Interprofessional Education Enhances Nursing and Pharmacy Students' Confidence in End-of-Life Care Through Simulation

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Purpose:

Education for pre-licensure programs in end-of-life care at both the baccalaureate and graduate levels, especially interprofessional education (IPE), is a relatively new phenomenon following the development of the Robert Wood Johnson and City of Hope’s End-of-Life Nursing Education Consortium (ELNEC) Core Curriculum (City of Hope & American Association of Colleges of Nursing, 2015). There has been little research from the student’s perspective on the content of end-of-life education curriculum. Although in the early stages of research, IPE using simulation methodology has been shown to be effective in increasing student confidence levels in other areas of patient care (Brown, Howard, & Morse, 2016; Phillips, Hall, & Irving, 2016; Pullon, Wilson, Gallagher, et. al., 2016). Using a quantitative one group pre- and post-test intervention design, the aim of this study was to show the effect of IPE using simulation on perceived confidence levels for end-of-life care in nursing and pharmacy students.

Methods:

This study used a pre- and post-test one group design using the End-of-Life Professional Caregiver Survey (EPCS) (Lazenby, Schulman-Green, & McCorkle, 2012). A convenience sample of undergraduate nursing students and graduate pharmacy students enrolled at a university on the east coast was recruited for the study. Third year nursing and pharmacy students enrolled in either Community Health Nursing or Pharmacy Case Studies courses at the university had participated in two IPE class sessions on other topics before the study class. Preparation and session content included: online preparation using multi-media curriculum materials developed for end-of-life education; an IPE role play simulation; and a faculty led debriefing. The role play simulation case study was developed for the ELNEC core (2015) and is used in both undergraduate, professional, and graduate level programs. Results of the survey were coded and entered into SPSS for analysis using the paired measures t-test for comparison of means within groups.

Results: A sample of 86 pharmacy and nursing students completed both pre-and post-tests surveys. A two-tailed test for dependent groups was used to test for differences in students’ perceptions of personal comfort in caring for dying patients and their families before and after an IPE class offering on end-of-life issues and concepts. The t test revealed that the students’ comfort levels following the class were significantly different from their levels before the class M=(20.40), t=(9.962), df (85), p=.000 with a significant increase in both classes.

Conclusion:

Although the study is limited by a small sample size (n=86) and a one-group design, results may contribute to the practice of undergraduate nursing education and curriculum development using current tools and approaches. Ongoing research is needed with larger samples and an experimental design to reliably inform practice. The World Health Organization estimates that 40 to 60% of all dying patients need palliative care (WHO, 2016). In 2014, a global resolution on palliative care encouraged countries to improve access to palliative care in primary care and home-based services. In the home setting especially, nurses and pharmacists play important roles in safe and effective care. Interdisciplinary collaboration for palliative and end-of-life care promotes optimum outcomes. Provider education for
palliative care can utilize an IPE approach with simulated role playing to promote competency in all dimensions of palliative care for patients with life-threatening diseases, especially chronic illness.

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Keywords:
Interprofessional education, Palliative care and Simulation

References:


Abstract Summary:

Through this session, attendees will be informed about the use of simulation in creating an interprofessional end-of-life session for nursing and pharmacy students. Results from the End-of-life Professional Caregiver Survey (EPCS) will also be presented and discussed.

Content Outline:

I. Introduction

1). Education for pre-licensure programs in end-of-life care at both the baccalaureate and graduate levels, especially interprofessional education (IPE), is a relatively new phenomenon following the development of the Robert Wood Johnson and City of Hope’s End-of-Life Nursing Education Consortium (ELNEC) Core Curriculum (City of Hope & American Association of Colleges of Nursing, 2015).

