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Best Practices in Simulation: Participant Assessment

Best Practices in Simulation,
May 17-18, 2017 – Bloomington, MN

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Objectives

Upon completion of this presentation, participants will be able to:

- Differentiate between formative and summative assessment in simulation
- Compare evaluation tools used for simulation.
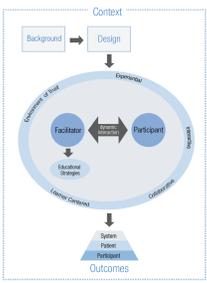- Participate in inter-rater reliability of an evaluation tool.

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What and When to Evaluate

NLN JEFFRIES SIMULATION THEORY

Jeffries, P. R. (2015). *The NLN Jeffries Simulation Theory.*
National League for Nursing: Washington, DC.

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NLN's Simulation Initiative

Explore the use of simulation
for high stakes assessment in
nursing education

Laerdal
helping save lives

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Phase I
Convene Think Tank - June 8-10, 2010

Phase II
Develops, pilots, revises simulations
Evaluates existing tools, creates new tools
Develops evaluator training

Phase III
Field testing across the country

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Desired Outcome

More Questions than Answers

Rizzolo, M.A., Kardong-Edgren, S., Oermann, M.H., & Jeffries, P.R. (2015).
The National League for Nursing Project to explore the use of simulation for
high-stakes assessment: Process, outcomes, and recommendation. *Nursing
Education Perspectives*, 36(5), 299, 303 doi: 10.5480/15-1639.

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Extending the NLN Study:

EETIIRR

Pilot study: summer 2016
Nationwide study: Sept 2016-present

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INACSL Standards of Best Practice

http://www.inacsl.org/i4a/pages/index.cfm?pageid=3407

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MATCH IT UP?

1.

2.

3.

4.

A. Formative Assessment

B. Summative Evaluation

C. High Stakes Evaluation

D. Objective Structured
Clinical Examination (OSCE)

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BA1   change pic for #3 to exam room
Buffy Allen, 11/21/2016

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Evaluating Students Activity

- Read materials given to students
- Review scoring criteria
- Gather in groups of 4-5 - share expected behaviors of competent students
- Watch video
- **Individually** score performance using criteria
- Gather in same small groups to compare scores & discuss
- Report out & large group discussion

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Student Video Performance

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Formative

FORMATIVE ASSESSMENT SCORE SHEET: VIDEO # _____

SCORING: 1 = Meets criteria   0 = Does not meet criteria

SAFETY - Criteria for score of 1	SCORE	COMMENTS
Positively identifies patient using name band & one other identifier		
Hand hygiene before & after patient care; gloves when in contact with body fluids		
Does not have to administer med. Must consult provider regarding pain med before administration. If med IS administered, must follow safe administration guidelines		
Uses equipment correctly. For example: bedpan, BP cuff, SPO2, incentive spirometer, stethoscope (to skin surface not gown)		
Repositions patient in straight alignment and maintains abduction of R leg		
ASSESSMENT - Criteria for score of 1	**SCORE**	**COMMENTS**
Vital signs: takes BP, pulse, pain;		
Mental status: alert & oriented to time, place, person;		
Neurovascular: pedal pulse on correct (R) leg plus one additional assessment;		
Dressing: at incision site.		
Rechecks mental status		
Notices patient position and corrects before other assessments/interventions		
CLINICAL JUDGMENT - Criteria for score of 1		
Reports or takes action to address abnormal vital signs		
Responds to changes in mental status and patient complaint of pain		
Safety issues first (repositions) then mental status or pain		
One correct intervention required. Examples: Uses alternatives to restraints, offers bedpan, repositions, uses pillows to keep leg in alignment, ice, comfort measures, distraction		
COMMUNICATION - Criteria for score of 1		
Provides organized report to provider or other care team member with minimal prompting		
Communication with patient and daughter is accurate; active listening demonstrated		
Calls provider to report change in mental status and attempts to reorient patient		
Responds to confused patient respectfully		
TOTAL SCORE (maximum possible score is 16)		

