Course objectives

Attendees will be able to:

- Identify the existing challenges for simulation use in home health care
- List reasons why simulation should be used to assess the competency of home health care nurses
- Identify steps required to develop and pilot a home health care simulation program
About us

- Privately owned home health care agency
- More than 240 service offices
- Currently serving clients in 26 states
- Employing more than 16,000 field employees

Seven specialty practices:
- Home Health
- Assistive Care
- Adult Nursing
- Pediatrics
- Habilitation Services
- Hospice
- Staffing

The private duty home health care nurse

- Day-to-day client interaction
- Providing or assisting client with chronic, complex care
The private duty home health care nurse

- Maintain optimum client health and well-being
- Monitor vital signs
- Administer medications and treatments
- Document a client's condition
- Report significant changes to the physician, clinical manager, and family
- Respond to emergency situations
- Assist with parent or care-giver teaching

How we prepare a nurse…

- One year of nursing experience required
- Must pass exam and skills lab
  or complete structured training course to include class, practice, testing and preceptorship with return demonstration of skills
- Office orientation (scheduling, policies etc)
- In-home orientation
## Our competency process

- **Task-oriented lab**  
  - On hire  
  - Annually  
- **Coding**  
  - Ped/Infant/Adult  
  - Basic/Trach/Vent/IV  
- **Precept/orientation**  
- **Annual evaluation**  
  - including home observation

### Developing a Simulation Program for Home Health Care

## Why did we need more?

- Families feeling uncomfortable with new learners practicing on their loved ones  
- Hospital nurses uncomfortable with transition to the new environment  
- Education tools to better prepare the nurse for dealing with family dynamics and psycho-social issues  
- Assessment and Education of techniques to better prepare the nurse for emergency situations

### Developing a Simulation Program for Home Care
PILOT:

- Enhance the competency process and ability to handle emergency situations with a pediatric clinical simulation lab (SIM Lab)
  - Add realism
  - See reaction times

SIM Lab planning:

- Development of the committee
  - Lab design and location
  - Vendor selection
  - Use of SIM Lab phases developed
- Grant application
- Policy and scenario development
- Instructor training
The SIM Lab

Pilot SIM Lab

- Grant funding assistance
- Six offices within vicinity of SIM Lab
- A group of clinical managers trained as instructors

- Phase one: March 1, 2011—June 1, 2011
  - Grant requirement to train 60 nurses in lab
Initial uses of the SIM Lab

- Teaching scenarios in conjunction with the content of our pediatric education program
- Initial and annual competency
- Re-education and reinforcement of skills for existing nurses

And the survey says....

- After their simulation training, 93% of the nurses expressed:
  - a higher level of confidence with their ability to
    - handle an emergency
    - identify a change in the client’s status
  - a higher comfort level with home health care in general

- 5% did not answer
- 2% stated no change in confidence level
Lessons learned…

- Slow process
- Need for a dedicated instructor
- Standardized lab request format
- Standardized review process
- Location
- Industry-wide home health care development
  - Gastrostomy
  - Functional tracheostomy
  - Ability to be on ventilator

Phase 2: January – June 2012

- SIM Lab shift scenarios
  - Multiple clients
  - Various psychosocial issues
  - Use of full charts (forms and documentation)
  - Variety of equipment
  - Potential/actual emergencies

*Goal: More confident nurse
Future SIM Lab pilot phases

- Equipment/process comparative analysis
- Transition-to-home scenarios
- Family training
- Other thoughts:
  - New graduate program
  - Role transition training (LPN to RN)
  - Clinical manager training
  - Client specific scenarios to reduce hospitalization

Growth

- Cost limiting
- Inability to share a lab
  - Setting
  - Equipment and supplies
  - Alterations made to simulator
  - Custom scenarios

***Evaluating the mobility possibilities
### In the meantime…

- Companywide simulation training
  - Scenario development
  - Moulage
  - Debriefing techniques
- Scenario vs. skills verification check
- Mechanism (Newsletter column) for sharing ‘best practices’ learned and developed
  - Moulage
  - Debriefing
  - Scenario sharing

### In the future…

- Research grants for growth assistance
- Develop SIM Labs in each region
  - North Carolina
  - Pennsylvania
- Expand to other specialty practices
  - Sept 2012: Adult nursing
## References
