SCHIZOAFFECTIVE DISORDER: A SIMULATION IN HOLISTIC CARE

JT SEAMAN, MSN, RN, PMHNP-BC
LINDA OLLIFF, RN, MSN
DR. NANCYE MCAFEE, PHD, RN
DR. LEANN CHISHOLM, PHD, RN
KACIE CALLOWAY, BSN, RN
THANK YOU

TO ALYSSA MANKE, BSN, FOR YOUR INSIGHT AND WISDOM
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DISCLOSURES

Conflict of Interest

• JT Seaman, Linda Olliff, Nancye McAfee, Valarie Talenda, LeAnn Chisholm and Kacie Calloway report no conflict of interest.
• Julia Greenawalt (INACSL Conference Administrator & Nurse Planner) reports no conflict of interest
• Leann Horsley (INACSL Lead Nurse Planner) reports no conflict of interest

Successful Completion

• Attend 100% of session
• Complete online evaluation
LEARNING OUTCOMES

Upon completion of this educational activity, participants will be able to:

1. Identify inadequacies in the care of psychiatric patients in medical settings.
2. List characteristics of simulation that provides holistic care for students.
3. Develop and implement holistic simulations in their respective learning environments.
THEORIES

1) Modeling and Role-modeling is used by encouraging the participants to put themselves in the place of the client and use the empathy gained to better care for the individual.

2) Watson’s Theory of Caring is utilized to promote a positive, caring, therapeutic relationship between the nurses and the client.
THE IDEA

Create a simulation that would encourage nursing students who do not want to work in psychiatric mental health nursing to view mental health patients in a more holistic manner. Mental health is always present in most care settings. One prime example is the ICU and the skills needed to care for a suicide attempt.

Aims:

1) Decrease the perceived stigma by nursing professionals associated with mental health diagnoses.

2) Promote a more collegial relationship between mental health nurses and nurses in other areas who encounter mental health patients on a regular basis.
THE METHODS

Develop and implement a simulation that takes place in the Emergency Department, an area that sees a large number of mental health patients.

Requires the use of Nursing skills that not always seen in mental health practicum.

Use of a standardized patient (SP) to ensure all participants receive an equivalent experience. The roles of the SP is scripted and in-depth instructions are given in terms of answers to the assessment questions.

Use of therapeutic communication instituted throughout the experience through the use of MRM and Caring theories.
PARTICIPANT PREPARATION

Each student is required to complete a case study which, is reviewed during the prelab.

In addition each student is required to complete a S.O.N approved medication sheet for each of the following drugs

1) Lithium (Lithobid)
2) Olanzapine (Zyprexa)
3) Olanzapine ODT (Zydis)

The medication sheets are reviewed during prelab to enhance learning and promote the dissemination of information with greater depth.
THE SCENARIO

Basic Description of Unfolding Scenario:
Client is being admitted to the general adult psychiatric unit via the emergency department. This 57 y/o male/female has a long history of Schizoaffective Disorder. The client is voluntary and presents with her family member. She stopped taking her medication several weeks ago because she thought she was well. Since the time of stopping her medications, she has been using alcohol and recreational drugs. Her occupational history includes employment as a waitress and subsequent assistant manager at a local restaurant. She was placed on leave by her employer due to her inability to competently complete her shift and monitor her employees. Symptoms include: very high energy level; insomnia for past five days; restlessness; and command hallucinations. She admits to having vague suicidal thoughts, but denies having a specific suicidal plan or any suicidal intent. She is dressed very colorfully, seductively (from her perspective), and is wearing a multitude of colorful jewelry. Since she has been on employment leave, she has reached the credit limit on her credit cards and has no means to pay her bills.
THE STUDENT ROLES

1) Charge Nurse
2) Assessment Nurse
3) Clinical educator
4) Medication Nurse
5) Family Member
6) Peer evaluators

Students have prechosen a role to act out and information is given to allow them to understand the role.
THE REQUIRED SKILLS/TASKS

1) A five minute assessment and ongoing evaluation.
2) Mental status examination
3) Communication using the SBAR method.
4) Obtain orders for labs once the physical has been completed.
5) Obtain labs and evaluate the results.
6) Contact the provider to report the lab results and obtain medication orders.
7) Determine the possible need for emergency medication.
8) Administer medication as needed.
9) Assess the effectiveness and safety of the administered medication.
10) Documentation of skills and actions performed.

All skills and tasks are monitored for completion by faculty utilizing a checklist.
IMPLEMENTATION

Standardized patients are trained to provide the best, most consistent experience for the learners.

A hospital type room is used and the client is placed in bed to simulate one in the ED.

Students are given roles and a brief description of the requirements to fulfil that role.

Report is given by the simulation lab coordinator who is not faculty but, who is well prepared to facilitate simulation who is portraying a charge nurse who then has to leave as the result of an emergency at home.

Once this person leaves the students resume responsibility of care.
DEBRIEFING

All sessions are recorded and played back for the participants. The playback allows for the self-evaluation of actions and skills.

The simulation is discussed and the opinions of the peer evaluators are taken into consideration.

Use of Promoting Excellence and Reflective Learning in Simulation (PEARLS) a theory-based debriefing tool, which encourages self evaluation and active discussion of the experience(Cheng, Grant et al, 2016).
POST SIMULATION

Learners are required to complete additional learning on disease process and the associated medications.

Verification of learning is documented by several means:

1) Self evaluation and self-report.
2) Successful completion of all assignments.
3) Successful completion of an assigned quiz.
4) The National league of Nursing Simulation Design Scale is used to evaluate the simulation (NLN, 2005)
5) Required journaling which addresses the following questions.
   a) The participant’s feelings about the situation.
   b) The participant's weaknesses as perceived by self.
   c) The participant’s strengths as perceived by self.
STATISTICALLY SPEAKING

THE PARTICIPANTS ENJOYED AND BENEFITED FROM THE EXPERIENCE. SURVEY RESULTS SHOW THAT A SIGNIFICANT PORTION OF THE PARTICIPANTS FELT THE EXPERIENCE RESULTED IN LEARNING AND GROWTH.
REFERENCES


CONTACTS

JT Seaman, RN, MSN, PMHNP-BC
Lamar University
Dishman School of Nursing
P.O. Box 10081
Beaumont, TX 77710
(409)880-8830
Email: JSeaman@Lamar.edu
Twitter: @nurjit