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Nursing Faculty's Competency to Teach Patient Safety to Their Students

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Abstract:

In 1999 the Institute of Medicine (IOM) published the *To Err is Human* report, which stated that 44,000 to 99,000 patients died in the hospital from adverse events. Since that time the Quality Safety Education for Nurses (QSEN) initiative in 2012 developed quality and safety competencies that they felt should be incorporated into all nursing undergraduate and graduate curriculums (Barnsteiner, Disch, Johnson, McGuinn, Chappell & Swartwout, 2012). Unfortunately, that momentum was not maintained in many nursing baccalaureate programs. Since that time, patient safety has become an ever evolving discipline that now encompasses many aspects of the science of safety. (Mitchell, Cristancho, Nyhof, Lingard, 2017). It is also well known that nursing faculty is not able to participate in ongoing education in all areas of nursing. A study by Suplee, Gardner, & Jerome-D'Emilia (2014) demonstrated that only 57% of nursing faculty studied developed their teaching skills through conferences. Aging nursing faculty, who are reaching their retirement age, may not keep expanding their knowledge, skills and teaching modalities. (Falk, 2014)

Unfortunately this has resulted in a lot of nursing faculty not having the knowledge and competencies to teach the science of patient safety to their students. In order to determine if this was the case, one College of Nursing in southwestern United States conducted a needs assessment regarding the faculty's knowledge and ability to teach the science of patient safety to their students. The needs assessment was conducted at a Nursing faculty meeting to determine the demographics, self-assessment of the faculty's knowledge and a 10 question quiz to determine if there was a relationship between the self-reported assessment and the score from the Quiz.

The self-assessment for the faculty ranking included terms such as just culture, Swiss cheese model, human factors, near miss, and other terms. The faculty was to rank each word as to whether that faculty member felt they had no knowledge or some knowledge about those topics and then indicate if they felt they could teach that topic and if they needed more education on the topic. The World Health Organization's (WHO) (2013) ten (10) general Patient Safety Questions was utilized for the quiz. The WHO utilizes this quiz to determine if there is a need for their patient Safety curriculum to be implemented.

Out of the 103 faculty signed into the faculty meeting, 86 completed the survey. The average score on the 10 question quiz was 5.77. Four of the 10 questions on the quiz had a majority of the faculty answering incorrectly. These questions included near miss, Swiss cheese model, the connection between ties and scarves and infection, and following the clinical leader's directions. The self-assessment results were interesting in that the answers varied widely with significant statistical differences noted between the knowledge of the faculty and their ability to teach the material, some of which had a p value of 0.001. Some of the faculty selected some knowledge of the patient safety topic but low ability to teach it. Others noted a low knowledge of the patient safety topic and a high level of being able to teach it. The disparity between the faculty having some knowledge and the ability to teach that topic was that the faculty had some knowledge (72.8 – 88.9%) and only a few felt that they could teach the topic (3.7-24.7%). Most interesting was with the topics of informed consent where 18.5% indicated they had some knowledge, but 81.5% indicated they could teach the topic! Also, human factors, a very important part of patient safety, 85% of the faculty indicated that they have some knowledge of human factors, but only 5% felt that they could teach about this topic. Of the topics where the faculty indicated some knowledge but little ability to teach those topics, the majority did not want education about the topic. Only 4% of the faculty wanted education

regarding consents. Only one topic, mindfulness, had 98% of the respondents asking for education on that topic. All the other topics scored below 30% of the faculty asking for education.

Given this response rate, it was determined that two actions were needed. The first was to give the faculty resources to utilize if they so wished. The Joint Commission's National Patient Safety Goals (2017) were included on all skill check lists so that the faculty/student would be more aware of these. Patient Safety posters were hung in the Skills lab for use during the experiences there. And all faculty were given information regarding the Institute of Healthcare Improvement's (2017) Open School program which contains modules on patient safety, quality and other such topics. The second set of actions were to utilize Brown bag lunch sessions that would be filmed and offered at any time, development of a patient safety newsletter that the faculty and students will be asked to contribute content, placing a 5 minute 'Safety Moment' at the beginning of every faculty meeting, and monthly emails with one patient safety topic, article or other resources.

