive encounters



#### Conclusion

- Reduce health professions' students concerns of inadequacy
- Improve communication among team
- Improve skills in meeting physical needs of patient
- Improve skills in addressing the patient's emotional needs
- Better address post discharge needs
- Clarity of roles



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