Simulation Design Template

Zachary Alexander Miller Simulation #3

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| **Date:**  **Discipline:** Nursing  **Expected Simulation Run Time:** 20 minutes  **Location:** Home  **Today’s Date:** | **File Name:**  **Student Level:**  **Guided Reflection Time:** Twice the amount of time that the simulation runs.  **Location for Reflection:** |

Brief Description of Patient

**Name**: Zachary Alexander Miller **Pronouns**: they/them

**Date of Birth**: 09-09-YYYY (reflect age 15) **Age**: 15

**Sex Assigned at Birth**: Male **Gender Identity**: Non-binary

**Sexual Orientation**: unknown **Marital Status**: N/A

**Racial Group**: Faculty can select **Language**: English **Religion**: Methodist

**Weight**: 120.0 lb (54.4 kg) **Height**: 66” (167.6 cm)

**Insurance Status**: Father has insurance through employer

**Support Person**: Mom Natalie and Dad David **Support Phone**: 778-631-8584

**Allergies**: NKA **Immunizations**: up to date

**Attending Provider/Team**: Chloe Wiebe, RN

**Past Medical History:** Unremarkable birth history.

**Social History**: Lives with their parents and three siblings. Everyone in the family is very involved in sports, school activities such as drama, band and choir, and the local church. Alex has two older brothers and one younger sister. Their dad works as an electrical engineer and their mom has a home-based book-keeping business. Alex’s grandparents live close by and have a close relationship with the family. They help by taking the grandchildren to their extra-curricular activities and watching them whenever it is needed. Alex plays soccer and is a member of the drama group at school.

**History of Present Illness**: Alex was struck by a motor vehicle 3 days ago. They suffered a fractured wrist, a wound to the torso, and some scratches and bruises. Alex did not sustain a head injury.

**Primary Medical Diagnosis**: follow-up care for open wound

**Surgeries/Procedures & Dates:** None

Psychomotor Skills Required of Participants Prior to Simulation

Vital signs

* Physical assessment of an adolescent (cast, wound and superficial injuries from accident)
* Optional: Wound care

Cognitive Activities Required of Participants Prior to Simulation

Use textbook and other faculty directed resources to review:

* LGBTQ+ content from current pediatric textbook
* Communication with an adolescent
* Adolescent physical assessment
* Wound assessment and care

Read the following:

* A Guide to Being an Ally to Transgender and Nonbinary Youth – <https://www.thetrevorproject.org/resources/guide/a-guide-to-being-an-ally-to-transgender-and-nonbinary-youth/>
* CDC LGBT Youth Resources – <https://www.cdc.gov/lgbthealth/youth-resources.htm>
* Providing Affirmative Care for Patients with Non-binary Gender Identities – <https://www.lgbtqiahealtheducation.org/wp-content/uploads/2017/02/Providing-Affirmative-Care-for-People-with-Non-Binary-Gender-Identities.pdf>
* LGBTQIA+ Glossary of Terms for Health Care Teams created by the National LGBTQIA+ Health Education Center, a program of the Fenway Institute – <https://www.lgbtqiahealtheducation.org/publication/lgbtqia-glossary-of-terms-for-health-care-teams/>
* Nursing Care for LGBTQ+ Patients: Tips and Resources by NurseJournal – <https://nursejournal.org/articles/nursing-care-lgbtq-patients/>

Access: Q Chat Space – <https://www>.qchatspace.org/

Simulation Learning Objectives

General Objectives (Note: The objectives listed below are general in nature and once learners have been exposed to the content, they are expected to maintain competency in these areas. Not every simulation will include all of the objectives listed.)

1. Practice standard precautions.
2. Employ strategies to reduce risk of harm to the patient.
3. Conduct assessments appropriate for care of patient in an organized and systematic manner.
4. Perform priority nursing actions based on assessment and clinical data*.*
5. Reassess/monitor patient status following nursing interventions.
6. Communicate with patient and family in a manner that illustrates caring, reflects cultural awareness, and addresses psychosocial needs.
7. Communicate appropriately with other health care team members in a timely, organized, patient-specific manner.
8. Make clinical judgments and decisions that are evidence-based.
9. Practice within nursing scope of practice.
10. Demonstrate knowledge of legal and ethical obligations.

