

## Review

## End of life care simulation: A review of the literature

Pauline C. Gillan <sup>a,\*</sup>, Sarah Jeong <sup>b,1</sup>, Pamela J. van der Riet <sup>c,2</sup><sup>a</sup> University of New England, P.O. Box U90, Armidale, NSW 2351, Australia<sup>b</sup> University of Newcastle, P. O. Box 127, Ourimbah, NSW 2258, Australia<sup>c</sup> University of Newcastle, Callaghan, NSW 2308, Australia

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## SUMMARY

**Background:** Simulation is an evolving pedagogical approach to teaching in many undergraduate nursing curricula, however, there is little published literature on end of life care simulation as an effective means of teaching nursing students about end of life care.

**Literature review aims:** To examine available literature on end of life care simulation.

**Review methods:** An extensive literature search on end of life care simulation in the undergraduate nursing curriculum was conducted in CINAHL, Mosby's Index, Cochrane Database, Scopus, Eric via Proquest, and Medline. 6 research articles and 10 descriptive articles published between 2009 and 2013 that met the selection criteria are included in the review.

**Findings:** Findings of these 16 articles are reported under 4 main themes: 1) Increased knowledge of end of life care through 'experiential learning'; 2) Impact of family presence on student learning; 3) the Debriefing imperative, and 4) Methodological issues raised from studies.

**Conclusion:** The findings of the studies reviewed support end of life care simulation as a strong and viable pedagogical approach to learning for its positive effects on knowledge acquisition, communication skills, self-confidence, student satisfaction and level of engagement in learning. However, the important factors including psychological safety of students and the costs involved require careful consideration. Research on the use of simulation in nursing is still in its infancy, further research using various research designs is required to adequately explore the issues surrounding end of life care simulation.

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## Introduction

This article is the second part of a literature review that explores the history and future of end of life care education for undergraduate nursing students. The first paper "End of Life Care Education, Past and Present: A Review of the Literature" (Gillan et al., in press-b) explored how end of life care education has been delivered since 1984 and to the present. Two main themes 'Methods of end of life education delivery' and 'End of life care education initiatives' were highlighted. A turning point is evident in the emerging use of simulation for end of life care since 2009 in an effort to help prepare students for undertaking quality end of life care in the clinical setting.

## Background

Simulation is defined as "An event or situation made to resemble clinical practice as closely as possible" (Jeffries, 2007, p. 28) and is categorized according to the level of fidelity or realism along a spectrum

of low fidelity to high fidelity. Examples of low fidelity include the use of case studies or role-plays related to a particular situation. High fidelity simulation is defined as "the use of technologically lifelike manikins with provision for a high level of realism and interactivity" (Jeffries, 2007, p. 28).

The use of simulation in nursing education dates as far back as 1874 when anatomical models were used in the form of jointed skeletons (Nehring and Lashley, 2009). The formal use of manikins to enhance student learning began a century ago with the introduction of 'Mrs Chase' a full body static manikin in 1911 (Jansen et al., 2009). However, simulation only became popular in the 1950s when it was realised that using manikins helped students put theory into practice (Roberts and Greene, 2011). In the 1960s the use of low fidelity manikins such as 'resusci-Annie' became popular, and is still in use today (Roberts and Greene, 2011).

Since 2004 the use of high fidelity manikins has increased as an effective means to teach essential skills for nursing students. High fidelity simulation is viewed as an innovative pedagogical approach (Reilly and Spratt, 2007; Berragan, 2011) in a safe clinically realistic environment (Twigg and Lynn, 2012). Simulation contributes to improving critical thinking, clinical reasoning skills and problem solving skills without fear of causing harm to actual patients (Jansen et al., 2009; Sperlazza and Cangelosi, 2009). Further benefits include; 1) improving

\* Corresponding author. Tel.: +61 2 6773 2532; fax: +61 2 6773 3666.

E-mail addresses: [pgillan3@une.edu.au](mailto:pgillan3@une.edu.au) (P.C. Gillan), [Sarah.Jeong@newcastle.edu.au](mailto:Sarah.Jeong@newcastle.edu.au) (S. Jeong), [Pamela.Vanderriet@newcastle.edu.au](mailto:Pamela.Vanderriet@newcastle.edu.au) (P.J. van der Riet).<sup>1</sup> Tel.: +61 2 4349 4535; fax: +61 2 4348 4035.<sup>2</sup> Tel.: +61 2 4921 6261; fax: +61 2 4921 6981.

knowledge acquisition (Lapkin et al., 2010); 2) promoting understanding and application of cognitive and psychomotor skills (Bland et al., 2011; Feingold et al., 2004); 3) bridging the gap between theory and practice (Kopp and Hanson, 2012); and 4) refining communication and technical skills in interdisciplinary teamwork (Jansen et al., 2009). More importantly, there is strong evidence of high learner satisfaction with the use of high fidelity patient simulation (Lapkin et al., 2010). This is significant because learner satisfaction may potentially enhance student's engagement and therefore, facilitate learning (Lapkin et al., 2010).

However, the focus of most of this research is on acute or critical care nursing using scenarios related to emergency or advanced resuscitation situations (Feingold et al., 2004). It was not until 2009 that the use of simulation in end of life care education emerged.

