

Effective Use of PNCI in Developing Confidence, Competence, and Critical Thinking with Nurse Graduate Residents

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Learning Objectives

- Understand the Nurse Residency program and goals
- Understand the use of Dorothy DelBuenos' Performance Based Development System (PBDS) as an evaluation tool for the Nurse Resident.
- Implement a program using PNCI scenarios that actively engage New Nurse Residents into the curriculum.
- Facilitate guided debriefing with PNCI Scenarios and teaching points.

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Accelerated Nurse Residency Program Sarasota Memorial Hospital

- Joint Project with Community College
- New Graduate Residency Program
From Aug 2007-Oct 2007
 - 30 hour classroom room
 - NCLEX review
 - Basic Arrhythmia
 - Case Study/Simulation
 - 16 clinical shifts (196 hours)
 - Performed as a student, not staff

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The Goal of Residency

- Providing a bridge over the chasm that currently exist between school and reality
- Provide an orientation for the residents' equal in nature to all new staff hiring into SMHCS
- Understand how to incorporate the Nursing process into their nursing care
- Most importantly Residents on completion feel confident, competent in their critical thinking skills development.

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Performance Based Development System (PBDS)

- Dorothy DelBuono
 - Critical thinking evaluation tool
 - Novice-expert
- Evaluation times
 - Pre-program
 - Post Sim experience
 - New Hire Orientation

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Journaling

Each of the Nurse Residents were asked to journal their experiences

- Daily The topic after each shift is entry: "Three new things I learned today"
- Weekly
 - at least 250 words
 - Some questions to write about were
 - When I felt anxious, nervous, frustrated or felt overwhelmed I think I _____.
 - When I try to understand important facts to solve a problem or prepare for clinical, I think I _____.
 - I prepare to carry out a nursing activity on the unit, _____.
 - My impression of the consequences of my performance in clinicals this week _____.
 - My reaction to what I like about my clinicals this week was _____.
 - My reaction to what I did not like about my clinicals this week was _____.

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Classroom Curriculum

DATE	TOPIC	ASSIGNMENT/ACTIVITY
8/6-9 At MCC	NCLEX review	Submit to the Education Department at either Venice or Sarasota Memorial the eligibility to sit for the nursing boards before Aug 31st Must sit for Boards by Oct 1st 2007
8/13 At SMH	Program Introduction Review 1) Arrhythmia 2) Case Study Scenarios-assignment 3) Journal-daily/weekly-assignment Core Measures Pre-test PBDS	Complete 2 clinical shifts at hospital during week of Aug 12-18 th Journal 2 journal entries Topic- "Three new things I learned today" 1 weekly entry-"Week in review"
9/10 At SMH	Basic Arrhythmia- Case study Simulation-Debriefing	Complete 2 clinical shifts at hospital during week of Sept. 9- 15 th Journal - 2 journal entries Topic- "Three new things I learned today" 1 weekly entry-"Week in review"
9/17 At SMH	Basic Arrhythmia Final PBDS Post test Case study-Final	Complete 2 clinical shifts at hospital during week of Sept 16- 22 nd Journal - 2 journal entries Topic- "Three new things I learned today" 1 weekly entry-"Week in review"

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Case Studies

- All case studies selected were taken from the Program for Nursing Curriculum Integration (PNCI)
- All were also in the PBDS scenarios
- All were able to be tied into the patient safety initiatives from the Joint Commission

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Case Studies (con't)

- Once the case studies were selected the instructor identified a leader for the two-man teams
- The case studies were assigned to the teams
- Expectations for the case studies were reviewed

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Case Study Expectations

- At the end of this simulation each participant would be able to:
 - Recognize the change in condition based on the new sign and symptoms
 - Correctly Identify the patients new diagnosis
 - Develop a plan of care involving doctor, patient, and family.
 - Implement the plan developed
 - Evaluate effectiveness of plan

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Grading

This program required the students obtain a grade. The grade came from:

1. Class attendance
2. Must make greater than an 80% on Basic arrhythmia final, missing no lethal rhythms
3. Rubric was developed for Simulation evaluation
4. Completion of 196 hours clinical experience

