

High-Fidelity End-of-Life Simulation for Nursing Students

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BACKGROUND

Caring for dying patients is a crucial nursing competency across practice settings yet nursing schools have historically struggled to provide adequate end-of-life (EOL) education. This has resulted in nursing students feeling underprepared to care for dying patients.^{1,2} Nurses who lack knowledge about the dying process or who have negative attitudes toward death are more likely to limit their interactions with dying patients and show more reluctance in discussing EOL issues with families.^{3,4,5} In addition to adversely affecting the quality of care that dying patients receive, inadequate end-of-life education can lead to increased risk of stress, burnout, and lack of resiliency in nurses themselves.⁶ Simulation-based educational activities involving the use of high-fidelity mannequins are commonly used in undergraduate nursing education.⁷ The use of high-fidelity end-of-life simulations may improve students' attitude toward death and care of dying patients, but its implications for a practice change have yet to be definitively described.

PURPOSE

The purpose of this project was to examine the current literature to guide recommendations for the inclusion of end-of-life education through high-fidelity simulation in the entry-level nursing curriculum.



METHODS

A literature search was conducted using the CINAHL database accessed through the University of Maryland Health Sciences and Human Services Library. Search terms included "nursing", "student", "end-of-life", and "education". Articles were excluded if published prior to 2016, were not peer-reviewed, lacked relevancy to the PICOT topic or were of poor quality. Nineteen articles were reviewed and five of the highest quality were included in the literature review. Four quasi-experimental studies and one randomized controlled study were included.



EVIDENCE REVIEW RESULTS

Authors, (Year)	Results	Level of Evidence/ Quality Rating*
Berndtsson et al., (2019) ³	Found statistically significant changes in student attitudes toward death and care of dying patients after an EOL simulation. ³	III / C
Byrne et al., (2020) ⁸	Found a statistically significant difference in pre/post Frommelt Attitude Towards Care of Dying Scale (FATCOD) test score using a paired t test (t50 = 3.1, P = .003). ⁸ Nursing students' attitudes improved from baseline following the EOL simulation. ⁸	III / C
Dame & Hoebeke, (2016) ⁹	The pre-simulation mean score on the 30-item FATCOD scale was significantly different than the mean on the pretest (p < .001). ⁹ Students' attitudes, confidence levels and anxiety levels toward death and care of dying patients improved significantly from pre- to post-simulation. ⁹	III / C
Rattani et al., (2020) ¹⁰	Found a statistically significant difference in pre/post FATCOD test scores using a paired t test (P<0.05). ¹⁰ Nursing students' attitudes following the EOL simulation improved significantly from baseline. ¹⁰	II / B
Tamaki et al., (2019) ¹¹	Students in the intervention group had significantly improved knowledge, skills and self-confidence scores following the EOL simulation as compared to the control group (p<0.01). ¹¹	III / C

*Level of evidence rated using Melnyk Hierarchy and study quality rated using Newhouse Quality Rating

IMPLICATIONS FOR NURSING PRACTICE

The American Association of Colleges of Nursing (AACN) has recently established EOL patient care an essential competency for nursing students.¹³ Events such as the COVID-19 pandemic as well as the rapidly aging United States population have reinforced the importance of ensuring nursing students are prepared to handle end-of-life patient care.⁶ Current evidence suggests that nurses who receive end-of-life education through high-fidelity simulation have increased self-efficacy in caring for dying patients and their families and are more resilient in the face of emotional distress than nurses who do not.^{3,8,9,10,11} Actual implications for nursing practice remain unknown. Future studies should determine if increased self-efficacy in EOL care translates to improved patient outcomes.

CNL ROLE

Clinical Nurse Leaders (CNLs) aim to improve the quality of patient care and clinical outcomes through research, evaluation, and implementation of evidence-based practice.¹² In terms of EOL education, CNLs should ensure that clinical staff in their microsystem are equipped with the knowledge and skills they need to effectively care for dying patients while coping with the emotional toll it places on them. Based on the evidence in the current literature, CNLs should advocate for the inclusion of high-fidelity EOL simulations for undergraduate nurses that will ensure a more resilient and competent workforce in the future.

CONCLUSIONS

End-of-life patient care is an essential competency for nurses due to the increasing frequency of caring for dying patients in the healthcare setting. The evidence gathered from the literature suggests that end-of-life simulations in the nursing curricula have the potential to increase students' attitude, knowledge, and confidence with end-of-life care.^{3,8,9,10,11} Because of the potential positive effects on student's self-efficacy in EOL patient care, an EOL education via high-fidelity simulation should be incorporated into all undergraduate nursing schools' curricula. Further research will be needed to determine its long-term implications for patient care.

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