

NURS-kit: 2

FACILITATOR'S GUIDE TO SCENARIO 2:

Community based scenario using a
standardised patient or role
play with undergraduate
nursing students

Students attend lectures and engage in suggested reading material presented by the lecturer (Plenary session on the trajectory of a chronic disease, with an introduction of what is meant by taking a focused history)



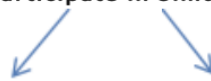
Student Learning Objectives for the simulation scenario



Students watch video 1: Introduction video (2.5 minutes long) (In lecture theatre or on an online forum)



Students participate in Simulated Scenario



Option 1: Facilitator Guided: Scenario, patient script and observation sheet are provided for students	Option 2: Self Directed: Scenario, patient script and observation sheet are provided for students
<p>Group of 12 students: facilitated group:</p> <p>1 student plays the role of the Patient</p> <p>1 student plays the role of the nurse</p> <p>10 students observe using the observation sheet</p>	<p>Group of 4 students:</p> <p>1 student plays the role of the Patient</p> <p>1 student plays the role of the nurse</p> <p>2 students observe using the observation sheet</p> <p>Students submit a 300 - 400 word group reflection to their facilitator, as a hardcopy or computer/electronic platform</p>



Debrief:

Facilitators debrief students on the student simulated scenario in large or small groups. Facilitator then present video 2: (the model video on taking a focused history) and facilitates another debrief session on the model video.

COMMUNITY BASED SCENARIO USING A STANDARDISED PATIENT OR ROLE PLAY WITH NURSING STUDENTS

Station Name: Taking a Focused History

Target Learner: 2nd/3rd year undergraduate nursing students

Learning objectives:

1. Demonstrate good communication skills when taking a focused health history
2. Apply evidence-based knowledge in the development of an educational plan for a patient with chronic disease
3. Demonstrate ability in supporting a patients with chronic disease to meet their self-care needs e.g. regarding eating more healthy and increasing levels of physical activity

Skills Tested: Communication and interpersonal skills

Taking a focused history.

?

Type of patient encounter: Patient was diagnosed with type 2 diabetes 2 years ago; he is attending the community service for a routine check-up.

Location of encounter: Community setting e.g. General Practice, community center, health center, home visit)

Station materials:

- Hand sanitiser /sink
- Chairs (2), desk
- Patient chart with vital signs, blood results: FBC, U&E, LFTs, TFTs (all normal), Glucose (high), HbA1c (abnormal). Urinalysis: abnormal. Chest x-ray and ECG normal. Weight and BMI (obese). Blood sugar records of patient
- Student instructions
- Standardised patient instructions
- Faculty evaluation forms
- SP evaluations
- Student observation sheets
- The patient is sitting in the consultation room, casually dressed, showing signs of not being able to cope (acopia).

STUDENT INSTRUCTIONS

All students should carry out the following prior to doing the simulation

Attend lectures/theoretical education on the following topics:

- Chronic disease (examples: diabetes, COPD, arthritis) as a public health priority
- Health promotion and patient education.
- Psychosocial aspects of the chronic disease process
- How to support the development of personal skills and self-management skills
- Taking a focused health history

View the introductory video (5mins)

Student role: There are 2 options to run the simulation.

Option1:

- One student plays the role of the Patient
- One student plays the role of the community nurse
- 10 students observe using the observation sheet

Option 2:

- One student plays the role of the Patient
- One student plays the role of the community nurse
- 2 students observe using the observation sheet

Community Nurse Brief:

Review the patient information: Alex White is a 52year old man who was diagnosed with a chronic disease (type 2 diabetes) two years ago. He is coming to your community setting (General Practice, community center, health center, home visit) for a routine check-up. He missed his check-up 6 months ago.

Review tests done:

Your task: To carry out a focused health history on a patient with a chronic disease

Duration of simulation: 15-20 min.

STANDARDISED PATIENT INSTRUCTIONS

Name of the scenario: A focused health history of a patient with a chronic disease

Scenario: You are Alex White, a 52 year old secondary school science teacher, married to Maria for 25 years. You have 2 children, aged 22 and 20, both attending college, and living at home. You live in semidetached home in the suburbs.

You were diagnosed with type 2 diabetes 2 years ago, (non-insulin dependent). You have hypertension and are obese. You are feeling tired, you have joint pain and feel unable to lose weight.