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Simulation Rubric

Criteria by stage	Points				Total
	0	1	2	3	
State #1 Demonstrates advance beginner level in the Nursing process. Completes initial assessment Diagnosis of condition change. Plan of care, implements plan, & evaluation of actions taken.	Does not complete an assessment of patient. Lacks sequence to steps taken.	Completes assessment, evaluates data, intervenes, documents Evaluates complaint of pain and intervenes appropriately Notes change in status and interprets data previously noted.	Seeks morning lab results and interprets data Notifies surgeon of change in status and lab results.	Uses SBAR when speaking with Physician Anticipates order for blood transfusion Calls physician to obtain order for Two units of PRBC's Provides read back for orders taken During debriefing provides rationales for actions taken.	
Total Score (out of 18 possible points)					

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Preparation for Simulation

- Audio/Visual set-up and capabilities
- Confidentiality
- Hands on Orientation to Simulator (SAM)
- Orientation to Patient Safety lab, available equipment, medications, etc.

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Audio/Visual



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“What Happens in SIM stays in SIM”

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PATIENT INFORMATION: NAME, ROOM NUMBER, PHONE NUMBER, SIGNATURE, DATE

Consent to Participate in Simulation Lab

During your participation in a session at the Patient Simulation Lab, you will likely be an observer of the performance of other individuals on managing medical events. It is also possible that you will be a participant in these activities. In order to provide an open and secure learning environment for all participants, we ask you to maintain and hold confidential ALL information regarding the performance of specific individuals and the details of specific scenarios.

By signing below, you acknowledge to having read and understood this statement and agree to maintain the strict confidentiality about any observations you may make about the performance of individuals and the simulation scenarios.

Signature: _____ Date: _____

Release of All Photographs and Video Recordings

I authorize the Patient Simulation Lab to share all photographs (color or print) and/or video recordings depicting me during the course of training in the Simulation Lab. I understand that these videos may be used by SIMS Education to show the ongoing evolution of Education strategies that meet our SIMS mission. Release statements approved by me, I will not be specifically identified, and photographs will be shown only in educational, research, or administrative purposes. No commercial use of the photographs (color or print) and/or video will be made without my written permission.

Signature: _____ Date: _____

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Pre-Simulation

- Utilized PNCI Learner
 - Anaphylactic Reaction to Blood Administration
 - Hand off communication format—*“Morning report”*
 - **History/Information:** 46 year old female, recently divorced ...
 - **Pre op labs-** hemoglobin of 8.4 and a hematocrit of 32%...
 - **Intraoperative report-** Estimated blood loss was 450mL...
 - **Currently-**uneventful
 -

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Pre-Simulation

Review the information utilizing the Prompts, questions, and teaching points on the Faculty guide of the PNCI.

Next the students are asked to develop a plan of care for the report they have received.

The plan is written down on a very large poster sheet to list out the concerns and actions that need to be taken, possible complications that might arise from those actions.

Poster sheet will then be moved into the simulation lab as a reference tool for the first simulation run through.

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Let’s try one

- With the H/P of the Blood transfusion reaction that you have already what is your diagnosis? What labs concern you?
- What you would call and relay to the MD? Why?
- What would you expect back from him/her? Why?
- What would you monitor to see if they were getting better or getting worse? Why?

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Post Simulation

- Debriefing

Of all the pieces the debriefing provided one of the best opportunities for the new graduate to learn and grow.

“What happened?”

“Why?”

“What would you do different?”

(change it on the poster paper)

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Final

- Completed the 196 hours of clinical
- Successful completed the NCLEX
- Successfully passed the basic arrhythmia exam
- Completed the second PBDS*
- Simulation without any prompts, evaluated on the rubric

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Results

- Accelerate program
- (18 months+3 month internship)
 - 12 started the program
 - 7 finished
 - 1 broke contract, 4 failed -2 during first year, 2 last semester*
- Simulation/Case study
 - PBDS improved
 - Ex: “monitoring vital signs” → “monitor temperature” with accompanying rationale.
- NCLEX
 - 7 took the exam
 - 4 passed first attempt, 1 passed second attempt, awaiting the last two*

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Lessons Learned

- Student do not want to wear their school uniform once they graduate!!!!
- Simulation should not have a grade attached
- Introduction to the lab is important for staff success
- Having the discussion prior to performing simulation maybe just as important as debriefing

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Lessons Learned

- **Debriefing is the most important part of the simulation**
- Important to provide plenty of debriefing time
- Play back of the scenario may not be enjoyable for all who participated
- Watch how the cameras are positioned!

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