A Few Notes from: The Future of Nursing

- Develop and test new approaches to pre-licensure clinical education.
- Teach students how to do the work and how to improve the work of nursing – the quality improvement piece.
- Must provide practice settings that provide students opportunities to demonstrate higher order critical thinking.
- Need a competency-based approach to education that provides explicit course competencies and requires students to demonstrate mastery of those competencies.
NCLEXN Study Reported in 2008

Based on self assessment, the newly licensed RNs were more competent in the areas of patient care delivery and management, compared to the areas of clinical reasoning and judgment skills, as well as recognizing limits and seeking help.

Del Bueno

Only 35% of new RN graduates, regardless of educational preparation and credentials, meet entry expectations for clinical judgment.

Nursing Executive Center

Bridging the Preparation-Practice Gap

And the survey says.....
89.9% of nursing school leaders

Versus

10.4% of Hospital Nurse Executives
Nursing Executive Center

Many of the issues centered around thinking abilities.

See handout.

Joint Commission

Nursing education and practice must work to better align education with practice environments.

QSEN

Quality and Safety Education for Nurses: QSEN.org

Recommends the 5 major concepts from IOM to be incorporated into nursing curriculum and added a 6th:

• Safety
Safety!

What is safety in nursing practice?
• Side rails up?
• Bed down?
• Call light in reach?

Anything else?

Safety!

• Predict and manage potential complications
• Decrease mortality and morbidity rate
• Decrease the failure to rescue rate

These safety interventions require the use of critical thinking/clinical reasoning.

Safety!

The focus is on safety!

We must shift our clinical experiences to focus on safety.

Paradigm shift ➔ from a focus on skills to a focus on thinking.

The new mantra: Nurses are knowledge workers!
Conclusion
Health care providers need to be prepared with a different set of competencies than are developed in educational programs today.

Focus on Thinking

What is Critical Thinking?
A very complex process

• Many students have NEVER had critical thinking explicitly modeled.

• They are not even sure what critical thinking is.

Are we ??
Your Nursing Program's Definition

- Agree upon one definition.
- Put it in the syllabus.
- Teaching and assignments flow from that definition.

Definitions from NLN

In handout:
- Critical Thinking
- Clinical Judgment
- Nursing Judgment

Tanner's Model of Clinical Reasoning

In handout:
- Noticing
- Interpreting
- Responding
- Reflecting: 2 kinds of reflection

Use this framework as you help students develop CT in the clinical.
So... that's critical thinking...

but how do I teach it?

Turning the abstract into the concrete.

Critical Thinking Involves

• Cognitive skills and strategies
• Attitudes

Critical Thinking Cognitive Skills and Strategies

• General Skills Used in all Situations
• Basic-Level Thinking Skills
• Gathering Data
• Providing Nursing Care
• Evaluating Data

Refer to handout for a list of examples for each of the above categories.
A Few Important Points

**Critical thinking:**
- Uses both logic and intuition.
- Is **contextual** – requires a knowledge base.
- The student nurse may have trouble with both.

Three Stages of Developing Critical Thinking Skills

1. **Right from Wrong**
2. **Alternatives**
3. **Complexities**

A VERY Brief Look at Each
Concrete thinking looking at right from wrong; black from white.

Applies standards or rules to a situation, issue, or problem.

Stage 1
Right from Wrong

Start by learning the basic skills & strategies of critical thinking applied to concrete examples.

Stage 1
Right from Wrong

How to teach at this level:
Teach the skills and strategies giving concrete examples.

• Here is the thinking skill.
• This is why you need to know it.
• Here is an example.
Integrating CT Into a Fundamentals Course

See handout.

Questioning:
• What are you on alert for today with this patient?
• What are the important assessments to make?
• What complications may occur?
• What interventions will prevent complications?

An Activity for All Stages

Stage 2
Alternatives

2nd stage: Transfer this concrete knowledge to more complex situations to get desired results in simulated or real situations. These real situations are more complex:

Compare/contrast Patients

See activity in handout.
Stage 3 Complexities

Definition:
The expert critical thinker knows there are many options for problems, issues, and dilemmas, and then selects one or more.
“Think outside of the box.”

Faculty’s role:
Apply those skills and strategies to clinical situations that are not so well-defined, with lots of possible variables.

Questioning
Have them discuss:
• Why they made a particular decision.
• The assumptions made about the patient.
• The data they used to make the decision.
• Other interventions that might be possible and their consequences.
Practice Using CT for Better Patient Outcomes

Early Detection and Intervention

Exercise:
• Go into a patient’s room without any information about the patient.
• Do a quick 2-minute assessment.
• Take one manifestation and develop a concept map.

Assessing Edema: In General

Cardiac  Pulmonary  PVD  DVT

* Heart sounds  * Lung sounds  * Color of extremities  * Unilateral?
* Pulse  * Respiratory status  * Condition of skin  * Homans’ sign
* Weight  * Pulse Ox  * Pupils  * Pitting?
Stage 3 Complexities
Additional Strategies:

Move on to more complex tools.

Other Factors Influencing Critical Thinking

• Time – need time to think
• Stress – stress decreases intellectual processing

How Can Practice and Education Partner?

• Rethink their partnership in the education of students.
• Shift the attitude that students are guests in the clinical environment but rather practice and education work together to educate our future professionals.
• This is the kind of attitude shift that is occurring with the Designated Education Units (DEUs).
• You don’t need to have a DEU to make this shift.
How Can Practice and Education Partner?

• Join together at the table to determine the specific types of learning activities for students in the clinical that are directly related to their course outcomes/competencies and that guide the student's perceptual awareness and raise their thinking to higher-order thinking skills.

• Without higher order thinking, mistakes by new graduates and nurses will continue to result in poor patient outcomes.

Clinical Activity Portfolios

• Focus on your outcomes and competencies (noted by the Future of Nursing)
• Reflect those outcomes in your CET
• Develop assignments that focus on CT/Clinical Reasoning in your CET
• Students complete the assignments in clinical
• Faculty provide feedback “grade” the assignments DURING clinical time

Example Clinical Evaluation Tool

Handout examples.
**Evaluation from Schools**

- Higher scores on their standardized exams.
- Expanded knowledge of their scope of practice (no longer skills and nursing process only but quality improvement, safety measures related to the system, etc.)
- Increased retention and NCLEX pass-rates for "at-risk" students
- More ready for their first position
- Higher ratings from employers.
- Employers asking to see CAP on interviewing graduates
- Better communication between schools and hospitals as they develop the tools together

**Student Comments**

- I knew what was expected of me during clinical time.
- For the first time I felt really engaged in the clinical.
- This was the first time I felt challenged to apply what I had been learning in the classroom.
- This helped me know what was expected of me in the role of the nurse.
- Definitely helped me see the bigger picture.

**Student Comments**

- I liked reflecting on what I have done; how I can do better.
- I liked reading what I wrote at the beginning vs. at the end. I could see myself evolving into an RN.
- The portfolio guided me throughout the clinical.
- Expanded my understanding of certain interventions.
- Allowed me to anticipate possible complications, not just what is occurring.
Student Comments

• It helped me self-evaluate.
• It helped me reflect on my performance.
• I learned most aspects of nursing care thru this portfolio.
• It was nice not having “down” time.
• I enjoyed using the portfolio and bragged to other classes about being able to have this clinical tool.

Thinking Points

• What new ideas did you learn?
• What ideas will you implement?
• How will you implement them?

Thank you for coming ! !