INTEGRATING QSEN INTO EVERY SIMULATION – ENHANCING STUDENTS' COMPETENCIES



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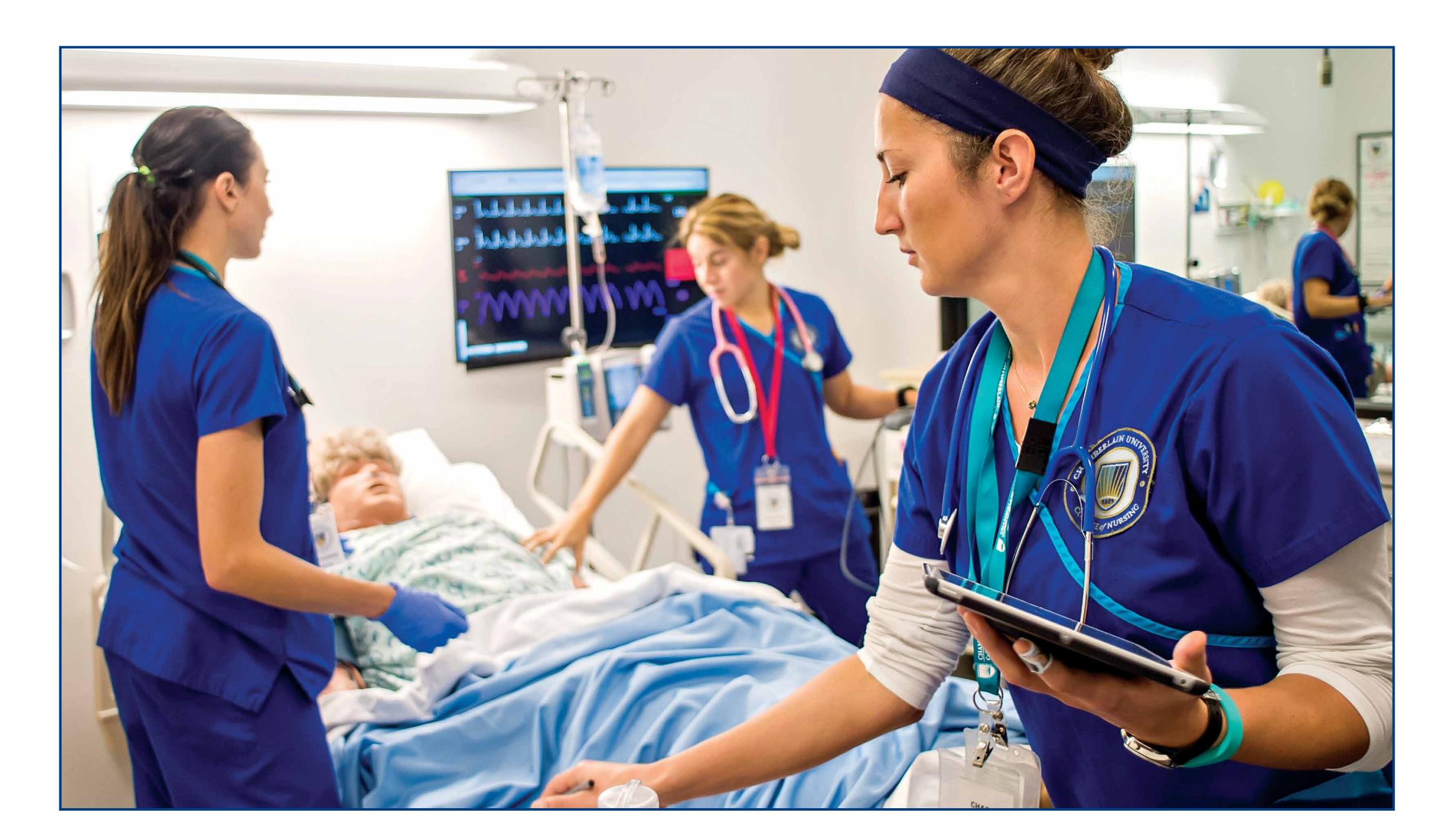
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Introduction

