Simulation is utilized in many trades to provide a safe learning environment. Healthcare has adopted simulation training as a safe learning tool to allow students to practice skills and prepare for situations in the clinical setting. Simulation has been shown to be effective in eliciting problem-solving skills, critical-thinking skills, and team collaboration. Debriefing is one of the most important learning practices and takes place after the simulation is completed to stimulate further learning and reflection for the participant to gather feedback on their performance. The piece of simulation education that appears to be lacking is the research in debriefing techniques. The clinical significance is that, in nursing and in all of academia, all activities must be geared toward optimizing student learning outcomes (SLOs). Since the incorporation of simulation into nursing education is a relatively new practice, there isn't ample evidence that supports whether one debriefing method is more effective than another. There has been some research that explores instructor-led debriefing but there is inadequate information about peer-led debriefing (Waznonis, 2016, Dufrene, 2013). A small amount of research supports that peer-led reflection engages students in their own learning process and instills a sense of responsibility in knowledge acquisition (Spiller, 2012). Purpose: This project will explore the differences in debriefing between instructor-led and peer-led techniques. Method: A group of students will participate in a simulation scenario and then debrief with an instructor and then the same group will participate in another scenario and debrief through a peer-led group discussion. There will be a total of 30 students in the course who will be asked to participate and the students will take part in the simulation scenarios one day a week in groups of five to six students. The data collection will take place over five to six weeks. Results: Satisfaction with debriefing will be evaluated using the Debriefing Assessment for Simulation in Healthcare (DASH) questionnaire. The results will be calculated using the Mann-Whitney U test. Conclusions: to be determined later. Projected completion date of this project is August 2017.

Title: Differences in Debriefing Practices in Nursing Education: Instructor-Led and Peer-Led

Keywords: Debriefing, Learning and Simulation

References:


Waznonis, A. R. (2016). Faculty descriptions of simulation debriefing in traditional baccalaureate nursing programs. *Nursing Education Perspectives, 37*(5) 262-267.

**Abstract Summary:**
This poster provides a description of the differences in student learning outcomes between peer-led debriefing and instructor-led debriefing following simulation activities with undergraduate nursing students. The Debriefing Assessment for Simulation in Healthcare (DASH) tool was utilized to examine the differences in debriefing techniques.

**Content Outline:**
1. **Introduction and overview of the problem**
   1. Background- Simulation is a learning tool that has been borrowed from other disciplines to provide experiences for students that they may not encounter during their academic clinical rotations and to prepare them for real clinical practice.
   2. Question Guiding Inquiry (PICO)-In final semester associate degree pre-licensure practical nursing students (Population), does peer-led or instructor-led debriefing after simulation-based learning activities (Intervention) improve student learning outcomes (Outcomes)?
   3. Theoretical Framework- The nursing framework that will be utilized for this project will be the NLN/Jeffries Simulation Framework (2015) since this project will involve working with students participating in simulation scenarios.
2. **Review of Literature**
   1. Critique and Synthesis of Research Findings
   2. Analysis of Literature Review Studies
   3. Debriefing Assessment for Simulation in Healthcare (DASH)
   4. Limitations
3. **Method**
   1. Design- This project design is quantitative as the participants will be completing the Debriefing Assessment for Simulation in Healthcare (DASH) Student Version Long Form which is a 23 question rating scale used to evaluate the debriefing process and the person leading the debriefing discussion after each simulation debriefing session.
   2. Population Plan- The sampling strategy will be a convenience sampling of up to 30 students enrolled in the Practical Nursing major at a college in central Pennsylvania.
   3. Procedure-IRB approval
4. Data Collection Plan- The students will complete the DASH Student Version Long Form which will be used to evaluate the debriefing process and the person leading the debriefing discussion after each session.

5. Data Analysis Plan

4. Results (still collecting data-will be complete July 2017)
   1. Analysis of Data Outcomes
   2. Summary of Findings

5. Discussion and Conclusions
   1. Discussion of Main Findings
   2. Implications for Practice
   3. Limitations
   4. Recommendations for Future Research

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Professional Experience: I have been an RN for 20 years while practicing in various settings of Long Term Care, Insurance, Community Health, Inpatient Behavioral Health settings and now, academia. I am the Simulation Laboratory Coordinator at a college in central Pennsylvania for the past 4 years and love it. I have embraced simulation and attempt to make it the best learning environment for the students.

Author Summary: Jessica has been an RN for 20 years while practicing in various settings. She is the Simulation Laboratory Coordinator at a college in central Pennsylvania and has held that title for the past 4 years and loves it. She and her faculty have embraced simulation and attempt to make it the best learning environment for the students. Jessica completed this research project to complete her Doctor of Nursing Practice (DNP) degree from Wilkes University, PA.