VIRTUAL SIMULATION IN HEALTHCARE EDUCATION

AMERITECH COLLEGE: DRAPER UTAH Diann Martin, Phd,RN Current Challenges Faced in Health Care Professional Education

- Increase demand for staff
- Decreasing supply of faculty in workforce
- * Reduced availability of sites for clinical placements
- * Increased expectations of regulators and accrediting bodies
- * Growing demand for expanding content and curriculum



Teaching Soft Skills in Simulation

• How do you teach



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What the Literature Tells Us Simulation

- Learners retain more information
- Response to live situations improves
- * Improves psychomotor skills
- * Debriefing is an essential element
- Seen as the future for medical and Nursing education



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Forms of Simulated Learning

- * High Fidelity- Interactive robotics with programmed cases
- Medium Fidelity- Mannequins with attachments and clinical needs (wounds, ostomy products, IVs)
- * Low Fidelity- Single item simulation, IV arms, pumps
- * Role Playing/Models- Use of live actors
- * Virtual Simulation- Interactive computerized case studies





Features of Virtual Simulation

- * Video or animated clinical situation
- * Assessment and interaction embedded
- Reporting and tracking
- Student controlled
- Branching logic
- * Multiple characters
- Multiple settings







Example Content for Virtual Simulation

Clinical Cases Maternal Child **Mental Health Medical Surgical** Trauma **Pediatrics** Soft Skills Communication Leadership Wellness and Self Care

Why Adopt Virtual Simulation in the Classroom ?

- * Consistency
- * Standardized assessments
- * Effective use of faculty time
- * Repeatability
- * No clinical risk
- * Less up-front investment
- * Technical skills not required

TYPES OF SIMULATION

* Second Life

* Priority Setting







Virtual Simulation Demonstration

- * Clinical Reasoning Scenarios
- * Soft Skills Training in Nursing
- Knowing Learning Styles

Recommendations for Use of Virtual Simulation

Infrequent or unreliable clinical experiences
Clinical that requires precise sequence of actions

- * Experiences with interaction and collaboration
- * When debriefing and repeated review would:
 - * Improve retention of knowledge
 - * Support reflective learning



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What Simulation Offers

- * Experience failure or in a safe environment
- Manage risk in preparation for actual clinical practice
- * How much simulation can be used to replace clinical experience?

Simulated Learning vs. Traditional Classroom Learning

Classroom

- * Conceptual in nature
- Good for conveying fact based information
- * Labor and time intensive
- Experience is a function of the faculty member
- Minimal student engagement in process in some formats

* Simulation

- * Hands-on experience
- Appeals to various forms of learning style
- * Repeatable
- * Learner actively engaged
- Requires clinical reasoning and application of knowledge and skill

Benefits of Virtual Simulation

- May be used to substitute or make up clinical time in nursing and other disciplines
- * Supports timely and prudent use of internal resources
- * Facilitates student confidence and engages student in experience
- * Supports development of clinical judgment and clinical reasoning
- * **Promotes** use of state of the art instructional strategies
- * Provides administrators with measure of student achievement

Next Steps for Virtual Simulation

- NCSBN Study of Impact on Clinical Outcomes based on use of Virtual Simulation
- State Boards of Various Disciplines across the US are considering regulations
- * Active Development and Entry to Market of Products
- Increase Formality of Training, Credentialing and Faculty Development in Healthcare Professonal Programs
- * Potential for integration into NCLEX testing

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OTHER SOURCES OF SIMULATION INFORMATION

* The Society for Simulation in Healthcare:

- * http://ssih.org/
- * The Center for Medical Simulation
 - * http://www.harvardmedsim.org/