Review

Use of simulated patients to develop communication skills in nursing education: An integrative review

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ABSTRACT

Background: Registered nurses are expected to communicate effectively with patients. To improve on this skill education programmes in both hospital and tertiary settings are increasingly turning to simulation modalities when training undergraduate and registered nurses. The roles simulated patients (SPs) assume can vary according to training purposes and approach.
Aims: The first aim is to analyse how SPs are used in nursing education to develop communication skills. The second aim is to evaluate the evidence that is available to support the efficacy of using SPs for training nurses in communication skills and finally to review the SP recruitment and training procedure.
Design: An Integrative review.
Data Sources: A search was conducted on CINAHL, Psych-info, PubMed, Google Scholar, Scopus, Ovid, Medline, and ProQuest databases. Keywords and inclusion/exclusion criteria were determined and applied to the search strategy.
Review Methods: The integrative review included Nineteen studies from 2006-2016. Critical Appraisal Skills Program (CASP) method of evaluation was utilised. Emergent themes were extracted with similar and divergent perspectives.
Results: Analysis identified seven clinical contexts for communication skills training (CST) and two SP roles from the eighteen studies. SPs were either directly involved in the teaching of communication (active role) or used in the evaluation of the effectiveness of a communication skills program (passive role). A majority of studies utilised faculty-designed measurement instruments.
Conclusion: The evidence presented in the 19 articles indicates that the use of SPs to teach nurse-patient communication skills targets more challenging clinical interactions. Engaging SPs in both CST program facilitation and course evaluation provides nurse educators with a strong foundation to develop further pedagogical and research capacity. Expanding the utilisation of SPs to augment nurses' communication skills and ability to engage with patients in a broader range of clinical contexts with increased methodological rigor is recommended.

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1. Background

One of the primary goals of therapeutic communication in healthcare is to develop a rapport with patients and their families and to foster an environment of compassion, understanding, and empathy (Peplau, 1997). Therapeutic communication between patients and members of the healthcare team in community and hospital settings is, therefore, essential in ensuring clarity in the provision of care, to mitigate medical errors and enhance patient safety (Rosen and Pronovost, 2014). The World Health Organisation recognizes the need for patients to be included in health care decision making and planning (Rimal & Lapinski, 2009). With a global agenda of improving quality and safety in healthcare, nurse educators need to find engaging and impactful ways to integrate communication skills training into undergraduate and graduate nursing education (Mullan and Kothe, 2010).

Dealing with patients and families during difficult conversations can be challenging particularly about explaining complex treatments, working through mental health issues, and discussions about end of life care. Such conversations are often a source of anxiety and fear for many healthcare professions' students as well as practicing clinicians (Martin

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& Chanda, 2015; Nestel et al., 2010; Eid et al., 2009). Simulation provides an innovative approach to emphasise the critical role of communication skills and for students to develop a repertoire of effective techniques (Kelly et al., 2014). Simulation can be described as a teaching strategy to replicate real life experiences (Brown, 2015) and offers an alternative learning experience given some of the limitations of clinical rotations (Howley et al., 2008). Several studies attest to the reliability, validity and feasibility of the simulated patient (SP) approach for communication skills training (CST) in nursing education (Bolstad et al., 2012; Ebbert and Connors, 2004; Vu and Barrows, 1994). A recent meta-analysis highlighted the efficacy of simulation training in nursing across diverse clinical domains (Shin et al., 2015). The meta-analysis examined 20 studies and provided evidence that using SPs in education across different areas in nursing was a useful technique over traditional learning methods. The results presented evidence, with a medium to large effect sizes, to advocate for the use of SPs to improve learner outcomes (Shin et al., 2015).

For students, rehearsing clinical conversations with peers offers a level of exposure to 'real life' situations (Schlegel et al., 2012). However, the interactions may not be authentic because individuals may 'hold back' in the type and level of responses. Role-plays with simulated patients (SPs) offer opportunities for students to immerse themselves in a more authentic experience within a protected and controlled environment (Nestel et al., 2014). SPs are primarily *well* people trained to act as a patient in a clinical scenario (Nestel et al., 2014). The terms simulated patient and standardized patient are often used interchangeably. From the 1960s SPs have been utilised for teaching and evaluating medical students in clinical assessment techniques (Barrows, 1993). More recently, SPs have been used to train clinicians to assess the effectiveness of communication training programs (Trickey et al., 2016) and to teach students' culturally sensitive communication skills (Bahreman and Swoboda, 2016). A variety of health professional schools are now using SPs for teaching and students feedback, with the use of SPs in nursing programs gaining increasing momentum. In this educational context, the authenticity of role-play and quality of feedback provided by SPs is of utmost importance (Bahreman and Swoboda, 2016).

