INACSL PRE-CONFERENCE

NLN JEFFRIES SIMULATION
THEORY AND ITS APPLICATION IN
THE SIMULATION BASED
LEARNING EXPERIENCES

GEORGE WASHINGTON UNIVERSITY SCHOOL OF NURSING





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PRE-CONFERENCE SESSIONS

The NLN Jeffries Simulation Theory by Dean Pamela Jeffries

A Call to Action: Strengthening Undergraduate Pediatric Learning through Simulation

Environmental Realism in Simulation Based Learning Experiences

Using a Quality and Safety Framework for Outcome Evaluation in Baccalaureate Nursing Simulation Education

Use of Technology in the Simulation Based Learning Experiences to Enhance Student Learning and for Organization Management



THE NLN JEFFRIES SIMULATION THEORY

THE STATE OF THE SCIENCE IN SIMULATIONS

PAMELA JEFFRIES





DISCLOSURES

Conflict of Interest

- Pamela Jeffries (Pre-Conference Presenter) 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 100% of session
- Complete online evaluation



LEARNING OUTCOMES

Upon completion of this educational activity, participants will be able to:

- 1. Describe the components of the NLN Jeffries Simulation Theory.
- Outline salient points form key documents related to teaching with simulation,
- 3. Identify challenges educators face in regards to developing competencies using simulation as a tool for teaching.
- 4. Discuss the state of Nursing Science in Simulation



REFERENCES

Hayden, J., Smiley, R., Alexander, M., Kardong-Edgren, S. & Jeffries, P. (2014)The NCSBN National simulation study: A longitudinal, randomized, controlled study replacing clinical hours with simulation in prelicensure nursing education. *Journal of Nursing Regulation*, 5(2)(2014)

Jeffries, P. (2016) The NLN Jeffries Simulation Theory. Wolters Kluwer



A CALL FOR ACTION: STRENGTHENING UNDERGRADUATE PEDIATRIC LEARNING THROUGH SIMULATION

ELIZABETH G. CHOMA, CPNP, MSN, RN, BSN





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DISCLOSURES

Conflict of Interest

- Elizabeth G. Choma (author) reports no conflict of interest
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- Leann Horsley (INACSL Lead Nurse Planner) reports no conflict of interest

Successful Completion

- Attend 100% of session
- Complete online evaluation



LEARNING OUTCOMES

Upon completion of this educational activity, participants will be able to:

- 1. Identify content topics currently underrepresented in pediatric nursing education and simulation implementation processes
- 2. Discuss simulation scenarios presented
- 3. Summarize student's experience after completing the pediatric SBLE



GUIDING RESOURCE

UNDERGRADUATE PEDIATRIC NURSING EDUCATION: ISSUES, CHALLENGES AND RECOMMENDATIONS

- Collaboration between AACN and Institute of Pediatric Nursing
- Trends and Challenges
- Recommendations



RECOGNIZE GAPS IN EDUCATION

Shift in the health needs of our pediatric patients and their families

Site competition

A few examples: Obesity/nutrition and Bullying



PHASE 1 DEVELOPMENT PRE-ASSIGNMENT

Articles

- Patient education guides
- Assessment Tools



PHASE 1 DEVELOPMENT QSEN COMPETENCIES

After this simulation the student will be able to:

- Provide patient-centered care with sensitivity and respect for the diversity of human experience
- Elicit expectations of patient & family
- Explore ethical and legal implications of patient/family-centered care
- Appreciate the importance of regularly reading relevant professional journals and providing evidence based practice



PHASE 1 DEVELOPMENT PRE-BRIEF

Throughout the scenario you are the nurse at a primary care office caring for a patient. The clinical faculty member will be the NP provider for the session.

You will have a patient chart with the required readings at the back of the chart for quick reference.



PHASE 1 IMPLEMENTATION

- 4 simultaneous scenarios
 - 2 students engage with patients
 - 2 students engaged with clinical faculty
- Prebrief 30 minutes
- Facilitation 75 minutes
- Break 15 minutes
- Debrief 60 minutes
 - Upon completion of all 4 scenarios



PHASE 1 LESSON LEARNED

Resource intensive

Student mainly engaged in one scenario

Chart



PHASE1 SURVEY RESULTS

"This simulation was valuable to me because of the way the scenarios were laid out. I liked that it was a start to finish simulation of an office visit with opportunities to talk to the healthcare provider. I think I was able to learn a lot about working with the pediatric population."

"Very realistic simulation that pushed us to think critically. Would have enjoyed more time with the other nurses but overall, great."



PHASE II EVOLUTION OF SCENARIOS

Teamwork

Allocation of resources

New Session Format



PHASE II ASSIGNMENT/ROTATION

- You will be caring for three patients today in a primary care setting.
- Three to four of you will be participating in a patient encounter for twenty minutes.
- The patient encounter will be streamed and those not actively participating will be deliberate observers.
- The roles will be randomly assigned.
- Everyone will participate in at least one scenario.
- After each patient encounter we will have a 20 minute debrief.



