Debriefing Post-Simulation and SRNA Self-Confidence and Satisfaction

Camila Queiroz BSN, RN & Diana Jauregui-Cervantes BSN, RN

Manuel Tolosa DNAP, CRNA, APRN; Jonelle Weagraff, MSNA, CRNA; Nel Thomas, PhD, RN AdventHealth Doctor of Nurse Anesthesia Practice

Problem

A large amount of research supports the use of simulation, and often discuss debriefing as an integral component of simulation. Yet, debriefing is seldom the focus of research. Although some studies have been conducted in simulation with SRNAs, the majority involve medical residents, nurse practitioner students, and undergraduate nursing students. There are a variety of debriefing methods applied post-simulation, however, there are limited studies examining structured methods of debriefing and how they affect SRNA self-confidence and satisfaction.

There is a need for an evidence-based time-efficient debriefing method that nurse anesthesia faculty can apply to improve learning outcomes due to time-constraints.

How does the implementation of structured debriefing methods (I) affect SRNA (P) self-confidence and satisfaction (O)?

Literature Review

Time is a common barrier in debriefing literature due to the limited period of learning how to debrief and conduct a debriefing session. As a result, an unstructured debriefing method is often utilized in many educational institutions due to time and expertise constraints, which poses a risk for poor learning outcomes, development of insecurities, strain to the educator and learner relationship, and dissatisfaction among students.

Self-confidence and satisfaction in learning are aspects that ultimately affect quality of care and impact patient outcomes. Debriefing enhances student self-confidence in caring for unstable patients. Self-confidence is an important characteristic for the SRNA professional role as it influences clinical decision making and promotes success in clinical practice. Satisfaction in learning correlates with clear learning objectives and active engagement in performance. SHARP and GAS are valid, reliable, and feasible methods of debriefing. Effective debriefing is important for nurse anesthesia students as it leads to reflection on performance, recognition of knowledge gaps, and improves clinical judgment and reasoning skills.

Methods

A 10-minute project introduction, was provided to all participants.

Random pairing occurred via an electronic random team generator. Students from the same cohorts were paired and were randomly assigned to the debrief method by withdrawing a slip of paper from a paper bag labeled A or B. Group A received the SHARP method of debriefing and Group B received the GAS method of debriefing, post-simulation.

Pairs then experienced the same 10-minute anaphylaxis crisis scenario simulation. A 5-minute debrief followed immediately the crisis scenario, based on the randomized group the pair selected, and was held in a designated debriefing room. Each participant completed an anonymous, electronic, modified version of the National League for Nursing (NLN) Student Satisfaction and Self-Confidence 13-item instrument on Mentimeter to evaluate the method of debriefing (SHARP or GAS), and its effect on self-confidence and satisfaction in learning.

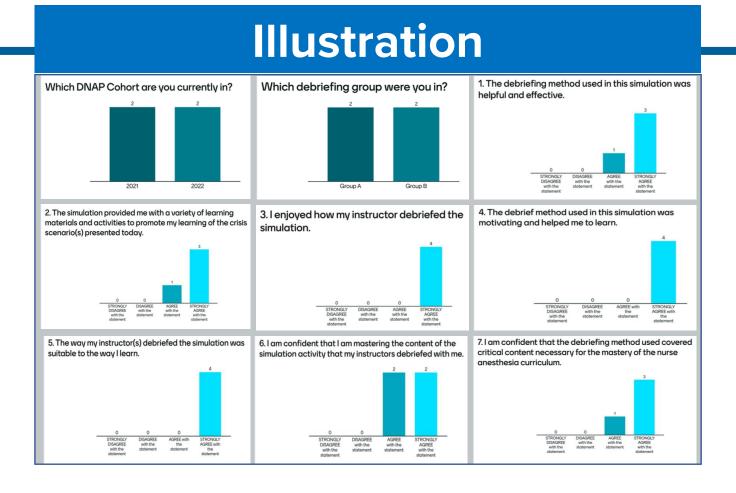
Results

Satisfaction in Learning

SRNAs' responses to each item ranged from 0 (strongly disagree) to 3 (strongly agree). No student reported a score of 0 (strongly disagree) or 1 (disagree) on any statement of the five items on the Satisfaction in Learning scale. For question 1 and 2, 25% of the SRNAs reported a score of 2 (agree), whereas the 75% of the SRNAs reported a score of 3 (strongly agree), with a mean of 2.75 for both. For question 3-5, 100% of SRNAs reported a score of 3 (strongly agree) of the statement, with a mean of 3 for each question. SRNAs that received the SHARP method of debriefing reported a mean score for SRNA satisfaction in learning of 2.8. SRNAs that received the GAS method of debriefing reported a mean score for SRNA satisfaction in learning of 3. The overall mean score for SRNA satisfaction in learning was 2.9.

