

Assessing Interprofessional Palliative Care Movie Simulation and Debriefing: A Multi-site, Multi-nursing Track Perspective

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University of Vermont Clinical Simulation Center



Background: Simulation

Simulation, commonplace in undergraduate nursing programs “opens doors for students to experience today’s complex and challenging patients and it enhances their critical thinking skills” (Davis, Kimble, and Gunby, 2014, p. 149).

“Video-recorded simulation is a teaching technology that allows one to present reality under controlled conditions, both of the environment and the individuals involved, which in turn favors learning” (Cardoso et al., 2011, p. 709).



Background: Palliative Care



“Simulation focusing on palliative care is an effective modality to promote IPE beyond acute care and crisis scenarios” (Vernoony, Selekmán, & Cowperthwait, 2016, p. 129).

Background: Interprofessional Education

Interprofessional (IP) education/collaboration has become a constant thread due to the imperatives issued by health service policy makers and educational accrediting bodies.

Barriers include: Logistics, cost, curriculum restraints and inexperience of faculty.



Framework: Adult Learning Theory

The Andragogical Model

- The need to know
- The learner's self concept
- The role of the learner's experiences
- Readiness to learn
- Orientation to learning
- Motivation

(Knowles, Holton, & Swanson, 2005)

The Adult Learner:

- Is independent, autonomous, self-directed, participatory
- Will engage with a learning process when it is deemed to be relevant and immediately useful
- Once committed to a learning experience, they are ready to learn
- Prefer reality-based, practical, stimulating, yet challenging experiences

Purpose

- 1) Assess student satisfaction and self-confidence in learning using the *Interprofessional Palliative Care Movie Simulation* and
- 2) Compare online discussion board debriefing with an in person post movie simulation debriefing.



Methods (Tools)

The National League for Nursing (NLN) Student Satisfaction and Self-Confidence in Learning survey was utilized for assessment.

This 13 item tool utilizes a five point scale. Reliability has been "tested using Cronbach's alpha: satisfaction = 0.94; self-confidence = 0.87" ("Description of Available Instruments," 2016).

Questions from a previously developed tool (UVM) based on the Interprofessional Competency Domains: 1) Values/Ethics, 2) Roles/Responsibilities, 3) Interprofessional Communication, and 4) Teams/Teamwork were also utilized.

The tool had been reviewed by faculty in each discipline providing content validity. Reliability of the survey instrument was not tested or established.

Satisfaction with Current Learning	SD	D	UN	A	SA
1. The teaching methods used in this simulation were helpful and effective.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
2. The simulation provided me with a variety of learning materials and activities to promote my learning the medical surgical curriculum.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
3. I enjoyed how my instructor taught the simulation.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
4. The teaching materials used in this simulation were motivating and helped me to learn.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
5. The way my instructor(s) taught the simulation was suitable to the way I learn.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
Self-confidence in Learning	SD	D	UN	A	SA
6. I am confident that I am mastering the content of the simulation activity that my instructors presented to me.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
7. I am confident that this simulation covered critical content necessary for the mastery of medical surgical curriculum.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
8. I am confident that I am developing the skills and obtaining the required knowledge from this simulation to perform necessary tasks in a clinical setting	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
9. My instructors used helpful resources to teach the simulation.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
10. It is my responsibility as the student to learn what I need to know from this simulation activity.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
11. I know how to get help when I do not understand the concepts covered in the simulation.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
12. I know how to use simulation activities to learn critical aspects of these skills.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5
13. It is the instructor's responsibility to tell me what I need to learn of the simulation activity content during class time..	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5

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lights
camera
action!



Methods

ONLINE STUDENTS: LPN-BSN, RN-BSN

- asynchronously viewed the movie simulation via the online learning platform (one week allowed)
- debriefing was the subsequent week via online discussion board
- at the close of the discussion board, students were given access to Qualtrics links (NLN survey and IP competency survey)

FACE-TO-FACE STUDENTS: TRADITIONAL

- observed the movie simulation in a synchronous, face-to-face group setting
- participated in a synchronous, face-to-face debriefing following the movie with peers from 3-4 other disciplines
- the NLN survey and the IP competency survey were completed following the debriefing

Findings - Demographics

DEMOGRAPHICS	UVM	UVM	ISU/LPN	ISU/LPN	ISU/RN	ISU/RN	TOTAL	TOTAL %
	N = 80	62.8%	N = 31	24.03%	N = 17	13.17%	128	
Male	9	11.25%	3	9.68%	2	11.76%	14	10.85%
Female	71	88.75%	28	90.32%	15	88.24%	114	89.06%
(Missing)	2							
	N = 82	62.8%	N = 31	24.03%	N = 17	13.17%	130	100%
Hispanic/Latino	2	2.6%	0	0%	0	0%	2	1.54%
American Indian/ Alaskan Native	0	0	0	0	0	0	0	0
Asian	5	6.33%	3	9.68	1	5.88%	9	6.92%
Black/African American	1	1.27%	10	32.26%	1	5.88%	12	9.23%
Native Hawaiian or Pacific Islander	0	0	1	3.23%	0	0	1	0.77%
White/Caucasian	74	93.67%	18	58.06%	15	88.24%	107	82.31%