Simulation Scenario Objectives

1. Demonstrate a developmentally appropriate assessment with a focus on wound care and mental health assessment.
2. Utilize therapeutic communication strategies while incorporating inclusive language when caring for an adolescent in a home setting.
3. Discuss strategies for creating an affirming environment for an adolescent who is experiencing feelings of isolation because of gender identity and sexual orientation.

Faculty Reference

The Trevor project – <https://www.thetrevorproject.org/>

CDC LGBT Youth Resources – <https://www.cdc.gov/lgbthealth/youth-resources.htm>

SOGI Nursing References for Nurses and health care providers – <https://soginursing.ca/index.php/bibliography/>

Providing Affirmative Care for Patients with Non-binary Gender Identities – <https://www.lgbtqiahealtheducation.org/wp-content/uploads/2017/02/Providing-Affirmative-Care-for-People-with-Non-Binary-Gender-Identities.pdf>

Gender Creative Kids – <https://gendercreativekids.com/>

Q Chat Space – <https://www>.qchatspace.org/

LGBTQIA+ Glossary of Terms for Health Care Teams created by the National LGBTQIA+ Health Education Center, a program of the Fenway Institute – <https://www.lgbtqiahealtheducation.org/publication/lgbtqia-glossary-of-terms-for-health-care-teams/>

Nursing Care for LGBTQ+ Patients: Tips and Resources by NurseJournal – <https://nursejournal.org/articles/nursing-care-lgbtq-patients/>

The Healthcare Simulation Standards of Best Practice™

<https://www.inacsl.org/healthcare-simulation-standards>

Setting/Environment

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| --- | --- |
| Emergency Department  Medical-Surgical Unit  Pediatric Unit  Maternity Unit  Behavioral Health Unit | ICU  OR / PACU  Rehabilitation Unit  Home  Outpatient Clinic  Other: |

Equipment/Supplies

**Simulated Patient/Manikin(s) Needed:** Simulated adolescent non-binary patient preferred. Alex can be adapted for use with adult manikin.

**Recommended Mode for Simulator:** Manual, as no vital sign changes are needed in this scenario.

**Other Props & Moulage:** Adolescent should have gender neutral hair style and be wearing gender neutral comfortable clothing (i.e., sweatshirt and sweatpants). Dressed wound to right lower torso, cast on right wrist, bruises and small cuts to the right side of body.

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| **Equipment Attached to Manikin/Simulated Patient:**  ID band  IV tubing with primary line fluids running at \_\_mL/hr  Secondary IV line running at \_\_ mL/hr  IVPB with \_\_ running at mL/hr  IV pump  PCA pump  Foley catheter with \_\_ mL output  02  Monitor attached  Other:  **Other Essential Equipment:**  **Medications and Fluids:**  Oral Meds:  IV Fluids:  IVPB:  IV Push:  IM or SC: | **Equipment Available in Room:**  Bedpan/urinal  02 delivery device (type)  Foley kit  Straight catheter kit  Incentive spirometer  Fluids  IV start kit  IV tubing  IVPB tubing  IV pump  Feeding pump  Crash cart with airway devices and emergency medications  Defibrillator/pacer  Suction  Other: If students are completing wound care supplies needed are:   * Normal Saline * Sterilized gauze packing * Mepore dressing * Dressing tray |

Roles

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| --- | --- |
| Nurse 1  Nurse 2  Nurse 3  Provider (physician/advanced practice nurse)  Other healthcare professionals:  (pharmacist, respiratory therapist, etc.) | Observer(s) - optional  Recorder(s)  Family member #1  Family member #2  Clergy  Unlicensed assistive personnel  Other: |

Guidelines/Information Related to Roles

Learners in role of nurse should determine which assessments and interventions each will be responsible for, or facilitator can assign nurse 1 and nurse 2 roles with related responsibilities.

Information on behaviors, emotional tone, and what cues are permitted should be clearly communicated for each role. A script may be created from Scenario Progression Outline.

Pre-briefing/Briefing

Prior to report, participants will need pre-briefing/briefing. During this time, faculty/facilitators should establish a safe container for learning, discuss the fiction contract and confidentiality, and orient participants to the environment, roles, time allotment, and objectives.

For a comprehensive checklist and information on its development, go to <http://www.nln.org/sirc/sirc-resources/sirc-tools-and-tips#simtemplate>.

