Title: Teaching Our Teachers: Identifying the Missing Variable in the Simulation Equation

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Purpose: To identify the need for formal coursework on teaching using clinical simulation in MSN educator curricula.

Rationale: NLN supports using simulation for up to 50% of a student’s clinical experience, contingent upon the utilization of educators who have adequate training and expertise in the pedagogy of simulation. Most nurse educators receive little formal education in how to teach using clinical simulation.

Research Questions: How was clinical simulation covered by the MSN nurse educator curriculum? Did you practice teaching using high fidelity manikins as part of your MSN education? Upon graduation, how confident were you in your ability to lead an exercise using high fidelity simulation technology? Should Master’s degree programs in Nursing Education include formal coursework in clinical simulation teaching with a hands-on component?

Synthesis of Literature Review: Increasingly, the trend in nursing education is the use of simulation for both teaching and evaluative purposes, due to the lack of clinical placements. Research demonstrates that faculty remain inadequately trained. Learning frequently occurs through on the job training from equipment vendors or colleagues who may not have had formal training themselves. Lack of formalized preparation weakens understanding of the essential components of simulation pedagogy such as the facilitator’s role and debriefing. International Nursing Association for Clinical Simulation and Learning (INASCL) Standards of Best Practice: Simulation (2013) provides detailed evidence-based guidelines for the use of
simulation in healthcare education. NLN recommends that clinical simulation should always be guided by these standards.

**Methods and Procedures:** An online poll was disseminated through email to six nurse educators from both academic and hospital settings within Connecticut. Recipients were asked to forward the link to other nurse educators creating a convenience/network sample. Questions were carefully designed to protect the personal identity of respondents as well as their place of employment and university from which they received their Master’s degree.

**Results:** 32 respondents with an MSN with focus in nursing education completed the survey. 78% reported there was no formal coursework on how to teach using clinical simulation in their MSN program. Those whose program covered clinical simulation did so through readings, lecture, or writing assignments. Only one respondent reported having a hands-on learning opportunity with simulation equipment. None of the respondents said they had any opportunity to practice teaching using high-fidelity simulation equipment. When asked how confident they were in their ability to lead an exercise using simulation upon graduation, the majority (84%) answered ‘not confident’, with the remaining answering ‘somewhat confident’. When asked if formal coursework in clinical simulation teaching should be a part of the MSN educator curriculum, 87% answered ‘Yes’.

**Discussion/ Application to Practice:** It is essential to provide coursework in simulation education based on INASCL *Standards of Best Practice: Simulation* that includes hands-on teaching opportunities in order to prepare nurse educators to meet the demands of today’s practice environment.