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Featured Article

Interprofessional Simulation: Developing Teamwork Using a Two-Tiered Debriefing Approach

Patrea Andersen, PhD (Victoria), MA (Ng), PG Cert Applied Arts, ADN, BHSc (Ng), CATE, RN^{a,*}, Steven Coverdale, MBChB^b, Mark Kelly, RN^c, Stephen Forster, BSC^d

^aAssociate Professor in Nursing and Academic Director Simulation and Visualisation, University of the Sunshine Coast, 90 Sippy Downs Drive, Sippy Downs, QLD 4556, Australia

^bSunshine Coast Clinical Unit, School of Clinical Medicine, University of Queensland, Sunshine Coast Health Institute, 6 Doherty Street, Birtinya, QLD 4575, Australia

^cSimulation Manager, Sunshine Coast Health Institute, 6 Doherty Street, Birtinya, QLD 4575, Australia

^dSenior Acute Physiotherapist and Clinical Educator for Physiotherapy for SCHHS, Allied Health Sunshine Coast Hospital and Health Service, Sunshine Coast University Hospital, 6 Doherty St, Birtinya, QLD 4575, Australia

KEYWORDS

simulation;
inter-professional
education;
two-tier debrief;
communication;
teamwork

Abstract

Background: Effective interprofessional education (IPE) positively impacts the quality of care. This article evaluates the effectiveness of an IPE simulation model that employed a two-tiered debriefing process with a cohort of medical, physiotherapy, and nursing students.

Methods: Using The TeamSTEPPS, Team Performance Observation Tool as a framework, this mixed methods study used observation, survey, and interview methods to collect data and evaluate the impact of a two-tiered debrief approach on students learning interprofessional communication and teamwork. The two-tiered approach consisted of two separate debriefings. These occurred concurrently after the simulation. The first debrief dealt with the scenario, clinical decision-making, and client outcomes. The second incorporated feedback from the Team Performance Observation Tool and focused learners on teamwork and communication.

Results: Positive changes in practice were demonstrated after debriefing in subsequent simulations, with statistically significant ratings suggesting that items for which students were given feedback for improvement were indeed improved in the next simulation. Furthermore, students reported significant learning, understanding other team member roles, strategies for team communication, and practical experience that substantially increased competencies and confidence in working together as a team.

Conclusions: Overall, the IPE experience and design was successful. Further studies using this model with a larger sample would inform development of this model for effective use in health care education.

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* Corresponding author: panders1@usc.edu.au (P. Andersen).

The increase in chronic disease, aging of the population, and resulting complexity of patient management have led to the widely recognized need for improved interprofessional communication, coordination, and teamwork (Thistlethwaite, 2012; Burwell, 2015; Blumenthal et al., 2016). Teamwork

within health care organizations, with an emphasis on effective interprofessional communication and collaboration, is identified as an important factor for patient safety (WHO, 2010; Brock et al., 2013; Klipfel et al., 2014). The ability to perform as a member of a health care team is necessary for the provision of competent clinical care and is a desired attribute in new graduates (Thistlethwaite & Dallest, 2014).

Research in interprofessional education (IPE) has reported improved outcomes for effective health care teamwork in relation to better adherence to guidelines, improved competency, greater collaborative care among participants, and enhanced understanding of interprofessional scope and boundaries of practice (Mickan, 2005; Alinier

et al., 2014; Hood et al., 2014). As opportunities for students to participate in teamwork in clinical settings are typically limited and variable, simulation-based IPE is increasingly being used to provide controlled and “safe” team learning environments for multiprofessional students (Cant & Cooper, 2010; Palaganas, Epps, & Raemer, 2014). A crucial aspect of simulation-based IPE is debriefing. Debriefing facilitates formative feedback and enables students to critically reflect, develop clinical reasoning, link theory to practice, and have the opportunity to improve performance (Hall & Tori, 2017; Cant & Cooper, 2011). Although evidence of the impact of debriefing on practice is scarce (Wazonis, 2014; Hall & Tori, 2017; Cant & Cooper, 2011), some methods are reported to be more effective than others (Hall & Tori, 2017). This article presents the evaluation of the pilot of a simulation-based IPE that used a two-tiered debriefing process, which demonstrated significant learning outcomes.

Background and Rationale

Interprofessional simulation education is a pedagogical approach designed to enhance opportunities for participants

to learn team collaboration, obtain awareness, and improve understanding of roles and responsibilities among team members (Baker et al., 2008; Titzer, Swenty, & Hoehn, 2012). It is an effective tool for undergraduate interdisciplinary education that has traditionally occurred in silos (Titzer et al., 2012). IPE learning opportunities are vital to overcome this if students are to understand and value contributions of fellow team members, recognize ways to enhance collaboration, and develop skills necessary for working in teams (Manning et al., 2016).

In 2013, a Cochrane review of experimental research into the impact of IPE on professional practice and health care outcomes found few studies that were considered of high enough quality to be included (Reeves, Perrier, Goldman, Freeth, & Zwarenstein, 2013), and none of those ($n = 15$) studies involved the use of the simulated learning environment for the development of interprofessional collaborative skills. The review and other researchers in IPE have called for greater empirical research into IPE models versus profession-specific interventions (Thistlethwaite, 2012; Reeves et al., 2013; Palaganas et al., 2014). This study responds to calls from the research by seeking evidence to confirm the effectiveness of using inter-professional models in both simulation and debriefing and to explore the impact these may have on the development of learner communication and teamwork.

Evaluation of Teamwork

A variety of different tools have been developed to provide frameworks for the facilitation and evaluation of teamwork. Of these, Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS[®]) is popular internationally in health care and was used as a framework guide in this study. TeamSTEPPS[®] is an evidence-based training model for teamwork and communication education developed through a collaboration between the defense force and health sector (Agency for Healthcare Research and Quality [AHRQ], 2006). The model supports four competencies for participants, including leadership, situation monitoring, communication, and mutual support (AHRQ, 2006; Clapper & Kong, 2012). Used in conjunction with simulation training, TeamSTEPPS[®] has a debriefing checklist to guide team monitoring, feedback, and improvement in performance and has been demonstrated to contribute to improved team functioning (Robertson et al., 2010; Clapper & Kong, 2012; Griswold et al., 2012; Brock et al., 2013; Liaw, Siau, Zhou, & Lau, 2014; Wong, Gang, Szyld, & Mahoney, 2016).

Debriefing

Debriefing is considered the most important element of simulation (Phrampus & O'Donnell, 2013). This is designed to improve participants' knowledge, competencies, and team performance (Neill & Wotton, 2011; Hall & Tori, 2017;

Key Points

- This pilot model of simulation-based interprofessional education was overwhelmingly well received by participants.
- Participants in the study gained significant insights into roles, responsibilities, and considerations of team members which deepened understanding and challenged prior expectations.
- The two-tier approach to debriefing enhanced learning, allowing for effective critical reflection on individual and team competencies in communication and collaboration and also on patient outcomes.

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