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2019

## If You Can Dream It, You Can Do It: Building an Escape Room to Meet Learning Needs

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### Recommended Citation

Schulz, Katherine A. and Jennings, Melinda, "If You Can Dream It, You Can Do It: Building an Escape Room to Meet Learning Needs" (2019). *Nursing Posters*. 150.

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St. Cloud Hospital



# If You Can Dream It, You Can Do It: Building an Escape Room to Meet Learning Needs



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## Description of Project

Use an Escape Room as an effective learning strategy to fill a gap in knowledge and practice in a fun, interactive, and competitive learning atmosphere.

## Identified Learning Need

On the 2018 Medical Nursing Needs Assessment, medical nurses self-evaluated their competence about a variety of topics using Benner's novice-expert scale.

- 41% reported they were beginner/novice in Code Stroke
- 56% requested more education about Code Stroke
- Code Stroke was the top learning need identified on the Needs Assessment

One night early in the educational planning process, Schulz had a dream about a Code Stroke escape room. After discussing the idea and reading how Escape Rooms have been used in other educational settings, the authors decided to take a chance and develop an Escape Room to meet the objectives for the learning gaps of Code Stroke.

## References

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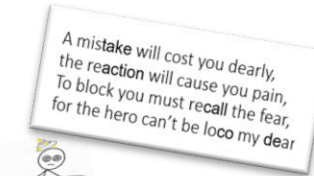
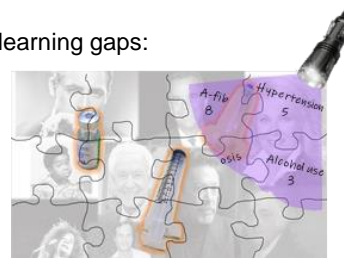
## Escape Room Puzzles

Three learning gaps were identified:

1. Identification of individual patient risk factors for stroke, as required by DMV Stroke Accreditation
2. Recognition of the Balance – Eyes symptoms from the recently changed BEFAST screen
3. Proper prioritization of nursing actions during a Code Stroke

Four puzzles were developed to fill these identified learning gaps:

- Nurses found puzzle pieces and everyday objects with numbers on them hidden around the Sim Room. The objects pictured in the puzzle showed them the code to the first lockbox.
- In the lockbox was a blacklight. After shining the blacklight on the puzzle, they found risk factors and numbers on each puzzle piece. The My Care Board contained hints about which risk factors this patient had, giving them the code to the next lockbox.
- In the lockbox was a pair of glasses with one lens smudged, a picture of a dizzy man, a picture of a glucometer with a reading of 88, and a poem with bold letters instructing them to “take action, call code.” After correctly calling a “Code Stroke” and the correct symptoms the patient had, they got the code to the last lockbox.
- This lockbox contained code stroke nursing actions on different colored pieces of paper. When prioritized correctly, the color names opened the last lock to “escape” the room.



- Call Code Stroke = R
- Call Provider = O
- Art Team Arrives = Y
- CT = G
- EKG = B
- Lab = B

Debriefing reviewed the purpose and objective of each puzzle.

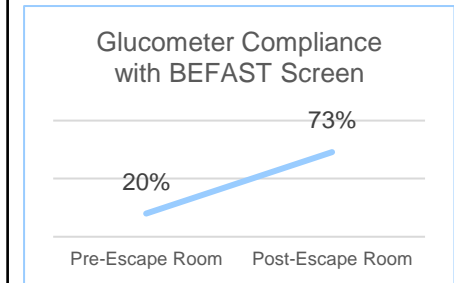
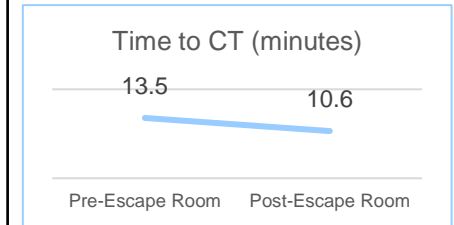
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## Evaluation

In Sept – Oct 2018, 202 nurses participated in the Code Stroke Escape Room.

- 100% reported intent to use new knowledge in their practice
- 73% reported a plan to improve their care during a Code Stroke
- 98% reported the Escape Room empowered them to improve their practice

Post-Escape Room outcomes data:



## Spread of Escape Rooms

The Escape Room learning strategy has spread to other departments. Escape Rooms have been developed for other learning topics, including cardiac arrest, pain, anaphylaxis, Magnet, clinical ladder, and evidence-based practice.