Use of Interdisciplinary Simulation to Improve Student Knowledge, Skill and Attitude in a Nursing Care of Older Adults Course

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The enthusiastic response of nursing students ready to study the care of older adults.
What brought us together?

• We need to prepare our students to practice their chosen discipline.

• We need to assist students to use an interdisciplinary team approach to care.

• We need to assist students to value the care of older adults as a specialty practice.

• Will simulation help?
What is already available to assist in the process?

• NLN Simulation Design Template

• NLN Guidelines for Designing Simulation

• http://sirc.nln.org/
We revised a scenario from the ACES site to fit our needs.

Ertha Williams and her spouse Henry move to the assisted living part of a Life Care Community. Henry has COPD and had a recent MI. Ertha has a diagnosis of AD at the time of the move.

The simulation scenarios focus on the mental, physical and psychosocial changes that Ertha encounters over the next few weeks due to the death of Henry from another MI.

The objectives focus on assessment and appropriate use of assessment tools such as SPICES, The Montreal Cognitive Assessment (http://www.moctest.org/), the Geriatric Depression Scale, the Modified Caregiver Strain Index, the Beers Criteria for Potential Inappropriate Medication Use in Older Adults,

The objectives also focus on psychosocial issues with Ertha and Betty’s concern for her living arrangements; the proper use of the SBAR tool and making appropriate referrals.
Planning

• Objectives
• Space Needs
• Time Flow Chart
• Support Staff
• Faculty to guide simulation
• Faculty to guide debriefing
All Students: Communicate; Build Trust

- Nursing Students
  - Assessment of physical and psychological status
- Speech/Language Pathology Students
  - Assessment of executive function
- Dietetics Students
  - Assessment of nutritional status
- Social Work Students
  - Assessment for depression
How Many Students Did You Say?

8
That many?

- Nursing: 64 total
- Speech/Language Pathology: 12
- Dietetics: 6
- Social Work: 6

Students divided into 2 lab sessions with 3 concurrent activities.
What Do You Want to Accomplish?

• Increase comfort levels when working with older adults

• Improve assessment skills

• Recognize that not every behavior change is due to dementia in a person who has AD

• Interdisciplinary team communication

• Best Practice
What Equipment is Needed?

• Computer and projector

• Simulator with
  – speech interaction ability
  – breath sounds
  – heart sounds

• Assessment tools
How Much Equipment is Needed?

• How many simulations?
• How many simulations running simultaneously?
Prepare the Equipment
How Much Staff is Needed?

• Faculty from each discipline to guide simulations and debriefing
• Staff to run simulators and stock equipment
• Staff to control flow
Students assume roles of professionals and role of family member
One student in each group assumes the role of the patient and speaks for her
Just Do It! (Perspiration)
Station: Evidence-Based On-Line Activities
Hi-Fidelity Simulation
Alternate activity (a sensory deprivation exercise)
Plan the Scenario

- Detailed Patient Information
- What will happen
- What roles students will play
- Give opportunities for referrals
Plan the Flow, Time, and Staff

• Using Prompts to guide the Students
  ▪ Flow
  ▪ Time
  ▪ Staffing
Timing the Prompts
Giving Direction

✓ Did you ask the patient what she prefers to be called?

✓ Did you touch her to wake her up?

✓ Did you lower the tone of your voice and speak louder?

✓ Have you included both Ertha and Betty, or directed your questions to Betty?
Helping Each Other
Using a Script ("Guided Intelligence")

- Guiding the Action
- Setting Expectations
- Increasing Comfort Level
Planning Real-World Documentation/Communication Mechanisms

- Lab Reports
- Assessment reports
- Interdisciplinary team meeting with family present
- Students who observe team meeting must then critique outcome (what went well?, what might have been done differently?)
Communication is Key
Communication Tool

ISBARR (Grbach, Struth, and Vincent, 2007)

I = Identification of self
S = Situation
B = Background
A = Assessment
R = Recommendation
R = Read back

How Much Debriefing Time?

• 5 minutes debriefing at bedside right after simulation
Debriefing 15 – 20 minutes
All students together!!
Lessons Learned

• Flexibility
• Review schedule and numbers each time
• Prepare students to relieve anxiety
• Consistency in faculty feedback
• Positive approach to faculty feedback
• Focus on student self-confidence
• Focus on student skill attainment
• Simulate to stimulate.
• PLAN, PLAN, PLAN!