**Aims**

The aims of the literature review were to 1) explore what literature exists on end of life care simulation in undergraduate nursing education and 2) critically discuss the issues related to end of life care simulation. This paper critically reviews the literature on end of life simulation and argues for its relevance in undergraduate nursing education.

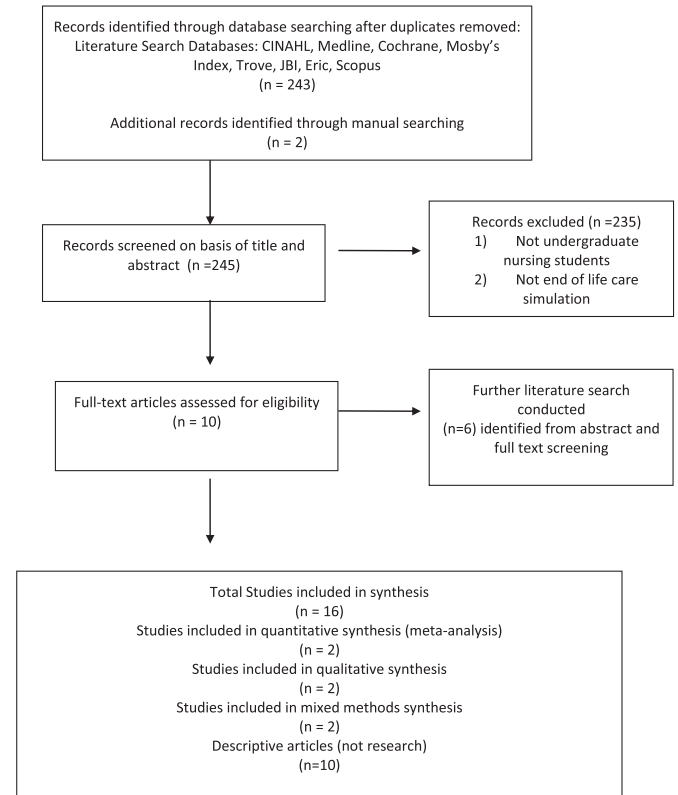
**Review Methods**

A search of published literature was conducted on CINAHL (Cumulative Index of Nursing and Allied Health Literature), Mosby's Index, Joanna Briggs Institute, Cochrane Database, Scopus, Eric via Proquest, Medline, and Trove. A total of 243 journal articles of potential use were identified. Key search terms and database results used are cited in Table 1. Two further articles were identified using a manual search of the relevant journals (n = 245).

These articles were reviewed for the key search terms of “end of life care”; “simulation”; “high fidelity simulation”, “simulated death”, “death simulation”, “end of life simulation” and “nursing students”. Article abstracts were reviewed for content specifically on participants (nursing students) and methodology (use of simulation). A total of 10 articles met the inclusion criteria of: 1) end of life care simulation; 2) undergraduate nursing students. The remainder 235 articles were excluded because they did not relate to end of life care, simulation or undergraduate nursing students. Table 2 provides a decision flow diagram.

A further literature search conducted in early 2013 revealed a further 6 articles, demonstrating an increased interest in this topic. A total of 16 articles have been identified of relevance and are included in the literature review. Of these only 6 were original research articles, the remainders of these are descriptive articles that report on projects undertaken in end of life care simulation, using high fidelity and hybrid

**Table 2**  
PRISMA flow diagram.



simulation strategies. Due to the limited amount of literature on this topic all the relevant literature on end of life care simulation in nursing education are included in the review. Table 3 provides a breakdown of literature by the publication type.

The identified literature was analysed using thematic analysis by the primary author. Identified themes were confirmed by the other two authors of the review. This process of peer review ensured rigour and trustworthiness of thematic analysis.

**Findings**

Four main themes were identified from the literature; 1) Increased knowledge of end of life care through 'Experiential learning'; 2) Impact of family presence on student learning; 3) The debriefing imperative; and 4) Methodological issues raised from studies. Table 4 provides a summary of the key findings from the literature.

**Table 1**  
Search terms and databases used in initial search strategy.

Search Terms:	"AND"	Database:	Number of articles identified after duplicates removed
Undergraduate nursing students/ Nursing degree students/ Bachelor degree nursing students Baccalaureate degree nursing students	End of life care/palliative care/terminal care/hospice care/hospital care/acute care/ residential aged care/nursing homes/long term care/long term aged care/geriatric care/geriatrics/grief and loss/grief and loss education/grief and loss programmes/ bereavement/ Bereavement education/bereavement programmes/Debriefing/clinical debriefing/ end of life care debriefing/death and dying debriefing/Death and dying/death/death and stress/dying patients/Death education/death curriculum/death curricula/End of life care education/end of life care curriculum/end of life care curricula/end of life education/end of life curriculum/end of life curricula/Simulation/death simulation/ simulated death/End of life simulation/End of life care simulation/High fidelity simulation	CINAHL; Mosby's index; Joanna Briggs Institute; Cochrane database; Medline; Scopus; Eric via Proquest; Trove	197 8 5 6 7 11 8 1
<b>Total results:</b>			<b>243</b>

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