Dreams for the Future for Clinical Simulation

This special issue of Nursing Education Perspectives comes at an opportune time as nurse educators incorporate simulation into the curriculum and explore new clinical models for nursing education. In this issue, readers will find articles to enrich their teaching practices, discover new teaching approaches using simulation pedagogy, and learn more about selected student learning outcomes when simulation is used.

With an increased emphasis on faculty development, and more federally funded grant opportunities, nurse educators are learning more and more about the use and implementation of simulation. The second NLN grant, funded by Laerdal Medical Corporation, allowed nine simulation experts and eight international contributors to develop web-based courses to teach other educators about simulation design, implementation, and evaluation. In addition, a one-stop shopping website, the Simulation Innovation Resource Center (SIRC), was developed to serve as a resource center for educators using simulation to assist and support their work (http://sirc.nln.org/). These initiatives have greatly increased faculty opportunities to learn about, use, and implement simulation.

What does the future hold for simulation? In the near term, we will see the continuing use of simulation in nursing and health care education. Implementation started slowly, with a few states now allowing up to 25 percent of real clinical time to be accounted for through the use of simulation. Based on evidence and quality outcomes from the use of this pedagogy, simulation could eventually be used for the majority of clinical time in nursing education. We all recognize the problems brought about by decreased numbers of clinical sites, patient safety issues, and the many rules and regulations required by clinical agencies’ regulatory bodies and their effect on the amount and quality of education instructors can provide their students.

The question that remains unanswered is: “What do students need in real-world clinical practice that educators cannot simulate in an authentic, simulated environment using high-fidelity simulators, standardized patients, and other types of simulation experiences?”

Over time, more evidence will be disseminated on the use, implementation, and best practices of incorporating clinical simulation into a nursing curriculum. Many master’s, DNP, and PhD students are conducting their research on simulations. New findings, clinical outcomes, and evidence-based teaching practices using this pedagogy will become more prevalent through the work of our nurse educators and graduate students.

With improvements in faculty development, research, and technology, the future for high-fidelity simulators will only be brighter. Research and development in this hot topic area will lead to more sophisticated manikins and robots possessing even more realistic features and functionality. What is known as the high-fidelity simulator today will look simplistic when compared to the next generation of simulators in the years to come.

The future for clinical simulation is promising. I encourage you and all nurse educators to continue to use this pedagogy and explore how to best exploit this amazing technology in your teaching-learning practices.

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