

Real Life Clinical Reasoning ScenarioTM Lesson Plans

Real Life Clinical Reasoning Scenarios give students opportunities to apply clinical reasoning skills to lifelike clinical situations in a “choose your own adventure” format through video, rich media, and branching logic. Because they can be viewed independently via the Internet and have a robust scoring mechanism, the scenarios were initially intended for individual student use. However, in the 3 years they have been available, we have learned that nurse educators are using the scenarios in other wonderful ways: in the classroom, in the lab, and beyond. We considered ways to bring those ideas to the rest of our user community. At the same time, we thought about the time challenges educators face. You are already the first professors on campus on Mondays and the last to leave on Fridays, with little or no release time to incorporate even the most exciting new technology into your curriculum. Borrowing from some of the innovative methods of Real Life faculty users across the country, we developed lesson plans for three classroom integration possibilities for all of the scenarios to help you incorporate Real Life into your classroom.

What's Included

For each of the 19 RN scenarios, you'll find three lesson plans. While there are similarities in format to the lesson plans, each is unique to the scenario and type of classroom experience suggested. All the lesson plans tell you:

- What resources you'll need to conduct the lesson.
- Objectives for the lesson.
- What students will be expected to do to prepare for the in-class lesson.
- What activities to have students engage in during class and the timing of those activities.
- What to evaluate for the lesson.
- Additional resources for that lesson.

Types of Lesson Plans

Clinical Day Replacement is useful when you must find ways to provide clinical experiences for your students but lack adequate clinical placements. Real Life insures that your students are exposed to clients with declining status, experiencing real emergencies. It will require students to reason their way through complex clinical situations they would most likely not encounter in a clinical environment. Students must prepare for the experience much as they would for a clinical day, then work individually, in small groups, and finally as a class to experience the scenario.

Flipped Classroom is useful for faculty who want students to actively participate in their learning during traditional lecture time. This class can be conducted in a lecture hall using this lesson plan. Students must come to class ready to practice what they've learned at home, either in their textbooks or by watching prerecorded lectures.

Small Group is useful for clinical post-conference, clinical makeup day, tutoring sessions, or as an activity for students waiting to go into the high-fidelity simulation lab.

Why Lesson Plans?

Many of us remember preparing transparencies for use on overhead projectors to go with our handwritten lecture notes. These were replaced by computers, presentation software, projectors, and light boards that enabled us to add visual elements and even video to our lectures. However, these technologies are only variations of the “banking” model of education in which students open their minds and professors pour in knowledge. Also, “Presenting ordered and classified information does little to prepare students to use knowledge” (Benner, Sutphen, Leonard, Day, 2010, p. 66). Increasingly, higher education is being asked to incorporate active learning strategies into the classroom. Many forces are at work in this movement, which is not new in educational circles but is new to higher education.

It can be frightening to give up the lecture notes and PowerPoints that serve as familiar road maps or scripts to the 2 hour lecture. Something has to replace them. Walking into a 2 hour active learning class period without a road map or guide is like asking an actor to go onstage without a script. Lesson plans are the road maps for an active learning classroom.

What is a Lesson Plan?

Borrowing from the primary and secondary school toolkit, the lesson plan is a way to prepare for a full classroom experience that requires activities for the learners and the teacher. It gives teachers and students, both active participants in the learning experience, a guide to the lesson. Lesson plans help teachers clarify the goals and objectives for the class period, the activities designed to meet those goals and objectives (for active or “flipped” learning, some of these happen outside of class), the sequence and duration of those activities, and resources required for the class period. They can serve as guides during class, a resource for the next person who teaches the course or a substitute teacher, and a historical document for teacher review and accreditation (Jensen, 2001).

A lesson plan is really the end point in the hard work of curriculum development. It conveys much about one’s philosophy of education (Jensen, 2001), and the lesson plans we’ve created are no different. Believing that nursing is first and foremost a practice discipline and borrowing heavily from the beliefs about nursing education in *Educating Nurses: A Call for Radical Transformation* (Benner, et. al., 2010), the lesson plans call for active participation of students and teachers in the learning that happens in the context of the clinical experience in each Real Life scenario. Learning takes place as students participate in an unfolding clinical situation using the video scenarios individually, in pairs, and in small and large groups. Far from a game, Real Life uses videos of live actors artfully portraying the nuances of the client-nurse interaction. “Students learn by, through, and in situations that involve particular patients” (Benner et. al., 2010, p. 86). Real Life gives faculty access to “particular patients” right in the classroom to enable the kind of situated learning so vital to a practice discipline.

There are three types of lesson plans developed for each scenario: the **Flipped Classroom**, the **Clinical Day Replacement**, and the **Small Group**. Each type follows the same format so they are easy to learn and follow.

FLIPPED CLASSROOM

The lecture remains the standard method of teaching content in most colleges. It is a time-, resource-, and space-efficient method of teaching, but nursing students believe they are on their own when it comes to integrating the information taught in the lecture classroom to clinical practice (Benner, et.al., 2010). “Flipping” the classroom can help alleviate this perceived disconnect between theory and practice. The basic concept is that students learn content outside of the classroom, through prerecorded lectures, readings, or other self-paced activities, and come to class to actively participate with the instructor and their peers in a “dynamic, interactive learning environment where the educator guides students as they apply concepts and engage creatively in the subject matter” (Flipped Learning Network, 2014).

Our **Flipped Classroom** lesson plans require students to do the work of content knowledge acquisition “up front” and at home. Many primary and secondary school educators tape their old lectures and encourage students to watch them at home prior to class, as well as read their textbooks, to prepare. This goes a long way toward satisfying students who feel that the role of the teacher is to impart knowledge. You may want to use your Learning Management System to make lectures available to those students who want to watch them, making this a pre-class requirement. The lesson plan guides you through a 2-hour classroom experience that will encourage your students to use what they’ve learned at home in a real patient situation.

Many faculty we’ve spoken to find that one by-product of using Real Life in this way is that students are able to hear how their colleagues are thinking about clinical problems. Along with many other benefits, it opens students’ eyes to gaps in their thinking compared to their peers.

CLINICAL DAY REPLACEMENT

Traditional clinical nursing education, in many ways, is a great example of active learning strategy. However, it is expensive and resource intensive, as is high-fidelity manikin-based simulation sometimes suggested as a replacement for bedside care experience. Importantly, high-fidelity, manikin-based simulation was only one of several “stations,” including Real Life, used in the National Council of State Boards of Nursing (NCSBN) National Simulation Study (2014) to replace traditional bedside clinical. Other less expensive simulation such as role-playing, standardized clients, screen-based simulation (Real Life), and skill stations made up the constellation of opportunities for students in the study.

The lesson plans for a **Clinical Day Replacement** are based on this concept, though heavily dependent on the less expensive and resource-intensive Real Life. The lesson plans suggest a variety of activities for the 6-hour class period, including individual, small group, and large group viewing of the scenarios. High-fidelity, manikin-based simulation can be a part of this activity, if available. The “station” approach can be used as an alternative with the lesson plans.

SMALL GROUP

Often, faculty find a need to teach small groups of students as a tutoring session, clinical pre- or post-conference, or as an activity while other students are rotating through the high-fidelity simulation lab. These lesson plans give an option for a 2-hour period that will engage students in clinical reasoning activities rather than reteaching sessions, as tutoring sessions often become, or unstructured discussion.

We Value Your Feedback

The lesson plans were derived from innovative classroom activities using Real Life developed by educators like you. We would love to know more about how you're using the scenarios in your classroom so we can expand these offerings in the future.

References

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