



WISCONSIN
UNIVERSITY OF WISCONSIN-MADISON



It's Time to Transform Baccalaureate Education in *Mental Health Nursing*

Linda Denise Oakley, PhD, PMHNP-BC

Zhiyuan Effy Yu, PhD, RN

Katherine Stahl, DNP Student, RN

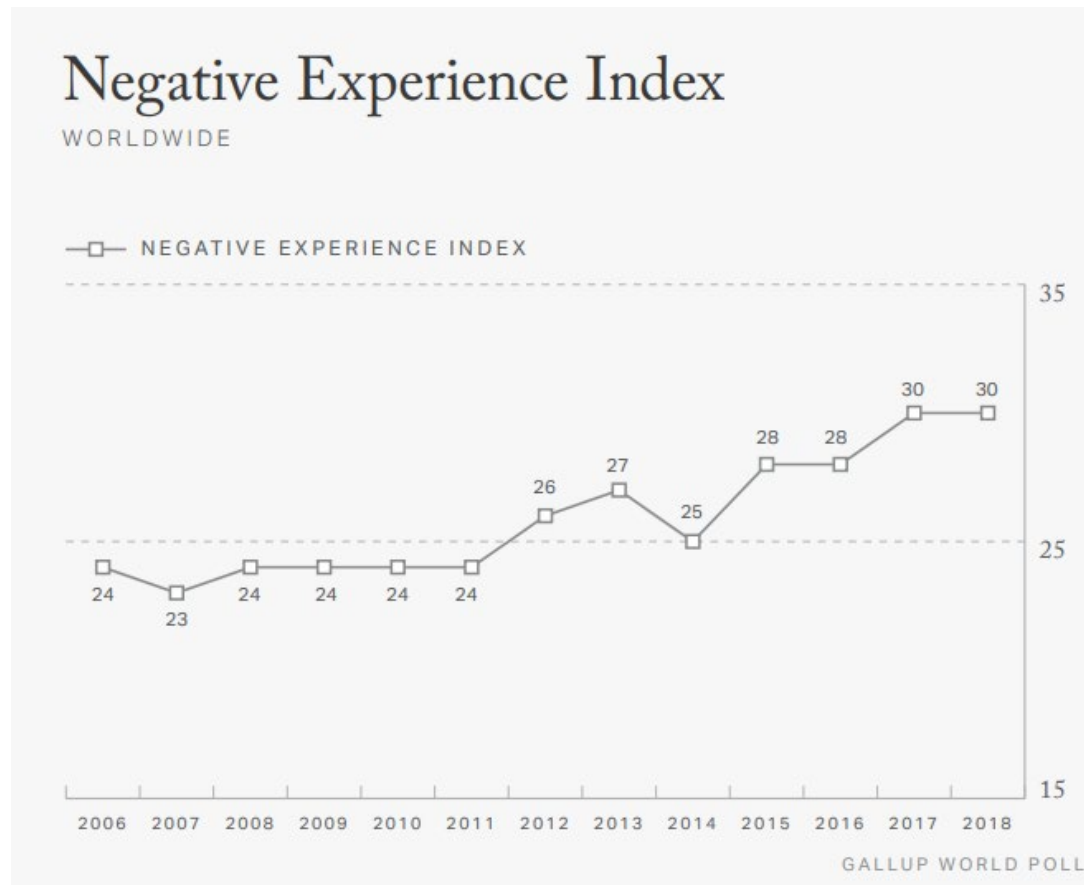


Overview

1. The call for MH workforce solutions
2. Nurse educators MH workforce solution
3. Two transformative simulation learning outcomes
 - A clinic MH nursing simulation assignment
 - A home visit MH nursing simulation assignment
4. APNA nurse educator feedback
5. Recommendation for point-of-care MH Nursing



GALLUP 2018 Global Survey: Negative Emotions You Experienced Yesterday





Call for MH Workforce Solutions

Stress

NEGATIVE EXPERIENCE INDEX QUESTIONS

- Did you experience the following feelings during a lot of the day yesterday?
How about physical pain?
- Did you experience the following feelings during a lot of the day yesterday?
How about worry?
- Did you experience the following feelings during a lot of the day yesterday?
How about sadness?
- Did you experience the following feelings during a lot of the day yesterday?
How about stress?
- Did you experience the following feelings during a lot of the day yesterday?
How about anger?

