Sedgwick, M. Using simulation as a research tool to explore how rural RNs reason through clinical problems (Oral presentation)

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Background. Rural nursing practice requires registered nurses (RNs) to have an extensive depth and breadth of knowledge including knowledge associated with speciality or critical care practice areas. Additionally, the relational component of rural nursing care necessitates that RNs possess flexibility particularly in relation to boundary concerns. Rural RNs then must be nimble and responsive in their clinical decision making ability in order to deal with practice and work environment issues.

Aim. Given the complex and dynamic environment of rural nursing practice, the aim of this study was to explore rural hospital RNs' ability to reason through clinical problems they are confronted with during a typical shift.

Method. The method used was a melding of a controlled approach to content within a fully simulated laboratory setting and unstructured observation and semi-structured qualitative interviews.

Findings. The findings suggest that the number of years of work experience is not directly linked to the ability to engage in a high level of clinical reasoning; high levels of clinical reasoning requires creative thinking, self-awareness, reflection, and self-correction; and high levels of clinical reasoning is episodic in nature.

Implications. Rural nursing practice requires RNs to access and use in a meaningful way multiple types of information from a variety of sources. However, they must also have a balance between procedural and conceptual knowledge. That is, they need to be able to consider possible choices and if they are making the right choice given the situation. Advanced reasoning ability requires being able to fluidly move between procedural and conceptual knowledge. To further develop this ability, we believe regular and repeated opportunities to work through similar simulated cases followed by a focused discussion pertaining to their reasoning is required.