2). Research on the outcomes of end-of-life education from the student’s perspective is in the early stages and relies on outcome surveys and anecdotal feedback. There has been little research from the student’s perspective on the content of end-of-life education curriculum. Although in the early stages of research, IPE using simulation methodology has been shown to be effective in increasing student confidence levels in other areas of patient care (Brown, Howard, & Morse, 2016; Phillips, Hall, & Irving, 2016; Pullon, Wilson, Gallagher, et. al., 2016).

II. Aim:

Using a quantitative one group pre- and post-test intervention design, the aim of this study was to show the effect of IPE using simulation on perceived confidence levels for end-of-life care in nursing and pharmacy students.

III. Body

A. Method

1). The Research Design: This study used a pre- and post-test one group design using the End-of-Life Professional Caregiver Survey (EPCS) (Lazenby, Schulman-Green, & McCorkle, 2012). Students were asked to complete the End of life Professional Caregiver Survey (EPCS) before and after the educational sessions. Preparation and session content included: online preparation using multi-media curriculum materials developed for end-of-life education; an IPE role play simulation; and a faculty led debriefing. Permission to use the EPCS tool was granted by the developer. The EPCS is a survey tool that has been validated for use with nursing professionals to measure perceived comfort in communicating with dying patients and their families. The role play simulation case study was developed for the ELNEC core (2015) and is used in undergraduate, professional, and graduate level programs.

2). Sampling: A convenience sample of undergraduate nursing students and graduate pharmacy students enrolled at a university on the east coast was recruited for the study. Third year nursing and pharmacy students enrolled in either Community Health Nursing or Pharmacy Case Studies courses at the university had participated in two IPE class sessions on other topics before the study class. Written consent was obtained prior to the educational offerings and students could withdraw from the survey activities at any time without withdrawing from the educational sessions and without impact to their grade for the activity. Grading for the activity was limited to participation grade for attendance. IPE sessions were designed to build collaborative practice skills.

3). Data Analysis: Results of the survey were coded and entered into SPSS for analysis using the paired measures t-test for comparison of means within groups.
B. Results:

A sample of 86 pharmacy and nursing students completed both pre- and post-tests surveys. A two-tailed test for dependent groups was used to test for differences in students' perceptions of personal comfort in caring for dying patients and their families before and after an IPE class offering on end-of-life issues and concepts. The t-test revealed that the students' comfort levels following the class were significantly different from their levels before the class \(M=(20.40), t=(9.962), df (85), p=.000\) with a significant increase in both classes.

C. Discussion:

The results of this study would suggest the confidence of students preparing to care for patients at the end of life may improve with the use of case studies and simulation offerings. Students report that role playing in simulated case scenarios increases their comfort and confidence levels in caring for and communicating with families and patients at the end-of-life. IPE course offerings are shown to give students the opportunity to build communication skills in interdisciplinary care approach such as palliative and end-of-life care.

IV. Conclusion

A). Interprofessional Education:

Palliative and EOL care require an interdisciplinary collaborative approach to meet the multi-dimensional needs of dying patients, their families, and caregivers (Archer, Latiff, & Faull, 2017; WHO, 2016). Undergraduate and graduate education is needed for healthcare providers in all disciplines to effectively provide palliative and end-of-life care. This study suggests that students benefit from IPE and simulated role play to meet these education needs.

B). Limitations:

Although the study is limited by a small sample size \((n=86)\) and a one-group design, results may contribute to the practice of undergraduate nursing education and curriculum development using current tools and approaches. Ongoing research is needed with larger samples and an experimental design to reliably inform practice.

V. Recommendations:

The World Health Organization estimates that 40 to 60% of all dying patients need palliative care (WHO, 2016). In 2014, a global resolution on palliative care encouraged countries to improve access to palliative care in primary care and home-based services. In the home setting especially, nurses and pharmacists play important roles in safe and effective care. Interdisciplinary collaboration for palliative and end-of-life care promotes optimum outcomes. Provider education for palliative care can utilize an IPE approach with simulated role playing to promote competency in all dimensions of palliative care for patients with life-threatening diseases, especially chronic illness.

References


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