

The background features a dark blue gradient with several overlapping circular patterns. Some circles are solid with dashed inner lines, while others are dashed. Numbers like 140, 150, 160, 170, 180, 190, 200, 210, 220, 230, 240, 250, and 260 are scattered around the circles. The text is centered in white.

# BULLIES, DRUGGIES, AND FOREIGNERS: TEACHING BEYOND THE TEXTBOOK

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# INTRODUCTION

- Learners: 40 CNL students
- Clinical Nurse Leader (CNL): Advanced RN generalist who knows nursing process and can take that process with the sciences and look for areas of improvement at the point of care delivery; they are experts in process improvement and quality improvement (can dissect a process using root cause analysis and business tools to identify a problem and address them); improvement occurs at the patient care delivery level.
- The University of Toledo (UT) College of Nursing: Ranked No. 11 for BEST graduate nursing schools in America 2016. UT offers many pathways to become a RN, BSN or pursue graduate degrees as Advanced Practice Nurses, Nurse Educators, and Nurse Practitioners (with Gerontology, Psychiatric Mental Health, Family, and Pediatrics specializations); post-graduate certificate programs also available.
- The Lloyd A. Jacobs Interprofessional Immersive Simulation Center- “tri-center” concept which incorporates Virtual Immersive Reality, Advanced Clinical Simulation and Surgery Simulation.



University of Toledo College of Nursing (2017). The University of Toledo College of Nursing ranked No. 11 Retrieved from, <http://www.utoledo.edu/nursing/>.

# REAL LIFE SITUATIONS

- As we prepare our future nurses for clinical practice they will face difficult clinical decisions, but how do we effectively teach therapeutic communication that encompasses ethical, social and cultural competence?
- All healthcare providers need a variety of skills to meet the needs of today's patient in an ever-changing social climate and culture.
- Textbooks and lecture style learning have limited information on how to handle current situations facing healthcare providers today.
- Simulated scenarios have helped our learners experience some of the dilemmas they may potentially face.



# HOW WAS THIS DONE?

- Implemented simulation for a graduate-level Therapeutic Communication Skills course for CNLs
- Key objective for simulation experience: Improve communication via experiential learning which encompasses unique healthcare situations.
- Faculty and staff developed scenarios based on real-life clinical or personal experiences
- Simulation incorporates the human/emotional factors in the scenario design
- Standardized Patients: Able to “ad lib” with fluid approach to learners interaction with patient
- What is needed: A/V technology, clinical environment, actors/standardized patients

# THE SCENARIOS

- Cultural Competency
- LGBTQ+- Caring for a Transgendered Patient
- Bullying of Novice Nurse
- Caring for the monolingual patient
- Suspected Drug seeking patient
- Suicidal
- Human trafficking
- Heroin overdose
- Schizophrenia
- Rape victims
- Domestic abuse
- Criminal/Inmate
- Alzheimer's/Confused



# PULLING IT TOGETHER

- Faculty and simulation staff played the rolls of the standardized patient (SD).
- Given no script and very general idea on the situation and extensive patient history; improv dialogue.
- With 40 students it is difficult for us to provide first hand experience for all the learners.
- Random subsets of students were selected via name lottery to experience the simulation while the remainder of the class watched live stream of the simulation from a theater.
- Learners were provided biased stereotypes about each of the patients they assessed. One of the learning objectives was to overcome the stereotype/bias.
- Short debriefing was done after each simulation and a longer discussion debrief was done at the end.



# REACTIONS

- Provided a convenient discussion board online via Blackboard for students to provide their input
- Majority of the students claimed to have experienced all of the situations we simulated
- Resonated beyond the classroom
- Feedback: overwhelmingly positive
  - Scenarios “hit home” for students; evoked emotion, particularly for those that experienced judgment personally in the healthcare setting as patients themselves
- What we would do differently: A/V system technical issues; use select students as actors; add more scenarios not originally performed

