

Innovation with ELNEC Education  
March 27, 2023  
**ENLEC Undergraduate/New Graduate**  
**Module 2: Communication**

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**Purpose of Webinar Series :** Overview of ELNEC Undergraduate/New Graduate Modules and Competency

- a. Previously recorded and found on Faculty Corner – Recorded Webinars – “[Examining AACN Essentials and CARES/G-CARES](#)” September, 28, 2022 (YouTube, 57 minutes)

**About This Module**

Communication is the foundation of everything that you do in palliative care. It is critical in all healthcare situations but is of special significance in the care of those with serious illness and at the end of life. Your vital role as a nurse is respected and members of the healthcare team depend on your assessments in order to work together with the patient and their family in developing goals of care. Communication is a wonderful skill to have and it improves over time, especially if you pay attention to those who do it well.

The goal of this module is to provide undergraduate and new graduate nurses with knowledge of communication principles for palliative care.

**Learning Objectives**

After taking this course, you should be able to:

- Discuss the role of the nurse in communication with the patient, family, and interdisciplinary team across the serious illness trajectory and at end of life.
- Describe active listening and mindful presence as essential skills for providing empathic care to patients with serious illness and their families.
- Identify three communication techniques that you can use to help patients and families discuss difficult topics in palliative care and at the end of life.

**I. Teaching Consideration:** Language around content warning.

Examples:

- a. “ELNEC acknowledges that every person has unique life experiences that inform how they perceive and respond to various types of information. We recognize that topics within palliative and end-of-life care, such as death and dying, can be cognitively or emotionally challenging for some individuals, resulting in feelings of discomfort, and upset. We encourage learners to contact their course faculty members or university-based mental health services if they experience distress associated with the content within this module”.
- b. “We recognize that topics within palliative and end-of-life care can be cognitively or emotionally challenging for some individuals. We encourage learners to contact their course faculty members or university-based mental health services if they experience distress associated with the content within this module.”

**II. Communication Competency Domains:** Skills for competent communication fall into three categories (Lippe & Davis, 2022):

- a. Utilizing therapeutic presence strategies:
  - i. Practice attentive listening skills such as active thoughtful engagement with what is being said or seen. Intentional listening discourages listening in preparation for

what you will say in response instead of having the intention of hearing and understanding.

- ii. Use therapeutic silence.
- iii. Be mindful of body language and demeanor.

b. Demonstrating compassionate and respectful therapeutic communication:

- i. Respond empathically to voiced concerns and fears.

c. Engaging in serious illness conversations:

- i. Identify who the patient considers their “family caregiver [FCG]” (i.e., the person most important to include in decision making and care).
- ii. Assess the FCG’s ability, knowledge, and skills to safely provide that care.
- iii. Elicit patient and family understanding of the illness, treatments, and the disease trajectory.
- iv. Assist in eliciting goals of care and what is important and advocate for those wishes to be met.

III. **Short Tour of Module 2: Communication** This is meant to show you how the module is set up and share a variety of ways the students engage with the material

IV. **Teaching Ideas**

- a. Mandatory faculty training (for all full-time faculty)
- b. Advanced Communication skills (virtual or in-person) and role-playing
- c. Interactive discussions
  - i. Utilize case studies to demonstrate attentive listening skills and compassionate communication.
  - ii. Partner with content experts for real-time classroom discussions on communication challenges associated with language differences.
  - iii. Partner with faith-based palliative care/hospice chaplains about their communication strategies related to the role of religion and spirituality.
  - iv. Implement a card game, such as “GoWish” or “My Gift of Grace” to stimulate conversations nurses encounter working with patients and FCG.
- d. Simulation
  - i. Integrate a simulated telephone/remote conversation with a caregiver(s) related to serious illness or a challenging conversation.
  - ii. Utilize a translator app or a medical interpreter in a simulated serious illness conversation or end-of-life discussion.
  - iii. Design scenario in which a serious illness or EOL conversation has occurred, and the nurse is asked by the patient and/or FCG to explain and clarify everything they heard.
- e. Content expert lectures
  - i. Include short 10-15 minute videos on symptom management matching up with the chronic disease or serious illness (i.e. COPD, HF, or ESRD).
  - ii. Create a podcast interview of a content expert for use outside of the classroom.
- f. Clinical rotations
  - i. Partner with an existing palliative care or hospice team for a ‘Day in the Life’ of a palliative care/hospice nurse.
  - ii. Attend an IDT meeting with an inpatient palliative care team or an outpatient hospice team.
  - iii. Participate in bereavement program through hospice organization, such as art and music therapy, or bereavement mailing program.
- g. Digital Badges awarded to all students that complete ELNEC Modules