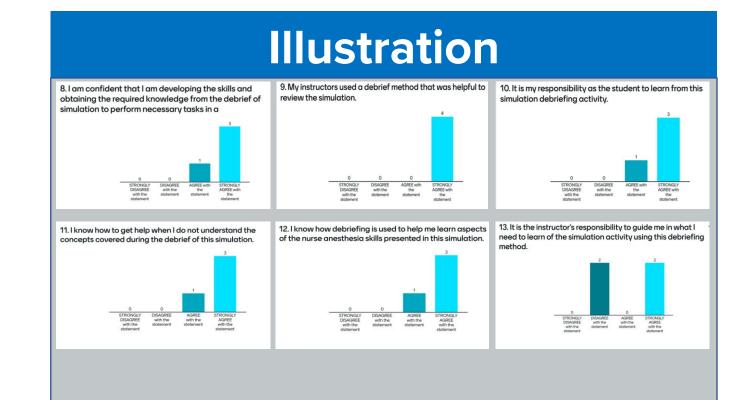
Self-confidence in learning

The mean self-confidence score of each item ranged from 2 to 3. For question 6, 50% of the SRNAs reported a score of 2 (agree), and 50% of the SRNAs reported a score of 3 (strongly agree), with a mean of 2.5.



More Results

For question 7, 8, and 10-12, 25% of the SRNA's reported a score of 2 (agree), whereas 75% of the SRNAs reported a score of 3 (strongly agree), with means of 2.75. For question 9, 100% of the SRNAs reported a score of 3 (strongly agree) with the statement, with a mean of 3. For question 13, 50% of the SRNAs reported a score of 1 (disagree) and 50% of the SRNAs reported a score of 3 (strongly agree) with the statement. Self-confidence subscale item 13 had the lowest mean score, which reflected how confident students were in that it was the instructor's responsibility to guide them in what they needed to learn of the simulation activity using the debriefing method. SRNAs that received the SHARP method of debriefing reported a mean score for SRNA self-confidence of 2.69. SRNAs that received the GAS method of debriefing reported a mean score for SRNA self-confidence of 2.63. The overall mean score for SRNA self-confidence was 2.66.



Discussion & Implications

Descriptive statistics, including tables of frequencies, percentages, and means were used to make observations of data. The mean score on SRNA satisfaction in learning for SRNAs that received the SHARP method of debriefing (2.8) was lower than mean score for SRNAs that received the GAS method of debriefing (3). The overall mean score for SRNA satisfaction in learning was 2.9 which suggests that the majority of the students were satisfied with the post-simulation debrief method. The mean score on SRNA self-confidence in learning for SRNAs that received the SHARP method of debriefing (2.69) was greater than the mean score for SRNAs that received the GAS method of debriefing (2.63). The overall mean score for SRNA self-confidence was 2.65 which suggests that the majority of the students were confident with the post-simulation debrief method.

Due to the small sample size, a statistical analysis could not be made through SPSS 21 and an independent samples T-test with a predetermined p-value of 0.05, to test for difference between the independent variables could not be implemented. Hence, no statistically significant conclusions could be made regarding the individual effect of the method of debriefing, nor in the difference between the GAS and SHARP method of debriefing on SRNA self-confidence and satisfaction in learning. Thus, an increased sample size was needed in order to achieve a result with statistical significance.

Conclusions

The results of the scholarly project may not be generalizable to other SRNAs at different institutions. Due to the small sample size, a statistical analysis could not be made through SPSS 21 and an independent samples T-test with a predetermined p-value of 0.05, a test for difference between the independent variables could not be implemented. Thus, conclusions cannot be made regarding the difference between the GAS and SHARP method of debriefing on SRNA Self-Confidence and Satisfaction in Learning.

Acknowledgements

Manuel Tolosa DNAP, CRNA, APRN; Jonelle Weagraff, MSNA, CRNA; Nel Thomas, PhD, RN; and Roy Lukman, PhD