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Slide 1: Summative

SUMMATIVE EVALUATION SCORE SHEET: VIDEO # _____

SCORING: 1 = Meets criteria   0 = Does not meet criteria

SAFETY – Criteria for score of 1	SCORE	COMMENTS
Positively identifies patient using name band & one other identifier		
Hand hygiene before & after patient care; gloves when in contact with body fluids		
Does not have to administer med. Must consult provider regarding pain med before administration. If med IS administered, must follow safe administration guidelines		
Uses equipment correctly. For example: bedpan, BP cuff, SPO2, incentive spirometer, stethoscope (to skin surface not gown)		
Repositions patient in straight alignment and maintains abduction of R leg		

ASSESSMENT - Criteria for score of 1	SCORE	COMMENTS
Vital signs takes BP, pulse, pain;		
Mental status: alert & oriented to time, place, person;		
Neurovascular: pedal pulse on correct (R) leg plus one additional assessment;		
Dressing: at incision site.		
Rechecks mental status		
Notices patient position and corrects before other assessments/interventions		

CLINICAL JUDGMENT - Criteria for score of 1		
Reports or takes action to address abnormal vital signs		
Responds to changes in mental status and patient complaint of pain		
Safety issues first (repositions) then mental status or pain		
One correct intervention required. Examples: Uses alternatives to restraints, offers bedpan, repositions, uses pillows to keep leg in		

TOTAL SCORE (maximum possible score is 16)	

Grade A = 14.5 – 16
Grade B = 12.5 – 14.4
Grade C = 11 – 12.4
Grade D = 9.5 – 10.5
Grade F = < 9.5

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Slide 2: High Stakes

HIGH STAKES SCORE SHEET: VIDEO # _____

SCORING: 1 = Meets criteria   0 = Does not meet criteria

SAFETY – Criteria for score of 1	SCORE	COMMENTS
Positively identifies patient using name band & one other identifier		
Hand hygiene before & after patient care; gloves when in contact with body fluids		
Does not have to administer med. Must consult provider regarding pain med before administration. If med IS administered, must follow safe administration guidelines		
Uses equipment correctly. For example: bedpan, BP cuff, SPO2, incentive spirometer, stethoscope (to skin surface not gown)		
Repositions patient in straight alignment and maintains abduction of R leg		

ASSESSMENT - Criteria for score of 1	SCORE	COMMENTS
Vital signs takes BP, pulse, pain;		
Mental status: alert & oriented to time, place, person;		
Neurovascular: pedal pulse on correct (R) leg plus one additional assessment;		
Dressing: at incision site.		
Rechecks mental status		
Notices patient position and corrects before other assessments/interventions		

CLINICAL JUDGMENT - Criteria for score of 1		
Reports or takes action to address abnormal vital signs		
Responds to changes in mental status and patient complaint of pain		
Safety issues first (repositions) then mental status or pain		
One correct intervention required. Examples: Uses alternatives to restraints, offers bedpan, repositions, uses pillows to keep leg in alignment, ice, comfort measures, distraction		

TOTAL SCORE (maximum possible score is 16)	

CUT SCORE: 75% =12 points TOTAL

Do you consider this student competent to practice nursing? Circle Yes or No

Identify 2 key elements in his/her performance that supports this conclusion.

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Slide 3: Challenges

Challenges

- Design Issues
- Consistency of implementation
- Audio/video
- Selection of tools
- Selection of raters
- Training of raters

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How fair is the existing evaluation process at your school?

- Have **all** faculty been educated on how to assess clinical competencies?
- Does every faculty member evaluate students in the same way?
- Have there been deliberative conversations among faculty to clarify behaviors/ expectations of students at end of each course and end of the program?

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Questions?

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References

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- Rizzolo, M.A., Kardong-Edgren, S., Oermann, M.H., & Jeffries, P.R. (2015). The National League for Nursing Project to explore the use of simulation for high-stakes assessment: Process, outcomes, and recommendation. Nursing Education Perspectives, 36(5), 299, 303 doi: 10.5480/15-1639.

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- Willhaus, P., Burleson, G., Palaganas, J., Jeffries, P. (2014) Authoring simulations for high-stakes student evaluation. Clinical Simulation in Nursing 10, e177-e182

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