INTRODUCTION:

Nurses must maintain a high standard of competency and possess critical thinking skills and judgment that contribute to identifying significant changes in the patient’s status. Entry-level nurses often have the feeling of fear that they could harm a patient. New graduate nurses are concerned that they are unprepared and not able to communicate effectively with patients and family. This preconceived mindset eventually leads new graduates to question their competence. Self-confidence may also be potentially compromised, causing more distress and uncertainty.

The study focused on the debriefing process of simulation. Debriefing is a learner-centered reflective conversation that guides learners in generating new knowledge by analyzing the meaning and consequence of interventions during the simulation. Post-simulation debriefing is an integral part of the students’ learning, providing a reflection of the participants’ performance, insightful observation of the students, and integration of collaborative learning.

To augment the post-simulation debriefing process in the study, the SHARP tool was used to provide structured debriefing. As an acronym, SHARP describes steps of a successful debriefing. The SHARP tool was utilized in the post-simulation debriefing in one group to determine if it made a difference in student satisfaction and self-confidence.

PURPOSE:

The purpose of the study was to determine if there was a difference in nursing student satisfaction and self-confidence between two different post-simulation debriefing methods: structured post-simulation debriefing with the utilization of the SHARP tool (WS) and post-simulation free-from debriefing (NS).

METHODS & PARTICIPANTS:

This study utilized a quantitative, quasi-experimental design to examine if there was a difference in student satisfaction and self-confidence when the SHARP tool is used as a guide during post-simulation debriefing. Participants of the study (n = 58) included undergraduate nursing students who had simulation in the nursing curriculum. One group received the SHARP debriefing method (With SHARP, WS) and the other group received the regular debriefing method (No SHARP, NS). Student satisfaction and self-confidence were evaluated using the NLN’s Student Satisfaction and Self-Confidence in Learning questionnaire. The hard copies of the questionnaire were distributed after each post-simulation debriefing. IBM SPSS version 25 was used to perform the statistical tests. The study was approved by the American Sentinel University’s Institutional Review Board (IRB) and deemed exempt by the Roseman University of Health Science’s IRB.

RESULTS:

A Mann-Whitney U test was performed and revealed no significant difference in student satisfaction and self-confidence in WS (Md = 55.5, n = 28) and NS (Md = 60, n = 30), U = 365.500, z = -.804, p = .421 (p > .05). Even though the finding of the study did not yield a statistically significant difference between the WS and NS groups, both debriefing processes delivered student satisfaction and self-confidence in their learning. The results of the questionnaire for both groups yielded in general, agree to strongly agree answers from the participants. The high scores of the participants suggested that one debriefing method was not better than the other.

DEMOGRAPHICS:

To determine if there was a difference in satisfaction and self-confidence between two different post-simulation debriefing methods: structured post-simulation debriefing with the utilization of the SHARP tool (WS) and post-simulation free-from debriefing (NS), the Mann-Whitney U test was performed. The results revealed no statistically significant difference between the two debriefing methods. Both participants from the WS and NS groups reported satisfaction and self-confidence in their learning. The results of the questionnaire for both groups yielded in general, agree to strongly agree answers from the participants.

DISCUSSION:

The debriefing phase of simulation plays an important role in nursing education. More studies are supporting the use of simulation, which includes the debriefing component, as replacement for a portion of clinical hours in the curriculum. Further research regarding the different debriefing method is needed to understand and appreciate the various ways students learn from the debriefing experience.

Overall, the results validate the continued use of best practices during the debriefing experience. While the results of the study did not reveal a statistically significant difference between the two debriefing methods, both participants from the WS and NS groups reported satisfaction and self-confidence in learning. This study expands the research on the critical role of debriefing in improving the learning of undergraduate nursing students.