

MnSHEP Spring Newsletter 2016 Issue #3

MNSHEP Minnesota Simulation for Healthcare Education Partnerships



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Mission

Minnesota Simulation for Healthcare Education Partnerships (MnSHEP) promotes simulation excellence by providing evidenced based resources and support for educators. MnSHEP fosters academic/practice partnerships to promote research and provide collaborative learning opportunities in simulation.

Spotlight on the International Meeting for Simulation in Healthcare (IMSH) Conference January 2016

Article by Jeanne Cleary BSN, MA, RN

Discover. Share. Lead

This year's conference was excellent, every session I attended was motivational and followed the title of *Discover. Share. Lead!* From the morning plenary sessions to the last break out session, I was engaged and active.

One big take-away this year is "get ready"! Simulation which is being adopted by the Boards of Nursing in each state. Some states have already adopted standards and like Minnesota, many are in the works of setting standards for simulation use and the replacement of clinical hours with simulation. [The National Council of State Boards of Nursing \(NCSBN\)](#) study outcomes are the evidence to support simulation use in place of clinical.

The topic I really focused in on was **DEBRIEFING**.

The INACSA Standard VI - Debriefing Process statement reads:

"all simulation-based learning experiences should include a planned debriefing session aimed at reflective thinking".

Archived Webinars

- Introduction to MnSHEP (December 2015)
- Debriefing and Pre-Briefing (January 2016)
- A Recipe for Engaging Learners: The Use of Virtual Simulations in your Teaching Practice (February 2016)
 - To access the archived Webinars go to:
 - <http://www.healthforceminnesota.org/simulation/>
 - Password: Simulation
 - Choose: Newsletters and Webinars

Spotlight on the N. Hennepin Community College MnSHEP Workshop - March 2016

Article by Sue Field DNP, RN, CNE

We had a great turnout for our workshop at N. Hennepin Community College with faculty from multiple schools present.

Rose Raleigh MS, RN gave a presentation on spiraling an asthma simulation throughout a nursing program. Rose added complexity as it spiraled through the curriculum.

The **oxygenation** concept complexity included:

- 1st semester: Nebulizer and O₂
- 2nd semester Neb + O₂ + IV steroids
- 3rd semester Neb + O₂ + IV steroids + additional Neb
- 4th semester Neb + O₂ + IV steroids + deterioration of the patient

The **communication** concept complexity included:

- 1st semester: basic communication
- 2nd semester: non English speaking patient with interpreter
- Call health care provider for additional Neb
- Call health care provider with deterioration of the patient

Jody Ryan RN, MA-C gave a poster presentation on three leadership simulations she developed for the N. Hennepin Community College Nursing Program including simulations on

Debriefing promotes understanding and supports transfer of knowledge, skills, and attitudes with a focus on best practices to promote safe, quality patient care.

Much of the information I took away was focused on

Criterion 1: The simulation debriefer *must be* competent in the process of debriefing.

- Debriefing must be done by someone who was part of the simulation or observed the simulation in its entirety.
- Debriefing should be grounded in theory, pick one theory and use it in your institution, support your learning objectives in the debriefing and use them as part of your debriefing.

Several methods demonstrated in the workshops for debriefing included:

- DASH: Debriefing Assessment for Simulation in Healthcare
- DML Method: Debriefing for Meaningful Learning
- Advocacy Inquiry Method

Regional workshops are being planned by the NLN/INACSL to provide training on how to meet the new standards and to assist in the educational process.

The NLN response to the study and a summary is linked here:

[NLN Response to the NCSBN Simulation Study](#)

Publications



Jessie Daniels RN, BSN, MA is an adjunct faculty in the BSN program at the Bloomington, Minnesota campus of National American University. Jessie completed the NLN Leadership Development Program for Simulation Educators in 2014 in which she worked with six other educators from across the country on a research study titled "A mixed methods, international, multisite study to develop and validate a measure of nurse-to-physician communication in simulation".

"The ISBAR (Identification, Situation, Background, Assessment, and Recommendation) Interprofessional Communication Rubric (IICR) developed by the first and last authors, is unique because of its focus on communication, the addition of Identification to SBAR and its rubric-based, evaluative format... It comprises 15 items, including specific criteria to measure in a communication, and was designed to be used in the context of an acute health care setting" (p. 384).

The study was published and presented at 2 national conferences in 2015. The article can be found at:

Foronda, C., Alhusen, J., Budhathoki, C., Lamb, M., Tinsley, K., MacWilliams, B., Daniels, J., Baptiste, D., Reese, K., & Bauman, E. (2015). A mixed-methods, international, multisite study to develop and validate a measure of nurse-to-physician communication in simulation. *Nursing Education Perspectives*. 383-388. doi:10.5480/15-1644



Dr. Colleen Royle, Assistant Professor and Learning Resource Lab and Simulation Coordinator at Minnesota State University, Mankato, along with Dr. Kathleen Hargiss, Independent Researcher from Bradenton, Florida, published a comparison study titled: *Comparison of Baccalaureate Nursing Students'*

- Leadership and conflict resolution
- Leadership and communication
- Leadership and advocacy



Nancy Hengy MA, BSN Simulation/Lab faculty at N. Hennepin gave a tour of their new simulation center. Multiple people commented on their surveys on how interesting it was to see the simulation center.

