The Patient Emergency Lab:
Staff to Staff Professional Growth Experiences
At The University of Cincinnati Medical Center

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Inter-professional Teamwork:

- Common Ground is Patient Care
- Focusing on Quality and Safety
- Emergency Teams - Rapid Response and Code Blue

- MICU Nursing Team responded to
  - 57% of 398 Code Blues
  - 80% of 549 Rapid Responses
The Problem: Lack of Role Enactment

1. Identified Through:
   • MICU Nurses observing deficits in Evidence Based Practice (American Heart Association, 2008)
   • Documented Debriefings

2. Chaos defined as Disorganization:
   • Need for guidance in making decisions about patient lives
   • Need for putting “Teeth” into order, not disorder
Purpose: MICU Patient Emergency Lab Mission

MICU Nurses provide education to Non-ICU Nurses in The Patient Emergency Lab (PEL):

1. Demonstrating (applying) evidence based practice for the first five minutes of a patient emergency
2. Creating (designing) deliberate practice scenarios
Critical Thinking, Critical Action, Critical Language

**Critical Thinking** is the process of purposeful, self regulating judgment (Facione, Facione, and Sanchez, 1994)

Attributes of **Critical Thinking** include **Perseverance** with:

- Open mindedness
- Flexibility
- Confidence
- Reflection
- Intellectual Integrity
- Intuition

(Scheffer and Rubenfield, 2000)
Educational Objectives

1. Remembering—**defining and memorizing**
2. Understanding—**describing and discuss**
3. Applying—**demonstrating and interpreting**
4. Analyzing—**comparing and contrasting, questioning**
5. Creating—**creating and designing**
6. Evaluating—**arguing and defending**

(Bloom et al 1956)

(Novotny and Griffin, 2006)
Patient Emergency Team
Methods:

MICU Nurses created simulation scenarios to demonstrate evidence based practice

Patient Emergency Lab developed a one hour CEU “The First Five Minutes”

- Pre and Post Testing addressed:
- Nurse Empowerment
- Building Confidence
Evaluation of Education:

With a Likert Scale, zero staff reported declines; vast majority reported increases:

1. Nurse empowerment to call for the Code Blue/Rapid Response Teams
2. Building confidence in the nurse knowing their duties
3. Building confidence in enacting their roles and responsibilities
4. Nurse being comfortable with using the defibrillator
5. Confidence in using emergency equipment and supplies
Conclusion: Staff to Staff Professional Growth

1. **Staff Nurses** have cognitive, psychomotor, and affective attributes to share with each other.

2. **Inter-professional Teamwork** is enhanced as Nurses enact roles and responsibilities.
Further Implications:

• ICU Nurse to Non-ICU Nurse Partnering for four hour shifts

• 3-5 Minute In-Situ Mock Rapids and Codes “Best Practice” is emerging

• The Patient Emergency Lab is creating a one hour CEU “The Previous 5 Hours of the Deteriorating Patient”
References


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Innovation is Contagious at UCMC

• “I just want everyone to know I went to a code this afternoon. The Staff Nurses did an amazing job! The monitor was on and functioning, Staff Nurses were doing chest compressions, there was an airway being established…I was impressed…I think the PEL is making a big difference. Awesome job guys!” (Clinical Program Developer)

• “Thanks for sharing; this demonstrated our mission of empowerment and providing life changing patient centered care. Thank you everyone for all you do every day.” (Nurse Executive)