

Setting the Stage for Embracing Diversity in Simulation: Development & Implementation of a Faculty Self-Assessment & Resource Guide

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BACKGROUND

- The American Association of Colleges of Nursing (AACN) and the National Academies of Science, Engineering and Medicine have emphasized the importance of preparing nursing students to care for diverse populations.
- Faculty often perceive they are ill-prepared to teach students the intricacies of providing patient-centered evidence-based care to diverse populations.

PURPOSE

- To develop a faculty self-assessment of perceived knowledge and understanding of caring for diverse populations based on Benner's Novice-to-Expert Model (1984).
- To develop a resource guide to facilitate an increase in faculty's knowledge, comfort, and ability to teach students to care for diverse populations during a simulation learning experience

METHODS

- Benner's Novice to Expert Model (1984) was used as a framework to develop the self-assessment and resource guide.
- Three populations (Indigenous, LGBTQ+, Neurodivergent) were initially selected to increase diversity in simulation scenarios while building inclusiveness and competence in nursing students caring for patients who identify as belonging to one of these populations.
- Faculty teaching simulation were asked to complete self-assessment activities and then use the guide to select resources that could facilitate their increase in knowledge and ability to teach students to care for these populations.
- Resources were stratified to align with the Novice to Expert Model.

PARTICIPANTS

- Faculty teaching Mental Health, Obstetrics and Pediatrics simulation scenarios to pre-licensure nursing student in one university located in the Midwestern United States.



Measurement: Readiness Ruler - Thermometer to measure self-perceived readiness, importance, confidence and competence in teaching students to care for diverse populations

Readiness Ruler

- How **ready** are you to teach students to care for patients of diverse backgrounds?
- How **important** is it to you to teach students to care for patients of diverse backgrounds?
- How **confident** are you in teaching students to care for patients of diverse backgrounds?
- Implicit Bias** is a form of bias that occurs automatically and unintentionally, affects judgments, decisions, and behaviors. (National Institutes of Health, <https://diversity.nih.gov/sociocultural-factors/implicit-bias>) **Knowing that everyone possesses implicit bias, how well do you feel you can teach students to care for patients of diverse backgrounds?**



Measurement: Self-Assessment Guided by Benner's Novice-to-Expert Model (1984)

- Reflect on your level of knowledge enabling you to teach students to care for patients who are members of indigenous, neurodivergent and LGBTQ+ populations.
- Consider your implicit and explicit biases towards these populations.
- Complete the Readiness Thermometer Rulers.
- Identify goals you may have in furthering your knowledge and understanding of these populations which will enable you to effectively teach students to care for these populations.
- Place an "X" in the blue box that most closely aligns with your self-perceived level of ability to teach students to care for these populations.
- Review the resources; select and review the materials that best align with your level of expertise and learning needs.

Self-Assessment	Novice	Advanced Beginner	Competent	Proficient	Expert
Use the definitions below* to rate your self-perceived ability to teach students, based on your knowledge, to care for the following populations:					
Indigenous					
Neurodivergent/ Autism Spectrum Disorder					
Pregnant couple identifies as LGBTQ+					
Based on your self-assessment, complete the recommended activities in the table below that align with your level of perceived ability.					
<small>*Novice: The novice has "no experience of the situations in which they are expected to perform" (Benner, 1984, p. 20) *Advanced Beginner: The advanced beginner "can demonstrate marginally acceptable performance" and has experienced "enough real situations to note the recurring meaningful situational components that are termed aspects of the situation" (Benner, 1984, p. 22). *Competent: The competent nurse has experienced similar situations for 2-3 years. They have a feeling of mastery. The competent nurse is able to handle many situations because they consciously and deliberately plan actions to achieve "efficiency and organization" (Benner, 1984, p. 27) *Proficient: The proficient nurse perceives situations as a whole. This occurs because they perceive its meaning in terms of long-term goals. They have learned from experience what typically happens in specific situations and can modify plans in response to these situations (Benner, 1984). *Expert: The expert, with extensive experience, has an "intuitive grasp of each situation and zeroes in on the accurate region of the problem without wasteful consideration of a large range of unfruitful...solutions" (Benner, 1984, p. 32)</small>					
<small>Benner, P. (1984). From novice to expert: Excellence and power in clinical nursing practice. Menlo Park: Addison-Wesley.</small>					

Based on your self-assessment, review the recommended resources in the table below that align with your perceived level of expertise. Review additional resources noted within and below the table to support your goals to enhance your knowledge.

Resources: Caring for Indigenous Persons	Novice	Advanced Beginner	Competent	Proficient	Expert
Historical Trauma in the American Indian Population – Access https://loyolanpath.com/ by selecting "Explore Specialty Topics".					
1. What is Historical Trauma?					
2. America's Great Indian Nations					
3. The Roots of Historical Trauma for Native Americans					
4. The Impact of Historical Trauma on Native American Populations					
5. Health Concerns and Treatment Strategies					
Beasley, C., Jones-Locklear, J., & Jacobs, M. A. (2021). Cultural competence with American Indian clients: Workforce and personal development. <i>North Carolina Medical Journal</i> , 82(6), 423-426. https://doi.org/10.18043/nmc.82.6.423					
Giordano, A. L., Prosek, E. A., Schmit, M. K., & Wester, K. L. (2020). "We are still here": Learning from Native American perspectives. <i>Journal of Counseling and Development</i> , 98, 159-171. https://doi.org/10.1002/jcad.12310					
Campaign for Action. (2023). Pathways to promote academic success for American Indian/Alaska Native nursing students: A mentoring curriculum for nursing faculty. https://campaignforaction.org/resource/ai-an-mentoring-curriculum-for-nursing-faculty/					
Pool, N. M. & Stauber, L. S. (2020). Tangled pasts, healthier futures: Nursing strategies to improve American Indian/Alaska Native health equity. <i>Nursing Inquiry</i> , 1-11. https://doi.org/10.1111/nin.12367					
Purtzer, M. A. & Thomas, J. T. (2020). What Native Americans want nurses to know: Attitudes and behaviors desired in client/nurse relationships. <i>Public Health Nursing</i> , 176-185. https://doi.org/10.1111/phn.12810					

RESULTS

Evaluation is in process.

LIMITATIONS

This project was implemented with faculty teaching simulation to pre-licensure students at one university.

CONCLUSION

- The faculty self-assessment and resource guide provides a systematic, theory-based, customized approach to increase one's knowledge and abilities for teaching students to care for diverse populations.
- While originally developed for faculty teaching simulation to pre-licensure nursing students, this could be used by faculty teaching in skills lab, the classroom or clinical setting, as well as in graduate programs.

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QR Code for Full Self-Assessment