Report Students Will Receive Before Simulation

**Time:** 0900

**Person providing report:** Home care coordinator

**Situation:** Alex is a 15-year-old, who was discharged from the hospital five days ago after being in a pedestrian-vehicle accident. Alex has a cast to the right wrist and requires daily dressing changes to a wound on their right lower torso.

**Background:** Alex is a quiet non-binary adolescent who lives with their parents and two younger siblings. Alex’s family is very supportive of their choices and has been concerned about Alex’s health during theirs past hospitalization.

Alex was struck by a car while riding their bike home from a friend’s house. Alex sustained a wound to the right torso, a fractured right wrist and a few cuts and bruises on the right side of the body. Alex did not suffer a head injury. Alex requires wound care three times a week. You have been Alex’s home care nurse for the last two visits and have developed a good relationship with Alex. You have been able to create an affirming environment, so Alex feels safe with you. Alex’s Mom has been present at the last two visits but told you during the last visit that she wouldn’t be able to come today.

**Assessment:** Alex’s torso wound is healing well. Alex’s cast was intact at the last visit and Alex voiced no concerns about their right wrist. Alex’s bruises and scratches are healing well, and Alex’s vital signs have been stable.

**Recommendation:** Complete a head-to-toe assessment. Focus on pain management, wound assessment, and general wellbeing.

Optional: complete a dressing change.

Scenario Progression Outline

**Patient Name:** Zach Alex Miller **Date of Birth:** 09-09-YYYY (reflect age 15)

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| **Timing (approx.)** | **Manikin/SP Actions** | **Expected Interventions** | **May Use the Following Cues** |
| **0-10 min** | Alex is resting on a sofa with some textbooks and school papers beside them.  **Alex**: “I’m okay”  **Alex:** “I’m not really missing school. I don’t really fit in there, so its much nicer to be at home where I can be myself and everyone accepts me for who I am. The only thing I really miss is the drama club. I feel so good when I am acting as someone else because then I don’t have to deal with feeling different… because when I’m acting, I’m supposed to be someone different. I can create this person in my mind and just be them for a while, so I don’t need to worry about being me.”  **Alex**: “This is very different when I’m playing sports. I really don’t like soccer, but I feel so much pressure to be sporty like the rest of my family. My family is okay if I don’t play soccer, but still, I feel like this is something I should do.”  **Alex**: “I’m pretty good at acting like someone else because I do this quite a bit when I am with people who are not close to me. There are a lot of times when I feel like I need to change who I am so that I can fit in and not be teased.”  **Alex:** “Did you know it’s even hard to figure out which bathroom I should use? I don’t know if I should go in the boys one…I mean I know that’s the one I’m supposed to go in because I have boy stuff, but it doesn’t feel right because I don’t identify as a boy. I just want to be me. It makes me feel anxious, stressed and sad sometimes.”  **Alex** – doesn’t feel like they need any additional support, but wants the student nurse to acknowledge how difficult this must be  **Alex**: “It’s getting better everyday. I take the medication that the doctor prescribed and I’m pretty good. My Mom makes sure that I take the medication when I’m supposed to. She is home all the time, so she watches pretty closely. I’m okay with this because then I don’t have to worry about it.” | **Learners should begin by:**   * Introduce themselves.   Ask Alex how he is doing today  Is Alex missing school?  Express empathy for how Alex is feeling.  Explore feelings of anxiety, sadness and stress.  Offer support strategies – i.e., counselling, LGBTQ+ group support, etc.  Assess overall pain? | **Role member providing cue:** Alex    **Cue:** If students don’t ask how school is going, state “I’m kind of happy that my teacher is sending me work to do at home so that I don’t get too far behind”  **Role member providing cue:** Alex  **Cue:** If learners don’t use the correct pronouns state “hey, can you call me by the correct pronouns”  **Role member providing cue:** Alex  **Cue:** If learners don’t explore feelings say, “wouldn’t that make you sad as well?” |
| **10-20 min** | HR – 75  RR – 16  BP – 115/68  Temp – 36.9 C/ 98.4 F  02 sats – 99% on R/A  Cast is intact.  **Alex:** “My hand feels okay, but my arm gets a bit itchy every once in a while.”  “I have almost figured out a way to play video games with this cast on. How much longer will I have the cast?”  All motor and sensation findings normal. Wrist pain 0/10  **Alex**: “My scratches and bruises are getting better. I don’t even feel them anymore.”  Dressing is dry and intact, wound pain is 2/10.  **Alex**: “It’s starting to get better I think”  I’m okay with the pain and as I said earlier Mom is making sure that I’m taking my pain medication and it never gets really bad.”  **Alex:** “Do you know how long it will take to get completely better?”  **Alex**: “I don’t think I have any other questions. Thanks for coming to see me and for listening to me. It’s nice to have someone to talk to who isn’t my part of my family or one of my friends.” | **Learners are expected to**:  Gather vital signs  Assess cast  Neurovascular assessment.  Assess bruises and scratches from accident.  Assess wound   * Pain * Dressing condition   Optional:  Complete wound care  Ask Alex if they have any questions  Let Alex know that someone will be coming to see them again in a few days. | **Role member providing cue:** Alex  **Cue:** If students do not complete vital signs say “last time you were here you checked my temperature and stuff”  **Role member providing cue:** Alex  **Cue:** If learners do not assess your cast, say “Do you know when I’ll get this thing off? It’s a bit itchy sometimes”  **Role member providing cue:** Alex  **Cue:** If the learners do not assess your scratches and bruises, say “I think this scratch on my cheek is getting better. What do you think?  **Role member providing cue:** Alex  **Cue:** If learners start to leave without talking to you about the plan, say “Are you coming to see me tomorrow.” |

