

Hands Off: Student Experiences in Objective Data Collection in Virtual Clinical Simulation

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Presentation for STTI International's 28th Nursing Research Congress

July 31, 2017 – Dublin, Ireland

Disclosure

- Learning objectives
 - The learner will be able to identify the differentiating characteristics of pre-licensure and post-licensure BSN students' attitudes towards virtual clinical simulation
 - The learner will be able to describe the value of virtual simulation experiences to students with varying levels of professional nursing experience
- The authors of this presentation are current employees of an educational software company that develops virtual patient simulations for health professions education.
- No additional funding was received for the completion of this study.

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Overview of Presentation

- ◎ Virtual Patient Simulations
- ◎ Purpose of Study
- ◎ Methods
 - ◎ New Objective Data Collection Feature
 - ◎ Measures
 - ◎ Procedure
- ◎ Results
 - ◎ Quantitative findings
 - ◎ Qualitative findings
- ◎ Conclusions and Implications for Practice

Virtual Patient Simulations

- Asynchronous, computer-based clinical simulations in which nursing students interview and examine virtual patients.



Virtual Patient Simulations

- Considered to be high-fidelity simulations because they are “extremely realistic and provide a high level of interactivity and realism for the learner” (Meakim, Boese, & Decker, 2013, p.6).
- Can be as or more effective than physical simulation for teaching diagnostic reasoning to pre-licensure nursing students (Duff, Miller, and Bruce, 2016).

Virtual Patient Simulations

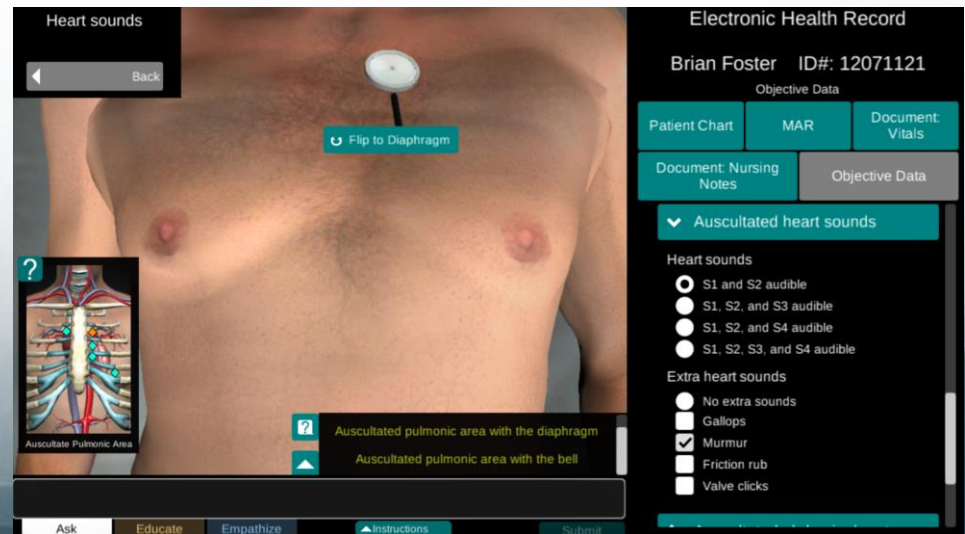
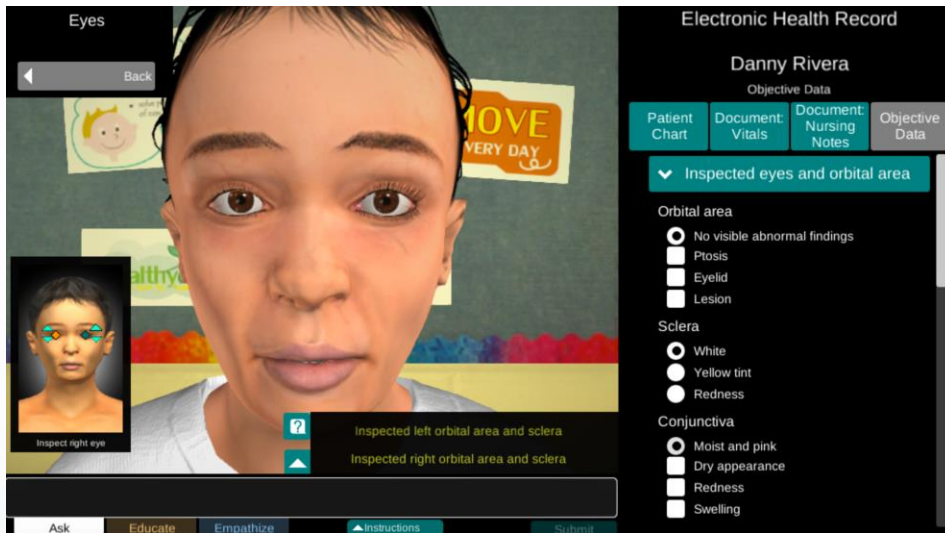
- The adoption of virtual simulation for “hands on” curricular components such as physical assessment may be limited by the lack of physical contact with the simulated patient.
- Particularly for post-licensure students, who typically have practical nursing experience, the lack of physical interaction may limit student satisfaction and the perceived efficacy of the simulation, presenting a barrier to curriculum integration.

