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Mary Val Palumbo

The University of Vermont, Mary.Palumbo@uvm.edu

Christina S. Melvin

The University of Vermont, Christina.Melvin@uvm.edu

Nancy P. LeMieux

The University of Vermont, Nancy.LeMieux@uvm.edu

Deborah A. O'Rourke

The University of Vermont, deborah.orourke@uvm.edu

Jean Beatson

The University of Vermont, jean.beatson@uvm.edu

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Authors

Mary Val Palumbo, Christina S. Melvin, Nancy P. LeMieux, Deborah A. O'Rourke, Jean Beatson, Patricia A. Prelock, Kelly A. Melekis, Mary Alice Favro, and Vicki Hart

An Interprofessional End of Life Simulation Using a Movie/Discussion Format

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Mary Val Palumbo, DNP, MSN, BS, APRN, GNP-BC¹

Christina S. Melvin, MS, BS, PHCNS, BC, CHPN¹

Nancy P. LeMieux, MSN, BSEd, RN¹

Deborah A. O'Rourke, PhD, MA, MCISc, BSc, PT²

Jean Beatson, EdD, MS, RN³

Patricia A. Prelock, PhD, MA, BS, CCC-SLP, BCS-CL⁴

Kelly A. Melekis, PhD, MSW, LMSW⁵

Mary Alice Favro, MA, BS, CCC-SLP⁶

Vicki Hart, PhD⁷

(1)Department of Nursing, University of Vermont, Burlington, VT

(2)Dept. of Rehabilitation and Movement Science, University of Vermont, Burlington, VT

(3)Vermont Interdisciplinary Leadership Education for Health Professionals Program, University Of Vermont, Burlington, VT

(4)Department of Communication Sciences & Disorders, University of Vermont, Burlington, VT

(5)Department of Social Work, University of Vermont, Burlington, VT

(6)Department of Communication Sciences and Disorders, University of Vermont, Burlington, VT, VT

(7)Office of Health Promotion Research, University of Vermont, Burlington, VT

Purpose:

The interprofessional team's role in end of life care provides a unique opportunity for an educational simulation. Novel ways to teach this content to a large number of students were needed. This research evaluated a palliative care interprofessional educational activity for healthcare students from six disciplines using an in-person movie/discussion format.

Methods:

Healthcare provider assessment visits and a death scene were pilot tested in actual simulations using twenty four students with standardized patients portraying a patient with ALS and his husband. Scripts were written from recordings of these simulations and were used in the dialogue of the movie which had standardized patient actors playing the patient, husband, sister and the student healthcare providers. The movie portrayed a patient with ALS and his husband in five scenes: assessment of patient and family needs by nursing, physical therapy, social work and speech language pathology; and a death scene. The movie was then edited to be used for discussion by large student groups.

An evaluation survey was developed with 14 questions scored on a Likert scale and related to Interprofessional Competency Domains of 1. Values/Ethics, 2. Roles/Responsibilities, 3. Interprofessional communication, and 4. Teams/teamwork. These competencies provided a structure for the evaluation questions, and a review by faculty in each discipline also provided content validity. Reliability of the survey instrument was not tested or established. Graduate nurse practitioner, medical, communication sciences and disorders, social work and physical therapy students as well as undergraduate nursing students participated together in end of life movie discussions in four sessions held in a classroom equipped with tables of six.

Survey responses were compared across disciplines and across the four interprofessional competency domains using a Chi-square test and adjusting for multiple comparisons. Significant differences were established at $p < 0.05$ level.

Results:

Student evaluations of the end of life simulations were consistently positive. Eighty percent of the participants ($n=162$) strongly agreed that they recognize the necessity of utilizing a healthcare team when providing care for patients at the end of life. All participants agreed that they would continue to forge relationships with other healthcare professionals to improve care for elders. Physical therapy students were consistently had the most positive responses; however, significant differences were only observed in three of the 14 questions. There were no significant differences between disciplines across the four interprofessional competency domains. A summary of qualitative data from the open ended questions will be also be presented.

Conclusion:

Interprofessional end of life care can be simulated in a carefully planned activity. The value of the experience was expressed by all students. Nurse practitioner students valued being able to practice supervising a palliative care team and facilitating the team discussion. Other students appreciated a safe place to discuss how to care for a dying patient and their family. Regarding the evaluation, small sample sizes in some disciplines may have limited the ability to detect significant differences between groups. Production of a movie and the discussion of the different scenes helped lower the cost of the simulation and scale up the activity for use with large groups of students. Interprofessional education requires innovative pedagogy that must be evaluated and disseminated. Consistent evaluation of interprofessional practice competency domains must be included in all educational activities.