Cause

The Negative Experience Index score is the mean of all valid affirmative responses to these items multiplied by 100. Country-level index scores range from zero to 100. The higher the score, the more pervasive negative emotions are in a country. People's experiences with health problems and their ability to afford food are predictive of higher negative scores.



Nurse educators are the nursing workforce solution because
all nurses are MH nurses



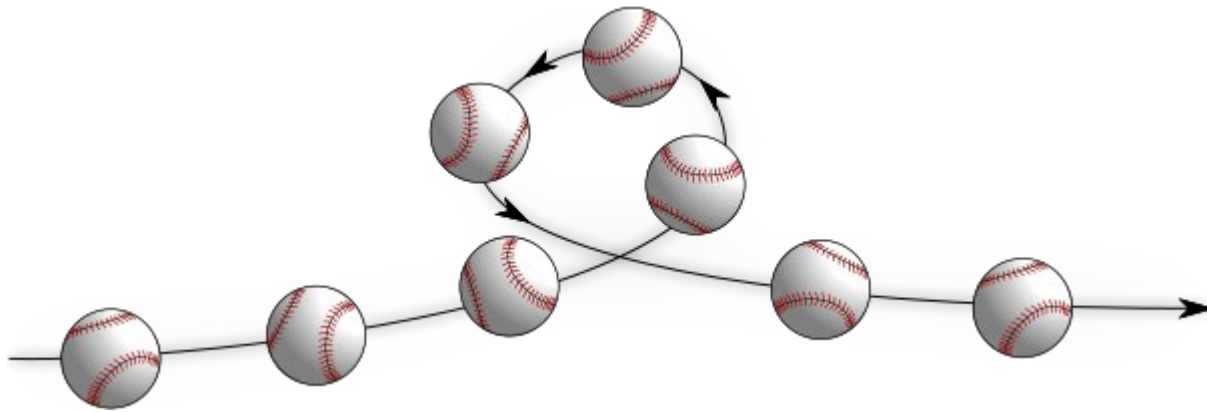


Findings from our transformative simulation learning assignments

1. A clinic nurse visit simulation with a standardized patient
2. A nurse home visit simulation with the patient, relative, & peer mentor

