

FLIPPING THE CONFERENCE: CONTINUING EDUCATION FOR ADVANCED PRACTICE NURSES IN THE EMERGENCY CARE SETTING



Authors: Margaret J. Carman, DNP, ACNP-BC, ENP-BC, FAEN, and

Diane Fuller Switzer, DNP, ARNP, RN, FNP-BC, ENP-BC, ENP-C, CCRN, CEN, FAEN, Washington, DC, and Seattle, WA

Section Editors: Cindy D. Kumar, MSN, RN, AG-ACNP-BC, FNP-BC, ENP-C, and Darleen A. Williams, DNP, CNS, CEN, CCNS, CNS-BC, EMT-P

Advanced practice registered nurses (APRNs) are prepared in their graduate education to demonstrate competency by certifying in their selected role as a certified registered nurse anesthetist, certified nurse-midwife, clinical nurse specialist (CNS), or certified nurse practitioner to 1 of 6 populations (family/individual across the lifespan, adult-gerontology, pediatrics, neonatal, women's health/gender-related, or psychiatric/mental health).¹ Preparation in a specialty practice, such as emergency care, requires education and practice built upon and in addition to the education and practice of the APRN role and population focus.¹

The population of emergency care providers is heterogeneous, with a wide variety of postgraduate emergency specialized education options following completion of a primary nurse practitioner (NP) program. NPs working in the emergency setting may receive on-the-job training and/or attend emergency care continuing education programs. Others may pursue formal academic Emergency Nurse Practitioner (ENP) programs, postgraduate ENP certificate programs, or an emergency residency or fellowship. However, in a national study of APRNs practicing within this specialty, the majority of participants reported that the bulk of their specialty training occurs through

on-the-job training.² For CNSs, one can design an educational program with emergency-specific education and clinical hours in the emergency setting designed to meet the ENA CNS core competencies.³

Emergency care continuing education programs designed for NPs who are either working or desire to work in the emergency setting are in demand with the new Emergency Nurse Practitioner Certification (ENP-C) Examination.⁴ A requirement for NPs who are striving to meet eligibility for the ENP-C examination via Option 1⁴ consists of 30 continuing emergency care education hours in emergency care procedural skills. This requirement provides a great opportunity for ENA, as the professional organization for the specialty of emergency nursing, to develop new educational content that not only fills the gap between graduation and entry into competent emergency specialty advanced nursing practice but also meets the requirement for emergency care procedural skills. At the completion of an accredited APRN program, the graduate has been prepared to deliver care guided by core competencies for the role of NPs,⁵ CNSs,⁶ and population-focused NP competencies.⁷ Competencies for the CNS and the ENP in the emergency care setting are maintained by ENA.^{3,8}

In 2018, ENA demonstrated the commitment to continuing educational opportunities for APRNs by providing an emergency procedural and skills pre-session and a dedicated educational APRN track at the ENA 2018 annual conference. Because providing high-quality education within the confines of a few days at a conference may present logistical challenges, and learning may be limited in the volume of content delivered, the pre-session planning committee used a flipped classroom approach for both procedural skills education and in preparation for 2 simulation experiences.

Use of the Flipped Classroom for Conference Learning

The inaugural ENA 2018 APRN conference pre-session was intended to provide procedural skills education for novice as well as experienced nurse practitioners in emergency care.

Margaret J. Carman, *Member, Heart of Carolina Chapter*, is Director, Institute of Emergency Nursing Advanced Practice, Emergency Nurses Association, Schaumburg, IL, and Associate Professor, Georgetown University School of Nursing and Health Studies, Washington, DC.

Diane Fuller Switzer, *Member, Washington ENA Chapter*, is Assistant Clinical Professor, Seattle University College of Nursing, Seattle, WA, and Emergency Nurse Practitioner, Harborview Medical Center, Seattle, WA.

For correspondence, write: Margaret J. Carman, DNP, ACNP-BC, ENP-BC, FAEN, 1930 Briar Chapel Parkway, Chapel Hill, NC 27516; E-mail: Mc2300@gmail.com.

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The flipped classroom has been a popular approach to promoting student performance and evaluation for the past several years.⁹ Using this methodology, students come to the live class session more prepared and ready for active engagement, which is a benefit for experience in psychomotor skills training.¹⁰ By recording lecture content for the procedural portion of the 2018 pre-session, participants were able to review important aspects surrounding each skill, including indications and contraindications for the procedure, holistic patient management, and postprocedural diagnostics and therapy. The procedural portion consisted of an introduction to point of care ultrasound, and participants rotated through stations in groups of 5 to 6 individuals, utilizing point of care ultrasound with central line placements and lumbar puncture on adults and children. They also rotated through advanced airway, dental procedures, and head, eyes, ears, nose, and throat (HEENT) stations.

Participants also were provided with 2 written modules on the assessment and management of pediatric heat related illness¹¹ and patients with adrenal crisis¹² in preparation for 2 high-fidelity simulations intended to guide the development of advanced clinical reasoning and diagnostic decision making. Attendees joined in the simulations in groups of 5 to 6, assuming the role of NP in a rotating fashion, to gather patient history, perform physical assessment, review differential diagnoses, and form a diagnostic plan. Laboratory and imaging results were then provided so the group could discuss a therapeutic plan. The simulation terminated at the point when the patient was dispositioned from the emergency department and report was called to the accepting team.

Providing attendees with the materials for review enabled them to maximize their time spent on advanced practice skills. More importantly, faculty were able to engage them in meaningful ways to connect theoretical knowledge from the content with clinical application in performing procedures or managing the patients in simulations.

Evaluation of the Flipped Pre-session

Postconference evaluations were conducted to gain insight for future efforts to present meaningful APRN continuing education. Although this endeavor was not a formal research study, the results of participant surveys were enlightening and provide direction for future endeavors. The postconference evaluations will be used for developing future APRN offerings at the 2019 ENA annual conference.

Next Steps

Although procedural skills are commonly used in the emergency care setting, it cannot be emphasized enough that the value of APRN practice lies in the use of advanced clinical reasoning and diagnostic decision making that is grounded in scientific knowledge. Whereas the flipped classroom approach allowed participants to review the pathophysiological background, diagnostic considerations, and therapeutic aspects of the technical skills taught, application of skills in a simulation setting would provide context and allow for deep learning.

Future efforts to improve the conference learning environment will include presentation of technical skills training sessions early in the conference, followed by a variety of simulations in which those skills can be used to stabilize and treat patients with emergent conditions.

Continuing education for APRNs is required for renewal of primary certification as an NP or CNS. Gaining knowledge and expertise as a specialist in advanced emergency nursing can be achieved through continuing education offerings at professional nursing conferences. Conference offerings can be used to promote current best practices and high-quality education for practicing APRNs. Utilizing a flipped classroom, integrating procedural skills training with simulation exercises, and engaging NPs and CNSs together in clinical decision making with simulation exercises will meet the need for APRN continuing education specialized emergency education.

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Submissions to this column are encouraged and may be sent to
Cindy D. Kumar, MSN, RN, AG-ACNP-BC, FNP-BC, ENP-C
cindyk.JENAP@gmail.com
or
Darleen A. Williams, DNP, CNS, CEN, CCNS, CNS-BC, EMT-P
darleenw.JENAP@gmail.com