

# Simulation-Based Education

## Visioning its Role in Health Social Work

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## Acknowledgement

I acknowledge the traditional custodians of the land, pay respect to Elders past and present, and extend that respect to other Indigenous Australians.



#### **Abstract**

**Well-designed simulation-based education** (SBE) provides an innovative opportunity to engage social work students and practitioners in **transformative learning**, with the aim of increasing their capacity to be more **effective**, **ethical and skilled agents of change** when working across the **micro**, **meso and macro spheres** of practice.

This paper will specifically explore the potential for simulation to enhance the capacity of social work students and practitioners working in increasingly complex and demanding health contexts.

#### Opportunities to be explored include SBE for use in:

- field placement preparation;
- interprofessional learning and education in both university and practice settings;
- University-Organisation partnerships in the development and delivery of in-service training;
   and
- the positioning of Social Work as a leading profession in the bourgeoning field of Healthcare Simulation debriefing.



## Abstract cont.

Simulation has been defined as a technique "to replace or amplify real experiences with guided experiences, often immersive in nature, that evoke or replicate substantial aspects of the real world in a fully interactive fashion" (Gaba, 2004, p. i2).

Role-play is one type of Simulated Learning Method, which has a long history in social work education, particularly in the form of peer-to-peer or student-to-student role-play. In contrast, a simulated or standardised patient (SP), defined as a "person trained to portray a patient in a clinical scenario for educational purposes" (Nestel et al., 2011, p. 1), can provide a more realistic portrayal of patient or client behavourial, psychological and emotional issues; as well as being trained to provide feedback to students on their performance.

The growing body of literature, most notably from medicine, supports SBE, including the use SPs, as a means of developing learners' skills, whilst meeting the **ethical imperative to do no harm** to 'real' patients (Nestel et al., 2011). **SBE facilitates a learner-centred approach "...while remaining patient-focused"**, which can be difficult to achieve in a real practice setting (Nestel et al., 2011, p. 1).

This presentation draws on the author's work leading the Simulated Learning Environment (SLE) Project, which has involved the construction of the SLE Practice Learning Centre at Griffith University's Logan Campus; and the subsequent development and implementation of simulation within the social work, nursing and midwifery programs.



## **Presentation Overview**

- Simulation: A brief intro
- 1. Background: HWA Simulated Learning Environments Project
- Simulation for Change: Transformative Learning through Post-Simulation Critical Reflection
- 2. Visioning its Role in Health Social Work



Section 1

# SIMULATION: A BRIEF INTRO



#### What is Simulation?

- Technique "to replace or amplify real experiences with guided experiences, often immersive in nature, that evoke or replicate substantial aspects of the real world in a fully interactive fashion" (Gaba, 2004, p. i2).
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- In contrast, a simulated or standardised patient (SP), defined as a "person trained to portray a patient in a clinical scenario for educational purposes" (Nestel et al., 2011, p. 1), can provide a more realistic portrayal of patient or client behavourial, psychological and emotional issues; as well as being trained to provide feedback to students/learners on their performance.



#### What is Simulation?

The growing body of literature supports SBE, including the use SPs, as a means of:

- developing learners' skills, whilst meeting the ethical imperative to do no harm to 'real' patients (Nestel et al., 2011).
- SBE facilitates a learner-centred approach "...while remaining patient-focused", which can be difficult to achieve in a real practice setting (Nestel et al., 2011, p. 1).



Section 2

# **BACKGROUND: SLE PROJECT**



## Why the project?

#### Transformative Simulated Learning with Social Work, Nursing & Midwifery

- Social Workers are ethically mandated to work across the micro, messo and macro spheres of practice, maintaining a dual focus on:
  - » working to improve well-being and functioning; and
  - » identifying and working to address broader systemic issues which create inequity, marginalization, discrimination and injustice.
- This complex work with vulnerable and diverse populations, requires highly developed interpersonal and communication skills.
- The need for students and graduates to work effectively and respectfully within an interprofessional context provided further impetus for this collaborative project.
- How do we educate the next generation of knowledgeable, skilled, ethical, influential and effective agents of social change?



## Health Workforce Australia SLE Project

#### Simulated Learning Environments (SLE) Program

#### This was part of a broader collaborative project between:

- » School of Human Services and Social Work (Logan) Project Lead
- » School of Nursing and Midwifery (Logan)
- » Queensland Health (Metro South Hospital and Health Service)

#### The SLE project involved:

- 1. Construction of a purpose-built SLE Practice Learning Centre, operated by the School of Human Services and Social Work (completed 2013);
- Development and integration of simulated learning methods within the social work, nursing and midwifery programs (2013 – 2014);
- 3. Simulated Learning workshops/sessions with **practitioners**.







