INTEGRATING SIMULATION-BASED EDUCATION INTO THE HEALTHCARE SETTING: NEWLY LICENSED NURSES LEARN TO TRANSITION

KELLY L. ROSSLER, PH.D., RN, CHSE
KATHERINE HARDIN, MSN, RN-BC
MARYGRACE LEVEILLE, PH.D., RN, ACNP-BC
RESEARCH TEAM

• Kelly L. Rossler, Ph.D., RN, CHSE*
• Katherine Hardin, MSN, RN-BC
• Marygrace L. Leveille, Ph.D, RN, ACNP-BC
• Karen Wright, DNP, RN

• Presenter(s) do not Report a Conflict of Interest*
STRENGTH IN THE LITERATURE

• National Council of State Boards of Nursing: Transition to Practice® (TTP) Model

• Formalized Nursing Residency/Internship Programs

• Experiential Learning Teaching Methodologies

• Baylor Scott & White Health Professional Practice Model
PURPOSE

Explore graduate nurse interns’ perceptions of the addition of simulation-based education into a nurse internship program to promote transition into the clinical practice setting.
RESEARCH QUESTIONS

1. What did it mean for new graduate nurses to experience simulation based education during the registered nurse internship program?

2. What are new graduate nurses’ perceptions of human patient simulation as a teaching modality to promote transition into the clinical practice setting?
METHODS

• Qualitative Research Design: Hermeneutic Phenomenology
• Setting: Simulation Education Room and Simulation Laboratory
• Human Patient Simulation Sessions
  • Tiered Format for Newly Licensed Registered Nurse hired into Graduate Nurse Internship Programs
METHODS: FACE-TO-FACE INTERVIEWS

- Past Participation in Pre-Licensure Simulation Education

- Attendance in the Simulation Education Sessions

- Exemplars: Incorporation of the Simulation Education Sessions into Practice

- The Meaning of Role Socialization
<table>
<thead>
<tr>
<th>Gaining</th>
<th>Gaining Comfort with Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Real-to-Life Practice</td>
</tr>
<tr>
<td></td>
<td>• Role Uncertainty</td>
</tr>
<tr>
<td>Talking</td>
<td>Talking it Out</td>
</tr>
</tbody>
</table>
REAL-TO-LIFE PRACTICE

“I don’t feel like a student…I feel just like myself.”

“Oh my – what does the patient think?”
ROLE UNCERTAINTY: COMPETENCY SKILLS
“I think it has to do a lot with teamwork. To discuss as a team... be comfortable... not being afraid to speak up and talk through stuff with your team.”

“It highlighted the importance of communication... being open and communicating with the people you are working with.”

“It helped me with other members... getting acquainted with them.”
CONCLUSIONS

• Financial Considerations
• Time and Personnel
• Future Directions in Interprofessional Practice
• Implications for Future Research
  • ANPD, Society for Simulation, and International Nursing Association for Clinical Simulation in Learning Survey
REFERENCES