

CLINICAL HANDOFF REPORT

Estimated Time: Flexible



Scan to Begin



CASE STUDY OVERVIEW

This case study has been designed with maximum flexibility for instructors to augment the reality of clinical handoff reports in the simulation lab or classroom setting. To enhance communication-related learning activities, instructors may select QR Codes for various report videos from the QR Code tables below. In addition, these report videos can be incorporated into group classroom activities by tapping on the iPad and displaying the media using a projector.

LEARNING OBJECTIVE

1. Practice verbal and written communication using videos that augment the reality of a manikin or standardized patient.

CURRICULUM MAPPING

WTCS RESPIRATORY THERAPY PROGRAM OUTCOMES

- Apply respiratory therapy concepts to patient care situations

QR CODE TABLE

RESPIRATORY THERAPY REPORTS			
RT - HECTOR 3 	RT - PATRICK 1 	RT - PATRICK 2 	RT - HECTOR 1 
RT - HECTOR 2 	RT - OLIVIA 1 	RT - OLIVIA 2 	RT - NOAH 1 
RT - OR NURSE 			

FACILITATOR INSTRUCTIONS


This case study was designed for maximum flexibility for Respiratory Therapy instructors to augment the reality of simulations and learning activities in the classroom and/or lab. QR Codes can be placed on a simulator, manikin, printed image of a “patient,” or given to a student who is playing the role of a “patient.”

Alternatively, in an instructor-led discussion, after scanning the QR Start Code, these videos can be accessed via tabs and buttons on the iPad. They can be displayed on a projector screen using a VGA adaptor connected to the iPad or via “Airplay” and an Apple TV.

SUGGESTED USES:


1. In a lab setting: See “Sample Teaching Plans” below.
2. In simulation: Choose a QR Code from above. Build a scenario around that report and your desired learning objectives. Have students get report prior to simulation by scanning the above start QR Code and then the QR Code you choose to base the scenario around.
3. In a classroom: Attach the iPad to the teaching station using a VGA connector or use “Airplay” associated with an Apple TV. Have students listen to a report. Then, discuss how to prioritize care based on report.

SAMPLE TEACHING PLAN – A

iPad Prompts		Facilitator Prompts & Discussion Points
1.	Class Preparation	Prior to class, create a “story” for each QR Code that you are using. Details should include past medical history, family history, surgical history, history of present illness, etc...
2.	Prebrief	Explain how to use the iPad to scan QR Codes. Divide students into pairs.
3.	Assign QR Codes	Assign and give each student a QR Code with the associated created story (see above). Allow students some time to become familiar with their assigned roles.
4.	Scan the Start QR Code	
5.	Discuss the “Learning Objective”	<p>LEARNING OBJECTIVE</p> <ol style="list-style-type: none"> 1. Obtain a patient history
6.	Obtain a patient history	Each student will take turns playing the role of the caregiver and the patient. When playing the patient, students should answer questions using the provided stories (see above) and improvise when needed. When playing the caregiver, student should ask questions appropriate for their patient.
7.	Debrief	<p>POSSIBLE DISCUSSION POINTS</p> <ul style="list-style-type: none"> • How did you feel the patient history taking went? • Relate discussion to learning objective. • What findings did you discover with your questions?

		<ul style="list-style-type: none"> • Did you change your questions or questioning technique based upon your patient? If so, why and/or how? • What are your concerns based off your questioning? • If you were to assess your patient at this time, what would be your priorities and why? • If you could re-do your history taking, is there anything you would change or improve? • Take away: What have you learned from this activity that you will take to your clinical practice?
<p>8.</p>	<p>End Scenario</p>	<ul style="list-style-type: none"> • Students can exit at any time by tapping the Exit tab and following instructions. • Please have each student complete the provided survey.

