The clinical education learning environment: Student nurse perceptions comparing the traditional clinical environment and the simulation environment toward meeting clinical learning outcomes

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CONFLICTS OF INTEREST AND DISCLOSURES

Neither the planner(s) or presenter(s) indicated that they have any real or perceived vested interest that relate to this presentation.

Purpose of the Study

- The purpose of this qualitative study was to share experiences of student nurses participating in clinical simulations and traditional clinical environments, and how the student nurse described their clinical learning outcomes were met.

Objectives

➡ Participants will discuss student nurse perceptions regarding which clinical learning environment best met their BSN clinical learning outcomes.

➡ Participants will create a template for clinical learning and which BSN clinical learning outcomes will be best met in the traditional clinical arena and the simulated clinical learning arena.

Research Question

How do student nurses describe an experience in a simulated and traditional clinical environment to meet clinical learning outcomes?

Recruitment/Sample

- Senior Population (36), Volunteered= 4
- Junior Population (86), Volunteered= 11
  - Senior- 4
  - Junior 1- 5
  - Junior 2- 6
- N= 15

Focus Groups & Telephone Interviews

- Met off-campus site
- Consent was read and signatures obtained
- Clear that participation would not effect grades or standing within the nursing program
- Clear could withdraw at any time
- Reminded them of audio taping
- Transcript review- 1 day to three weeks
- 8 randomly selected to participate in the telephone interviews

Interview Questions

Introductory question	You were invited to participate in this focus group because you are currently a junior/senior within the nursing program and have experienced at least one clinical course in a simulated and traditional clinical environment. In which nursing course(s) have you experienced both clinical learning environments?
Transition questions	Think back to when you participated in a simulation; tell me something that happened in the simulated clinical environment that really helped you to learn.
	Think back to when you participated in a traditional clinical, tell me something that happened in the traditional clinical environment that really helped you to learn.
Key questions	How are the traditional clinical learning environment and the simulated clinical learning environment similar toward meeting your BSN learning outcomes?
	How do the traditional clinical learning environment and the simulated clinical learning environment differ toward meeting your BSN learning outcomes?
Ending question	You are competing for a $100,000 reward to design a simulated experience and traditional clinical experience, how would you do that to meet your BSN learning outcomes?

Data Collection and Analysis

➤ Data Collection resulted from:
  ➤ 3 Focus group interviews (4 seniors; 5 juniors; 6 juniors)
  ➤ Participant feedback to validate the focus group transcript (2 seniors; 5 juniors; 4 juniors)
  ➤ 8 random individual telephone interviews (1 senior; 7 juniors)

➤ Data was analyzed by In Vivo coding:
  ➤ First cycle coding + Second cycle coding + Reflexive iteration= analysis
    ➤ What are the data telling me?
    ➤ What is it I want to know?
    ➤ What is the relationship between what the data are telling me and what I want to know?

You are the student today…

➥ Traditional Clinical Environment-
  - ➥ Think about your BSN learning outcomes
  - ➥ Think about your traditional clinical experiences
  - ➥ Draw a line from the traditional clinical environment to the specific learning outcomes

