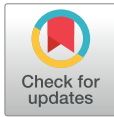




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Featured Article

Simulation-Based Empathy Training Improves the Communication Skills of Neonatal Nurses

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Abstract

Background: Empathy is a fundamental component of all relationships between health care workers and patients, but very little is known about how best to teach empathy to neonatal intensive care unit (NICU) nurses—particularly with respect to their ability to recognize and respond empathically to parents. This study describes the development and implementation of simulation-based empathic communication training and the evaluation of training efficacy.

Method: A quasi-experimental, single-group design was used which was evaluated with a pretest and posttest. Thirty-two NICU nurses from a Chinese hospital participated in simulation-based training for empathic communication skills. Nurses completed an observer-reported assessment at both before and after training, as well as a survey on their self-reported attitude, confidence, and understanding of empathy.

Results: The majority of nurses (>90%) were satisfied with the training. Their self-reported attitude and confidence concerning their empathy skills as well as their understanding of empathic communication reflected significant improvement. The behaviors of nurses toward communicating empathetically improved significantly after undergoing the simulation training ($p < .001$).

Conclusions: The training was effective for improving the ability of NICU nurses to communicate empathically with parents.

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Many parents report that the admission/hospitalization of a newborn infant in a neonatal intensive care unit (NICU) is an extremely stressful experience (De Rouck & Leys, 2009;

Bry et al., 2016). Feelings of worry, uncertainty, disappointment, and powerlessness have been mentioned as possible reasons for the stress (Wigert, Dellenmark, & Bry, 2014). If prolonged, such a high-stress situation may expose parents to elevated risk for anxiety, depression, acute stress disorder, and posttraumatic stress disorder that can ultimately

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affect their neurological behavior (Huhtala et al., 2012). As such, parents often seek infant-care advice from health care professionals to reduce their emotional burden. In 2015, the National Perinatal Association (NPA) stated that providing information and psychosocial support to parents of NICU

infants is essential for ensuring their mental-health stability and favorable outcomes of infants (Hynan & Hall, 2015). NICU nurses are ideally suited to translate these recommendations into clinical practice (Purdy et al., 2017). Hence, clear communication between a NICU nurse and parents is critical for providing specific information and support.

Extensive research has demonstrated that patient-centered communication can improve the quality of information transfer and therefore foster a positive and supportive relationship (McCormack et al., 2011).

Empathy is a vital aspect

of patient-centered communication (Neumann et al., 2009), and the definite link between nurse empathy and patient outcomes has been established (Kelm, Womer, Walter, & Feudtner, 2014). Thus, nurses must be able to evaluate parents' emotions and devote themselves to ensuring a shared understanding (Pehrson et al., 2016). However, research to date suggests that communicating empathically is not always a straightforward undertaking for health care professionals. First, in the absence of training, health care professionals may lack the ability to recognize the emotional cues of parents and empathically respond (Morse, Edwardsen, & Gordon, 2015). Several studies conducted at hospitals in China also reported that nurses often have limited ability to evaluate the emotional state of patients and their family members (Wei & Shi, 2010; Ma & Li, 2013). Moreover, communication may be adversely impacted if nurses miss or ignore the opportunity to express empathy owing to their busy work schedules (Hall, 2011). In addition, parents under stress usually do not fully express their feelings to nurses (Wigert et al., 2014). These obstacles may reduce the parents' willingness to disclose their concerns (Finset, Heyn, & Ruland, 2013). Thus, many NICU nurses need practical, specific, and targeted training to improve their empathic communication skills.

Key Points

- The training increased the confidence of nurses with respect to their ability to communicate empathically.
- The simulation-based training allowed nurses to experience relatively more complex and varied scenarios than traditional training.
- The combination of self-reported and observer-reported measurements yielded more reliable data than single evaluation.

Empathy training can target three domains, namely the cognitive, affective, and behavioral empathy (Ekman & Krasner, 2017). Cognitive empathy is considered an acquired ability, whereas affective empathy is regarded as a personal quality (Williams & Stickley, 2010). Furthermore, Batt-Rawden, Chisolm, Anton, and Flickinger (2013) suggested that training that focuses exclusively on the cognitive or affective aspects of empathy may not result in an improvement of behavioral skills. Thus, our training included both the cognitive and behavioral aspects of empathic communication. Indeed, training that primarily develops a nurse's ability to show empathy is more effective and conducive to the day-to-day realities of the NICU (Pehrson et al., 2016).

The teaching method may influence the effectiveness of empathy training (Teding Van Berkhouit & Malouff, 2016). The most common training includes experiential, didactic, skills, mindfulness, video stimulus, writing, and mixed methods (Lam, Kolomito, & Alamparambil, 2011). It is difficult to evaluate which teaching method is best for empathy training, but the more important part is the congruence between training method type and the description of its implementation (Lam et al., 2011). In our present study, we implemented a combination of didactic, experiential, and skill training that provided NICU nurses with well-defined empathic communication skills and then demonstrated the practical use of typical behavior skills. We also offered opportunities to practice using empathic communication skills.

The most useful strategy to develop communication skills is interactive, participation-based training (Baile & Blatner, 2014). Thus, simulation has emerged as an excellent method for empathic communication training (Bauchat, Seropian, & Jeffries, 2016). Existing research recognizes the potential benefits of simulation training for skill acquisition. Simulation training provides participants the opportunity to practice and explore their skills, mainly through reflective questions (Foster et al., 2016). Research has also demonstrated that practical experience acquired from simulations can motivate learners to develop empathy (Lam et al., 2011). The simulation can employ various strategies including a manikin, a standardized patients (SPs) model, or a hybrid model. In our study, we chose the SP model to teach and evaluate the performance of our nurses. Several studies have demonstrated the value of simulation using SPs in communication skill training. Bokken, Linssen, Scherpbier, Vleuten, and Rethans (2009) suggested that the SP model is suitable for early-stage training of communication skills. For the present study, we designed eight challenging clinical scenarios targeted to NICU nurses and used SPs to simulate possible emotional states of parents. The simulation allowed NICU nurses to address specific issues that could arise in

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