

Featured Article

Effects of Using an Advancing Care Excellence for Seniors Simulation Scenario on Nursing Student Empathy: A Randomized Controlled Trial

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KEYWORDS

active listening;
self-awareness;
empathy;
patient-centered care;
audio narrative;
nursing students;
simulation;
ACES

Abstract

Background: Low levels of empathy among nursing students can adversely impact patient-centered care (PCC) and patient outcomes.

Methods: An Advancing Care Excellence for Seniors simulation scenario was delivered to 50 nursing students to improve empathy and PCC by improving active listening and self-awareness.

Results: Active listening, empathy, and PCC scores in the intervention group compared with the control group and baseline significantly differed at postintervention and four-week follow-up ($p < .001$). Self-awareness scores between the groups were significantly different only at four-week follow-up ($p < .001$).

Conclusions: Using the Advancing Care Excellence for Seniors simulation scenario was effective in improving the four variables.

Cite this article:

Haley, B., Heo, S., Wright, P., Barone, C., Rettigantid, M. R., & Anders, M. (2017, October). Effects of using an advancing care excellence for seniors simulation scenario on nursing student empathy: A randomized controlled trial. *Clinical Simulation in Nursing*, 13(10), 511-519. <http://dx.doi.org/10.1016/j.ecns.2017.06.003>.

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Funding: This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

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Patient-centered care (PCC) is the care given by a health care provider (HCP) that focuses on engaging the patient in the plan of care (Rocco, Scher, Basberg, Yalamanchi, & Baker-Genaw, 2011). PCC includes concepts of caring,

sharing, communication, and building therapeutic relationships. The [Institute of Medicine \(2011\)](#) emphasized teaching PCC in nursing education programs because PCC has been associated with improved patient outcomes ([Rathert, Wywich, & Boren, 2012](#)).

Key Points

1. Using an Advancing Care Excellence for Seniors simulation was effective to improve levels of active listening, self-awareness, empathy, and patient-centered care in nursing students.
2. Improvement in self-awareness may take time compared with improvement in other variables.
3. Advancing Care Excellence for Seniors was an easy and useful tool to incorporate with simulation use in this randomized controlled trial.

For example, patients who reported that their providers gave them more PCC showed a better control of cholesterol, blood pressure, and hemoglobin A1C ([Rocco et al., 2011](#)) and reported higher patient satisfaction ([Evans, Watts, & Gratton, 2015](#)). Nurses need to know the factors affecting PCC to deliver it effectively. According to the patient-centered theory (also known as the client-centered theory), one factor affecting PCC is empathy ([Rogers, 1951](#)).

Empathy is the ability to recognize, understand, and share a patient's experiences and feelings ([Rogers, 1951](#)). Improving empathy can lead to improved communication and therapeutic relationships between the nurse and the patient, which are some characteristics of PCC ([Rogers, 1951](#)).

In addition, empathy has been associated with improved patient outcomes. For instance, higher levels of empathy in HCPs are linked to improved patient self-care ([Hojat et al., 2011](#)), higher patient satisfaction ([Menendez, Chen, Mudgal, Jupiter, & Ring, 2015](#)), and shorter illness periods ([Rakel et al., 2009](#)). Because nurses have the majority of interactions with patients, empathy by nurses and nursing students is a desired characteristic to deliver PCC appropriately in order to improve patient outcomes. However, empathy is not easily taught and several studies indicate that levels of empathy in nursing students were suboptimal and lower than students and/or HCPs in other health care disciplines ([Williams et al., 2014a, 2014b](#)). Therefore, improvement in empathy in nursing students may lead to improvement in PCC and patient outcomes.

Several types of interventions have shown improvement in empathy. These include reflective writing ([Hunter, 2008](#)), expressive arts ([Ozcan, Bilgin, & Eracar, 2011](#)), and simulation ([Everson et al., 2015; Kidd, Tusaie, Morgan, Preebe, & Garrett, 2015](#)). These studies had several limitations, such as being costly (e.g., using seminars and labs and long intervention periods) ([Ozcan et al., 2011](#)), lack of rigorous study design ([Hunter, 2008](#)), and no follow-up

measurement of feelings of empathy in the participants ([Kidd et al., 2015](#)). Therefore, rigorous study designs with more efficient interventions are needed.

Simulation is effective for improving learning outcomes in nursing education such as reaction, cognitive, affective, and psychomotor skills ([Kim, Park, & Shin, 2016](#)). An Advancing Care Excellence for Seniors (ACES) simulation scenario is a free teaching resource retrievable from the National League of Nursing (NLN) Web site that offers several simulation scenarios targeting active listening and self-awareness. The present study used the Millie Larsen scenario, which included a simulated patient monologue, a scripted simulation scenario, and debriefing guidelines ([NLN, 2015](#)). Using ACES simulation audio narrative allows the student to hear the patient's voice and tone, which may increase the student's active listening and self-awareness, leading to the development of empathy and PCC. The effectiveness of using an ACES simulation is unknown.

This randomized controlled trial (RCT) examined the effects of using an ACES simulation on active listening, self-awareness, empathy, and PCC from Time 1 (T1: baseline) to Time 2 (T2) or postintervention (immediately after intervention for intervention group [IG] and two weeks after T1 for control group [CG]; the time periods in both groups were similar) and Time 3 (T3: four weeks after T2) in prelicensure Baccalaureate and Associate degree nursing students. The CG received no intervention related to improvements in empathy and PCC. The hypothesis was that active listening, self-awareness, empathy, and PCC scores in the IG at both T2 and T3 would be significantly higher (better) than those in the CG and at T1.

Theoretical Framework

In the Patient-Centered Theory, [Rogers \(1951\)](#) suggests that active listening and self-awareness lead to empathy, and empathy leads to PCC ([Figure](#)). Active listening is the listening in order to understand the total meaning of the message ([Rogers & Farson, 1987](#)). Rogers defines self-awareness as the ability of the HCP to look at self and remove any judgment about a patient's ideas and beliefs ([Rogers, 1975](#)). [Ozcan et al. \(2011\)](#) add that self-awareness enhances the development of empathy. Improvements in empathy and PCC may come through interventions targeting active listening and self-awareness.

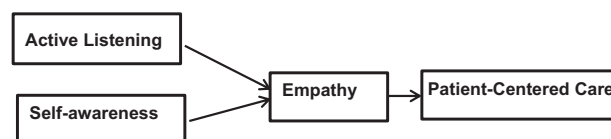


Figure Rogers' patient-centered care theoretical framework.

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