Increase Confidence in New Graduate Nurses using High Fidelity Simulation

Margaret Schwimer MSN RN

Touro University of Nevada

Dr. Jessica Grimm DNP, APRN, ACNP-BC, CNE

Dr. Samantha Peckham, DNP, APRN, AGACNP, FNP-BC, ENP-C

Abstract

Background: Confidence is critical for nurses to provide quality patient care. New graduate nurses (NGNs) often lack the knowledge and confidence to recognize the cues of a deteriorating patient. Critical situations may be better managed if nurses are confident and competent in identifying and intervening with a deteriorating patient. The lack of confidence has been identified as a barrier to detecting subtle changes in vital signs, leading to a deteriorating patient condition. Lack of confidence may delay intervention in providing care to prevent sentinel events. Research demonstrates that simulation increases competence and confidence in nurses and nursing students at all levels. Providing NGNs with simulation experiences to recognize a deteriorating patient condition, could improve patient outcomes and save lives. Methodology/Strategy: The overall objective was to use simulation exercises in the orientation of NGNs to increase their confidence to identify deteriorating patients and to intervene in a timely manner. The simulation occurred at the project site for NGNs. First, NGNs completed the NLN Student Satisfaction and Self-Confidence in Learning Questionnaire (SSSL). This project implemented a high-risk low-frequency simulation during the nurse orientation. Immediately after the simulation, NGNs repeated the SSSL questionnaire. Results: A Repeated-Measures t-test was performed to test the assumption that there was a significant difference between the pre-intervention and post-intervention scores. There was a statistically significant increase in the scores from pre to post-intervention $t(14) = -9.88$, $p < 0.001$. Descriptive statistics of frequencies using an antidotal tool measured six rapid response team calls (RRT) by NGNs pre-intervention, three RRT calls were made by NGNs, a 50% decrease in RRT calls. Limitations: The project design used a pre/post-test self-reported questionnaire to gather quantitative data for the DNP project. The primary constraint of self-reported questionnaires is the possibility of providing invalid answers. Recruitment was completed employing a convenience sample targeting NGNs

in the orientation process. Several limitations of a convenience sample may include the lack of representation and or generalizability to other health care facilities—the limitation of a small number of participants, N=15. A larger sample to include other nursing units may have achieved more significant results enabling greater generalizability to other healthcare populations. The project contained limited demographic data, which may have influenced using additional statistical tests for analysis. Other limitations occurred due to scheduling challenges. Conclusion and Implications: A key nursing practice implication is that simulation education provides an effective means for improving clinical competency, confidence, patient safety, and optimize patient outcomes. Simulation experiences may play a fundamental role in shaping the orientation process for nursing education and increase confidence for NGNs. Confidence can impact how nurses think, believe, and respond. The simulation experience may increase the learner's competence; thus, confidence can occur by increasing critical thinking skills and clinical judgment.