Debriefing/Guided Reflection

Note to Faculty

We recognize that faculty will implement the materials we have provided in many ways and venues. Some may use them exactly as written and others will adapt and modify extensively. Some may choose to implement materials and initiate relevant discussions around this content in the classroom or clinical setting in addition to providing a simulation experience. We have designed this scenario to provide an enriching experiential learning encounter that will allow learners to accomplish the listed objectives and spark rich discussion during debriefing. There are a few main themes that we hope learners will bring up during debriefing, but if they do not, we encourage you to introduce them.

**Themes for this scenario:**

* + Creating a non-judgmental environment using inclusive language
  + Empathy for an adolescent who doesn’t feel like they fit in.
  + Neurovascular and wound care

We do not expect you to introduce all of the questions listed below. The questions are presented only to suggest topics that may inspire the learning conversation. Learner actions and responses observed by the debriefer should be specifically addressed using a theory-based debriefing methodology (e.g., Debriefing with Good Judgment, Debriefing for Meaningful Learning, PEARLS). The debriefing questions for consideration are organized into the phases of debriefing, as recommended by the Healthcare Simulation Standard of Best Practice™ The Debriefing Process. The following phases are included below: Reactions/Defuse, Analysis/Discovery and Summary/Application. Remember to also identify important concepts or curricular threads that are specific to your program.

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| **Debriefing Phase** | **Debriefing Questions for Consideration** |
| Reactions/ Defuse | How did you feel throughout the simulation experience? |
| Give a brief summary of this patient and what happened in the simulation. |
| What were the main problems that you identified? |
| Analysis/ Discovery | Discuss the knowledge guiding your thinking surrounding these main problems. |
| What were the key assessment and interventions for this patient? |
| Discuss how you identified these key assessments and interventions. |
| Discuss the information resources you used to assess this patient. How did this guide your care planning? |
| Discuss the clinical manifestations evidenced during your assessment. How would you explain these manifestations? |
| Explain the nursing management considerations for this patient. Discuss the knowledge guiding your thinking. |
| What information and information management tools did you use to monitor this patient’s outcomes? Explain your thinking. |
| How did you communicate with the patient? |
| What specific issues would you want to take into consideration to provide for this patient’s unique care needs? |
| Discuss the safety issues you considered when implementing care for this patient. |
| What measures did you implement to ensure safe patient care? |
| What other members of the care team should you consider important to achieving good care outcomes? |
| How would you assess the quality of care provided? |
| What could you do improve the quality of care for this patient? |
| Summary/ Application | If you were able to do this again, how would you handle the situation differently? |
| What did you learn from this experience? |
| How will you apply what you learned today to your clinical practice? |
| Is there anything else you would like to discuss? |

Guided Debriefing Tool

The NLN created a Guided Debriefing Tool to provide structure from which facilitator observations can make objective notes of learner behaviors in simulation in direct relationship to the learning outcomes. [Download the NLN Guided Debriefing Tool](https://www.nln.org/docs/default-source/uploadedfiles/professional-development-programs/sirc/guided-debriefing-tool.docx?sfvrsn=f659d27e_3).