INTRODUCTION
While the use of simulation and technology have been seamlessly added into curriculums of undergraduate and clinically based graduate nursing programs, the ongoing use of simulated learning experiences for those that aspire towards the nursing leadership role have not been so seamless (Sharpnack, Goliat, and Rogers, 2013; Waxman and Delucas, 2014).
- Identified by the National League for Nursing (NLN) to provide students with a low risk, transformational clinical learning experience (2015).
- Simulation is considered the norm in multiple academic settings.
- Used as a teaching methodology across programs at a College of Nursing (CON).

PROBLEM
- Nursing leadership and administration is a specialty area within the nursing profession.
- Needed skills, competencies, and developmental trainings have been historically overlooked.
- An estimated 75% of the current nursing leadership plan to leave the workforce by 2020 (Hader, Saver, and Steltzer, 2006).
- Succession planning and the acquisition of future nurse leaders with previously developed leadership skills is crucial.
- Past leadership roles were quickly filled without recognizing whether or not the individual had qualities needed to successfully perform the role.

PURPOSE/SIGNIFICANCE
- To discuss how simulation was used in a master’s level nurse administration course to address content objectives, and introduce the concept of root cause analysis (RCA).
- Provided graduate nurse administration students (GNAS) with an opportunity to acquire hands-on exposure to clinical situations that could potentially lead to a sentinel event.
- Undergraduate nursing students (UGNS) received evaluative critique and feedback from GNAS.
- GNAS were expected to walk through each step of the RCA process, and identify organizational issues or processes that needed to be addressed.

METHOD/ACTIVITIES
- GNAS attended the Obstetrics Simulation for Semester 3 UGNS
- GNAS shared evaluative critiques of skills and actions in a roundtable debriefing discussion.
- Debriefing sessions were held collaboratively to ensure that course objectives were met.
- GNAS observed UGNS behaviors, competencies, and decision making skills.

OUTCOMES
Student and faculty feedback revealed that the collaborative academic learning milieu was permeated with rich, intellectual opportunities needed to successfully demonstrate clinical skills, competencies, and to further advance leadership development abilities. This simulation provided a realistic clinical environment that afforded GNAS with multiple opportunities to demonstrate the use of effective communication skills in providing individual feedback and evaluation.

IMPLICATIONS
- Prioritization in the management of complex patient assignments was not addressed.
- Intra-professional training enhanced collaboration, communication, and competency among students at a CON.
- Worked simultaneously to enhance understanding of delineated roles and scopes of practice among students, colleagues, and peers.

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