Introduction

Providing cardiopulmonary resuscitation is an essential skill for nurses. Too often the nurse has had limited experience with cardiac arrests leaving them to feel unprepared and anxious. A need for training was identified, focusing on the first five minutes of a RRT (rapid response team) or code before either team arrives. Mock codes with the use of simulation was initiated on the medical-surgical and telemetry units providing the necessary education and reinforcement of the skills required of licensed nurses.

Purpose and Objectives

Purpose: Using mock code simulation to improve responder performance during the first five minutes of a patient emergency.

Objectives:

• Identify the declining patient health status requiring urgent intervention.
• Execute the proper first responder procedure per hospital policy.
• Perform the appropriate interventions based upon patient assessment.
• Demonstrate the proper techniques of basic cardiac life support in a timely manner.

Methods

Target audience: Registered nurses
Settings: Medical-surgical and Telemetry units
Equipment: Sim Man 3, arrest cart, oxygen, suction, patient chart, patient scenario, surveys, and evaluations
Scenarios: Rapid Response- based scenario and a Code- based scenario

Methods:

An in situ mock code is held on random medical –surgical/telemetry units bi-monthly. Participants are asked to respond to two different scenarios. Each session is followed by debriefing, post survey and post evaluation. Time to perform CPR and defibrillation are recorded and evaluated for responder improvement. In addition, the participants level of confidence is measured pre and post mock code.

Findings

Demographics: 103 nurses participated in the Five Alive course. Fifty four percent had not been involved in simulation training prior to this course. Fifty two percent were ACLS certified.

Pre-post survey results:

• Nurses expressed more confidence in recognizing declining patient health status after the simulation training.
• Nurses were neutral towards or confident initiating the appropriate first responder interventions pre-simulation.
• The number of nurses who did not feel confident decreased after simulation while the number of nurses who felt very confident increased after training.

• Nurses demonstrated a 65% increase in 1 minute to CPR and a 67% increase in 3 minutes to defibrillation after the second scenario.

Discussion

Data revealed that an in situ simulation mock code, followed by video debriefing, is an effective tool for improving the performance of nurse responders time to CPR and defibrillation. In addition, it has demonstrated to be an effective tool in improving the nurse’s performance when responding to a patient in crisis.

We plan to continue offering the Five Alive Program as an effective training tool. Currently, we have initiated the Five Alive program system wide and after further analysis, we anticipate expanding the program to include outpatient departments and a full in situ simulation code beyond the first five minutes.