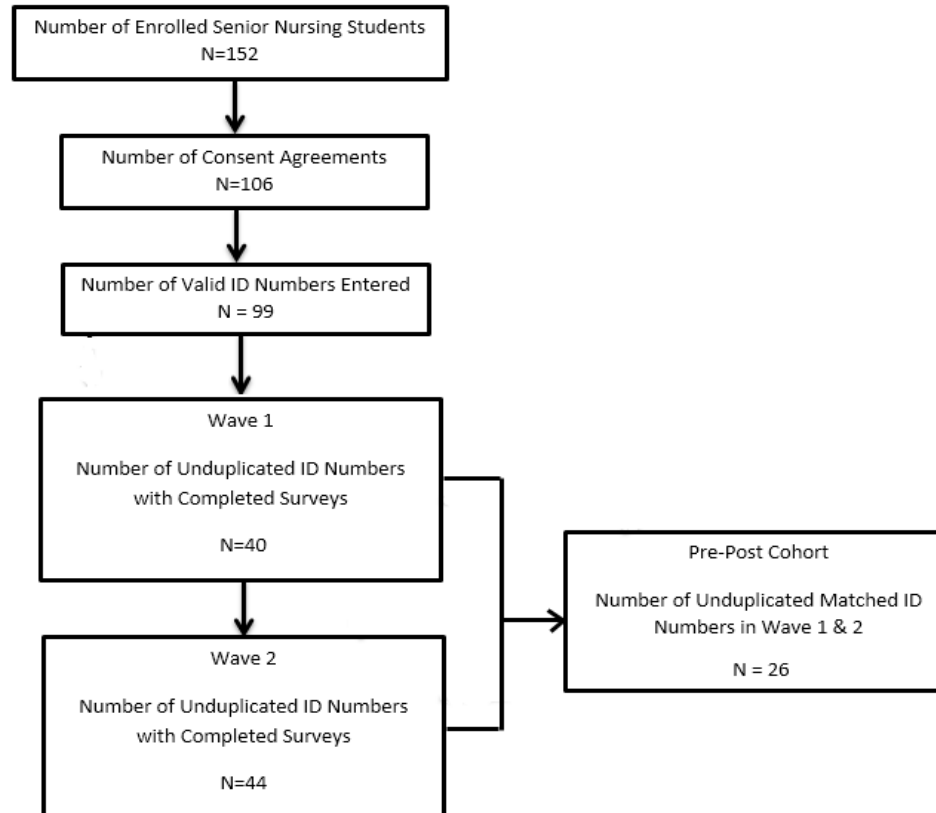


Simulation Curve Ball: MH Distress





Clinic Visit MH Nursing Simulation





Sample Characteristics	Pre Wave 1 (n = 40)	Post Wave 2 (n = 44)
Age (M, SD)	24.12 (7.02)	23.89 (6.13)
Final Grade Points ¹ (M, SD)	996.38 (3.64)	995.87 (3.93)
Current Employment		
Certified Nursing Assistance (n)	34.1% (14)	21.3% (10)
Student Nursing Assistance (n)	34.1% (14)	31.9% (15)
Mental Health Nursing ² (MHN)		
Student MHN Experience (% , n)	17.20 (7)	8.50 (4)
Intent to Specialize in MHN (M, SD)	2.42 (1.13)	2.36 (0.97)
Interest in MHN (M, SD)	3.34 (1.02)	3.25 (0.94)



Table 1

Sample Characteristics	Pre Wave 1 (n = 40)	Post Wave 2 (n = 44)
Learning Activity Effectiveness ³ (M, SD)		
Twenty-Minute Lectures	3.51 (1.08)	3.63 (1.20)
Web Based Response System	4.00 (1.20)	3.28 (0.96)
Standardized Patient Simulation	3.12 (1.64)	4.33 (1.15)
Student Role Play Simulation	3.00 (1.64)	4.07 (1.22)
Simulated Electronic Medical Record	2.37 (1.48)	2.93 (0.96)
Self-Reflection Individual Papers	3.56 (1.12)	4.17 (0.93)
Self-Reflection Group Seminars	2.93 (1.59)	3.88 (0.93)
Self-Evaluation Audio-Video Program	2.20 (1.62)	4.07 (1.11)
Note: ¹ Maximum possible total grade points = 1,000, ² Due to missing data percent totals equal less than 100, ³ Maximum possible item rating = 5		



Table 2
Standardized Measures of Confidence, Competence, Readiness

Self-View (SV) and Self-Directed Learning Readiness Scale (SDLRS) Scores (M, SD)

Variable	Pre Wave 1 (n = 40)	Post Wave 2 (n = 44)	Zc (p-value)
SV- Confidence Competence →	4.71(1.36)	6.14(1.19)	-12.066, p<.001
SDLRS- Self Management	39.00(4.50)	38.78(3.84)	.367, p=.712
SDLRS- Desire for Learning	37.15(3.26)	36.21(2.85)	1.979, p=.046
SDLRS- Self Control	41.92(3.54)	41.43(3.54)	.872, p=.382
SDLRS-Total Score	118.40 (9.71)	116.64 (9.72)	1.207, p=.226



Patient Vignette	Wave 1 (n = 40)	Wave 2 (n = 44)	Adjusted c2 test (df) (p-value)
1. What is your immediate nursing assessment priority?	60% (24)	77% (34)	4.525 (2) P = 0.10
1. What is your immediate nursing care priority?	20% (8)	16% (7)	0.239 (2) P = 0.88
1. Which of the following is the best rationale for this nurse response: “Let’s take a few minutes to talk about any concerns you may have”	33% (13)	30% (13)	2.086 (2) P = 0.35



Clinic Visit Reflections

“I felt like I was not completely listening and processing what she was saying. I think I was so focused on asking the right questions which I prepared from her history and background that I forgot to listen... I completely missed several key opportunities during my interview...”