You are a nonsmoker and consume less than 5 units of alcohol per week. Until recently you enjoyed a healthy social life. You are a member in a golf club and enjoyed walking. However due to your decreased mobility (hip, knee and ankle pain) and fatigue, you are unable to play golf now or walk for more than 10 minutes at a time.

Weight, BMI and blood tests have been carried out on you prior to entering the nurse's office.

Reason for encounter: You received a letter to attend a check-up appointment in your community setting (General Practice, community center, health center , home visit). You were diagnosed with type 2 diabetes 2 years ago, (non-insulin treated). You have hypertension and are obese. You feel you are unable to lose weight, you feel tired all the time and have joint pains (hips, knees and ankles).

Standardised Patient task: To act as a patient with a chronic disease, the student will take a focused history from you

Objective:	Routine check-up. Find help and encouragement to cope with condition
Tactics:	You are nervous and fidgety. You are concerned about what the test results will show. You are afraid that you have put on more weight but have not weighed yourself at home.
Since your last visit:	You feel like everything is getting on top of you – weight, diabetes, everything. Your blood sugars are high and unstable and you feel your weight is increasing. Your family are constantly pestering you to watch your diet and to lose weight. You feel over-whelmed and unable to cope. You are also feeling a little angry at having this chronic disease as you didn't sign up for it.
Personality:	Formally happy, sociable and outgoing. Now feel isolated, anxious and a little down.
Past medical and surgical history:	You were diagnosed with Type 2 diabetes 2 years ago. You have high blood pressure for many years, on meds for this though sometimes you just forget to take them. Recently you have pain in your joints (hips, knees, ankles)
Family history:	Nil
Social History:	You live with your wife Maria and 2 daughters. They are both in college and are very busy. You loved travel, golf, walking and going out for few drinks (< 5 units a week) with your friends. However due to decreased mobility you cannot manage more than 15minutes walk and cannot play golf. You are now reluctant to go out and meet friends so your social life is diminishing.
Allergies:	None
Medications:	Metformin for diabetes. Lisinopril for hypertension though you sometimes forget to take this. You take <u>Neurofen</u> and Paracetamol for pain when needed.

When the student enters the room you are sitting on a chair. You make poor eye contact, and you feel apprehensive.

Questions the student may ask

Question from student	Standardised Patient Answer
How can I help today?	I got a letter to tell me to come for a check-up of my diabetes
When were you last here Alex?	Oh, I'm not sure, I think a year ago. I did get a few letters before this one but you know the way it is
Can you remember what those appointment letters were about	Oh, I think one was to see an eye man but my eyes are fine. And another was to see a dietician – looks away.
How have you been since your last visit?	Ok, I think
Have you been keeping a record of your blood sugars?	Sometimes – here it is. A bit messy I know
Can you tell me what your results in this record mean to you?	I think they are not good, perhaps a little high??
A little high?	Yes, I think the nurse before told me they should be below 10, or maybe 8
Why might your blood sugars be raised?	Might have something to do with my diet
Are you worried about your diet?	Yes. I just can't seem to cut down. I love my food; it seems the only pleasurable thing I have left. Sighs
But yet this worries you?	The weight seems to be piling on and that can't be good for me. What is my weight nurse? Act very anxious
What do you do to try to lose weight? (OLDCART)	I can't do very much now with the pain in my joints.
When did the joint pain start (OLDCART)	
Medications:	I have the list here
Family history:	No diabetes or CVD in the family. My wife and daughters are normal weight.
Living situation:	Live with my wife and 2 daughters. The girls are studying and are really busy
Work:	I am a teacher so I can still manage that thank God

Prompts that can be used by the Standardised Patient

Prompt 1:	After the student asks about your blood sugars, act anxious. Is there a strong link between my blood sugars and my diet??
Prompt 2:	After the student tells you what is optimum blood sugar. Is having a high blood sugar dangerous for me?
Prompt 3:	After the student asks about your diet, act as not coping. My wife and girls are always telling me to cut down, but how can I? Have you any tips for me here nurse?
Prompt 4:	After the student tells you your weight, act dejected. Is my weight very bad? Am I overweight or obese? I just can't lose any as I can't exercise much any more
Prompt 5:	Ask about your blood pressure: is it ok? I don't really like taking more tablets so sometimes I don't take them.
Prompt 6:	This whole thing is just too much for me. I didn't sign up for it you know

Student Observation Sheet:

Observers will pay attention to how the learning objectives are being met.

