

Development of a Simulation-Enhanced Medical-Surgical Nursing Orientation Boot Camp

Heather Cherry, MSN, RN-BC

Lois Shellhorne, MSN, RN, CNS, CMSRN

Service Line Educators

Medical Nursing Department

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Kathleen Kenyon, RN, MSN

Yale-New Haven Hospital

Liana Kappus, MEd

Stephanie Sudikoff, MD

Yale-New Haven Health System

Background

- ❖ **Original 12-week competency-based orientation (CBO) program included a workbook and precepted clinical experiences interspersed with classroom curriculum.**
- ❖ **The majority of orientees failed to complete the required CBO workbooks, resulting in managers, orientees, and preceptors voicing dissatisfaction with the process.**

Purpose

- ❖ Revise and evaluate the CBO Program and align previous orientation with projected duration and budget
 - Original: 12 weeks for 480 hours
 - Budget reduction: 10 weeks for 400 hours
- ❖ Assure orientees are adequately prepared prior to their first day on patient care units

Rationale

FY 2010

- ❖ New hire orientation expense exceeded new hire orientation budget by significant amount
- ❖ Additional dollars spent on new hire orientation in excess of entitled hours based on level of experience

Focus Group Discussions – Preceptors and Orientees

- ❖ Dissatisfaction with current process due to variability in:
 - Baseline skills of RNs as they begin practicing on unit
 - Preceptor's educational/mentoring skills
 - Exposure of orientees to key clinical situations
- ❖ Limited protected time to reflect, facilitate learning, set goals and evaluate

YIKES!

Research Questions

- ❖ Do participants perceive that the revised CBO Program is beneficial?
- ❖ Do participants perceive that their skills related to critical thinking, decision making, and practice independence were enhanced after attending the CBO Program?
- ❖ Does the revised CBO Program meet the projected budget reductions?

Synthesis of Review of Literature

- ❖ **Simulation programs have been found to enhance the experiences of nurses in the clinical setting.**
- ❖ **The safe environment of simulation can equip nurses with improved critical thinking skills, confidence and better communication.**

Methods

- ❖ **Nurse Educators and Simulation Experts designed pilot program for 8 Medicine units.**

Methods (Cont'd)