Some of these actions plans were put into place during the spring 2017 semester, with the remainder being implemented in fall 2017. This faculty education will evolve over time as there is a patient safety research project underway to re-implement patient safety topics, didactic, followed by clinical, into the undergraduate curriculum during the fall 2017 – Spring 2019 semesters. In conjunction with this research project, as it is implemented with a cohort of undergraduate students, the faculty on one campus has agreed to place all patient safety topics in a slide that has a stop sign with the words Patient Safety and STOP in the right hand corner of the slides. Hopefully this will encourage both faculty and students to explore and implement more patient safety into their education!

Title:

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Keywords:

Competency Improvement Methods, Faculty Competency and Patient Safety

References:

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Abstract Summary:

Does your faculty really have the knowledge and competency to teach patient safety to your students? You will learn about one College of Nursing's identified need for more patient safety faculty competency and the developed action plan designed to improve their competency.

Content Outline:

I. Introduction

A. To Err is Human Report of over 44,000 to 99,000 deaths per year from patient adverse events – 1999 – Started the patient safety movement

B. Ever evolving discipline that now includes the science of safety

1. More than just preventing falls, medication errors and so forth

C. Faculty's have not kept up with the ever changing discipline and thus cannot teach the evolving information to their nursing students.

D. One such faculty needs assessment and analysis of the results will be shared to illustrate the points presented

II Body

A. Faculty Patient Safety Needs Assessment must be conducted

1. All faculty should respond to the needs assessment regardless of what courses the faculty teaches.

a. Patient Safety is a prominent sub-topic in most nursing courses/topics.

2. Needs to contain information from the evolving discipline

- a. Swiss Cheese model
- b. Just Culture
- c. Human Factors
- d. Others

3. Should include a self-assessment by the faculty as to how they perceive their knowledge of and ability to teach the patient safety topics

a. Possible rating scale – No knowledge; little knowledge; need more knowledge; could teach this content.

b. Include simple topics and the topics in A. 2 above

4. May also include a quiz concerning the same content to validate the self-perceptions

B. Analysis of data and identification of needed areas of education

1. Are there areas of weakness in the faculty's perceptions of their knowledge of patient safety content?

2. Are there areas where a large portion of the faculty identified weaknesses in their patient safety knowledge and ability to teach the topics?

3. Is there any statistical significant difference between the faculty's perception of their knowledge and their perception of being able to teach the content?

4. Are the self-perceptions consistent with the answers of the quiz?

C. Development and implementation of an action plan to address faculty weaknesses with the content

1. Provide educational resources such as videos and case studies

a. Include the National Patient Safety Goals in every skills checklist

b. Patient Safety posters in the Skills/simulation lab.

c. IHI Open School modules and information

d. Many others available

2. Utilize Brown Bag lunch events to provide education to faculty

3. Develop a Patient safety newsletter that the faculty and students can contribute to.

4. Place a 5 minute "Safety Moment" at the beginning of every faculty meeting where brief topics are presented

5. Send out monthly patient safety specific information/articles to all nursing faculty

III. Conclusion

A. The provision of staff development information/materials will assist the faculty in including the information in their courses.

B. Complete the needs assessment in a year to ascertain what the faculty's self-perceptions are at that time

C. Remember the faculty knowledge does not always translate to student learning so don't forget to also examine the integration of patient safety into the clinical experiences to reinforce the concepts taught.

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Professional Experience: Dr. Mellott has been an Associate Professor at TWU since 2012, teaching in the undergraduate and graduate programs. She has been a nurse since 1973 and has worked as a bedside nurse, clinical nurse specialist, Assistant Professor (8 years at Univ. Of Texas SON, Houston), a CNO, and at a healthcare system corporate office as the Manager of Nursing for the system. She was certified in performance improvement in 1991 and certified in patient safety since 2015. She attended the Academy for Emerging Leaders in Patient Safety Workshop for Faculty in 2015. She has research in patient safety and speaks around the country on patient safety, quality, and performance improvement

Author Summary: Dr. Mellott has focused on healthcare quality and patient safety in multiple settings. She has experience with patient safety, improving patient/customer satisfaction and quality, decreasing costs, and team work. Dr. Mellott is an Associate Professor of Nursing for Texas Women's University in Houston. Dr. Mellott has holds certification in patient safety and performance improvement, and is a Fellow of NAHQ. Dr. Mellott's research is in patient safety and she has numerous publications.