Title:

Bringing the Simulation Lab to the Classroom

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Session Title:

Simulation to Enhance Clinical Practice

Slot:

B 05: Saturday, 28 October 2017: 3:15 PM-4:00 PM

Scheduled Time:

3:15 PM

Keywords:

Interdisciplinary approach, Pediatric Safety Scenario and Technology in the classroom

References:

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Abstract Summary:

A realistic patient encounter that clinically challenges a team of learners either in a simulation suite or transmitted to a classroom will facilitate large group discussion. A pediatric simulation, transmitted via WebEx, allows for a large group of students to practice situational awareness concerning major patient safety violations.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will discuss the steps to create a "Safety Scenario" in the classroom with the use of technology.	The Pediatric Safety Scenario was created based off of a potential safety near miss in the hospital with a nursing student. Utilizing an interdisciplinary approach, clinical nursing faculty members collaborated with the director of the simulation lab and technical support specialists to create the Pediatric Safety Scenario via WebEx. This allowed 84 students to remain in the classroom instead of an assigned pediatric self -learning module that was staged in the lab.
The learner will identify 10 safety errors in the Pediatric Safety Scenario.	The learner will be provided a pediatric safety case study to review. The learner will then view the Pediatric Safety Scenario WebEx and will identify 10 safety hazards. Once the activity is completed a debriefing session will occur.
The learner will discuss future simulation experiences that could be incorporated in the classroom environment.	The learner will engage in discussion regarding future simulations that can be incorporated in their work setting.

Abstract Text:

High Fidelity Simulation (HFS), as a learning pedagogy, can provide patient-centered, experiential, clinical scenarios that challenge the nursing students. These simulations create clinical exposure to rare, high acuity, interprofessional clinical scenarios. These clinical challenges can replicate a realistic patient encounter that clinically challenges a team of learners either in a simulation suite or can be transmitted to a classroom to facilitate large group discussion (Hayden, Smiley, & Gross, 2014). International Nursing Association for Clinical Simulation and Learning standards (INACSL, 2013) can be applied to a large classroom simulation experience and provided a valuable resource to create this simulation. This pediatric simulation, transmitted via WebEx, allowed for a large group of students, n= 82, to practice situational awareness concerning major patient safety violations. With the assistance of technical support specialists, we were able to establish a live feed between the simulation center and the class room on main campus.

Patient Safety is integrally associated with quality, as many of the quality indicators are measured by safety practices to prevent harm (Shearer, 2013). Clinical Simulation improves safety measures as allows nursing students to train, practice, and evaluate their performance to make improvements in their clinical

practice (Doolen, Mariani, Atz, Horsley, Rourke, McAfee & Cross, 2016, Berndt, 2014). Safe medication practice is a critical component of nursing curriculum and a vital aspect of the nursing practice. Safe medication practices involve critical thinking and clinical decision making skills. A clinical simulation scenario including safe medication practice provides a realistic approach in a safe environment where a patient cannot be harmed.

In an Undergraduate Nursing Course, a Pediatric Safety Scenario was created based off of a potential safety near miss in the hospital with a nursing student. Each year, students would come to our lab and complete a "What's wrong with this safety scenario?" which included (but not limited to) a baby in the crib, one side rail down, baby on his stomach. This year, the nursing faculty were working on this learning activity with our Director of the Simulation Lab, to enhance the scenario to include medication safety. The director of the lab suggested instead of 82 students coming to the lab bring the scenario to the classroom. With the upgrade of technology in the lab and the assistance of technical support specialists, we were able to establish a live feed between the simulation center and the class room on main campus. The students had to make an assessment of the Pediatric room and then list ten safety issues. This simulation exercise was live from the lab and the camera scanned the infant in his crib along with the medication he was receiving.

This pediatric simulation allowed for a large group of students to practice situational awareness concerning major patient safety violations. Students assessed most of the safety errors, yet missed the wrong medication that was hung and the ml/hour setting. A debriefing session occurred in the classroom. This was perceived as eye opening to the students and the importance of creating a safe environment. Students enjoyed the simulation experience in the classroom and hope this is the beginning of more classroom simulations in the future.