- ❖ Used Change Acceleration Process Tools to design new program

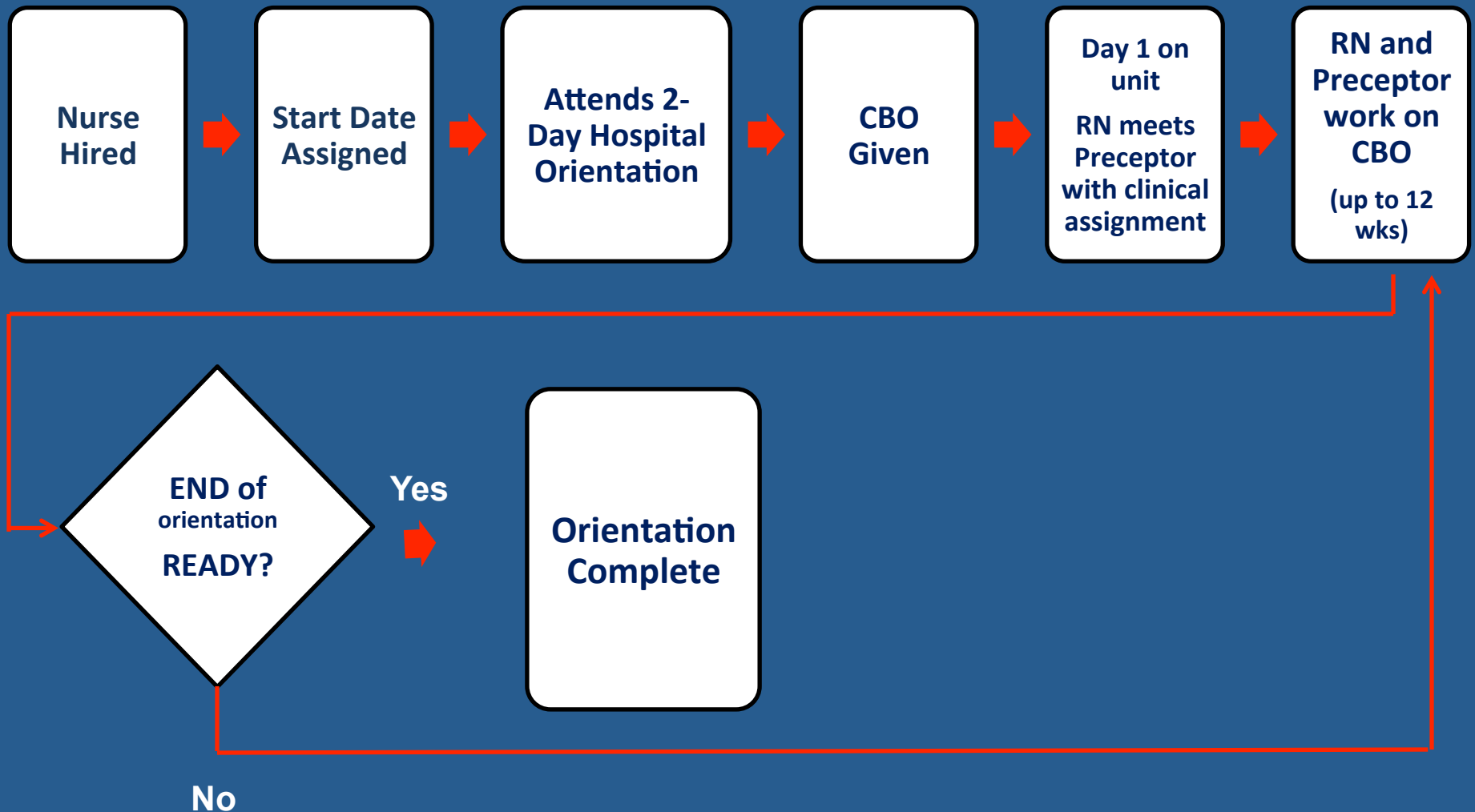
Categorizing Information



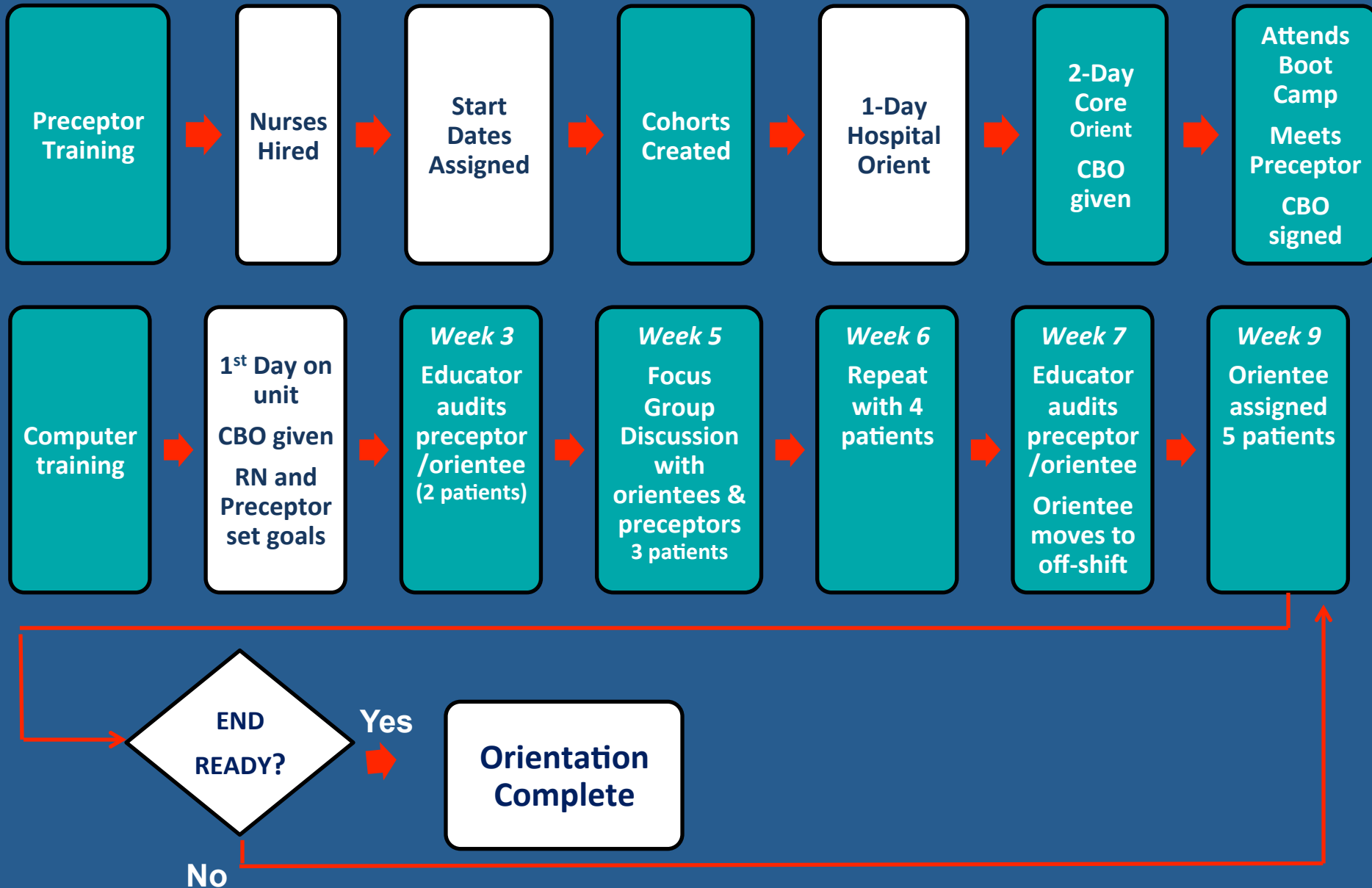
Methods (Cont'd)