V. **Supplemental Resources**

- a. Publicly available videos (some at the end of this document)

- b. ELNEC – when requesting token to review material or if you use ELNEC, write to [ELNEC@coh.org](mailto:ELNEC@coh.org) and request supplemental materials for the specific module (ex. Case Studies and other resources)
  - c. [Faculty Corner Resources](#)
- VI. In closing – Questions, Next Webinar (ELNEC-Undergraduate: Communication)
- a. Needs Assessment Survey: [CLICK HERE](#)
  - b. Call for submissions – please share teaching exemplars you use to introduce palliative care to students. [CLICK HERE](#)

## VII. Breakout Activity

**Instructions:** In small breakout rooms, you will select one of the resources and talk about how you might leverage in your teaching (classroom, clinical post conference, or simulation).

1. **Everyone** – share how you are incorporating palliative care education and specifically communication principles. Remember we are all doing different things and at different places with this so if you don't know, that's okay too! How can we help each other to advance palliative care education?

### PICK ONE BELOW

2. **Case Study Example:** discuss how you might either modify this and/or where might you use it in education – simulation? A classroom? What level? What course? Clinical? What population?

#### Mr. Ahmed: Active Treatment and Palliative Care?

**This is a good one for practicing active listening. Don't just talk about it, let them practice.**

Mr. Ahmed is a 74-year-old with end-stage heart failure. Two weeks ago, his cardiologist advised him and his family that he was not a candidate for a heart transplant and there were no further aggressive treatment options. The cardiologist recommended hospice care. The patient and family were not interested in hospice or palliative care; they requested that “everything be done” and decided to seek another cardiologist’s opinion.

Mr. Ahmed has been struggling with weight loss, severe shortness of breath and swelling of his lower extremities. Last evening, he fell at home and his wife brought him into the emergency room. He is admitted to your cardiac unit for further evaluation of his fall and cardiac status. When you go in to help him with his am care, he tells you he is so tired of treatment and doctors and just wishes his family would “give up and just let me be at home, so I can play with my dog and be with my friends.”

#### Discussion Questions:

- a. How would you respond to Mr. Ahmed?
- b. Is it possible for Mr. Ahmed to continue to receive symptom management treatment for his heart failure and receive hospice care at the same time? If so, how would you describe this to Mr. and Mrs. Ahmed?
- c. How could you use attentive listening and presence with this patient and his wife?

3. **Listening Exercise:** Discuss how you might incorporate and where; what sort of course?

This exercise is intended to give participants/students an opportunity in active listening. Please divide yourselves into groups of two. One of the two partners will be instructed to be the “speaker” to describe a loss that they’ve experienced in their own life. This can be loss of a significant person, loss of some aspects of their own health, loss of a pet, loss of an object/home or any other significant loss in life. The person is asked to talk about this loss for five minutes. The second partner, the “listener,” needs to listen silently for the five-minute period of time. The listener *may not speak at all* during the five minutes.

This exercise is intended to provide both an experience in describing loss and in expressing emotions as well as, most importantly, giving an opportunity to listen intently in silence.

Commented [DA1]: Excellent exercise and easy to do in groups – Stop during module when covering active listening

**Questions for Discussion:**

After completing this five-minute exercise the following questions may be used to guide discussion with the participants: **Add questions that reflect some of the module slides – use of verbal/nonverbal cues that reflected listening (body language, presence, tone, mannerisms) Include cultural issues of touch and eye contact....NOT universally acceptable.**

1. For the “Speaker”:
  - What did it feel like to describe your loss?
  - How did the listener respond to you?
  - Did you feel that the listener was being attentive?
  - Was there any particular thing that made you feel that the listener was in fact listening to you?
  