Finally our presenters answered multiple questions for the participants! The following were some "tidbits" that I took away!

For small nursing programs starting out with simulation:

- Start small and simple
- Use 1 simulation with 1 group of students and pilot it
- Set up the same patient for all your simulations. Use the same MAR in multiple scenarios
- One program used baby monitors to get started with verbal responses for the mannequin!

Using students as standardized patients can help to develop empathy in our students

- One particular student commented that having a colostomy bag applied to her abdomen helped her to identify how her patients might feel with a colostomy bag.

Nutritional Education

- Use props to help students apply nutritional education. For a patient on a low sodium diet, place chips and pop on bedside stand.

Orientation to Simulation

- Be sure to orient the students to the simulation room and the mannequin each time. Put a list of what the mannequin can do at the head of the bed.

Easy and lifelike wounds for mannequins

- Purchase transparent labels of different sizes, google images of wounds and print the images on the labels and apply labels to mannequins for extremely realistic wounds!

These were a few of the ideas I came away with! Thank you to everyone that presented and attended! We hope to offer similar workshops in the future!

****Be sure to attend the MnSHEP meeting on Wednesday, April 27th from 5:30 to 6:30 at the Health Educators Conference!**

What's new on the MnSHEP Website?

Jeanne Cleary BSN, MA, RN developed a wellness home care visit simulation using NLN-ACES patient, Red Yoder. You'll find the simulation and the concept maps for the simulation online! Thank you Jeanne!

Upcoming Regional Conferences

Experience of Video-Assisted Debriefing versus Oral Debriefing following High-Fidelity Human Simulation.

The abstract from their study follows:

High-Fidelity Human Simulation (HFHS) is used in many disciplines, including nursing, as an innovative teaching pedagogy that offers an active learning process. The simulation process involves a number of stages with the most critical stage identified as debriefing. The main focus of debriefing is to stimulate reflection and encourage communication while exploring the emotions of the participants. These emotions assist in framing the experience that aids in enhancement of learning for the student. This quantitative, quasi-experimental study explored the comparison of two debriefing processes, video-assisted and oral, by assessing the students' opinion of the debriefing experience and the students' rating of the importance of the debriefing experience. Participants were first semester baccalaureate nursing students. The overall finding and the four subscales for both dependent variables showed no statistical significance. This article provides further evidence to guide educators to a preferred method of debriefing students after a simulated experience.

The publication can be found at: Royle, C., & Hargiss, K. (2015). Comparison of Baccalaureate Nursing Students' Experience of Video-Assisted Debriefing versus Oral Debriefing following High-Fidelity Human Simulation. *International Journal of Strategic Information Technology and Applications*, 6(2), 40-49. doi:10.4018/IJSITA.2015040103

Memberships to Consider

[Society for Simulation in Healthcare \(SSH\)](#) mission is as a leading inter-professional society that advances the application of simulation in healthcare through global engagement.

[International Nursing Association of Clinical Simulation and Learning \(INACSL\)](#) mission is to promote research and disseminate evidence based practice standards for clinical simulation methodologies and learning environments.

[National League for Nursing Simulation Innovation and Resource Center \(NLN SIRC\)](#). The Simulation Innovation and Resource Center (SIRC) project, is a collaborative alliance between the NLN and Laerdal Medical, whose purpose is to develop a community of nurse educators who can effectively use simulation to promote and evaluate student learning and who dialogue with one another in an effort to advance simulation in nursing education,

❖ [Health Educators Conference](#)

April 27: Pre-session: Best Practices in Simulation

April 27: 5:30 to 6:30 MnSHEP MEETING!

April 28: Breakout: Creative Uses of Simulation in the Classroom

April 28th Breakout: Care and Maintenance of your Simulation Center

Upcoming National Conferences

❖ [NLN/Boise State University Simulation Conference](#)

Current and Future Trends in Simulation

April 22-23, 2016 Boise, Idaho

❖ [International Nursing Association for Clinical Simulation and](#)

INACLS Conference, 2016

June 15-18, 2016 Grapevine, Texas

❖ [Sim Ops Society for Simulation in Healthcare](#)

July 21-22, 2016 Greenville, SC

❖ [Gathering of Healthcare Simulation Technology Specialists](#)

SimGhosts Conference 2016

August 2-5 2016 Peoria, Illinois

❖ [ACE.S Workshops Designed for PN Educators](#)

May 20th in Newark, New Jersey

September 21, in Orlando Florida

October 25, in Corpus Christi, Texas

For Additional Information Contact



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