

Teaching Methodologies Regarding Palliative Care Competencies on Undergraduate Nursing Students: A Systematic Review

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Abstract

The teaching problem in undergraduate nursing students (UNS) is a lack of empirical evidence of teaching methodologies for achieving palliative care competencies (PCC). The purpose of this review was to synthesize the evidence of palliative care (PC) teaching methodologies for UNS and their effectiveness to achieve PCC.

Four electronic databases were searched, including Scopus, ProQuest, PubMed, and CINAHL, from 2015 to 2020. Full-text available, published in peer-reviewed journals, written in English and aimed at verifying the effectiveness of teaching methodologies for achieving PCC were included. The Critical Appraisal Skills Programme (CASP) checklist was used to appraise the trustworthiness, relevance, and the results of published papers.

Five studies were considered relevant for this systematic review. The learning methodology carried out to achieve PCC for UNS varies from multimodality approaches, simulation-based experience to high fidelity simulation. Kolb's Experiential Learning Theory proved to be effective in improving students' PCC, especially in the aspects of knowledge, attitude, comfort, and self-awareness.

The learning methodology identified in this review was proven to be effective to improve the PCC on UNS; simulation being the most widely applied method in teaching strategies.

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Introduction

The World Health Organization (WHO) defines palliative care (PC) as an integrated system of care provided to patients suffering from chronic or terminal illness from the time the diagnosis is made to the end of the patient's life. It is a people-centered approach to care that takes into account physical, psychological, social and spiritual aspects associated with a life-threatening illness¹. During the sequence of their

illness, patients need expert care including end of life care. This generates a need for longer-term comprehensive care to shorter-term curative treatments and to maximize the quality of life of patients during their illness. WHO also states the importance of PC care and end-of-life care (EOL) and recommends that these treatments could be offered early in the course of a serious illness. Unfortunately, most postgraduate nurses feel unprepared to provide care to patients with serious illnesses or patients who are dying²⁻⁵. This condition highlights the need for education and training on PC for UNS.

Education is the key to develop quality of human resources and a tool to kind an important transformation in learners' knowledge and comfort about PC. Without the right learning strategies and approaches, students will not be able to carry out PC holistically. After receiving

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