Introduction

The methodologies used to provide education and ongoing learning in health care is changing. Classic lectures, computer based learning, and other self-learning modalities provide only one component of information and are not effective in improving team communication or salient psychomotor skills that are needed when working in a complex environment, such as the hospital. Interestingly, health care providers are rarely trained as teams even though they function almost exclusively in a team (Smith and Cole, 2009).

The Institute of Medicine (2003) recommends professionals develop and maintain proficiency in five core areas: delivering patient-centered care, working as part of interdisciplinary teams, practicing evidence-based medicine, focusing on quality improvement and using information technology. Multidisciplinary simulation training can assist healthcare professionals in meeting all five of these competencies in a method that cements teamwork, acquisition of skills, and communication.

Objectives

The overall goal of this project is to explore the effect of a simulated learning experience on the confidence levels of Neonatal Intensive Care Unit (NICU) staff in managing a neonatal resuscitation.

Aim #1: Describe the NICU staffs’ current confidence level regarding performance during a neonatal resuscitation.

Aim #2: Describe the NICU staffs’ confidence level regarding performance during resuscitation after participating in a simulated neonatal resuscitation.

Aim #3: Describe the NICU staffs’ overall evaluation of simulation as a new learning experience.

Methods

Study: Descriptive, Comparative Participants: n=120

The staff (RN’s, RT’s and MD’s) in the NICU at UC Irvine Medical Center participated in multidisciplinary simulation based training program centered on conducting a mock neonatal resuscitation. Two surveys were developed, the first was given to each staff member before going into a simulation exercise. The second survey asked the same questions to assess each participant’s confidence level after participation in the simulated learning experience and to evaluate the overall simulation experience. The surveys were anonymous and participation in completion of the surveys was completely voluntary.

Results

Analysis of the descriptive data concluded that a simulated experience improved participants confidence in neonatal resuscitation. Results revealed a higher confidence score for the participants after they participated in the simulation training.

The overall evaluation of the simulation program from the participants was positive. This was a new learning experience for the participants and the staff in the NICU found the experience enjoyable, valuable and safe as shown in the graphs in the conclusion section.

Conclusions

This study found that a multidisciplinary simulation training can improve staffs’ confidence in managing a neonatal resuscitation. This study found that experienced nursing, respiratory and medical staff in the NICU may benefit from ongoing team training in a simulated environment.

References