Findings –NLN Survey: Satisfaction

SATISFACTION	N	Q1	Q2	Q3	Q4	Q5	TOTAL SATISFACTION
RN	19	84.21%	89.47%	78.95%	100%	78.95%	431.58/5 = 86.32%
LPN	30	96.77%	87.10%	83.87%	90.32%	83.34%	441.40/5 = 88.28%
Traditional	81	93.83%	83.95%	85.86%	82.72%	86.42%	432.78/5 = 86.56%
ALL	130	93.13%	85.50%	85.50%	84.73%	84.62%	433.48/5 = 86.70%

1. The teaching methods used in this simulation were helpful and effective.
2. The simulation provided me with a variety of learning materials and activities to promote my learning the medical surgical curriculum.
3. I enjoyed how my instructor taught the simulation.
4. The teaching materials used in this simulation were motivating and helped me to learn.
5. The way my instructor(s) taught the simulation was suitable to the way I learn.



Findings –NLN Survey: Self-confidence in Learning

SELF	N	%T Q6	%T Q7	%T Q8	%T Q9	%T Q10	%T Q11	%T Q12	%T Q13	SELF T
RN	19	84.21%	73.68%	84.21%	84.21%	89.47%	94.74%	94.74%	47.37%	652.63/8 = 81.58%
LPN	31	93.55%	87.10%	83.87%	80.65%	100%	93.55%	90.33%	51.61%	680.66/8 = 85.08%
Traditional	81	75.31%	75.31%	79.02%	90.12%	89.75%	90.12%	92.59%	40.74%	632.96/8 = 79.12%
ALL	131	80.91%	77.86%	80.92%	87.02%	92.31%	92.31%	92.31%	44.27%	647.91/8 = 80.99%

SELF	N	%T Q6	%T Q7	%T Q8	%T Q9	%T Q10	%T Q11	%T Q12	%T Q13	SELF T
RN	19	84.21%	73.68%	84.21%	84.21%	89.47%	94.74%	94.74%		605.26/7 = 86.47%
LPN	31	93.55%	87.10%	83.87%	80.65%	100%	93.55%	90.33%		629.05/7 = 89.86%
Traditional	81	75.31%	75.31%	79.02%	90.12%	89.75%	90.12%	92.59%		592.22/7 = 84.6%
ALL	131	80.91%	77.86%	80.92%	87.02%	92.31%	92.31%	92.31%		603.64/7 = 86.23%

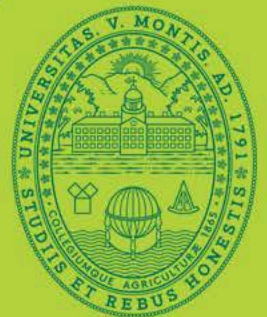
Q13. It is the instructor's responsibility to tell me what I need to learn of the simulation activity content during class time



Findings –IP Survey: Reflection

IP REFLECTION	N	Q14	Q15	Q16	Q17	Q18	TOTAL
RN	17	76.47%	100%	100%	82.35%	88.24%	447.06/5 = 89.41%
LPN	31	87.1%	87.1%	100%	100%	87.10%	461.30/5 = 92.26%
Traditional	82	83.95%	97.53%	97.56%	82.93%	89.02%	450.99/5 = 90.20%
ALL	130	83.7%	95.35%	98.46%	86.92%	88.46%	452.89/5 = 90.58%

Q14	I recognize my limitations in providing care for patients and families at the end of life.
Q15	I recognize the necessity of utilizing a healthcare team when providing care for patients at the end of life.
Q16	I will continue to build relationships with other healthcare professionals to improve care for elders.
Q17	I learned about effective inter-professional teamwork
Q18	I feel more comfortable integrating the knowledge and experience of other professions to inform care of patients at end of life.



Findings –IP Survey: Movie Simulation

Question 12	N	SA (5)	#/T	A (4)	#/T	%T	#
RN	17	23.53%	4	52.94%	9	76.47%	13
LPN	31	32.26%	10	48.39%	15	80.65%	25
Traditional	82	18.52%	15	51.85%	42	65.51%	57
ALL	130	22.31%	29	50.77%	66	73.08%	95

Question 12: The movie effectively demonstrated health professionals' roles and responsibilities in palliative care.

Question 12	N	SA (5)	#/T	A (4)	#/T	%T	#
Traditional (FTF)	82	18.52%	15	51.85%	42	65.51%	57
Online	48	29.17%	14	50.00%	24	79.17%	38



Findings –IP Survey: Movie Simulation

Question 13	N	SA (5)	#/T	A (4)	#/T	%T	#
RN	17	29.41%	5	52.94%	9	82.35%	14
LPN	31	35.48%	11	48.39%	15	83.87%	26
Traditional	81	24.69%	20	45.68%	37	70.37%	57
ALL	129	27.91%	36	47.29%	61	75.19%	97

Question 13: The format and pace of the movie was conducive to my learning.

