## Nurses' Reactions to an Emergent **Pediatric Educational** Simulation



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## Disclosures

Neither party has any conflict of interest to report.





# Purpose



 The purpose of this study was to examine nurses' reaction to an emergency simulation exercise, specifically:

- What went well,
- What did not go well,
- Their confidence level during simulation, and
- Reasons why wrong orders are followed during an emergency situation.



# Background

Involves 3 areas:

- 1. Pediatric resuscitation
- 2. Recognition of symptoms of deterioration
- 3. Use of simulation to evaluate



# **Pediatric Resuscitation**

- Resuscitation of critically ill children has long been associated with poor survival
- Pediatric resuscitation requires a different mindset compared to an adult critically ill population

-Cheng, et al., 2012



# **Symptoms of Deterioration**



 Pediatric patients' symptoms during resuscitation vary from their adult counterparts and can often go unrecognized.

-Straka, et al., 2012



# **Use of Simulation**

- Tex
- Used to increase repetition and enhance competence before performing complex tasks
- Allows errors to be made in relative safety

-Chan et al., 2012



# What is not known



- Nurses' responses in pediatric simulations
- Pediatric Nurses' views of simulations

The purpose of this study was to examine nurses' reaction to an emergency simulation exercise



## Methods



# Sample



- Analyzed videotapes of simulations (N = 10 groups; 43 nurses)
  - 5 groups of experienced (4 or more yrs.)
  - 5 groups of less experienced (3 or less yrs.)
- All inpatient units were represented, excluding ICUs and ED (n=10)
- Data reported by subgroup and not individual responses



# Procedure

- IRB approval
- Taped 10 Staff Development Simulations
  - 18 month old child going into respiratory arrest
  - Wrong order was given during simulation
- Nurses asked during debriefing:
  - What went well
  - What did not go well
  - What are the reasons wrong orders might be followed

# **Data Extraction**

#### Data Collection Form

- Two researchers watched videos independently
- Used form, developed for this study, to extract data
  - Form focused on behaviors/reactions related to research questions
- Percent agreement: 100%

Accuracy of Simulation	During Simulation				During Debriefing			
-	Performed without prompting	Able to answer correctly	Did NOT perform correctly	Not able to answer	N/A	Able to answer correctly	Not able to answer	N/A
Calling of Code – prompt								
Clear Communication								
CPR – Prompt initiation	1							
CPR – O <sup>2</sup> Delivery	]							
CPR – Proper ratio	1							
CPR – Proper position	1							
Med Delivery – right dose								
Other:	1							
	1							

What Didn't Go Well:	
	What Didn't Go Well:

Nurses' Confidence Level (first simulation)	Reasons why Wrong Orders are Followed

Date of simulation	Simulation	Weight given
Number of Participants	Details:	Age
Participants > 5 yrs of exp.	]	Ativan Dosage
Reviewer's Initials		Other:

# **Data Analysis**

#### • Content Analysis for Open-ended Items McLaughlin & Marascuilo's (1990)

- Each researcher independently marked units of analysis related to research question
  - Interrater reliability (percent agreement): 98%
- One researcher developed broader categories in which to place units
- Other researcher sorted units of analysis into categories
  - Interrater reliability (percent agreement): 98%
- To answer research questions
  - Frequencies and percentages
  - Crosstabs
    - Experienced vs. Less Experienced



## Results



#### Nurses Reactions to What Went Well During Simulation

Category	More Experienced	Less Experienced	Total
	(n = 5) n (%)	(n = 5) n (%)	( <i>N</i> = 10) n (%)
Catching medication errors	3 (23.1)	1 (7.7)	4 (30.8)
Rapid response to emergency	2 (15.4)	0	2 (15.4)
Communication between team members	2 (15.4)	0	2 (15.4)
Knowledge of equipment	1 (15.4)	0	1 (7.1)
General performance during simulation	0	2 (15.4)	2 (15.4)
Kept calm during simulation	0	1 (7.7)	1 (7.1)
Learned from prior simulation	0	1 (7.7)	1 (7.1)

Note: One of the groups had no response to this question.