## **SLE Practice Learning Centre Team**



Amanda Probert

Director, SLE Practice Learning Centre

Lecturer, Simulated Learning



Staś Wiatrowski
Associate Lecturer, Simulated Learning



Ben Haigh

Audio-Visual Technician, Simulated Learning

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## Simulated Learning Environment (SLE)

- Purpose built for simulations designed to enhance learners' interpersonal, communication & practice skills
- Fluid space able to be furnished and 'dressed' through props to increase realism of the practice environment
- Equipped with audio-visual capabilities to observe, record and playback sessions (for video-assisted debriefing)
- Encourages learners to be mindful of the importance of creating physically and emotionally safe spaces for themselves and the people they work with
- Engage in transformative learning through post-simulation CRITICAL reflection (values, beliefs & assumptions made explicit; deconstructed & reconstructed)



## Simulation within Human Services & Social Work

#### Bachelor of Social Work (4 year program)

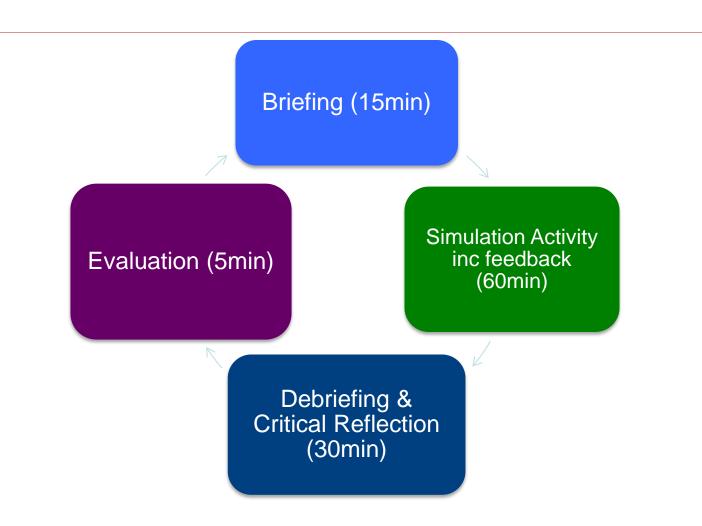
- Year 1: Interpersonal Skills
- Year 2: Case Management
- Year 2: Group Facilitation
- Year 2: Working in Communities
- Year 2: Working in Organisations
- Year 3/4: Counselling Individuals & Families
- Year 4: Social Work Field Placement 2 (Learning Circles)

## Master of Social Work - Qualifying (2 year program)

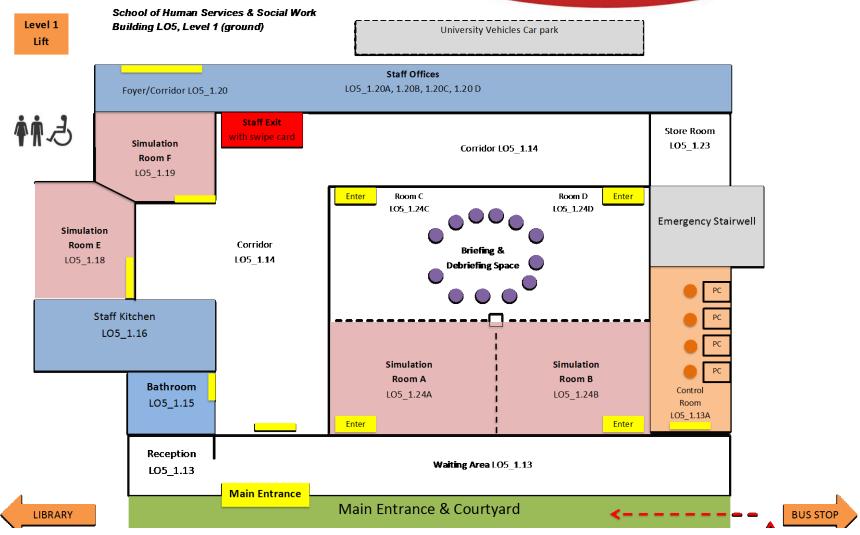
 Year 1: Social Work in Context – Interpersonal & Communication Skills Intensive



## Example 2 hour simulation workshop









## Control Room Observation: Faculty & Learners







## Simulation Rooms in Action (Nursing student models)



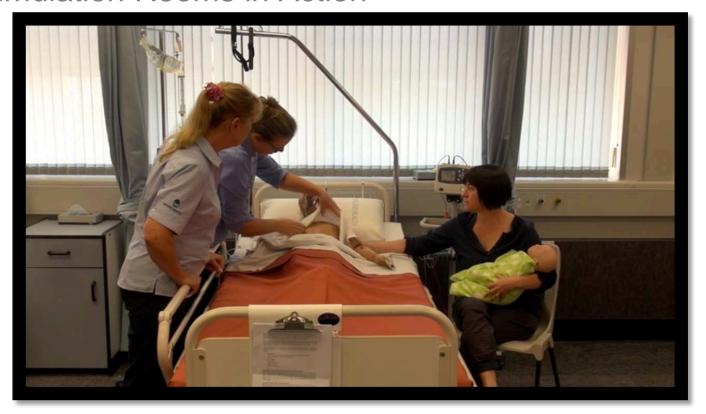








## Simulation Rooms in Action



...audio-visual system now linked to simulated hospital ward in School of Nursing & Midwifery, allowing livestreaming to SLE.