➥ Simulated Clinical Environment
  - ➥ Think about your BSN learning outcomes
  - ➥ Think about your simulated clinical experiences
  - ➥ Draw a line from the simulated clinical environment to the specific learning outcomes
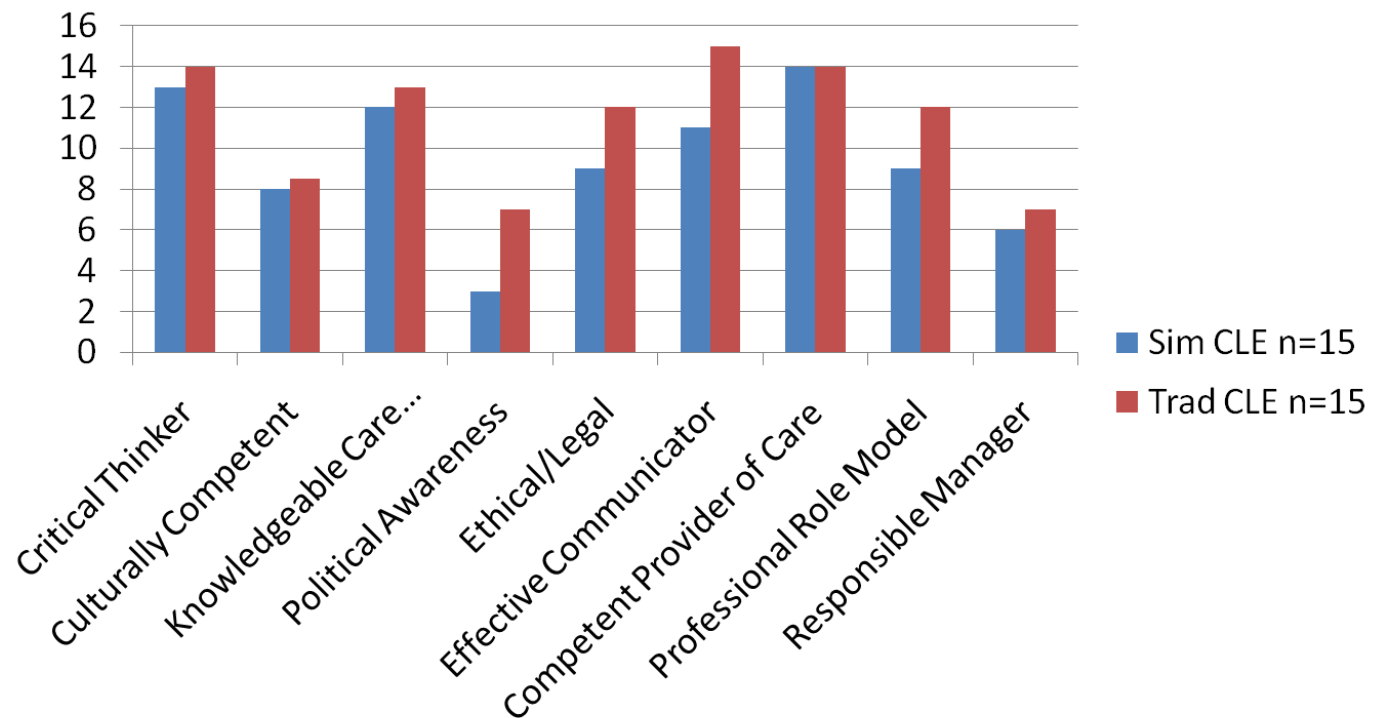
What do you see?

Is it possible to meet the majority of the learning outcomes in both CLE's? Yes or No

Which environment appeared to offer more opportunity to meet the BSN learning outcomes? TCLE or SCLE?

Was there a learning outcome that was difficult to meet in either CLE?

Student results

Categories Emerged

- Linking Past and Present Learning
- Significant Moments
- Preventative Learning
- Lack of Opportunity for Learning

Linking Past and Present Learning

➤ SCLE
  ➤ Enhanced learning that applies classroom knowledge & prepares for the TCLE

➤ *"I was in the simulation, the family member, it was amazing. This was the first time I like really seen all the things we learned in med/surg [class] really just being applied right away and both the nurses [students] were just really knowledgeable and just; I mean they were able to coordinate what they were doing with what we learned."*

Linking Past and Present Learning

- SCLE

  Enhanced learning with case-specific experiences and observations

- I think the simulations helped us prepare actually what to do when we got to the actual clinical site. Like, what to look for, it's like I know sometimes we actually got to critically think about it before you was actually able to care for an actual patient.

Linking Past and Present Learning

- TCLE

  Enhanced learning with case-specific experiences and observations

- I can't remember what condition the patient had, but it's something that you don't see everyday...and so to, to help you through the process you have to recall information that you want to have at the top of your head from previous clinical experiences. So it was a way for the professor to kind-a challenge us to something that we weren't going to see.

