



Incorporating End-Of-Life Competencies into Simulation

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Abstract

Undergraduate nursing students are expected to demonstrate competencies for palliative care and end-of-life (EOL). In the past, didactic instruction and discussions have been used, but students continue to report their lack of comfort and experience with death and dying. Minimal clinical opportunities in the EOL setting prevent the reinforcement and application of these skills in a real life setting, creating a void in the students' confidence, comfort, communication, and attitude when dealing with these situations.

We proposed to use innovative teaching strategies, intrigue and creative EOL scenarios, and a sophisticated high fidelity simulation to fill this gap.

Assessment

- In 2015, approximately 2.5 million deaths occurred in the United States¹
 - over 170,000 deaths occurred in Texas²
 - 28% of deaths occurred in a hospital with RNs in attendance³
- In January 2016, new competencies added for Palliative Care by AACN⁴
- EOL is difficult to talk about for students and experienced RNs. RNs are uncomfortable, fearful, helpless, anxious, and often feel inadequately prepared in dealing with death and dying⁵.
- Few high fidelity simulations for a dying patient in a home setting⁶
- After EOL simulation, UG nursing students had:
 - improved satisfaction and confidence levels⁷
 - improved assessment and skills⁸
 - Improved knowledge of the patient's physiological changes⁹
 - reduced anxiety for caring for dying patients¹⁰

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*Palliative Care (PC) Competencies by AACN⁴

1. Promote the need for PC for seriously ill patients from the time of diagnosis ...
2. Identify the dynamic changes in population demographics, health care economics, service delivery, caregiving demands, & financial impact on the patient ...
3. Recognize one's own ethical, cultural and spiritual values and beliefs about PC ...
4. Demonstrate respect for cultural, spiritual and other forms of diversity for patients ...
5. Educate and communicate effectively and compassionately about PC issues
6. Collaborate with members of the interprofessional team ...
7. Demonstrate respect for the patient's values, preferences, goals of care, decision-making ...
8. Apply ethical principles in the care of patients ...
9. Know current state and federal legal guidelines relevant to the care of patients ...
10. Perform a comprehensive assessment of symptoms ...
11. Analyze and communicate with the interprofessional team ...
12. Assess, plan, and treat patients' physical, psychological, social and spiritual needs ...
13. Evaluate patient outcomes from the context of patient goals of care, national quality standards.
14. Provide competent, compassionate and culturally sensitive care for patients ...
15. Implement self-care strategies to support coping with suffering ...
16. Assist the patient to cope with and build resilience ...
17. Recognize the need to seek consultation [from PC experts] for complex patient needs.

*Abbreviated version of the AACN Competencies

EOL Simulation Scenarios

Simulation 1 – Advance Care Planning and EOL wished with patient and family in a home environment

Simulation 2 – Symptom management (pain, constipation, immobility) with a terminally ill patient

Simulation 3 – Symptom management (dyspnea and anxiety) with a terminally patient and Death



Implementation Plan

Team: Program Director, Simulation Manager, IT Manager and IT Instructional Designer, and Business Manager

Time Line: January 2017 – December 2018

Equipment: Laerdal Sim Man 3G Model and “Home” environment

Personnel Needs:

1. Installation of Sim Man 3G and F2F instructions from supplier
2. Development of EOL scenarios
3. Programming scenarios
4. Implementation with students

Research Study:

Approved by the UH Institutional Review Board
Participants are 2nd Degree Accelerated RN BSN Students
Baseline -> Sim 1 -> Sim 2,3 -> Graduation (Repeat in 2018)
(02/17) (7/17) (10/17) (12/17)

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