

Your answers should clearly **demonstrate** your **knowledge**. It is essential that you support your conclusions with theories. Look for opportunities to show your **understanding** of the concepts. Define or explain terms. Be as precise as possible. **Quantity as well as quality is essential for earning points. I am attempting to measure your critical thinking.** Your written answer must be **correct, detailed,** and **complete** to earn points. **Assume you are trying to impress a prospective employer or consulting client with your answer.** The word count is a guideline. There is **no penalty for going over** the maximum but no extra points either. Going below the minimum is a good indication that your analysis is incomplete.

Active Shooter events at a healthcare facility are uncommon but do happen. New OSHA regulations require worker training on how to survive and, in some cases, prevent active shooter events. Healthcare professionals face unique challenges compared to workers in other workplaces because nurses, for example, must consider how best to protect patients and visitors as well as themselves and coworkers. During an active shooter situation, the natural human reaction is to be startled, feel fear and anxiety, and even experience initial disbelief. However, split-second decisions can mean many lives are saved or lost.

Assume you have been asked to advise the HR manager for a major Gwinnett county hospital. She is reviewing two training options. **Which one of the following options would you recommend and why? Consider issues such as transfer of training, evaluation, and learning theories in supporting your recommendations to the HR manager. 350–450 words**

Option One

Require that anyone who works in the emergency room (medical professionals, housekeeping employees, and administrative staff) read the following scholarly [article](#), view this [10-minute video](#), and take an online 30 item multiple-choice test. Two of the benefits of this training, she believes, is that it would take less than two hours to complete and costs about \$50 per trainee including compensation for nonexempt employees for the time spent reading, viewing, and test taking. Total Cost: \$5,000.

Option Two

The hospital would have an Active Shooter Drill, facilitated by a nationally accredited organization, similar to the one depicted in this [video](#). This **very realistic** video explains how hospital employees experience the reenactment of an active shooter based on a real event that happened at a hospital (if you find the video distressing, you don't need to watch it to effectively evaluate the two training options). All trainees are told in advance that there will be a simulation. Some are given instructions on what to do such as pretend to be shoot. There is

a debriefing after the simulation (lasted about 15 minutes). The debriefing lasts about four hours. Trainers discuss what happened, how people reacted, and how they should have reacted. Training content includes the “fight or flight” response and the actions most likely to result in survival. A month later, there is a two-hour follow-up session ending with a test where trainees view three videos and assess the actions of the “employees.” Total Cost: \$35,000.

Excellent Answer

If the **goal** of the training is to make sure employees and innocent bystanders SURVIVE an active shooting, option one would be **negligent training**. The fact that there is little chance of it happening is **more reason** to do it right. Since OSHA issued new regulations, I guess this would be fall under **external factors** as the justification for the training. It appears that **needs assessment** included **task analysis** since the **simulation** takes place on the job with the same employees. This means there is **similarity between training and work**. This is like **vestibule training** which is as similar to on-the-job training possible. “Maximizing the **similarity**” between **the training and job is essential for high transfer**. High transfer means that what people learn during the training “sticks” back on the job. Being part of the simulation has much higher fidelity than watching a video.

This type of training makes evaluation harder than something like Excel training, but there are ways. There are four **levels of evaluation** (Kirkpatrick). **Reaction measures how employees felt about the training**. That isn’t mentioned, but the debriefing would be a good time to talk to trainees about if they thought the training was effective and important. I am guessing they would, especially compared to reading an article and watching a short video. The best way to measure **learning that took place during the training** would be a work sample or asking questions after watching a video. During the debriefing, maybe they could discuss the right and wrong actions that took place and why. For example, why would people run and why is running a bad idea. I know **a multiple-choice test would not be valid** because this is about behavior. The follow-up would measure **behavior** which is about transfer. Two months later, did the employees remember what they learned? **Results** is a group-based measure. This almost would require another simulation because most people would know what to do but if one person starts screaming, it could go bad fast.

Option two has several examples of important learning theories missing from option one including learning by doing (**practice**), **overlearning** (very important when required to perform under stress), and **whole-task training** (too complex to learn in parts). The training also includes important theories such as “**fight or flight**” and provides **a variety of examples** (some participants instructed to do different things).