the quality of the debrief, and its utility in a wider audience of debriefers.

REFERENCES

Introduction While considerations of the human rights and efforts to secure safety in medical care are being reinforced, nursing students without nurse licenses are facing a limit in acquiring practical nursing skills during students’ days.

In order to fill the gap with the basic skills required in clinical settings after graduation, simulation-based nursing education is conducted by reproducing scenes that can occur in actual clinical settings and using simulator.

In this study, we tried whether the simulator as the teaching materials was useful. And we used the instruction designs devised for the simulation-based educational purpose.

Methods
1. Subjects: 40 nursing students who already ended the clinical training for 1,260 hours
2. Study period: From November 2009 to March 2014
3. [Ethical considerations]
4. The open recruitment was carried out for a study cooperators. We obtained a written consent.
5. The study was conducted by ethics review board.
6. The Simulation Design Scale were translated into Japanese and used in the study with the approval of the author.
7. Instruction System Design
1. Set study goals.
2. Create a patient scenario according to the study goal using a Simulation Design Template.
3. Select equipment required to execute the simulation according to the scenario,
4. The setting time is 15 minutes.
5. Assess the conditions of each patient and report to the person playing the role of leader using
6. SBAR.
7. Debriefing: 30 minutes

Results
1. The study goal was set as ‘patient’s condition after operation can be assessed and reported.’
2. We created a scenario to observe and report conditions of a patient at 30 minutes after returning to a ward after operating surgery.
3. It took 13 minutes on average from assessment of the patient’s condition until reporting to the person playing the role of nurse leader using SBAR.
4. The debriefing was conducted for the methods and contents of patient observation and reporting.

5. They felt confused as SBAR is not normally R (recommended).
6. The SDS was 4.2/5 on average.

Discussion The issue is how to utilize it to achieve the best possible educational effect. We designed simulation-based learning using ISD. It was suggested that the simulator was utilized well as an educational material. It also suggested that video debriefing allows us to subjectively look back on our actions based on certain standards and shows the significance of those actions.

Conclusion This study suggested that instruction design need to simulation-based nursing education.

REFERENCE