PHASE 2 ROLES OF STUDENTS

- Nurse 1- Chief complaint and initial assessment
- Nurse 2- Standardized assessment tool
- Nurse 3- Health team communicator
- Nurse 4- Medication administration



MEET OUR PATIENTS

Anthony

Jessica

Emma



SAMPLE PATIENT-ANTHONY FIELDS



Life Style Nutrition Bullying



ANTHONY FIELDS

- History
- Current presentation
- Bringing obesity and bullying into the clinical setting
- Advocating on bullying is unfamiliar territory



ANTHONY FIELDS RESOURCES

- Bullying: It's Not OK Connected Kids: Safe, Strong, Secure (Copyright © 2006 American Academy of Pediatrics)
- HEADSS Assessment
- Pacers.org/bullying
- Getting into adolescent heads: An essential Update



ANTHONY FIELDS STUDENT OUTCOMES

- Identify Chief Complaint
- Standardized Assessment Tool
- Obtain Diet History
- Complete SBAR
- Discuss Bullying
- Med Administration
- Provide Educational Resources



ANTHONY FIELDS SIMULATION

https://www.youtube.com/watch?v=voPS0wBZPeE&feature=e m-share_video_user



RESULTS OF STUDENT EXPERIENCES

 Debrief – all student able to participate because they were either in the scenario or an observer

Safe place to share feelings and discuss difficult topics

 Confidence Building – strategies for handling difficult situations



PHASE II SURVEY RESULTS OF STUDENT EXPERIENCES

"It was helpful to practice in a primary care setting instead of a hospital. I enjoyed learning to incorporate clinical and social aspects of nursing."

"Great simulation experience and the readings assigned prior were very beneficial."

"The topics covered in the scenarios were very helpful because they are very difficulty to talk about. This was a great opportunity to discuss these sensitive topics."



PHASE III

- Disseminate experiences of development and implementation of pediatric SBLE
- Publish pediatric SBLE
- Continue to implement and evaluate pediatric
 SBLE within the undergraduate curriculum



QUESTIONS?





ENVIRONMENTAL REALISM IN SIMULATION BASED LEARNING EXPERIENCE

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DISCLOSURES

Conflict of Interest

- Patricia Davis (INACSL Pre-Conference Presenter) reports no conflict of interest
- Brian Keenan (INACSL Pre-Conference Presenter) 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 100% of session
- Complete online evaluation



LEARNING OUTCOMES

Upon completion of this educational activity, participants will be able to:

- 1. Explore lab environment to identify strategies to enhance simulation activity.
- 2. Exam affordable solutions in creating a realistic environment



ENHANCING REALISM

Participants will rotate through a variety of stations exploring:

- Manikin Enhancement
 - Patient Assessment with Low fidelity manikin
 - Situational Awareness
- Environmental Enhancement
 - General Red Yoder at Home
 - Nutrition Experiential Sim
 - Assisting with a Meal Clinical Readiness
 - Communicating with a healthcare provider



AFFORDABLE SOLUTIONS

Participants will rotate through a variety of stations to examine environments which demonstrate:

- Repurposing
 - Pyxis
 - IV
 - Reading a PPD
- Fluids In and Out
 - Central Line Blood Draw
 - Collecting sterile urine specimen
- Tools/Documents
 - EHR
 - Medications



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Moulage. (2014) Healthy Simulation. http://healthysimulation.com/moulage/

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USING A QUALITY AND SAFETY FRAMEWORK FOR OUTCOME EVALUATION IN BACCALAUREATE NURSING EDUCATION

THOMAS DARISSE AND CHRISTINE SEATON





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DISCLOSURES

Conflict of Interest

- Thomas Darisse reports no conflict of interest
- Christine Seaton 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 100% of session
- Complete online evaluation



LEARNING OUTCOMES

Upon completion of this educational activity, participants will be able to:

- 1. Discuss significance of assessment and evaluation of patient safety outcomes in simulation education
- 2. Analyze video recording of patient care simulation in regard to patient safety criteria
- 3. Synthesize aspects of evaluation involving multiple outcomes and interrater reliability
- 4. Integrate NLN Jefferies Simulation Theory in outcome evaluation



USE OF TECHNOLOGY IN SIMULATION BASED LEARNING EXPERIENCE TO ENHANCE STUDENT LEARNING

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DISCLOSURES

Conflict of Interest

- Julia A. Clarke (INACSL Pre-Conference Presenter) reports no conflict of interest
- Miro Liwosz (INACSL Pre-Conference Presenter) reports no conflict of interest
- Shane Popelka (INACSL Pre-Conference Presenter) 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 100% of session
- Complete online evaluation



LEARNING OUTCOMES

Upon completion of this educational activity, participants will be able to:

- 1. Explore the use of technology for deliberate practice
- 2. Identify the use of technology to engage learners



CONTENT

- Participants will rotate from station to station observing the different technological practices implemented in the learning environment
- Interactive environment will enhance the learning experience and give the participant the hands-on experience developed in the Simulation and Experiential Learning Center
- Deliberate practice and the use of technology will be able to engage the learners effectively



DELIBERATE PRACTICE

- iPad with independent practice
 - QR code use to demonstrate the practice
- Patient presentation
 - Patty Davis poster presentation and the student response to crisis
- iPad use for remediation and retesting
 - Videotaping of students to show skills performed
- Medication Reconciliation Case Study



USE OF TECHNOLOGY

- Use of iPads for patient presentation
- Simulation with clickers
 - Student interaction and participation
- Streaming capabilities
 - Use of active observer
 - Separation of the observer
- Communication in Quality and Safety
 - Narrated/Animated Rehab situation



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- Chee, J. (2014). Clinical simulation using deliberate practice in nursing education: A Wilsonian concept analysis. Nurse Education in Practice, 14, 247-252.
- Jamu, J., Lowi-Jones, H. and Mitchell, C. (2016). Just in time? Using QR codes for multi-professional learning in clinical practice. Nurse Education in Practice, 19, 107-112.
- Jeffries, P. (2014). Clinical simulations in nursing education: advanced concepts, trends and opportunities. Baltimore: Wolters Kluwer.



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