- ❖ Developed a simulation-enhanced 3-day course “Boot Camp” replaced the fragmented classroom experiences (30 hours). New program includes:
 - Skill stations
 - Simulation scenarios
 - Debriefing sessions
- ❖ Conducted faculty train-the-trainer
- ❖ Developed evaluation process

Process Map – Original Process



Process Map – New Process



Day 1 Boot Camp Curriculum

Day 1				
Time	Session and Activity	Facilitator	Target Audience	Location
8:00 – 10:30am	Train the Trainer for Skills Sessions	CPPE & Facilitators (SLEs, Preceptors)	SLEs, Preceptors	Sim Room 1 and 2
8:00 – 10:30am	Orientation to Simulation Learning how to learn/experiential learning styles	Jason Zigmont	All Learners	730 Howard Classroom
10:30 – 12:30pm	Introductory Skills Stations	1 Facilitator		730 Howard Classroom
	Station 1: Pumps	1 Facilitator		Classroom
	Station 2: Line Recognition	1 Facilitator		Vestible
	Station 3: Urinary Cath Male	1 Facilitators		Sim 1
	Station 4: Urinary Cath Female	1 Facilitators		Sim 2
	Station 5: Blood / Blood Components	1 Facilitator		Classroom
12:30 – 1:15pm	Lunch			730 Howard Classroom
1:15 – 2:15pm	Introductory Skills Stations Cont'd	5 Facilitators Total	4-5 Learners per group	730 Howard Entire
2:15 – 4:15pm	Arrhythmia Recognition Lecture	1 Facilitator		730 Howard Classroom
4:15 – 4:30pm	Closing Q&A	All		

Day 2 Boot Camp Curriculum

Day 2				
Time	Session and Activity	Facilitator	Target Audience	Location
7:00 – 8:00am	Train the Trainer for Skills Sessions	CPPE	SLEs, Preceptors	8-8
8:00 – 11:30AM	Respiratory Skills Station	3 RN Facilitators	Group 1	8-8 Sim Room 1
	Station 1 (Classroom) : BiPap/ CPAP & Oxygen Therapy		Group 1a	
	Station 2 (Simulation Room 1) : Trach Care and Suctioning, and BVM ventilation		Group 1b	
	Station 3 (Simulation Room 2) : Chest Tubes		Group 1c	
8:00 - 11:30am	Simulation and Debriefing Exercises	1 RN / 1 Sim Facilitator	Group 2	8-8 SimRm 2
8:00 – 9:00	Module 3a: Respiratory Compromise Simulation and Debriefing			
9:00 – 9:45	Module 3b: Tracheotomy Simulation and Debriefing			
9:45 – 10:00	Break			
10:00 – 10:45	Module 4a: Neurology (Stroke) Simulation and Debriefing			
10:45 – 11:30	Module 4b: Neurology (De-escalation) Simulation and Debriefing			
11:30 – 12:30pm	Lunch			
12:30 – 4:00pm	Respiratory Skills Station	3 RN Facilitators	Group 2	8-8 Sim Room 1
	Station 1 (Classroom) : BiPap/ CPAP & Oxygen Therapy		Group 2a	
	Station 2 (Simulation Room 1) : Trach Care and Suctioning, and BVM ventilation		Group 2b	
	Station 3 (Simulation Room 2) : Chest Tubes		Group 2c	
12:30 – 4:00pm	Simulation and Debriefing Exercises	1 RN / 1 Sim Facilitator	Group 1	8-8 SimRm 2
12:30 – 1:30	Module 3a: Respiratory Compromise Simulation and Debriefing			
1:30 – 2:15	Module 3b: Tracheotomy Simulation and Debriefing			
2:15 – 2:30	Break			
2:30 – 3:15	Module 4a: Neurology (Stroke) Simulation and Debriefing			
3:15 – 4:00	Module 4b: Neurology (De-escalation) Simulation and Debriefing			
4:00 – 4:30pm	Closing			

