

# Bundle up: Introducing care bundles to increase knowledge and confidence of senior nursing students



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## Abstract

Nursing graduates transitioning to practice are expected to be safe and competent practitioners. Health organizations promote the use of evidence-based practices such as care bundles to improve patient outcomes and provide quality health care. This research describes the introduction of 2 care bundles, sepsis, and acute stroke to senior associate degree nursing students in a clinical day on campus. The researchers used high-fidelity simulation as a teaching methodology to increase knowledge and confidence level in caring for patients in the clinical setting.

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## 1. Introduction

Quality health care demands the use of evidence-based practices (EBPs). In 2001, the Institute for Healthcare Improvement (IHI) developed the “bundle” concept in an effort to improve patient outcomes in critical care (Resar, Griffin, Haraden, & Nolan, 2012). A bundle is defined as a “group of interventions related to a disease process that, when executed together, result in better patient outcomes than when implemented individually” (Zambon, Ceola, Almeida-de-Castro, Gullo, & Vincent, 2008, p. 456).

Bundles represent one strategy among others (i.e., Team Strategies and Tools to Enhance Performance and Patient Safety) that hospitals can implement to save lives and

improve patient care outcomes. The aim for the bundle initiative was to ensure that patients receive quality care and achieve positive outcomes while preventing the most common complications associated with their diagnosis. The foundation of this initiative is enhanced communication and teamwork that will result in reliable and consistent care (Resar et al., 2012). As teamwork and communication are cornerstones of success, bundles are developed by multidisciplinary care teams; this also serves to increase their widespread acceptance and successful implementation (Norman, 2010).

Nurses represent a tremendous part of the health care team and are well positioned to be change agents. The manner in which nursing education is delivered is changing to accommodate the complexity of the health system and places the emphasis on high-quality, reliable medical care. Nursing faculty need to employ teaching strategies that

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facilitate student acquisition of the essential knowledge, skills, and attitudes that will improve patient outcomes and reduce preventable medical errors (Jones, 2013). According to Duchscher (2008), new graduates lack the confidence and the practice experience needed to navigate in an intense clinical environment. In a study by Casey et al. (2011), students reported that they needed more assistance with clinical competency and role development during their senior practicum course.

The researchers of the current study used high-fidelity simulation (HFS) as a teaching methodology to introduce senior associate degree (AD) nursing students to two care bundles: sepsis and acute stroke. The goal of this research study was to determine if students could increase their perceived knowledge and confidence in caring for patients experiencing sepsis and acute stroke. The two care bundles were introduced during a clinical day on campus (CDOC) learning experience.

## 2. Literature Review

The IHI published a white paper in 2012 entitled *Using Care Bundles to Improve Health Care Quality*. The authors describe care bundles as a ground-breaking strategy to improve patient care outcomes through use of best practices and innovation. Resar et al. (2012) report that implementation of care bundles in the clinical setting has impacted reliability of care received by patients and has prevented serious clinical complications. The authors point out that it is not solely the implementation of care bundles responsible for improving patient outcome but the focus on strategies that aim to “redesign work, communicate better, and work more effectively toward achieving patient goals” (Resar et al., 2012, p. 11).

The innovative approach of using bundles to improve patient care has surpassed expectations of health care team members and faculty. A study by Robb et al. (2010) concluded that “implementing care bundles can lead to reductions in death rates in the clinical diagnostic areas targeted and in the overall hospital mortality rate” (p. 861). Eight IHI care bundles were selected that targeted high-mortality diagnosis: central venous catheter line sepsis, diarrhea and vomiting, stroke, ventilator-acquired pneumonia, methicillin-resistant staphylococcus aureus infections, heart failure, surgical site infections, and chronic obstructive pulmonary disease. In the intervention period, 174 fewer deaths occurred in the targeted diagnosis, and 255 fewer deaths occurred in all diagnoses (Robb et al., 2010).

In 2011, the Institute of Medicine reported the need to bridge the gap between research and practice and recommended the adoption of best practices, such as care bundles, to improve patient care (Chassin, 2012). Nursing faculty need to find ways to incorporate EBP nursing interventions across the curriculum. With strong emphasis on improving the quality of health care, the novice nurse needs to be prepared to enter the profession with knowledge of EBP and

have the ability to use this knowledge in a measurable and meaningful way (Larmon & Varner, 2011).

Alinier and Platt (2013) drew attention to the importance of using simulation-based learning to improve quality of care and patient safety. It is well documented that simulation serves as a bridge between learning in the academic laboratory and the application of newly learned skills in the clinical setting. The authors suggest that additional studies look at new and innovative ways HFS can be used to help nursing students acquire EBP skills and improve patient care outcomes.

In a study conducted by Kirkman (2013), nursing faculty used HFS as a teaching strategy to improve nursing students’ clinical judgment. The findings suggested that HFS resulted in a significant difference in transfer of learning demonstrated over time as compared to more traditional teaching methods such as lecture. Integration of HFS throughout the nursing curriculum can be an effective strategy for nursing students to practice new skills and reinforce knowledge in a low-risk practice environment.

Brenner and Iafrati (2014) discuss the integration of best clinical practices, such as the IHI care bundles, into the nursing curriculum at The College at Brockport baccalaureate nursing program. Introduction of best practices early in the nursing curriculum facilitates students’ learning to provide safe, competent, and evidence-based care. Incorporation of quality and safety into their professional learning can help novice nurse develop leadership skills and positively impact both patient outcomes and the nursing profession.

## 3. Method

### 3.1. Purpose

The purpose of this study was twofold: to increase student knowledge and confidence in caring for patients experiencing sepsis and acute stroke in the clinical setting by integrating two care bundles to senior AD nursing students during a CDOC learning experience.

### 3.2. Design

A pre- and postsurvey design was used to evaluate student self-reported knowledge and confidence levels related to sepsis and acute stroke. Students were given preparatory educational material prior to the CDOC (see Table 1) and were sent a link to the preintervention survey measuring self-reported knowledge and confidence. Each participant was asked to complete the survey prior the CDOC. Informed consent was included in the survey.

All students in the CDOC learning experience participated in the simulation scenarios because this day was in lieu of a day spent in the clinical setting. The simulation scenarios were created based on current EBP and conducted using the National League for Nursing/Jeffries Simulation Framework. The characteristics of this framework design include

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