

Leveled Learning: Applying Benner's Novice to Expert Theory in Multi-Patient Simulation

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Upon completing their nursing degree, students enter clinical areas where they are expected to perform various duties, including delegating tasks and prioritizing patient care. To ensure that students are equipped with the necessary skills, the faculty identified the need to engage them in practical activities, demonstrating their ability to delegate and prioritize patient care. Additionally, the faculty aimed to provide novice nursing students with opportunities to work alongside more advanced nursing students and perform various skills. This activity exposed two levels of baccalaureate students to multi-patient simulation (MPS), which helped them gain valuable experience managing multiple patients collaboratively with activity objectives tailored to each level based on Benner's Novice to Expert Theory.

During the nursing program's first semester, students take a fundamentals practicum course. According to Benner's theory, these students are considered novices.¹ In the final semester, fourth-level nursing students take a transition to nursing practicum course, also known as capstone, and are considered advanced beginners. Both levels were expected to demonstrate a routine assessment and work collaboratively as part of the

healthcare team while fourth-level students were expected to prioritize appropriate assessments and interventions and identify tasks that can be legally, ethically, and safely delegated to novice, first-level students.

Students were pre-scheduled, with one fourth- and two first-level students assigned to one-hour blocks. Fourth-level students were also scheduled to be the "voice" of patients they did not provide care for. They followed a script developed by the faculty that outlined the patient's assessment findings to guide the students in their interactions during the simulation. All students were able to access the simulated patient records within the program's simulated EHR. Before the MPS, all students received a pre-briefing that explained the expectations of the students. It was emphasized that communication must occur amongst the team to determine which tasks and interventions could be safely delegated to the first-level student. Fourth-level students received education and reviewed delegation and prioritization as part of their capstone orientation before the MPS. Five medical cases with varying patient conditions were developed to allow students to experience and respond to scenarios encountered in clinical practice rang-

ing from common diagnoses to critical care. The MPS occurred in the nursing facility's skills lab, where students were expected to contact faculty via cell phone and communicate as they would in a clinical environment. The faculty acted as providers, pharmacy, lab, radiology, and other departments that students may need to notify for orders.

At the end of each MPS day, all the students who participated attended a post-clinical debriefing. The feedback from the students was overwhelmingly positive. The first-level students expressed feeling reassured working with the fourth-level students and were more confident in their ability to learn and advance within the program. The fourth-level students expressed that they felt a sense of satisfaction in demonstrating appropriate delegation to novice nursing students. They also pointed out that this opportunity gave them a simulated experience in which they could manage patient care as an interdisciplinary team member. The faculty noted that during the activity, the fourth-level students did an excellent job teaching and mentoring the first-level students throughout the simulated experience.

The use of this multi-patient simulation activity has dramatically improved the skills and confidence of nursing students, both novice and advanced beginners. By immersing students in realistic healthcare scenarios, students can build their knowledge and abilities in patient management, delegation, and prioritization. This approach fosters critical thinking and decision-making, allowing them to face complex patient care situations confidently. ■

References

Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice*. Addison-Wesley Publishing Company.