Undergraduate Student Nurse ACLS Certification to Improve Practice Transition and Confidence

Abstract: A code blue curriculum, with an integrated an ACLS certification, was designed to facilitate student confidence for transition into clinical practice. The 12-item Code Blue Self-Confidence survey was developed to measure code blue confidence in the undergraduate nursing student. An inverse correlation was discovered with student confidence and anxiety in critical events.

Purpose: The presentation synthesizes data on the impact of the code blue simulation experience. In conjunction with simulation, a leveled code blue curriculum with the inclusion of an ACLS certification will facilitate student confidence for transition into clinical practice. The development of the Code Blue Self-Confidence survey was created to determine participant comfortability and anxiety with code blue processes.

Methods: An exploratory, single group design with a convenience sample of 89 BSN senior nursing students enrolled in the seventh semester, medical-surgical nursing course. A quantitative pre- and post-test with Pearson Correlation as split-half reliability check. A t-test for equality of means measured the difference in comfortability and anxiety between variables.

Variables: Variables included age, gender, race, exposure to code blue events in the clinical and work settings, and previous years of health care experience.

Findings: The modified 12-item survey, Code Blue Self-Confidence, assessed participant code blue confidence pre- and post-intervention. Favorable findings for pre-test included a Chronbach’s Alpha = .750 and Factor Analysis= LOE>.631. Post-test Chronbach’s Alpha= .237 and Factor Analysis= LOE>.754. A demographic survey was utilized to measure correlative data with code blue skill confidence. It was determined that there was an inverse correlation between comfortability and anxiety (r=.444, p=.199). Lastly, the t-test for equality of means was not statistically significant between variables of gender, age, previous healthcare experience, and specialty certifications.

Conclusion: Correlative findings revealed a significant improvement in student confidence with recognizing and intervening with the deteriorating patient to ensure swift implementation of code blue processes. The improved self-confidence was pivotal for successful completion of an ACLS certification in eight semester.

Practice Implications: Nurse response times greatly influence patient outcomes in critical situations. The safe zone of a simulation environment versus clinical practice creates opportunities for students to transition from novice, to beginner, to competent, while able to make errors and glean reflective knowledge before managing the direct care of a critically ill patient. One critical skill is the ability of a new nurse to identify and quickly respond to the needs of a deteriorating patient. When nurses launch proficiently from graduation into the transition of
the nursing profession, patient outcomes improve. The pre-graduation ACLS certification is an instrumental element in this process.