Regardless of the educational context - whether clinical or communication skills training - SPs are in a position of being able to provide valuable feedback to students from the *patient's* perspective (Nestel et al., 2014). In this teaching role, they can be viewed as active facilitators of the specific training objective. Alternatively, SPs can also be engaged in scenarios to determine the impact of simulation interventions for research purposes, quality assurance, and program evaluation (Weaver and Erby, 2012). In such instances, SPs may take on a more passive role within the evaluative protocol. However, the extent to which the various positions of SPs are utilised, supported, evaluated, and reported is under reported in the extant literature (Weaver and Erby, 2012).

Measuring learner performance in simulations with SPs, nursing researchers should seek advice on tool selection and use to build rigor into emerging research (Kardong-Edgren et al., 2016). However, the range and use of validated instruments in the literature remains weak, and an area where more sound approaches in research methods are warranted. While there are many approaches to the recruitment and training of SPs, Nestel et al. (2014) concede that few procedures are evidenced based. Some of the methods described in the literature include demonstrations, video-clips, observation of real patients, coaching by experienced SPs or professional actors, and feedback by students and teaching faculty regarding SP performance (Meier et al., 1982). In a review of 121 SP articles Howley et al. (2008) identified that few authors provided sufficient detail about SP recruitment and training for reproducibility of research studies.

A recent text by Nestel et al. (2014) provides the most detailed instructions on the recruitment and training of SPs currently available. These authors developed a four-stage model that draws on evidence in the field of dramatic arts as an exemplar on which to standardize SP training. The model allows SPs to be recruited and trained for

multiple roles, for different scenarios, and in a range of health care contexts (Nestel et al., 2014). In sum, SPs can offer valuable feedback and perspective to learners, and provide health educators with the opportunity to improve or expand on their program. As the use of SPs rises it is now opportune to review the literature and report on current aspects of SP training and use including the preparation and support of these partners in learning. Of particular interest is an investigation of the scope and efficacy of using SPs in the training and evaluation of nurses' communication skills.

2. Aim

This integrative review aims to identify, critically appraise, and synthesise the existing evidence on the use of simulated patients in educational programs related to developing or enhancing therapeutic communication skills for undergraduate and graduate nurses to answer the following research questions:

3. Method

(1) How are SPs used in nursing education to develop communication skills?
(2) What evidence is available to support the efficacy of using SPs for training nurses in communication skills?
(3) How are SPs recruited and trained for their role in communication skills training?

4. Design

An integrative review enables appraisal, analysis, and integration of literature on a phenomenon so that new insights can inform further research and evaluation. The Whittemore and Knafl (2005) strategy for conducting an integrative review was employed, as this strategy allows for inclusion of studies with diverse data collection methods.

5. Literature Search Strategies

Eight electronic databases including PubMed, Scopus, MEDLINE, CINAHL, Psych-INFO, ProQuest, Google Scholar and Ovid were searched for peer-reviewed articles published between January 2006 and April 2016. The decision to only include literature from the past 10 years was made on the following basis. The importance of RN education focused on nurse-patient communication has been recognized at a national and international level. However, nursing education's use of simulation in communication scenarios involving patient discharge has been very recent and is evolving currently. These databases were selected to capture publications that pertained to simulation as a teaching and learning methodology in nursing education. An initial search using the term *standardized patient* was too broad; therefore, a Boolean search was conducted including the term *AND*. Keywords used were: simulation, *standardized patient or simulated patient*, and patient simulation, communication skills, communication skills training*, nursing communication* and health care communication.

6. Inclusion and Exclusion Criteria

Inclusion criteria for the search included: peer-reviewed research articles using standardized patients; nurse-patient communication skills with health care simulation as the teaching strategy. Articles included baccalaureate, associate, and diploma nursing programs. Peer reviewed articles relevant to nursing staff development in hospitals and medical centres focusing on the above criteria were also included. Only articles in the English language were reviewed. Exclusion criteria included: virtual patients such as computerized cases and simulators such as mannequins; articles pertaining to allied health, nurse