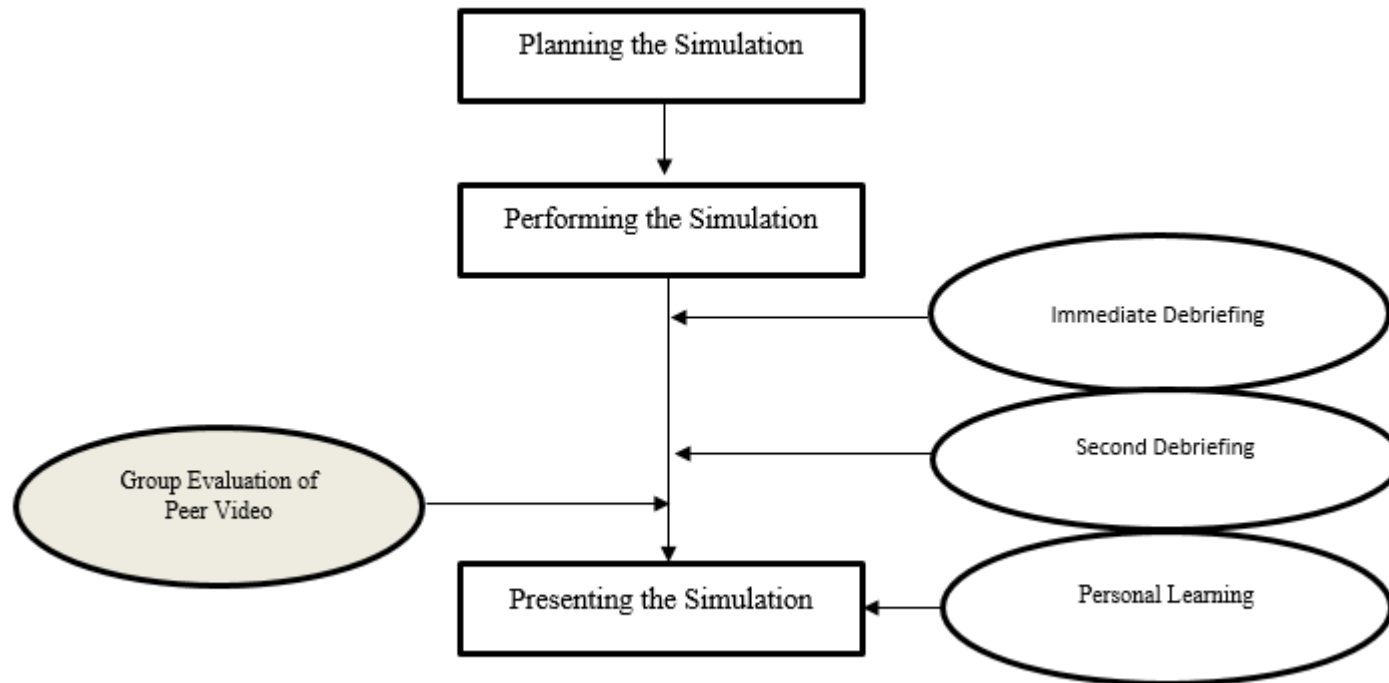
“Overall, despite the stress and worry over this assignment, I would say it was a beneficial experience. Not only did it calm some of my nerves, it gave me a chance to see myself interacting with a patient and it made me aware of things I can change... and that I should listen to the patient and be more empathetic”

“I think this opportunity really helped me and was a great learning experience. The main thing that I learned was that you cannot really be prepared for a mental health assessment as distress could happen at any moment. I found it hard to prepare and only made a short list of questions that I could potentially ask”

“This simulation activity was an entirely new style of learning for me as it forced me to do and then learn from doing. I had to apply knowledge that I had learned in lecture, but I realized, no matter how much I study every patient is unique”

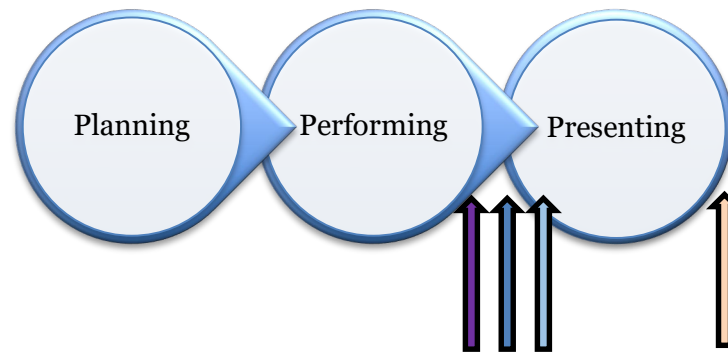


Home Visit MH Nursing Simulation





Evaluation of Simulation Learning Effectiveness



Procedures:

- Coded Key Phrases
- Level of Learning
- Formulated Meanings





Question 1

Essential	1. What is the first thing that comes to mind about this simulation experience?	Formulated Meaning
9	“It was not easy to address our concerns with the patient because she did not want to ‘come down’ from her manic episode”	Assessment was difficult
9	“It was interesting to kind of form a background for our patient and see how things played out”	Person first narrative

* Arranged by levels of learning, from recognition, application to meaning.