Day 3 Boot Camp Curriculum

Day 3				
Time	Session and Activity	Facilitator	Target Audience	Location
7:00 – 8:00am	Train the Trainer for Skills Sessions	CPPE	SLEs, Preceptors	8-8
8:00 – 11:30AM	Central Venous Access Device Skills	3 RN Facilitators	Group 1	8-8 Sim Room 1
	Station 1 : CVAD Dressing Changes (Sign off on BSI competency)	2 Facilitators	Group 1a	
	Station 2 : CVAD Giving Meds& CVAD Blood Draws	1 Facilitator	Group 1b	
	Station 3 : Kangaroo and PCA Pump	1 Facilitator	Group 1c	
8:00 - 11:30am	Simulation and Debriefing Exercises	1 RN / 1 Sim Facilitator	Group 2	8-8 SimRm 2
8:00 – 9:00	Module 1: GI/GU Simulation and Debriefing			
9:00 – 9:45	Module 2: Family Centered Care Simulation and Debriefing			
9:45 – 10:00	Break			
10:00 – 10:45	Module 5: Cardiac Simulation and Debriefing			
10:45 – 11:30	Module 6: Medical Errors Simulation and Debriefing			
11:30 – 12:30pm	Lunch			
12:30 – 4:00pm	Central Venous Access Device Skills	3 RN Facilitators	Group 2	8-8 Sim Room 1
	Station 1 : CVAD Dressing Changes (Sign off on BSI competency)		Group 2a	
	Station 2 : CVAD Giving Meds& CVAD Blood Draws		Group 2b	
	Station 1 : CVAD Dressing Changes (Sign off on BSI competency)		Group 2c	
12:30 – 4:00pm	Simulation and Debriefing Exercises	1 RN / 1 Sim Facilitator	Group 1	8-8 SimRm 2
12:30 – 1:30	Module 1: GI/GU Simulation and Debriefing			
1:30 – 2:15	Module 2: Family Centered Care Simulation and Debriefing			
2:15 – 2:30	Break			
2:30 – 3:15	Module 5: Cardiac Simulation and Debriefing			
3:15 – 4:00	Module 6: Medical Errors Simulation and Debriefing			
4:00 – 4:30pm	Course Debriefing Closing Evaluation			

Where we were

Preceptors don't know how to teach.

Preceptors don't know what their orientees' learning style is.

Some preceptors are new grads themselves.

Preceptors should not be charge.



Preceptors have to want to be preceptors, not have the job assigned to them.

Where we are now

It is a nice refresher of nursing skills.

Boot Camp was fun. I learned a lot.

I am amazed at the resources available to me.

I feel more confident in myself and know to trust my judgment.



Simulation made me sweat in nursing school, but Boot Camp was great – really helpful!

Results

Metric	Outcome
Participants' (N=129) ratings of: <ul style="list-style-type: none"> • Skill stations • Simulation scenarios 	88% Beneficial or Highly Beneficial 87% Beneficial or Highly Beneficial
N (%) RNs completing revised orientation within 10 weeks	80 (70%) – completed in 10 weeks 12 (10%) - required additional time 5 (4%) - terminated prior to completion
Overall reduction in time (cost savings)	
FY 2012	13,076 hours (\$399,157)
FY 2013	5,903 hours (\$184, 175)

Discussion/Application to Practice

- ❖ This CBO model, incorporating Boot Camp, is an effective method for preparing new nurses for their clinical role in an acute care setting and can be replicated in other hospitals.
- ❖ It also facilitates early identification of new employees who either need additional time to acclimate to this setting or are not well-suited for this practice environment.

References

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