Purpose of Study

- To evaluate pre- (BSN) and post-licensure baccalaureate (RN-BSN) nursing students' attitudes towards curriculum-integrated virtual patient simulations that teach and evaluate physical assessment.

Methods

New Objective Data Collection



New Objective Data Collection

[Overview](#)

[Rubric Dump \(Admin\)](#)

[Transcript](#)

[Subjective Data Collection](#)

[Objective Data Collection](#)

[Documentation](#)

[SBAR](#)

Objective Data Collection: 20.5 of 21 (97.62%)

› **Palpated dorsalis pedis arteries**

1.0 of 1 point

› **Auscultated carotid arteries**

1.0 of 1 point

▼ **Auscultated heart sounds**

0.5 of 1 point

Heart Sounds (1/2 point)

- ☐ S1 and S2 audible
- ☐ S1, S2, and S3 audible
- ☒ S1, S2, and S4 audible
- ☐ S1, S2, S3, and S4 audible

Extra Heart Sounds (No point)

- ☒ No extra sounds
- ☒ Gallops
- ☐ Murmur
- ☐ Friction rub
- ☐ Valve clicks

› **Auscultated abdominal aorta**

1.0 of 1 point

› **Auscultated abdominal and lower extremity arteries**

1.0 of 1 point

› **Auscultated breath sounds**

1.0 of 1 point

Participants

- BSN and RN-BSN students at 20 nursing schools across the United States using three Focused Exam assignments of the Health Assessment Digital Clinical Experience™ (DCE) in spring of 2016
- Sample exclusion criteria
 - Had multiple assignment attempts
 - Reopened assignment
 - Less than 10 minutes spent with virtual patient
 - Hidden findings
- Final sample of 1,028 assignment attempts
 - 480 for the Focused Exam: Respiratory
 - 323 for the Focused Exam: Cardiovascular
 - 225 for the Focused Exam: Abdominal

Measures

- Eight Likert-type items, for example:
 - *“Overall, I feel that this assignment was a worthwhile learning experience”*
 - *“I feel that the patient’s body images and visuals allowed me to select the appropriate findings in the EHR”*
 - *“I feel that the patient’s body sounds allowed me to select the appropriate findings in the EHR”*
 - *“I feel that the process of reporting objective findings improved my clinical reasoning skills”*
 - *“I feel that the duration of this assignment was appropriate”*
- One open-ended question
 - *How satisfied are you with the experience of selecting a physical exam from the menu, and then reporting the objective data in the EHR?*

Procedure

- Each FE assignment had a post-exam activity that included a link to the survey instrument.
- In the survey instructions, students were told that their answers would be confidential and that participating or opting-out of the survey would not interfere with their patient exam assignment in any way.
- Identifying information, including demographics, were not collected in the survey.

Results

Quantitative Findings

- Respiratory FE Assignment
 - RN-BSN students reported significantly higher levels of agreement to the items
 - *“Overall, I feel that this assignment was a worthwhile learning experience”, $t(460) = 3.274, p < .05$*
 - *“I feel that the duration of this assignment was appropriate”, $t(449) = 4.123, p < .05$.*

Quantitative Findings

- Cardiovascular FE Assignment
 - RN-BSN students reported significantly higher levels of agreement to the item
 - *“I feel that the duration of this assignment was appropriate”, $t(319) = 2.007, p < .05$.*

Quantitative Findings

- Abdominal FE Assignment
 - RN-BSN students reported significantly higher levels of agreement than their BSN peers to the items
 - *“Overall, I feel that this assignment was a worthwhile learning experience”, $t(222) = 2.353, p < .05$.*
 - *“I feel that the duration of this assignment was appropriate”, $t(223) = 3.095, p < .05$.*

Qualitative Findings

- Overall satisfaction emerged as a theme for
 - 75% of RN-BSN students
 - 80% of BSN students
- Main themes among BSN students
 - Activity was challenging or difficult to complete.
 - Workflow of the physical assessment was appropriate.
 - More guidance was required to complete the assignment.

Qualitative Findings

- Main themes among RN-BSN students
 - Need for quality art and sound assets in order to identify abnormalities on virtual patients.
 - Expectation that EHR would auto-populate with the correct dimensions selected without having to select them.
 - Using the open-text documentation tab in the EHR to summarize objective findings implied additional work and time.

Conclusions and Implications for Nurse Educators

Conclusions

- Students of both learning populations found value and realism in virtual patient physical assessments.
- RN-BSN students found the new objective data collection feature to be more valuable and appropriate than their BSN counterparts.
 - To a greater degree, they may recognize the high level of fidelity of the virtual environment (i.e., art, narrative, physical findings).
- BSN students found the new objective data collection feature more challenging, and asked for more guidance within the assignment.

Implications for Nurse Educators

- The National Council of State Boards of Nursing simulation study (Hayden, et. al 2014) supports replacing up to 50% of clinical hours with simulation.
- Virtual patient simulation is a valuable and viable tool for educators augmenting or replacing clinical placements with simulation.
- For both pre- and post-licensure students, the use of virtual patient simulations with a high-degree of fidelity can result in high student satisfaction and the perceived efficacy of the simulation.

Thank you!

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