Second Week Debriefing

Item	Minimum	Mean	Maximum
Helpfulness of simulation learning in generally	2.00	5.61	7.00
Helpfulness of home visit simulation	1.00	5.35	7.00
Helpfulness of simulation learning for mental health	1.00	5.19	7.00
Preparedness for the simulation	1.00	5.66	7.00



Second Week Debriefing

Lessons Learned-*Planning*

Essential	Statement	Formulated Meaning
9	“While planning the simulation we had to create a health barrier for the client. For our simulation, we chose asthma. Although it’s a physiological health concern, I learned how it can impact the client psychologically as well”	Mind-body connections
9	“I learned more about what a home visit is like”	Knowledge Development



Second Week Debriefing

Lessons Learned-*Performing*

Essentials	Student Comment	Formulated Meaning
9	<p>“You also have to recognize your biases so they don't affect the way you care for your patient.”</p> <p>“When working with patients that are difficult and you do not know what to say, listening will make all the difference.”</p>	<p>Shows awareness of healthcare professionals' beliefs and values and how they impact health care;</p> <p>Demonstrates engagement in caring and healing techniques that promote therapeutic nurse-patient relationship</p>
9	<p>“It is hard to ever know what a patient is thinking; being open to listening to them is the best way to find out. We didn't know what our patient was going to say or do, we had to listen and wait to see.”</p>	<p>Demonstrate tolerance for the ambiguity and unpredictability of the world and its effect on the healthcare system as related to nursing practice</p>



Second Week Debriefing

Lessons Learned-*Presenting*

Essentials	Student Comment	Formulated Meaning
9	“I think the most important part about the simulation is understanding that the most important thing to do is treat the patient and not the illness. It is easier to treat the patient once you get to know them and not just the symptoms of the disease.”	-Demonstrates application of the nursing profession, practice, & performance by identifying the importance of assessing and treating the patient rather than solely the mental health diagnosis.
9	“In the moment, it can be difficult to address everything. Reflecting on this experience is giving me the tools to better prepare myself and help my patient in the future.”	-Demonstrates application of a psychosocial assessment, clinical nursing judgment, and the use of a mental health toolkit.
6	“How to efficiently give constructive feedback.”	-Demonstrates a task-focused and novice approach to nursing and interprofessional practice; moreover, this learner recognizes the importance of effective communication and feedback.



Second Week Debriefing

Lessons Learned-*Concerns*

Comment	Gap	Formulated Meaning
“Having a prepared situation for us would help us learn how to handle situations that we may not be expecting and avoid stereotyping about mental health. It also would be more helpful for all of us to be able to be the nurse”	Nurse	Nurses learned more
“I really like the assignment. Giving us time off to work on it our of class was helpful because that is where we really become comfortable with the assignment”	Group	Need time to plan



Poster Fair **Personal Learning**

MH *Nursing Actions*

Essential	Comment	Formulated Meaning
9	“...helped me visualize how to notice and address symptoms of major depression...”	Confidence
9	“I thought <u>the ABC’s</u> were helpful reminder of actions the nurse can take in assessment; many hospitalized patients will have some sort of mental health condition in this time of stress”	Toolkit
6	“It’s important to gain a “snap shot” of the day-in-the-life of the client, what the client wants or needs to improve themselves while living with a disease”	Person-first Context



APNA Feedback Home Visit Simulation

- October 2-5, 2019 APNA Annual Conference
- N=32 Completed Surveys
- N=27 Currently Teaching MH Nursing
- Take Aways from our presentation:
 - No MH clinical is upsetting and shameful.
 - Finding an effective alternative to clinical is essential.
 - Great idea for complex application of learning.
 - Amazing you did this!
 - It worked!
 - Semester long assignment?



AACN Population Health: Reconceptualizing Point of Care

- Our findings support research showing simulation learning is learning effective for nursing students
- Education in MH nursing helps develop nursing judgment, nursing confidence, and ethics
- It's time to transform baccalaureate education in MH nursing and prepare nurses to deliver POC MH nursing



ldoakley@wisc.edu

Thank you

