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## “The First Knock”: A Public Health Nursing Simulation

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### KEYWORDS

public health;  
community health;  
simulation;  
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novice;  
simulation debrief

**Abstract:** A simulated initial home visit, First Knock, was conceived to address anxiety and reticence seen in student and novice nurses before their first home visit in the public health setting. The First Knock aims to provide an opportunity for learners to reflect on issues, challenges, and ethical dilemmas likely experienced during home visits. This article provides background literature on the use of simulation in public health and describes the First Knock simulation.

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Use of simulation in public health (PH) may reinforce skills and concepts (i.e., critical thinking, cultural humility, and patient-centered care) needed in response to shifts in the health care environment from acute to community-based settings (Distelhorst & Wyss, 2013). The First Knock home visit simulation was developed by the authors to provide PH

nursing students and novice PH nurses the opportunity to practice skills and reflect on knowledge and attitudes necessary to conduct an initial home visit in a safe, nonthreatening and learning environment. The work presented in this article is intended to provide nurse educators information about the development and delivery of the First Knock simulation activity.

A cornerstone of PH nursing is that it is, “...grounded in social justice, compassion, sensitivity to diversity, and respect for the worth of all people, especially the vulnerable” (Minnesota Department of Health, 2007). Simulation

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can be used to develop additional competencies, such as establishing caring relationships, demonstrating nonjudgmental acceptance of others, commitment to social justice principles, and using the nursing process holistically (Quad Council of Public Health Nursing Organizations,

2011). PH simulation, using a simulated home environment, may be used to expose student and novice nurses to the realities of PH nursing, where they may come face to face with personal bias and realize the impact of social determinants of health (SDH). The SDH are defined as, "... the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life" (World Health Organization, 2017). PH simulation provides an opportunity for students to practice and apply concepts

such as the SDH, before working in actual home settings. The American Association of Colleges of Nursing (2008) outlines the importance of quality clinical experiences to develop the knowledge and skills required for contemporary nursing practice; however, PH clinical sites are limited (Phillips, Grant, Milligan, & Moss, 2012). The American Association of Colleges of Nursing supports the use of simulation combined with direct care experience to prepare flexible and dynamic nurses to work in diverse settings such as those encountered in PH. The First Knock provides learners the opportunity to develop public health nursing (PHN) competencies for day-to-day functions of state and local PH departments, including clinical, home visiting, and population-based services where nurses are called to practice more independently than in acute care settings. Simulation provides opportunity for participants to apply critical thinking skills at the spur of the moment (Jeffries, 2005). When coupled with guided reflection during debrief, the simulation experience provides an opportunity for impactful transformative learning.

Nurse educators have the challenge of implementing teaching strategies that promote the clinical competency of learners while strengthening their clinical reasoning and reflective thinking skills. Situated cognition is a learning theory that is based on the premise that learning is influenced by the situation in which it occurs (Onda, 2011). According to situated cognition theory, learners participate in experiences that reflect the way the knowledge will be used in real life. Within the context of situated learning, students should be

provided with access to expert thinking and modeling practices. Simulation and the debrief provide this opportunity to participate in real experiences with access to their educator's expertise.

Without adequate home visit preparation, such as the First Knock simulation, learner anxiety and lack of experience may lead to reduce self-efficacy and a decline in ability to function effectively in the home environment (Bearnson & Wiker, 2005). The initial home visit may induce anxiety for student and novice nurses. They may be concerned that they are unprepared for what they will encounter in the home setting and may feel uncertain about how to communicate with patients and families. The extreme anxiety voiced and observed on the part of students before their initial home visits in a PH clinic was concerning to faculty because it is not conducive to student learning and to the use of clinical skills such as therapeutic communication to develop client rapport (Moscaritolo, 2009). Supervised simulation experiences allow learners to practice clinical situations in a community-based environment in advance and help to decrease associated fear of failure with initial client encounters (McCallum, 2007).

Existing studies have been published on simulation-based learning (Bambini, Washburn, & Perkins, 2009; Cato, Lasater, & Peeples, 2009; Jeffries & Rizzolo, 2006; Lubbers & Rossman, 2017). Learners experienced simulation as engaging, with the potential to improve learning (Kiat, Mei, Nagammal, & Jonnie, 2007; Lasater, 2007) by stimulating critical thinking (Starkweather & Kardong-Edgren, 2008). To date, there is a lack of existing literature on home visit simulation in PH nursing. Research on simulation in PH has focused on the use of computerized simulation for population health studies with a focus on emergency preparedness, epidemiology, and on the prediction of morbidity/mortality in at-risk populations (Atkinson et al., 2017; Enanoria et al., 2016; Leal, Khurshid, Pagano, & Feenstra, 2017). Thus, both evidence and anecdotal comments from students substantiated the need for the development of the First Knock simulation scenario.

## First Knock Objectives

The First Knock is unique in many ways. One significant difference between the First Knock and other simulations is the fact that learners are assigned to the role of both novice PHN and client or family member. Simulation objectives provide clear expectations of the learner from the time of approaching and entering the home (PHN role) or answering the door (client role) to the conclusion of the home visit (Figure). The Figure provides sample simulation objectives. It is up to facilitators to select objectives that are appropriate for their group given the characteristics of clients and the community of practice. General learning

### Key Points

- The First Knock is aimed at reducing student anxiety prior to their first home visit in the community.
- Through simulation, students may experience, in a safe, non-threatening environment, the role of a public health nurse on a home visit.
- The use of guided reflection during debrief provides an opportunity for transformative learning.

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