Question 13	N	SA (5)	#/T	A (4)	#/T	% T	#
TOTAL (ONLINE)	48	33.33%	16	50.00%	24	83.33%	40
Traditional (FTF)	81	24.69%	20	45.68%	37	70.37%	57



Findings –IP Survey: Discussion (F-T-F _{versus} DB)

Discussion 1	N	SA (5)	#/T	A (4)	#/T	%T	#
F-T-F	81	41.98%	34	46.91%	38	88.89%	72
Online DB	48	45.83%	22	43.75%	21	89.58%	43

Discussion Q1: The format and pace of the **discussion** time was conducive to learning.

Discussion 2		SA (5)	#/T	A (4)	#/T	%T	#
F-T-F	81	58.02%	52	34.57%	28	86.42%	70
Online DB	48	54.17%	26	41.67%	20	91.67%	44

Discussion Q2: I learned about effective interprofessional teamwork from the discussion.



Findings –IP Survey: Discussion (Participation)

IP Discussion Participation	N	Q3	Q4	Q5	TOTAL
Traditional FTF	81	97.53%	86.42%	97.53%	$281.48/3 = 93.83\%$
Online DB	129	95.83%	91.67%	87.50%	$275.00/3 = 91.67\%$

Discussion Q3: I expressed my knowledge and opinion during the case discussion.

Discussion Q4: I expressed my feelings about end of life care during the case discussion.

Discussion Q5: Each member of the team shared responsibility for a constructive discussion of end of life care.



Open ended – traditional BSN comments

Was the movie a valuable experience? Why or why not?

“Yes, showed concerns families often have and the roles of each team member.”

Please comment on what could be improved on the movie.

“I think demonstrating more nursing care would be helpful.” “Too long, bad acting.”

What aspects of the movie were particularly helpful for your learning?

“The different professions at work and seeing a real life simulation of a death scenario.”



Open ended – online students (LPN-BSN, RN-BSN)

Was the movie a valuable experience? Why or why not?

“Great movie simulation to teach students about collaboration and an end of life situation. It was realistic, the pace of the movie was good, and it covers all the important aspects of caring for a patient and their caregiver. Should make more movies like this in various settings”

Please comment on what could be improved on the movie.

“Future simulations should go into more detail for the patient assessment and teaching for the patient/family.”

What aspects of the movie were particularly helpful for your learning?

“I really liked how the professionals interacted with the patient and how they were present and open to any questions and concerns. I also appreciated the fact that they explained their different roles very well.”

“I liked the realism of the situation and I liked the fact that you included a gay couple. Students need to be culturally competent when caring for patients and families.”



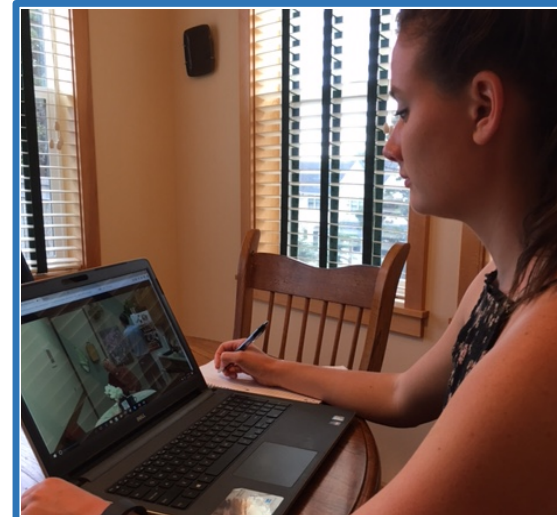
Discussion

- Student responses show that this movie format is a useful means to allow for online simulation and shows evidence of 1) satisfaction (mode of simulation), 2) self-confidence in learning and 3) perceived competency in the interprofessional palliative care of a patient.
- For this pilot survey, various tracks of nursing students (multi-site) learning via differing formats (online versus face-to-face) may have direct benefit from this educational modality.
- This finding is helpful as the logistics, faculty time, and cost of simulation for large groups of interprofessional students is considerable.



Discussion

- A significant amount of literature supports the use of simulation to enhance critical thinking.
- The development of specific (level appropriate) video case study simulations may broaden the teaching strategies available to bring simulation and debriefing to students of nursing and other interprofessional disciplines.
- The use of a movie simulation (based on health concepts/case scenarios) appropriate to the level of learning can reach a wide audience outside of a simulation lab whether a distance or local student.



Limitations

- This was a small pilot study with uneven sample sizes that were not appropriate for statistical analyses.
- Diversity was lacking in the large group of traditional students.



Recommendations for Future Research

- Innovative online simulation activities which expose students to interprofessional practice must also be continually developed, implemented, and evaluated.
- Consistent evaluation of interprofessional practice competency domains must also be included in all educational activities.
- Multi-site, multi-educational mode (face-to-face and online) comparisons are also encouraged.
- Synchronous or asynchronous technological advances (virtual clinics, video conferencing, mobile robotic tele-presence, movie discussions) have opened up new avenues for interprofessional simulation education. This type of innovative pedagogy must be further evaluated and disseminated.



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Questions?

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