#### Nurses Reactions to What Did Not Go Well During Simulation

Category	More Experienced	Less Experienced	Total
	(n = 5)	(n = 5)	(N = 10)
	n (%)	n (%)	n (%)
Lack of response to critical	3 (15.8)	1 (5.3)	4 (21.1)
indicators/signs			
CPR: wrong respiratory technique	2 (10.5)	3 (15.8)	5 (26.3)
Reliance on other health care	2 (10.5)	0	2 (10.5)
professionals			
Errors in assessment	1 (5.3)	0	1 (5.3)
CPR: wrong compression technique	1 (5.3)	1 (5.3)	2 (10.5)
Wrong medication/fluid	1 (5.3)	3 (15.8)	4 (21.1)
administration			
CPR: Lack of preparation	0	1 (5.3)	1 (5.3)

#### Reasons Why Wrong Orders are Followed

Category	More Experienced (n = 5) n (%)	Less Experienced (n = 5) n (%)	Total ( <i>N</i> = 10) n (%)
Chaotic situation	3 (75.0)	5 (100.0)	8 (88.9)
Assumption/belief that person in charge is right	3 (75.0)	2 (40.0)	5 (55.6)
Fear	2 (50.0)	2 (40.0)	4 (44.4)
Inexperienced in situation	1 (25.0)	1 (20.0)	2 (22.2)
Uncertain of own knowledge	0	1 (20.0)	1 (11.1)

#### Nurses' Confidence Level During Simulation

Category	More Experienced (n = 5) n (%)	Less Experienced (n = 5) n (%)	Total (N = 10) n (%)
Having experience of simulations helps	2 (33.3)	0	2 (33.3)
Stress interferes with confidence	1 (16.7)	0	1 (16.7)
Lack of leadership within team affects confidence	1 (16.7)	0	1 (16.7)
General low confidence level	0	2 (33.3)	2 (33.3)

Note: Only half of the groups had responses to this question.

#### Observed Performance During Simulation

	More Experienced			Less Experienced			
	Correct w/o Prompt n (%)	Correct w/Prompt n (%)	Incorrect n (%)	Correct w/o Prompt n (%)	Correct w/ Prompt n (%)	Incorrect n (%)	
Prompt initiation of CPR	5 (50.0)	0	0	5 (50.0)	0	0	
Clear team communication	4 (40.0)	0	1 (10.0)	4 (40.0)	0	1 (10.0)	
CPR: Proper positioning	4 (40.0)	0	1 (10.0)	4 (40.0)	0	1 (10.0)	
Proper med/fluid delivery	4 (40.0)	1 (10.0)	0	2 (20.0)	1 (10.0)	1 (10.0)	
Called code immediately	3 (30.0)	0	2 (20.0)	3 (30.0)	1 (10.0)	1 (10.0)	
Prompt/correct delivery of O <sub>2</sub>	3 (30.0)	1 (10.0)	1 (10.0)	4 (40.0)	0	1 (10.0)	
CPR: Proper ratio	3 (30.0)	1 (10.0)	1 (10.0)	4 (40.0)	0	1 (10.0)	
Proper patient assessment	3 (30.0)	2 (20.0)	0	4 (40.0)	1 (10.0)	0	

#### Observed Performance During Debriefing

	More Expe	erienced	Less Experienced		
	Answered Correctly n (%)	Answered Incorrectly n (%)	Answered Correctly n (%)	Answered Incorrectly n (%)	
Prompt/correct delivery of O <sub>2</sub>	5 (50.0)	0	5 (50.0)	0	
CPR: Proper ratio	5 (50.0)	0	5 (50.0)	0	
Call code immediately	5 (50.0)	0	5 (50.0)	0	
Proper med/fluid delivery	5 (50.0)	0	4 (40.0)	1 (10.0)	

## Discussion

- First study to examine Pediatric Nurses Reactions/Performance
- Overall Nurses knew the right answers, but didn't necessarily reflect in performance
- Perceptions of chaos and assuming the person in charge is right may lead to errors in following wrong orders
- Limitations
  - Small sample
  - Group responses vs. individual responses
- Future Research
  - Replication with larger sample and individual responses
  - Performances and reactions in real emergencies





## Questions