2. For the “Listener”:
  - How did it feel for you to listen in silence for five minutes?
  - Did the five minutes seem short or long?
  - What aspects of the telling of the story of loss were most significant to you?
  - What did you learn from this experience of attentive listening?

**Alternative listening exercise that gets to the point but is not as personal:**

Partners – 1 listens while the other takes 2-3 minutes (instructor times) to describe from the entryway of their home, what it looks like – takes the listener on a verbal tour of their home. No cross-talk from listener. When time is up, the listener recounts what they heard.

**ADDITIONAL VIDEO RESOURCES**  
**Module 2: Communication**

Frontline Communication (2020). *Breaking Bad News over the phone SPIKES model*.  
<https://www.youtube.com/watch?v=wIUrzfLDrIg> (9 minutes)

The Guardian (2019). *Before I die: a day with terminally ill patients/Death Land #2*.

What does it feel like to know you're dying? In episode two of Death Land, Leah Green meets people who are facing up to the end of their lives. She follows palliative care doctor Sunita Puri as she helps her patients come to terms with their own mortality

Difficult conversations – goals of care Excellent 14-minute video of goals of care and a beautiful conversation between the provider (identifies as Hindu) speaking with a Spanish-speaking family. (14 minutes) <https://www.youtube.com/watch?v=aZdDXNmD9wk&t=511s>

RSA (2014). *Brene Brown on Empathy*. <https://www.youtube.com/watch?v=1Evwgu369Jw>

**ADDITIONAL PUBLICATIONS**

Chang, Chan, E. A., & Chung, B. P. M. (2022). A new pedagogical approach to enhance palliative care and communication learning: A mixed method study. *Nurse Education Today*, 119.  
<https://doi.org/10.1016/j.nedt.2022.105568>

Clark, S. B., & Lippe, M. P. (2022). Vicarious learning and communication self-efficacy: A pediatric end-of-life simulation for pre-licensure nursing students. *Journal of Professional Nursing*, 43, 107-116.

Hökkä, M., Rajala, M., Kaakinen, P., Lehto, J. T., & Pesonen, H. M. (2022). The effect of teaching methods in palliative care education for undergraduate nursing and medical students: A systematic review. *International journal of palliative nursing*, 28(6), 245-253.

Findings: Simulations, lectures, films and a humanistic approach all had a positive effect on students' attitudes to care for a dying person. Problem-based learning, simulations and elective courses increased students' knowledge of palliative care. Game interventions in education decreased students' fear of death, while communication with dying patients and relatives became easier. Conclusions: Education interventions had positive effects on students' attitudes and knowledge. However, there is a need for future research into effective palliative care interventions using randomized designs and research about the effects of blended learning.

Jeffers, S., Lippe, M. P., Justice, A., Ferry, D., Borowik, K., & Connelly, C. (2022). Nursing student perceptions of end-of-life communication competence: A qualitative descriptive study. *Journal of Hospice & Palliative Nursing*, 24(3), 199-205.

Halliday, D. A., Dorney, P., & Landis, J. (2022). Difficult conversations in palliative care: Innovations in learning. *Nursing Education Perspectives*, 43(3), 201-202.

Smith, Macieira, T. G. R., Bumbach, M. D., Garbutt, S. J., Citty, S. W., Stephen, A., Ansell, M., Glover, T. L., & Keenan, G. (2018). The use of simulation to teach nursing students and clinicians palliative care and end-of-life communication: A systematic review. *American Journal of Hospice and Palliative Medicine*, 35(8), 1140–1154. <https://doi.org/10.1177/104>

# Advancing Palliative Care Education in Schools of Nursing 2023 Innovations Series



**ELNEC Undergraduate/New Graduate**

**Module 2 - Communication**

**March 2023**

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**American Nurses Association Professional Issues Panel**

**Call for Action:  
Nurses Lead and Transform Palliative Care**

Approved by ANA Board of Directors  
March 13, 2017

Developed in Partnership With Organizational Affiliate  
Hospice and Palliative Nurses Association



## Historical Context

ANA Professional Issues Panel & HPNA.  
(2017). Call for action: Nurses lead &  
transform palliative care.  
<http://www.nursingworld.org/CallforAction-NursesLeadTransformPalliativeCare>

