Simulations to support Quality and Safety Education for Nurses (QSEN) Competency Development

Carol F. Durham  EdD RN ANEF
Clinical Associate Professor
Director, Clinical Education & Resource Center
The University of North Carolina at Chapel Hill

2010 QSEN National Forum
All health professionals should be educated to deliver patient-centered care as members of an interdisciplinary team, emphasizing evidence-based practice, quality improvement approaches, and informatics.

Committee on Health Professions Education Institute of Medicine (2003)
QSEN Competencies

• Can be, indeed needs to be, taught or reinforced in multiple methods and sites
  » Classroom
  » Skills labs
  » Simulation labs
  » Clinical Teaching Sites
Integrating Quality and Safety into Simulation

- Examine and re-envision fundamental, advanced and health assessment skills and simulation

- Minor changes can highlight patient quality and safety

- Use terminology – *think out loud*

- QSEN competencies incorporated into every simulation
Inter professional Simulations

- Teach in silos
- Expect to practice in teams
- Practice teamwork skills in patient scenarios
- Effectively communicate and collaborate in the responsibility for patient care
Root Causes of Sentinel Events
(All categories; 1995-2004)

- Communication
- Orientation/training
- Patient assessment
- Staffing
- Availability of info
- Competency/credentialing
- Procedural compliance
- Environ. safety / security
- Leadership
- Continuum of care
- Care planning
- Organization culture

Percent of 2966 events
Inter professional Simulations
Schools of Nursing, Medicine and Pharmacy

Patient-centered care - through scenarios with human patient simulator and standardized patients

Teamwork and collaboration – focus of course

Evidenced-based practice – how to find the evidence and to use it

Quality improvement – root cause analysis, Just culture

Safety – error disclosure using standardized patients, patient/family panel who have experienced a medical error

Informatics – use of electronic records to access patient information and document
TeamSTEPPS
Team Strategies & Tools to Enhance Performance & Patient Safety

- Department of Defense (DOD) & Agency for Healthcare Research & Quality (AHRQ)
- Systematic approach to team practice
- Establish leadership
- Allow full participation
- Improve communication
- Involve patient
- Improve patient safety
Communication Strategies

- SBAR — Situation, Background, Assessment, and Recommendation
- Call-Out
- Check-Back
- Handoff

Adapted from TeamSTEPPS is Team Strategies and Tools to Enhance Performance and Patient Safety
Power Gradient

• Who?
  » Nurse, nursing assistant, nursing student, intern, family member . . .

• Have the knowledge but not the confidence in reporting what they know

• Important to overcome hesitancy for patient safety

• Include all team members in patient care discussion and decision making
I am Concerned!

I am Uncomfortable!

This is a Safety Issue!

From TeamSTEPPS is Team Strategies and Tools to Enhance Performance and Patient Safety
Two-Challenge Rule

Assertively voice a concern at least *two* *times* to ensure that it has been heard using the three C’s

“I’m curious……”
“I’m concerned…..”
“I’m still uncomfortable, let’s consult with a third party…”
In-situ Simulation

- Funded by NC Future Care
- Human patient simulator taken to long term care
- Simulation sessions focus on core teams
  » Teamwork & Collaboration
  » Patient-centered Care
Transition to Practice Preceptor Preparation

- North Carolina Foundation for Nursing Excellence
- Preceptor Preparation Program
- Assists preceptor to assist new nurse in transition to role of nurse
- Integrates QSEN competencies through simulations, role play and reflective practice using TeamSTEPPS videos as trigger
Pharmacology Competency

- Teach our nursing content in silos as well
  » Pharmacology
  » Medication administration
- Competency exam students have to apply both within a timed test – focus on:
  » Patient-centered Care
  » Teamwork and Collaboration
  » Evidenced-based Practice
  » Safety
- If make medication error in any of the competency exams has to complete variance report
Ostomy Affective learning
Patient-Centered Care

- Patient preferences
- Coordination and integration of care
- Information, communication and education
- Physical comfort and emotional support
- Reflect on effects on family through integration with case in virtual community *The Neighborhood*
- Discussion of concepts of pain, suffering related to psychosocial issues
Ostomy Affective learning
Teamwork & Collaboration

• Recognize how authority gradients influence discussions around placement of the ostomy stoma
• Include patient in discussion of placement of ostomy
• Describe impact of own communication style on patient when teaching about ostomy
• Identify members of team to best facilitate patient adaptation to change in lifestyle
Ostomy Affective learning
Evidence Based Practice

- Research strategies for skin protection, odor control and bag security and support with evidence
- Differentiate clinical opinion and tradition from research and evidence
Evidenced Based Practice

Safe Patient Handling and Movement
Did you know??

- Nursing injury rate one of highest of all industries
- Body mechanics alone not effective in preventing job-related injuries
- Strong evidence supports that nurses are at risk of injury if they continue to manually lift patients – must teach use of lift equipment

ANA Handle with Care pilot project to integrate SPHM into nursing curriculum
Just Culture demonstrated

Teaching Assistant made an error - distributed expired saline to students for administration
System Improvement
QSEN Competencies

• Integration limited only by your imagination

• Start small and build

• Help students understand what you are doing by using the language and talking out loud about what you are thinking and the rationale behind it
Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.
Teamwork & Collaboration

- Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care
• Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care
Quality Improvement

- Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.
Safety

- Minimize risk of harm to patients and providers through both system effectiveness and individual performance
Informatics

• Use information and technology to communicate, manage knowledge, mitigate error, and support decision making