Featured Article

Debriefing Practices in Simulation-Based Nursing Education in South Korea

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Abstract
Background: In simulation education, learning does not occur without certain debriefing activities. The purpose of this study was to identify debriefing practices in simulation-based nursing education in Korea.
Method: Ninety-six nursing faculty members responsible for simulation education participated in this study from January to April, 2015. Data were collected using a revised version of Fey's Final Survey Questions: Debriefing Practices (2014) and analyzed by descriptive statistics.
Results: Simulation education is a required course in the majority of Korean nursing colleges, and 52.7% of them have replaced the clinical practicum with simulation. Those who completed training for debriefing were more likely to support students' emotional reactions to simulation and provide feedback. The Gather—Analyze—Summarize model and the Debriefing Assessment for Simulation in Healthcare model were most frequently used for debriefing.
Conclusions: There is a need to develop more systematic and effective training programs that encompass theories for implementing and evaluating debriefing practices in simulation-based nursing education in Korea.

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Background

Recently, simulation-based nursing education has increasingly begun to substitute the clinical nursing practicum in Korea. There are several factors for this increase in simulation-based education. One is regional imbalance between educational institutions and practicum institutions due to the urban concentration of hospitals (Ryoo, Park, & Ha, 2013). The movement toward greater patient rights and safety is another driving force that now tends to hinder nursing colleges from obtaining high-quality clinical practicum sites. Simulation-based learning has emerged as a viable alternative that skirts around these problems. The Korean Accreditation Board of Nursing Education (2015) recently declared that up to 10% of the clinical practicum could be substituted with simulation-based education. Compared with the United States, where up to 50% of the existing clinical practicum has been replaced by simulation (Hayden, Keegan, Kardong-Edgren, & Smiley, 2014; Kardong-Edgren, Willhaus, Bennett, & Hayden, 2012), this

is a modest beginning. Yet, it is clear that there is plenty of room for advancement in simulation-based nursing education in Korea.

Simulation-based education can effectively substitute the traditional clinical practicum in almost all the core courses across the prelicensure nursing curriculum. Simulation-based learning is composed of three steps: prebriefing, simulation experience, and debriefing. During debriefing, learners reflect on the simulation experience using metacognitive strategies under the guidance of an instructor who provides the learners with feedback on actual performance, factual errors, and cognitive reconstruction (Fey, Scrandis, Daniels, & Haut, 2014; Rhodes & Curran, 2005). As the last step of simulation based-education, debriefing develops clinical judgment and critical thinking skills through guided reflection on which instructors and learners examine the events of simulation (Decker et al., 2013; Korean Society for Simulation in Healthcare, 2015). According to Fey (2014), learning cannot occur in the absence of debriefing (Fey, 2014; Ha, 2014; Lee, So, Kim, Kim, & An, 2014; Zigmont, Kappus, & Sudikoff, 2011).

Students benefit from debriefing activities in simulation-based education, by discovering their mistakes and learning how to correct them. Learning outcomes include improved critical thinking abilities, greater self-confidence, and learner satisfaction. Overall, the result is greater academic achievement and clinical competency (Sanford, 2010). Simulation can also play an important role in improving communication skills and teamwork not only during the simulation phase but also during the debriefing phase when students are engaged in open communication, reflecting on their reactions to the simulations (Kim, Park, & Shin, 2013; Norman, 2012).

In light of the recognized importance of debriefing, academic interest in Korea has turned to the study of debriefing in simulation-based nursing education. A deficiency at present, however, is a lack of established standards for the debriefing stage in simulation. It is felt that there is a critical need to develop standardized debriefing guidelines and evaluation models for more effective debriefing activities (Kim et al., 2013; Neill & Wotton, 2011). This could be one step towards better

Key Points

- This study is to understand the current usage of simulation-based nursing education and debriefing in South Korea.
- Most of the participants answered that simulation-based nursing education was conducted in nearly all educational courses.
- Instructors are very interested in debriefing methods and their role.

standardized guidelines, conceptual frameworks, and approaches to simulated education in Korea.

Thus, this study was conducted to identify how debriefing is currently practiced by Korean nursing faculty members in simulation-based nursing education. This study will provide baseline data to aid the development of an efficient simulation curriculum with standardized debriefing models and guidelines in the future in Korea.

Purpose

The purpose of this study was to identify how debriefing was practiced in simulation-based nursing education in Korea in order to provide basic information for the development of more standardized debriefing guidelines in simulation-based nursing education in Korea. More specifically, the objectives of this study were as follows:

1) To understand how simulation-based nursing education was practiced,
2) To understand how debriefing was practiced,
3) To understand the effect of nursing faculty's debriefing training experience on current debriefing practices, and
4) To understand how the nursing faculty reflected on debriefing in simulation.

Methods

Design

This is an exploratory survey study to identify current debriefing practices in simulation-based nursing education among nursing faculty members in Korea.

Subjects

Nursing faculty members who have implemented simulation-based nursing education at least once in a semester within the past 5 years were selected as study subjects after they agreed to fill out the written consent form. Using Cochran's sample size formula (Barlett, Kotrlik & Higgins, 2001), the minimum number of the subjects required for this study was estimated at 95 subjects, calculated at $p = .05$ and $t = 1.65$ when an estimated population size of 150 entered into the calculation (margin of error $= 0.05$). By considering an exclusion rate of 10% from the estimated sample size, the total of 110 subjects was selected from the list of 130 directors of simulation centers in nursing colleges, most of whom are members of the Korea Nursing Simulation Society. Of 110 subjects, 98 questionnaires were collected, but 2 were excluded from