Connecting and Collaborating in Nursing Education through the Excellence in Clinical InterProfessional Simulation Education (ECLIPSE)

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Objectives

• Outline components of an inter-professional simulation
• List common obstacles and solutions in developing an inter-professional simulation
• List strategies for developing inter-professional simulations
Support for IPE

- Institute of Medicine core competencies (2003)
  - Work in interdisciplinary teams
- Quality and Safety Education for Nurses (QSEN) (2005-12)
  - Knowledge, Skill & Attitude competencies of “Teamwork and Collaboration”
- Inter-Professional Education Collaborative (IPEC) (2011)
  - Core competency domains
    - Values/Ethic for IP practice
    - Roles/Responsibilities
    - IP Communication
    - Teams & Teamwork
ECLIPSE Components

- Planning committee
- Learning objectives
- Participants
- Scenarios
- Schedule
- Resources
- Evaluation
ECLIPSE Goals

• Build a climate of mutual respect and understanding for other health and social science professionals
• Increase understanding of the roles and responsibilities of other health and social science professions
• Improve IP communication skills
• Increase proficiency in developing IP plans of care which can improve patient outcomes across the lifespan
Student Participation

• Obstacles
  – Asynchronous schedules
  – Incentives
• 2012: 6 Health profession programs
• 2019: 11 Health profession programs
  (RN,NP,CNL,MD,RT,PT,OT,Pharm,SW,Med.Diet.,Speech)
  – 4500+ students in seven years
Prelicensure Nursing

- “Transition to Practice” precepted clinical course
- Final year in program
- Required course activity
- Four students per sim
Acute Care Nurse Practitioner

• Simulation imbedded in one of two clinical courses
• Final year of NP program
• Receive extra credit on final grade for participation
• One-two students per sim
• Act as team leader
Clinical Nurse Leader

- Graduate level clinical course
- Final year of program
- One student per sim
- Work with prelicensure students and may be team leader
Student Preparation

6 Module online mini course
• Communication
• Leadership
• Situational monitoring
• Shared decision making
• Orientation to simulation
• Post-simulation evaluation
Patient Scenarios

**Ann Arbor**
- Trauma patient - MVA unrestrained DUI
- Intubated on ventilator (respiratory failure)
- 2nd day post-op splenectomy and ORIF
- Chest tube, IV, NG, post-pyloric feeding tube, art line
- Lives in upstairs apartment

**Willy Flan**
- Homeless, found collapsed on street
- Hx alcoholism, marijuana and tobacco abuse
- Hx PTSD, Hepatitis C, Cirrhosis
- Altered mental status, SOB, flapping tremors
- Military veteran
Patient Scenarios

Jill Shuman
• 4th day post-op amputation
• Pneumonia
• Diabetic – poor control
• Atrial fibrillation
• Hx of ETOH and benzodiazepines
• Post ETOH withdrawal
• Bipolar and schizophrenic

Chrissy Mack
• Endocarditis
• MRSA
• Day 9 of hospitalization
• 2nd day post-op valve replacement
• Hx of Heroin abuse
• Intubated
• CVC, Art line, NG, Foley
ECLIPSE Schedule

• 2.75 Hours
• Concurrent sims in 3 rooms
• 3-4 Day series
• Total of 18-20 sessions each semester
Session Schedule

<table>
<thead>
<tr>
<th>Interprofessional Simulation Session Schedule (General)</th>
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<tbody>
<tr>
<td>• Orientation to simulated experience</td>
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<tr>
<td>o <strong>ALL students from both rooms together in one room</strong></td>
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<tr>
<td>o Lead by T.L.C. staff</td>
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<tr>
<td>o Lasts about 5 min</td>
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<td>o Following orientation, return to assigned rooms</td>
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<tr>
<td>• Review of patient cases, patient assessments and planning</td>
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<td>o Separate professions facilitated by corresponding faculty</td>
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<td>o (RNs together, RTs together, etc...)</td>
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<tr>
<td>o Allow 25-35 min</td>
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<tr>
<td>• Bedside rounding on each patient by whole inter-professional group</td>
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<tr>
<td>o <strong>Begins no later than 40 minutes after session start</strong></td>
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<tr>
<td>o Allow up to 30 min</td>
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<tr>
<td>• Implementation of interventions and treatment plans collaboratively</td>
</tr>
<tr>
<td>o Begins after rounding</td>
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<tr>
<td>o Allow 15-25 min</td>
</tr>
<tr>
<td>• Debriefing as individual professional groups/prepare for round 2</td>
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<tr>
<td>o Allow 5-10 min</td>
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<tr>
<td>• Debriefing of rounding experience 1</td>
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<tr>
<td>o Allow 5-10 min</td>
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<tr>
<td>• Re-round on each patient by whole inter-professional group</td>
</tr>
<tr>
<td>o <strong>Begin no later than 55 minutes from end of session</strong></td>
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<tr>
<td>• Debriefing with whole inter-professional group (in each room)</td>
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<tr>
<td>o Allow 15-30 min</td>
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<tr>
<td>o Use debriefing questions here</td>
</tr>
<tr>
<td>• Complete post-simulation questionnaire</td>
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ECLIPSE Debrief

• What questions do you have for another profession?
• Name one thing you learned about another profession.
• Describe the collaborations that occurred?
• Did you come to any new realization about your own profession’s role on the team?
• How should conflicts about patient care decisions be addressed with another profession?
• What will you do differently in practice as a result of this experience?
Research Summary

• Examined the potential benefits of clinical simulations on teamwork and communication.
• Analyzed the attitudes of participants toward the use of multi-disciplinary simulations in clinical education
• Used the Readiness for Interprofessional Learning Scale (RIPLS) assessment tool
  – Results statistically significant in all subscales
Conclusions

• Interprofessional simulation demonstrated a strategy to better prepare students for the clinical setting

• Future research
  – Effects of formal teamwork training on behavior in simulation
  – Effects of IP simulation on patient outcomes
References

