PALLIATIVE CARE TEACHING STRATEGIES IN PRE-LICENSURE NURSING EDUCATION: AN INTEGRATIVE REVIEW

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Purpose: Current trends in the United States show that palliative care services are being used by Medicare patients at the highest rates in the past ten years (Teno et al., 2013). While there is a need for services, many nurses feel incompetent (Schlairet, 2009) and students experience anxiety (Smith-Stoner, 2011) in providing quality palliative care. Although education can be effective in decreasing student anxiety (Barrere, Durkin, and LaCoursiere, 2008) and increasing perceived competence (Allchin, 2006), little is known about which teaching strategies are most effective in increasing knowledge and competence in providing palliative care. Very little is known about how palliative care education impacts patient outcomes. An integrative review of the literature was conducted that critically evaluated characteristics and effectiveness of teaching strategies designed to improve student learning outcomes, and the subsequent impact on patient outcomes, associated with palliative care education.

Methods: An integrative review of the literature was conducted utilizing ten databases (both nursing and education). Articles from 1998 to present were considered, as this time marked the formation of the End of Life Nursing Education Consortium (ELNEC) that developed 15 palliative care competencies for practicing nurses. Multiple search terms where utilized to ensure all applicable articles were accessed. Articles were also obtained through manual searching of reference lists and related citations of relevant articles. A total of 14 articles were included in this review.

Findings: Palliative care education was most frequently taught within required courses not dedicated to palliative care or in palliative care elective courses. Lecture/didactic sessions were implemented most frequently (n=8), followed by film observation (n=5), and hospice clinical experiences (n=4). All other teaching strategies were implemented in only one or two studies. Teaching topics covered in the studies varied widely and most frequently focused on: nursing responsibilities, psychological topics, societal/cultural perspectives, the dying process, and ethical/legal issues. Learning outcomes demonstrated across a majority of studies included: decreased student anxiety (n=7), and increased knowledge (n=4), self-efficacy (n=2), and awareness about or appreciation of palliative care (n=4). A major limitation in the studies reviewed was over-inflated effect sizes, preventing critique of the effects of individual strategies. Additionally, no studies reviewed analyzed the effect of teaching strategies on patient outcomes.

Conclusions: The various teaching strategies utilized across studies demonstrated primarily positive student outcomes. However, the most significant findings from this review relate to the gaps or weaknesses in the literature that need to be addressed in future research. These gaps include: 1) inability to determine relative effectiveness of teaching strategies due to insufficient power and poor study design; 2) inability to distinguish the impact of multiple strategies when analyzed collectively within a specific course; 3) inadequate teaching strategy description for replication; and 4) lack of palliative care content taught within dedicated courses.