Quality and Safety Education for Nurses (QSEN) is a project designed to prepare future nurses with the information and the skills required to continuously advance the organizations where they are employed. There are six different QSEN competencies that have been identified with the project that represent a commitment to the delivery of high-quality, safe, healthcare delivery to promote the most positive patient outcomes. Some nursing programs may struggle to integrate the QSEN project and its competencies into their curriculum. In an age where medical errors are rampant and patient safety is a priority, integration of patient safety education among schools of nursing is paramount (Lyle-Edrosolo & Walkman, 2016). With this novel approach, the QSEN project and all of its competencies can easily be incorporated into any nursing program that utilizes high-fidelity simulation. A modified learner observation tool with accompanying debriefing strategies will be presented with examples and discussed as an opportunity to conduct further studies and quality improvement initiatives to improve learner knowledge of patient safety strategies.

Setting

Approximately 350 pre-licensure, undergraduate baccalaureate 2nd and 3rd year nursing students from Chamberlain University College of Nursing in Miramar, Florida.



Approach

Since the implementation of the modified observer tool, learners have been expected to build on their observations by identifying a QSEN competency (or several) that aligns with their observation. For example, a student could be expected to tag "S" (for Safety) to the observation "Nurses did not wash their hands". Students can select among one of the following six QSEN competencies to tie into their observations:

• **S** = Safety

- I = Informatics
- QI = Quality Improvement
- T/C = Teamwork and Collaboration
- EBP = Evidence-Based Practice
- PCC = Patient-Centered Care

The most important part of the utilization of the modified observer tool lies in debriefing. The debriefer goes through each of the observer annotations and asks additional probing questions to stimulate critical thinking. Examples of probing questions can include:

- "I noticed you observed that a side rail was left down and that you noted this would be a safety risk. Tell me more about this."
- "Why would this be considered a safety risk?"
- "What are the potential complications of a patient fall?"
- "What could a nurse do to decrease a risk like this?"

Outcomes

The outcome of the utilization of the modified observer tool equips the learner to think beyond their actions and what is simply considered to be right or wrong when observing a traditional simulated clinical experience. This method of observation and debriefing allows the learner to grasp not only the implications of their nursing interventions but also the strategies to prevent future occurrences where a patient's safety may be compromised.

Model

Keeps (+)	QSEN	QSEN	Changes (△)
Student washed their hands	S, EBP	S	Student did not identify the patient
Filled out the board in the patient room	QI	S, EBP	Six rights of medication administration not completed
Asked the patient where they would like their insulin administered	PCC	S, T/C	Did not repeat critical assessment findings to the physician on the telephone
Repositioned the patient	QI, EBP	S, T/C	Did not read back physician orders
Asked the patient what they prefer to drink	PCC	EBP, S	Provided* incorrect diabetic diet teaching
Offered therapeutic communication	PCC	QI, PCC	Used non-simplified terminology when communicating to patient
Good change of shift report between nurses	T/C	S	Student left patient side rails down
Documented assessment findings			

Discussion

The utilization of this method of learner observation and debriefing for simulated clinical experiences is recommended to equip learners with the knowledge and strategies to improve the safety and quality of care delivered to their patients throughout nursing school and into their future clinical practice. Although no data has been collected, this method lends itself to the conduction of additional studies and quality improvement projects to further assess the effectiveness of this method on learner knowledge of QSEN competencies and patient safety strategies.

Reference

Lyle-Edrosolo, G., & Waxman, K. (2016). Aligning healthcare safety and quality competencies: Quality and Safety Education for Nurses (QSEN), the Joint Commission, and American Nurses Credentialing Center (ANCC) Magnet® standards crosswalk. *Nurse Leader, 14*(1), 70–75. https://doi.org/10.1016/j.mnl.2015.08.005