Does a Blended Learning model for an Introduction to Critical Care Course increase nurses' perceived knowledge and confidence in clinical practice?

INTRODUCTION

- During the coronavirus pandemic, rapid education of critical care nurses was deployed to ensure patient safety during the surge (Liu et. al. 2024).
- Newly hired nurses were expected to work with a new scope of practice with the expectation that skills would develop in the clinical environment (Critical Care Networks-National Nurse Leads (CC3N), 2020).
- A condensed one-day didactic version of our existing introduction course was delivered potentially impacting learner competence and confidence.
- Learner feedback supported the idea that recovery from the condensed version of the Introduction to Critical Care Course was essential.

METHODOLOGY

Utilising elements of the pre-pandemic course, a new curriculum was designed. This was trialled with two cohorts in 2023.

Four online
workbooks focusing
on the different
organ systems such
as Respiratory,
Cardiovascular,
Gastrointestinal,
Renal and
Neurological
System.



Four interactive scenario-based workshops with GSTT Specialist Teaching Input, Critical Care Learner Mentorship and Evidence Based Workshop with group poster presentations.



Completion of the
Critical Care
Network Leads
(CC3N) National
Competency
Framework for
Registered Nurses in
Adult Critical Care.

A Clinical Case Sudy Exam following a patient's journey from admission to discharge.

TEST

OBJECTIVES

To design a revised Introduction to Critical Care curriculum aligned with the CC3N step 1 national competencies by utilising different teaching methods in supporting the knowledge and confidence of newly hired nurses with no experience in Critical Care.

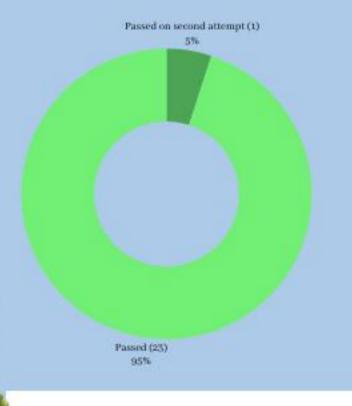
RESULTS

A. Immediately post-course:

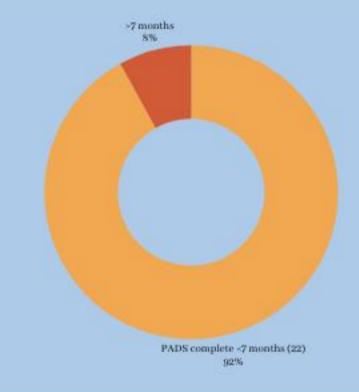
All learners (24) agreed that the content of the course is appropriate to their level of learning.

B. Three months post-course:

All learners (24) reported that the course improved their knowledge and confidence in caring for critically ill patients.



95% of learners passed the scenario-based exam with scores of more than 80%.



91.67% completed their PADS within seven months.

CONCLUSION

The recovery of the Introduction to Critical Care course by utilising a blended learning approach was a necessary initiative to enhance the knowledge, clinical practice and confidence of the new starters in Critical Care.

Developing the course has equipped learners who have no previous experience in Critical Care a good foundation of knowledge, skills and decision-making in caring for critically ill adults. which ultimately improves patient safety.

CURRENT DEVELOPMENT

Teaching methods like low fidelity video simulation of common clinical scenarios (intubation, fluid resuscitation, etc) and several more are now developed. Skills stations will also be utilised to provide a practical aspect to the course.

REFERENCES:

Liu, S. I., Greenway, A., Sobocinski, K., An, A., Winchell, R. J., & Barie, P. S. (2024). Rapid Critical Care Training for Nurses Deployed to Intensive Care Units During the COVID-19 Surge. American Journal of Critical Care, 33(2), 140–144. https://doi.org/10.4037/ajcc2024922

The Critical Care National Network Nurse Leads Forum (CC3N) (2020) Coronavirus: principles for increasing the nursing workforce in response to exceptional increased demand in adult critical care Specialty guides for management during the coronavirus pandemic Coronavirus: principles for increasing the nursing workforce in response to exceptional increased demand in adult critical care.

https://www.cc3n.org.uk/uploads/9/8/4/2/98425184/specialty_guide__critical_care_workforce_v1_25_ma

AUTHORS

Nicole Camille Flores
Joana Da Silva Maia
Samantha Murie
Email: CriticalCarePDT@gstt.nhs.uk