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**2016**

**American Association of Colleges of Nursing**  
ADVANCING HIGHER EDUCATION IN NURSING



**CARES:**  
**Competencies And Recommendations for Educating Undergraduate Nursing Students**  
*Preparing Nurses to Care for the Seriously Ill and their Families*

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**2019**

American Association of Colleges of Nursing



SINCE 2000

**ELNEC**  
END-OF-LIFE NURSING EDUCATION CONSORTIUM  
*Advancing Palliative Care*

the MIRACLE of SCIENCE with SOUL



City of Hope®

Preparing Graduate Nursing Students to Ensure Quality Palliative Care for the Seriously Ill & Their Families

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**JAMA Health Forum™**

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JAMA Forum

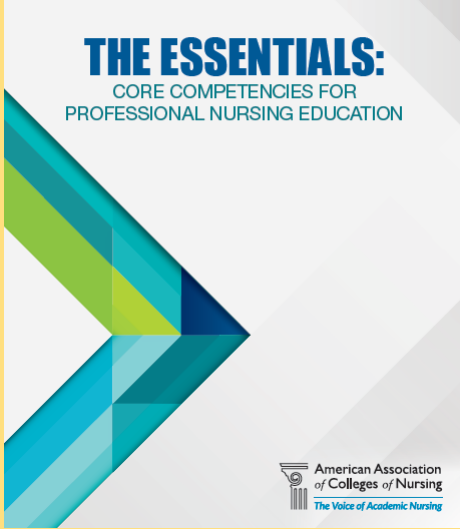
**Integration of Palliative Care Into All Serious Illness Care as A Human Right**

William E. Rosa, PhD, APRN; Betty R. Ferrell, PhD, RN; Diana J. Mason, PhD, RN

Rosa, W. E., Ferrell, B. R., & Mason, D. J. (2021). Integration of Palliative Care Into All Serious Illness Care as A Human Right. *JAMA Health Forum*, 2(4), e211099.  
<https://doi.org/10.1001/jamahealthforum.2021.1099>



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**THE ESSENTIALS:**  
CORE COMPETENCIES FOR  
PROFESSIONAL NURSING EDUCATION

American Association  
of Colleges of Nursing  
*The Voice of Academic Nursing*

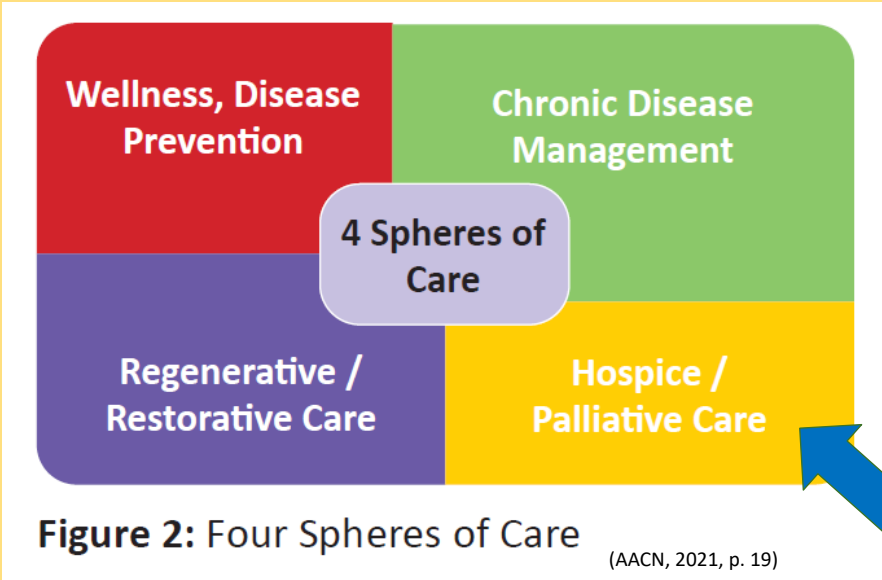
### ESSENTIALS MODEL

LEVEL 1	LEVEL 2
<b>AACN Essentials</b> Entry-Level Professional Nursing Education sub-competencies	<b>AACN Essentials</b> Advanced-Level Nursing Education sub-competencies — and — Specialty/role requirements/ competencies
Used by programs preparing a nurse for an initial professional nursing degree.	Used by programs preparing a nurse for an advanced nursing practice specialty or advanced nursing practice role.