The nurse will demonstrate good communication with the patient.	Yes	No	Comments
Does the nurse introduce herself to patient?			
Does the nurse confirm patient details (e.g. identity, age)?			
Does the nurse act professionally?			
Does the nurse use good nonverbal communication skills?			
Does the nurse use both open questions and closed questions appropriately and listens carefully to patient's story?			
The nurse will take a focused health history.			
Does the nurse determine the duration of disease?			
Does the nurse determine the current care - medications and non-pharmacological treatments?			
Does the nurse determine the patient's view of current situation and major concerns?			
Does the nurse assess any signs/symptoms of patient?			
Does the nurse assess the patient's motivation to change?			
The nurse will use evidence-based knowledge in patient education.			
Does the nurse discuss weight changes and optimal weight with the patient using the patient's BMI?			
Does the nurse assess dietary intake and discuss nutrition with the patient?			
Does the nurse discuss insulin treatment with the patient, explaining the main points of insulin medication?			
Does the nurse discuss exercise with the patient?			
The nurse will support the patient's ability to self-care in chronic disease.			
Does the nurse set with her patient realistic goals and guidelines for weight control and loss at home?			
Does the nurse set with her patient realistic goals and guidelines for exercise at home?			
Does the nurse devise a plan with her patient to ensure that her patient can measure and record their blood glucose accurately and interpret and treat the result correctly?			

DEBRIEFING

The debriefing is planned according to “Debrief Diamond” –model (Jaye, P., Thomas, L. & Reedy, G. 2015. ‘The Diamond’: a structure for simulation debrief. The Clinical Teacher, 12, 171-175.).

- Debriefing takes app. 45-60 min.
- At the beginning of debriefing session, it is important to remember that the purpose of the session is to focus on what happened, not judge performance. Keep focus on positive sides
- Agree who leads the conversation (at least at the beginning)
- Remember to focus on learning objectives.
- There are three phases in debriefing conversation:
 1. Description
 2. Analysis
 3. Application

1. Description

Questions, (for a student who acts as a nurse and for a student who acts as a standardized patient)

- Explain briefly in your own words, what happened? ... and further question if needed: what happened next?

Transition to next step:

- Explain the purpose of the scenario (if needed) i.e. address technical and clinical questions

2. Analysis

The purpose of this phase is to deconstruct behaviour into specific actions and explore what happened in detail.

Two ways to continue:

- 1) Continue according to the scenario progression (in chronological order)
- 2) Continue according to learning objectives:

The student is able to:

1. Demonstrate good communication skills when taking a focused health history
 2. Apply evidence-based knowledge in the education of a patient with a chronic disease
- Demonstrate competence in supporting patient's ability to self-care in chronic disease

Questions for the nurse actor:

- How did you feel when acting as a nurse?
- What was hard? What was easy?
- What do you think about your communication with this patient?
- How did you take this patient's focused health history?
- What do you think this patient's ability to self-care his/her chronic disease?
- How did you support the patient's ability to self-care?

Questions for the patient actor:

- From a patient point of view, how did the nurse pay notice to educating you to cope with a chronic disease?
- From a patient point view, how did the nurse communicate with you? Do you have suggestions on how this could be improved?
- From a patient point of view, how did the nurse support your ability to self-care your chronic disease?

Additional questions for leading conversation at this point:

When the nurse tells about some action he/she did during the simulation, you can ask:

- Why did you take that action?
- Why did you respond in that way?
- How did that make you feel?

If something did not go according to protocol, you can ask (for example):

- I noticed that you did not ask the patient anything about his/her health status. I was wondering if it would have been necessary to do in that situation. What do you think about that?

Transition to next step: Make a short summary about the things that were discussed.

"What we've talked about in this scenario is..."

3. Application

The purpose of this phase is to generalize the specifics of the scenario.

Questions:

- What kind of similar situations could you face in real life? What way are they similar?
- How can you use the skills from this simulation in real life situations?
- If you would face the same situation again some other day, would you do something differently?
- Please, name at least one thing that you have learned today.

ACKNOWLEDGEMENTS

The following three Universities cooperated to produce this NURS-Kit 1

University College Dublin, Ireland

SAMK, Satakunta University of Applied Sciences

Lahti University of Applied Sciences, Finland



L-Università
ta' Malta