Section 3

# TRANSFORMATIVE LEARNING



## Core Concepts Underpinning Transformational Learning





## Transformative Learning Through Critical Reflection

• "...what makes such reflection critical is the focus on power which allows the reflective process to be transformative, especially when linked with the basic ideas of critical theory" (Fook & Askeland, 2007, p. 522).

 "...critical reflection must incorporate an understanding of personal experiences within social, cultural and structural contexts" (Fook & Askeland, 2007, p. 522).



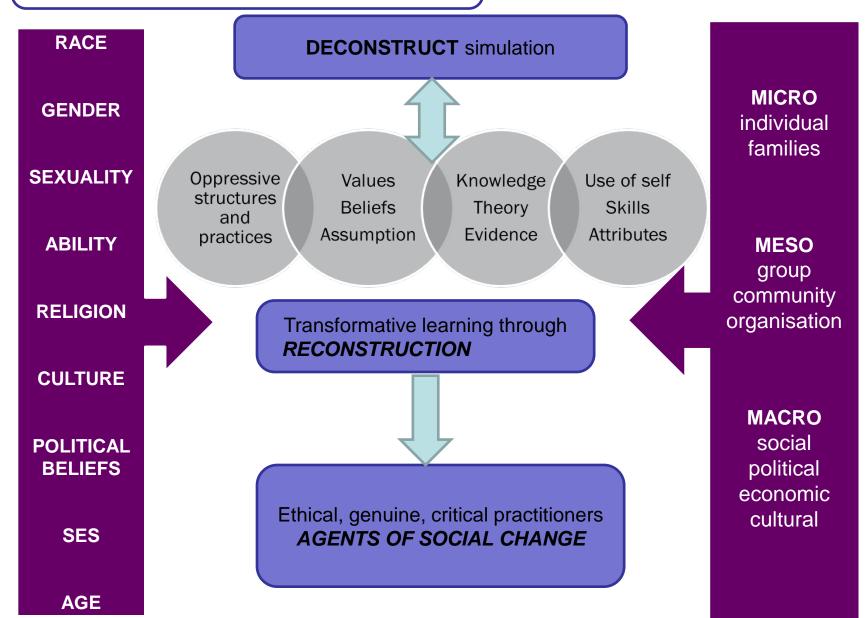
## Transformative Learning Through Critical Reflection

• "... process is transformative in that it allows a fundamental reworking of experience (in an enabling way), which also functions as to provide new guidelines for action and an improvement of practice. In this way critical reflection can be applied to professional learning but also to the bigger task of living" (Fook, 2007, p. 7).

"Ultimately, through critical reflection on deep assumptions, especially about the social world and the individual person's connection with it, a person should be able to become more empowered in acting within and upon her or his social world" (Fook & Askeland, 2007, p. 522).

## Critical Reflection Framework for Transformative Learning







Section 4

# SBE: VISIONING ITS ROLE IN HEALTH SOCIAL WORK

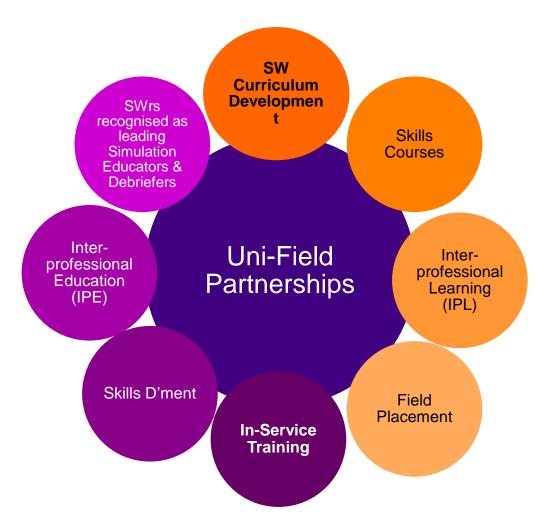


## **Guiding Questions**

- What is the vision of Health Social Work?
- How do we work towards that vision?
- What do Health Social Workers need now and into the future to be knowledgeable, skilled, ethical, effective & influential?
- Is there a way for universities and the field to work more closely as we progress towards this vision?
- What's the role of simulation-based education in undergraduate, post-graduate and in-service?



## Simulation-Based Education in Health Social Work





## Resources: NHET-Sim Program (free until 31 Dec)

#### National Health Education & Training in Simulation (NHET-Sim) Program http://www.nhet-sim.edu.au

#### **Core Modules**

- » C1: Simulation-based education Contemporary issues for the health professions
- » C2: Being a simulation educator

#### **Elective Modules**

- » S1: Being a simulation technician
- » S2: Simulator fundamentals
- » S3: Technology-based simulators & simulations
- » S4: Delivering technology-based simulations
- » S5: Simulated patient methodology
- » S6: Patient focused simulations
- » S7: Virtual environments
- » S8: Simulated Learning Environments: Program management
- » S9: Debriefing in simulation
- » S10: Developing scenarios



## Questions?

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#### References & Resources

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