Figure 1: Model for Nursing Education (AACN, 2021, p. 17)

American Association of Colleges of Nursing. (2021). *The Essentials: Core Competencies for Professional Nursing Education*. American Association of Colleges of Nursing. <https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials->

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**Wellness, Disease Prevention**

**Chronic Disease Management**

**4 Spheres of Care**

**Regenerative / Restorative Care**

**Hospice / Palliative Care**

Figure 2: Four Spheres of Care (AACN, 2021, p. 19)

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## COMPETENCY STATEMENT REVISION

### Entry-level Professional Nursing

- CARES (2016) = 17 competency statements
- CARES (2nd ed.) = 15 competency statements

### Advanced-Level Nursing

- G-CARES (2019) = Eight (All graduate Masters/DNP) + Five Direct Care
- G-CARES (2nd ed.) = 12 competency statements



Endorsed March 2022  
American Association  
of Colleges of Nursing

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### Recommendation #1

“Adopt the End of Life Nursing Education Consortium (ELNEC) curricula (Core, Geriatric, Critical Care, Pediatric, Advanced Practice Registered Nurse [APRN], **and Online for Undergraduate Nursing Students**) as the standard for primary palliative nursing education for pre-licensure, graduate, doctoral, and continuing education for practicing registered, vocational, and practical nurses and advanced practice registered nurses” (p. 3)

ANA Professional Issues Panel & HPNA. (2017). Call for action: Nurses lead & transform palliative care. <http://www.nursingworld.org/CallforAction-NursesLeadTransformPalliativeCare>

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# ELNEC HISTORY

End of Life Nursing Education Consortium

- 2000: Curriculum Developed
- 2001: 1<sup>st</sup> National ELNEC Course
- Currently 10 ELNEC Curricula:
  - ELNEC Core
  - ELNEC Geriatric
  - ELNEC Pediatric Palliative Care
  - ELNEC Critical Care
  - ELNEC APRN
  - ELNEC International
  - ELNEC Undergraduate/New Graduate (2017)
  - ELNEC APRN Oncology
  - ELNEC Communication (2018)
  - ELNEC Graduate (2019)



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# PRIMARY PALLIATIVE CARE EDUCATION

Undergraduate and **Graduate**

Evidence-based palliative care education



2017 and 2019

1. Introduction to Palliative Nursing
2. Communication in Serious Illness
3. Pain Assessment and Management (**Advanced**)
4. Symptom Assessment and Management (**Advanced**)
5. Loss, Grief, and Bereavement
6. Final Hours/**Care at the End of Life**
7. **Leadership in Primary Palliative Care**

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**ELNEC Undergraduate/  
New Graduate**