Linking Past and Present Learning

- SCLE

  Enhanced learning with case-specific experiences and observations

- I remember being the observer for the pediatric clinical...that was probably the most helpful clinical, uhm, simulation, experience that I was in, but it was really only helpful in the sense that I was like, watching my peers go through the experience that they were the RNs and I was supposed to be detailing what they were doing and what they weren't doing and, it was helpful in a sense that I was able to have a list in front of me of things that they should be doing, and remember from my readings. Oh yeah, that's why we need to do this and this, critiquing on your feet. And, I don't know I'm someone who learns from mistakes, so even when it's other people's mistakes, I don't want to say this like harshly, but just watching them totally fail, helped me a lot [laughter] it helped me probably more than if I just watched them do the whole thing perfectly.

(in)Significant Moments

- TCLE

  Enhanced learning with 1:1 instruction and observations

- Having time with the instructor and that attention was incredible. I learned so much about the charting system, I learned so much about where things were located in the hospital, where supplies were, what the codes were to get in this door or that door....it made a huge difference.

(in)Significant Moments

- TCLE
  Enhanced learning with 1:1 instruction and observations

- Student 1-When we were in a traditional clinical setting but we just observed for the day and I feel like I got way more learning than when I was kind of thrown out there...on my own and told go do this.
- Student 2-'Cause I learned so much. I went for OB [observation] and I just watched and I learned so much, like a tremendous amount of stuff so when I did my couplet care [instructor] was like 'oh do you need me to go in when you do your assessment or check your fundus?'I was like no; I saw all that, I was confident in doing that, I didn't have any problems.

(in)Significant Moments

- TCLE

  Time factor enhances learning

- *"And in clinical you don't have a ticking time bomb in your ear the entire time, in sims they have the timer and it just ticks. That is nerve-wracking, because it's like I can feel the time beating on me."*

Building Confidence

➡ Both

  ➡ Confidence booster

➡ *"Learn from mistakes, I didn't check vitals once during sim and I learned what the ramifications of that would be to the patient. I like an environment where I can make mistakes but no risk to the patient."*

Building Confidence

- Both
  - Confidence Booster

- *"Sims also provide trial and error, and keep practicing but not going to kill anyone. Confidence builder, I always walk out of a sim with more confidence than when I walked in."*

Building Confidence

➡ Both
  ➡ Confidence booster

➡ *"…preconference was especially helpful, because before we actually go out into the floor, we review our patients status making sure that you are competent enough with the person and what they have to care for them that day."*

CLE facilitates learning towards meeting clinical learning outcomes

- Linking Past and Present Learning

- Significant Moments

- Confidence Booster

➥ The majority of participants perceived both CLE's assisted them to meet the following learning outcomes:

- ➥Critical thinker
- ➥Knowledgeable care coordinator;
- ➥Practices within an ethical/legal framework
- ➥Effective communicator
- ➥Competent provider of care
- ➥Professional role model

Cultural competence was dependent upon the particular patient assigned in the TCLE and if the particular scenario included cultural diversity in the SCLE.

Most participants perceived political awareness and responsible manager of care as two learning outcomes that were difficult to meet in either CLE.

Preventative Learning

➡TCLE
  ➡Lack of professionalism

➡*"We are seeing things being done that we were told not to do; and we are not building good relationships with the nurses on the floor like I think we should."*

Preventative Learning

➡TCLE
  ➡Limited guidance

➡ *"You're really nervous and kind of anxious and you go in there and when your instructor sees that [nervousness] it effects your grading… also, when your instructor does not watch you how can they properly grade you?"*

Preventative Learning

➭TCLE
  ➭Limited guidance

I think [student] hit it right on the head at the focus group, we need more time with the nurses and not have to wait on our instructor so much. Last week I had a patient who kept asking for his meds, his nurse kept asking when I was going to give them and I kept having to say, 'I have to wait on my instructor', because she was busy. This results in neglect to the patient. Even a one instructor to five student ratio would help.