SAMPLE TEACHING PLAN – B

iPad Prompts		Facilitator Prompts & Discussion Points
1.	Class Preparation	Prior to class, create a “story” for each QR Code that you are using. Details should include past medical history, history of present illness, and a problem that requires Provider notification.
2.	Prebrief	Explain how to use the iPad to scan QR Codes. Divide students into groups of 3.
3.	Assign QR Codes and Roles	<p>Assign and give each student a QR Code with the associated created story (see above). Allow students some time to become familiar with their assigned roles. Each student will take turns playing the role of caregiver, patient, and Provider. Assign students so that each threesome will play each role one time.</p> <ul style="list-style-type: none"> • When playing the patient, students should answer questions using the provided stories (see above) and improvise when needed. (Optional: Use the ARISE “Head to Toe” Assessment case study with a second iPad to assign realistic images and sounds for the assessment. Students can attach the QR Codes to their clothes.) • When playing the caregiver, students perform a basic assessment and ask questions appropriate for their patient. This is also the person that will use SBAR to notify the Provider about any problem(s). • When playing the Provider, students will listen to the SBAR and ask questions when/if data is missing.
4.	Scan the Start QR Code	

5.	Discuss the “Learning Objective”	<p>Learning Objective</p> <ol style="list-style-type: none"> 1. Use SBAR communication
6.	Obtain patient history & assess patient	<p>One student plays the role of the patient. One student plays the role of the caregiver. The student playing the Provider role should be secluded and not listening to the assessment/history taking. The caregiver will assess the patient and take a history.</p>
7.	Perform SBAR Communication	<p>Using the data gathered in Step 6, the “caregivers” will perform SBAR communication with the “Providers.” Do this at bedside so that patients can be a part of the process. During this time, have the “patients” perform a brief written critique of the “caregiver’s” SBAR skills.</p>
8.	Repeat	<p>Repeat the above process until all students have played each role one time.</p>
9.	Group Discussion	<p>Using the written critiques, have groups discuss the SBAR process prior to the large group Debrief.</p> <ul style="list-style-type: none"> • What went well? • What needs improvement? • How does SBAR aide or improve patient care? • Keeping SBAR in mind, if you could do any part of your assessment or history taking over, what would it be and why?
10.	Debrief	<p>Possible Discussion Points</p> <ul style="list-style-type: none"> • Relate discussion to learning objective. • How do you feel the SBAR communication went? • Were things missed in the assessment/history taking that could have altered the Provider’s recommendations? • In what other situations could SBAR be used to improve healthcare communications and how? • If you could re-do your SBAR, is there anything you would change or improve?

		<ul style="list-style-type: none"> • Take away: What have you learned from this activity that you will take to your clinical practice?
	<p>End Scenario</p>	<ul style="list-style-type: none"> • Students can exit at any time by tapping the Exit tab and following instructions. • Please have each student complete the provided survey.

SURVEY

Print this page and provide to students.

Students, please complete a brief (2-3 minute) survey regarding your experience with this ARISE simulation. There are two options:

1. Use QR Code: Survey
 - a. Note: You will need to download a QR Code reader/scanner onto your own device (smartphone or tablet). There are multiple free scanner apps available for both Android and Apple devices from the app store.
 - b. This QR Code will not work in the ARIS app.



2. Copy and paste the following survey link into your browser.
 - a. https://ircvtc.co1.qualtrics.com/SE/?SID=SV_6Mwfv98ShBfRnBX

REFERENCES

Dreifuerst, Kristina Thomas (2012). Using debriefing for meaningful learning to foster development of clinical reasoning in simulation. *Journal of Nursing Education*, 51(6), 326-333. doi:<http://dx.doi.org/10.3928/01484834-20120409-02>

International Nursing Association for Clinical Simulation and Learning (2016). *Standards of Practice: Simulation*. Downloaded from <http://www.inacsl.org/i4a/pages/index.cfm?pageid=3407>



This work by the Wisconsin Technical College System TAACCCT IV Consortium is licensed under a Creative Commons Attribution 4.0 International license.

Third party marks and brands are the property of their respective holders. Please respect the copyright and terms of use on any webpage links that may be included in this document.

This workforce product was funded by a grant awarded by the U.S. Department of Labor's Employment and Training Administration. The product was created by the grantee and does not necessarily reflect the official position of the U.S. Department of Labor. The U.S. Department of Labor makes no guarantees, warranties, or assurances of any kind, express or implied, with respect to such information, including any information on linked sites and including, but not limited to, accuracy of the information or its completeness, timeliness, usefulness, adequacy, continued availability, or ownership. This is an equal opportunity program. Assistive technologies are available upon request and include Voice/TTY (771 or 800-947-6644).c