

**Title:**

Active Teaching Strategies for a Sense of Salience: End-of-Life Communication

**Mary Louisa Kopp***School of Nursing, Concordia University Wisconsin, Mequon, WI, USA***Session Title:**

End-of-Life

**Slot:**

1C: Friday, April 4, 2014: 10:15 AM-11:30 AM

**Scheduled Time:**

10:15 AM

**Keywords:**

Active Teaching Strategies, Communication and End-of-Life

**References:**

Arthur, D. (1999). Assessing nursing students' basic communication and interviewing skills: the development and testing of a rating scale. *Journal of Advanced Nursing*, 29(3), 658-665.

Benner, P., Sutphen, M., Leonard, V., & Day, L. (2010). *Educating nurses: A call for radical transformation*. San Francisco, CA: Jossey-Bass.

Dunne, K. (2005). *Effective communication in palliative care*. *Nursing Standard*, 20(13), 57-64.

Fink, L. D. (2013). *Creating significant learning experiences: An integrated approach to designing college courses*. San Francisco, CA: Jossey-Bass.

Malloy, P., Virani, R., Kelly, K., & Munevar, C. (2010). Beyond bad news: Communication skills of nurses in palliative care. *Journal of Hospice and Palliative Nursing*, 12(3), 166-174.

Wittenberg-Lyles, E., Goldsmith, J., Ferrell, B., & Ragan, S. L. (2013). *Communication in palliative nursing*. New York, NY: Oxford University.

Yeaworth, R. C., Kapp, F. T., & Winget, C. (1974). Questionnaire for Understanding the Dying Person and His/Her Family. *Nursing Research*, 23, 20-24.

**Learning Activity:**

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE	TIME ALLOTTED	FACULTY/SP EAKER	TEACHING/LEARNING METHOD	EVALUATION/FEEDBACK
<b>Example</b>  Critique selected definition of the term, "curriculum"	<b>Example</b>  Definitions of "curriculum"  <ul style="list-style-type: none"> <li>• Course of study</li> <li>• Arrangements of instructional</li> </ul>	<b>Example</b>  20 minutes	<b>Example</b>  Name, Credentials	<b>Example</b>  Lecture PowerPoint presentation Participant feedback	<b>Example</b>  Group discussion: What does cultural training mean to you?

	<p>materials</p> <ul style="list-style-type: none"> <li>• The subject matter that is taught</li> <li>• Cultural "training"</li> <li>• Planned engagement of learners</li> </ul>				
Compare significant learning, active teaching, and traditional passive lecture	<p>Definitions: traditional lecture, active learning/teaching &amp; significant learning according to Fink (2013). Relate Fink (2013) active teaching to Blooms taxonomy, Decreases the paradigm shift in the classroom, alignment with clinical</p>	15 minutes	Dr. Mary Lou Kopp, PhD, MSN, RN, CHPN, CNE	Pre-assessment discussion. Lecture Power point presentation Participation feedback	Group discussion: Comparison of pre-assessment discussion, importance of significant learning for a sense of salience.
Recognize the importance of teaching	Problems with passive lecture: producing a	15 minutes	Dr. Mary Lou Kopp, PhD, MSN, RN, CHPN, CNE	Lecture Power point presentation Provide examples of each: Cognitive	Discuss challenges and importance of teaching end-of-life communication, and

End-of-Life communication skills with a sense of salience	sense of salience; difficulty nature of teaching end-of-life communication. Foundation to excellent nursing care at end-of-life.			(written exam), affective (journaling, self-assessment, surveys) and psychomotor assessment (simulation): including simulation video. Participation feedback	assessing all 3 learning domains
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**Abstract Text:**

The problem addressed was twofold: First, passive lecture prevents transfer to situational decision-making, or a sense of salience (Benner, Sutphen, Leonard, & Day, 2010). Nursing education pedagogy is in need of revision. Many nurse educators teach from tacit, or experience in how they were originally taught. Nurse educators must prioritize utilization of educational science. Active teaching models are meant to encourage a sense of salience by integrating theory and practice (Benner et al., 2010). However, the inconsistent nature of active learning definitions prevents generalization of research findings. Fink (2013) provided a structured definition for active teaching strategies that compliments learning domains created by Bloom, Englehart, Furst, Hill, and Krathwohl (1956). Second, death discussions are more complicated than standard communication courses teach. The COMFORT model (Wittenberg-Lyles, Goldsmith, Ferrell, & Ragan, 2013), was validated for nursing education.

This study compared active teaching strategies with passive lecture by evaluating cognitive, affective, and psychomotor learning outcomes, while highlighting the need for end-of-life communication in nursing education. The design was comparative, quasi-experimental, and posttest-only with control. Instruments included a multiple-choice test (Malloy, Virani, Kelly, & Munevar, 2010), a survey measuring openness toward end-of-life communication (*Questionnaire for Understanding the Dying Person and His/Her Family*, Yeaworth, Kapp, & Winget, 1974), and an observational checklist called the *Simulated Client End-of-Life Communication Scale*- (SCEOLCS), revised from the *Simulated Client Interview Rating Scale* (Arthur, 1999). Significant psychomotor differences were revealed ( $t(46) = -5.65, p < .001$ ). The SCEOLCS demonstrated internal consistency ( $\alpha = .902$ ). Active teaching strategies improved the nursing student's sense of salience during end-of-life communication. Ultimately, nursing students were better prepared for one of their most underestimated and rewarding roles, caring for dying patients and their families.