

# ROLE ASSIGNMENT IN SIMULATION

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## Session agenda

- What are roles in simulation
- The use of roles in simulation
- How others “do it”
- Research: what does it recommend regarding roles?
- Learning that takes place with role assignment
- Demonstration
  
- Questions??

## What are roles in simulation?

- Simulation is a unique learning environment
- Practice setting: often have one student assigned to one (or several) patient(s)/client(s)
- Simulation setting: often have several students assigned to one simulator
- If we have several students assigned to one client, is it realistic to have them all assigned to the same role?

## Why do we use roles in simulation?

- Often have groups assigned to simulator
- Can have anything from 1 to 8 students (or more!) assigned to the same simulator
- What do we do with all the students?
- ASSIGN THEM ROLES

## Use of roles in simulation

- Using roles or role-playing is a natural extension of simulation
- If you simulate the patient, then it's reasonable to assume that you need to simulate the health care provider

## Use of roles in simulation

- Most users of high-fidelity simulators have a good (or beginning) understanding of how to moulage or make the most of the simulator and the scenario
- ... but how do you simulate the health care provider?

## Support for roles

- Why do we need specific roles?
- Nikendei et al (2005), published article titled "Role-playing for more realistic technical skills training"
- Develops student interaction and communication skills of learners from different backgrounds

## Support for roles

- van Ments (1999.) "The effective use of role-play"
- Found that role-playing promoted active learning
- This is valuable for student development of skills, knowledge and attitude

## Support for roles

- Billings & Halstead (2005)
- Good for adult learners because of the connection to real-life situations and active participation

## Support for roles

- By using roles and role-playing, it acknowledges the importance of the social context of learning
- Allows student to take on roles in a secure environment
- A great match with the teaching philosophy behind simulation use!

## Reasons to assign roles

- Groups are too large – to make these more manageable
- If we want to simulate the health care environment, there are several other disciplines working together – maybe we can assign the various disciplines?
- To focus on a particular learner or skill
- Other reasons?

## What kind of roles do we use?

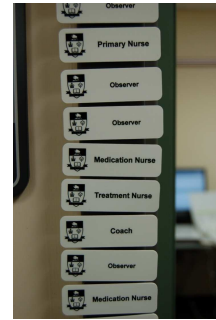
- In nursing schools or programs, the following is common:
  - Dividing the work of the nurse into roles
    - i.e. primary nurse, medication nurse, documentation nurse, treatment nurse, etc.
  - Assigning the role of the family
  - Assigning students to roles of another discipline
    - i.e. pharmacy, social work, etc.
  - The role of the patient
  - Observer – often not used to it's potential

## Developing roles

- Who chooses which roles to assign?
- How is this decision made?
- Are these developed ahead of time with the scenario in mind? The students in mind?

## Assigning roles

- How does a facilitator actually assign roles?
- Pre-planned?
- Tailored to the learner?
- Do you let the learners know ahead of time?
- Do you change roles during the simulation?



## Random assignment

- What if you don't have time or are working "on-the-fly"?
- Can you have the students choose their own roles?
- One option is to develop cue cards

Documentation Nurse GI bleed  
 ✓ responsible for documenting all pertinent data  
 ✓ keep log data to use visible for all team members  
 ✓ Report any problems you may see or changes to the scenario over time

Family member GI bleed  
 \* upset but voice your concerns about your husband receiving blood  
 \* Your great Aunt had problems once when she received blood  
 \* If things appear to worsen, immediately alert the team to

## Preparing the student for their role

- Do you prepare the student for their role?
- Why or why not?
- What type of preparation would you have available?

## Support for structure

- Kiger (2004); Nestel & Tierney (2007); Kneebone (2005); Shearer & Davidhizar (2003)
- All suggest that role-play and role assignment works best in preplanned and structured situations that are kept as realistic as possible
- Feedback and discussion regarding the experience is important

## Learning that takes place in roles

- Most learning focuses on the cognitive domain and cognitive outcomes
  - however*
- Using roles increases the affective domain of learning
  - ▣ Want learners to respond to what they learn, to value it, and to organize it

## What about the observer?

- Important role – do not ignore this
- Observation learning (social learning theory)
- Learning through observation involves for processes
  - ▣ Attention
  - ▣ Retention
  - ▣ Production
  - ▣ Motivation

## How to make the most of the observer role

- Attention
  - ▣ Observers cannot learn unless they pay attention to what's happening around them – METI has observation sheets available to keep them focused
- Retention
  - ▣ Observers must not only recognize the observed behavior but also remember it at some later time – by documenting the behaviours or videotaping the scenario, this can help with retention

## How to make the most of the observer role (cont'd)

- Production
  - ▣ Observers must be physically and/intellectually capable of producing the act. Must be of same skill level or year in program
- Motivation
  - ▣ In general, observers will perform the act only if they have some motivation or reason to do so. Be sure to include or highlight the observations in debriefing. This is not to be a meaningless exercise

## Pitfalls

- Students playing roles of other disciplines
- Students over-indulging in their roles
- Roles being vague or unclear
- Is it realistic to separate one nurse into several parts?

## Limitations to roles

- Some find it difficult as it requires some amount of acting
- Can feel unnatural or awkward
- Important to reinforce that role-play is a single part of a more comprehensive learning and communication process

## Recommendations

- Establish clear roles for simulation participants
- Give participants roles prior to start of simulation
- Pre-plan which roles you plan on using and why
- Give the observer clear direction as to what their role entails
- Debrief with the students their perceptions of their roles (bringing the pieces together)

## Demonstration

- I need five volunteers!
- GI bleed secondary to aspirin abuse SCE (state 1 only)
- What was the difference between both attempts at the scenario?

## Questions????

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