Preventative Learning

➥TCLE
  ➥Limited guidance

➥*"The traditional clinical would be ideal with 1:1 or 1:2 ratio of nurse to students. It stinks to give meds two hours late and have to explain this to your patient who is calling for his meds, then the nurse says 'let's talk to your instructor, we need to get these meds given.' Or, you have to go running around looking for your instructor or the instructor says come get me…that's wrong, I shouldn't have to do that."*

Preventative Learning

➡SCLE
   ➡Lack of feedback

➡Then like with the uhm, pulse ox, I mean if that is supposed to be real then how come when I stick it on their finger then the instructor in the back says 'Pulse Ox 92.' I'm just thinking ok, where'd that come from? They made that up, like they made that up so how do you know what's real and not real?

Preventative Learning

➡SCLE

➡Stress

"I feel much more stressed in the simulation and the labs then I do in the clinical environment. That falls back on that peer pressure, peer opinion, ya know, uhm, cause when we're all on a floor somewhere we're each doing our own thing."

Preventative Learning

TCLE

➡Stress

I feel like we don't get a lot of preparation before being thrown into it. A lot of people have not worked in a hospital or nursing home setting and it was kind of like, here you go, have fun, good luck.

Lack of Opportunity

➭Both

  ➭Outcomes not appropriate to CLE

➭ *"I think it's really hard to incorporate some of those things within the simulated environment versus getting out there in the real world and actually seeing it…"*

Lack of Opportunity

➡ Both

➡ CLE does not provide opportunity

➡ Responsible Manager of Care and Political Awareness

➡ *"Because we have no one to delegate to in clinical really, cause you know, we're like the bottom [laughter]."*

Conclusions

1) Both CLE's provide beneficial learning environments.

2) TCLE- students perceived a lack of consistency, lack of guidance and assistance to provide patient care.

3) TCLE- More observation experiences and time with nurse/instructor.

4) Students perceived SCLE as an environment with potential and one that provided learning, increased confidence, prepared for the traditional environment, and offered practice and implementation of skills.

5) Desired an increase in sims and opportunity to practice and repeat sims, longer sims to "finish their work." Know the role ahead of time to prepare.

Limitations

- Sample from one school of nursing
- Simulation experiences ranged from 1-3 different experiences
- Lack of information regarding specific simulation scenarios
- Lack of specifics the observation experiences consisted of

Recommendations-Twofold

- Align the clinical experiences just as we do the didactic

  Aligning student perceptions toward learning with teaching goals has been found to engage the student in the clinical learning experience (Delany and Bragge, 2009).

- Future investigation

Align the clinical experiences…

BSN Program Learning Outcome	QSEN	Identified CLE (or didactic only)	Instructional/Clinical Activities	Evaluation Methods
Outcome 1 A critical thinker who demonstrates intellectual engagement and uses evidence as a basis for clinical reasoning and decision making.	QI Safety T&C PCC EBP Informatics	TCLE SCLE		
Outcome 2 A culturally sensitive individual who provides holistic individual, family, community, and population-centered nursing care.	QI Safety T&C PCC EBP Informatics	SCLE		
Outcome 4 An individual who understands and considers the impact of health care policy, finance, and regulatory environments on care delivery.	QI Safety T&C PCC EBP Informatics	Didactic SCLE????		
Outcome 7 A competent care provider who is prepared to practice to the full capacity of the professional nurse role in diverse health care environments.	QI Safety T&C PCC EBP Informatics	TCLE SCLE		

Future Investigation

➥ How much traditional clinical time is needed for students to be competent providers of care?

➥ What should the focus of the TCLE be for learning? What is an appropriate instructor/nurse to student ratio for learning to occur?

➥ In the SCLE, the different roles played during a simulation needs investigation to evaluate if learning occurs equally or is differentiated between the roles.

➥ Final recommendations include investigating what the best blend of simulations (DCE's), observations, and traditional clinical experiences would be and where these experiences would best be integrated in the curriculum to enhance learning and assist nursing students to meet their learning outcomes for future practice.

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