- ❖ 917 Undergraduate Schools
- ❖ 80,659 completions

**ELNEC Graduate**

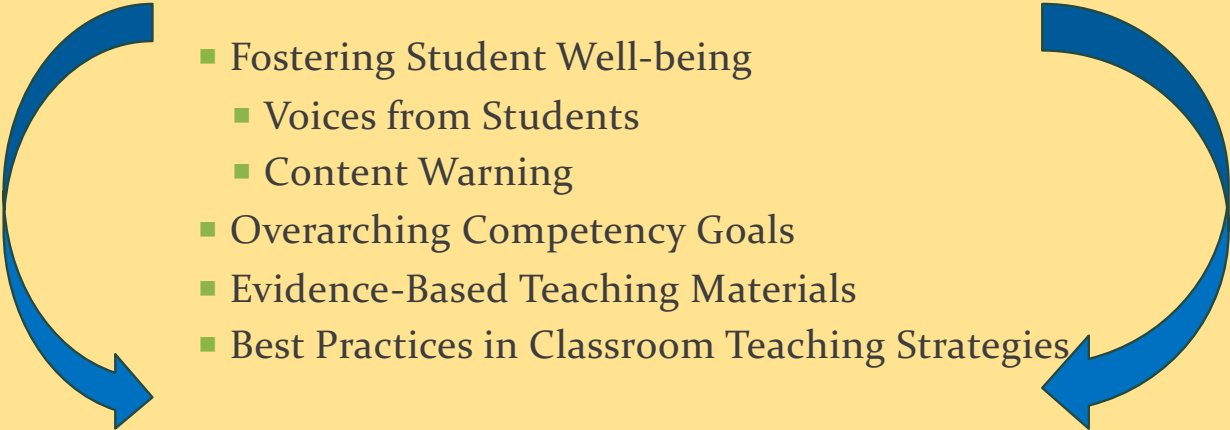
- ❖ 346 Schools
- ❖ 1806 completions



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**GENERAL CONSIDERATIONS IN  
PALLIATIVE CARE EDUCATION**

- Fostering Student Well-being
  - Voices from Students
  - Content Warning
- Overarching Competency Goals
- Evidence-Based Teaching Materials
- Best Practices in Classroom Teaching Strategies



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## Student Voices



“I felt frazzled to tears after one of the clinical days, and I realize that I need to grow in how I handle days like that and in how to leave work at work.

And I need to extend grace to myself, too.

I've been able to reflect on life and death as I have watched patients and families deal with it.

Amazing.”

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## Student Voices

- ❖ What are things I'm not allowed to say?
- ❖ I would like some solid tips on what to do when I'm experiencing emotional difficulty; I'm going to need an outlet to process after a difficult day
- ❖ I liked the ELNEC modules, but I'd get the most out of it if there was an engaging professor discussing it out loud in class.
- ❖ Wanting to develop courage through knowledge and expand conversational competence.
- ❖ Discomfort in initiating advance care planning conversations



Rotter and Braband, 2020

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## Student Voices

After completing ELNEC\_communication-specific remarks



I can imagine myself communicating with the patient and their family about end-of-life care or about how they're feeling, and I don't feel scared or incompetent. I learned communication skills and my role as a nurse for a patient and family going through palliative and end of life care

I feel more competent in therapeutic communication

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## Content Warning



University  
of Portland   
SCHOOL OF NURSING  
& HEALTH INNOVATIONS

The teaching team recognizes that some of the content may stir up past trauma or difficult experiences.

In this course we strive to practice healthy engagement which means if you ever feel distressed by course content or class conversation, if you need to remove yourself from the situation and follow up with your faculty, please do.

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<p><b><u>Utilizing therapeutic presence strategies:</u></b></p> <ul style="list-style-type: none"> <li>• Practice attentive listening skills such as active thoughtful engagement with what is being said or seen. Intentional listening discourages listening in preparation for what you will say in response instead of having the intention of hearing and understanding.</li> <li>• Use therapeutic silence.</li> <li>• Be mindful of body language and</li> </ul>	<p><b>Demonstrating compassionate and respectful therapeutic communication:</b></p> <ul style="list-style-type: none"> <li>• Respond empathically to voiced concerns and fears.</li> </ul>	<p><b>Engaging in serious illness conversations:</b></p> <ul style="list-style-type: none"> <li>• Identify who the patient considers their “family caregiver [FCG]” (i.e., the person most important to include in decision making and care).</li> <li>• Assess the FCG’s ability, knowledge, and skills to safely provide that care.</li> <li>• Elicit patient and family understanding of the illness, treatments, and the disease</li> </ul>
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**Communication Competence Domains  
(Lippe & Davis, 2022)**

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**ELNEC UNDERGRADUATE/  
NEW GRADUATE MODULE 2:**

Communication in Palliative Care

**LET'S TAKE A LOOK**

stance in viewing and/or navigating this module, click the "Help" button located in the top right.

**KELIAS**

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### Activity #1

- share how you are incorporating palliative care education and specifically communication principles. Remember we are all doing different things and at different places with this so if you don't know, that's okay too!
- How can we help each other to advance palliative care education?

### Activity #2

- Read **Case Study #2 (Mr. Ahmed)** and discuss how you might either modify this and/or where might you use it in education – simulation? A classroom? What level? What course? Clinical? What population?
- OR look at **option #3(Listening Exercise)** and discuss ways any of this material might augment what you are doing in your teaching currently.

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## AACN / ELNEC FACULTY CORNER FOR SCHOOLS OF NURSING

“New Publications & Resources”



<https://www.aacnnursing.org/End-of-Life-Care-ELNEC/ELNEC-Schools-of-Nursing-Faculty-Corner>

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