Background
- The only nationally ranked comprehensive Children's Hospital (within an adult hospital) in Sacramento serving 33 counties, covering 65,000 square miles, with nearly 8000 pediatric admissions per year.
- The Central Valley's only level 1 pediatric trauma center and the West Coast's first and California's only level I children's surgery center as verified by the American College of Surgeons.
- The complex issue of caring for a patient at the end of life in the pediatric intensive care unit is one that nurses are often not prepared for. Education is often focused on caring for a specific population and diagnosis or simulation training for resuscitative efforts. Pediatric Intensive Care Unit (PICU) nurses witness a tremendous amount of human suffering at the end of life and often receive little to no training to provide competent and compassionate care at the end of life.

Purpose
Purpose of this project was to develop an educational opportunity to improve the care of pediatric patients and families at the end of life in the PICU by providing an active learning environment with simulation education. The population of nurses that this education was targeted for were newly hired nurses to the PICU. This group of newly hired nurses ranged in experience level from new graduate nurses to 18 years of nursing experience.

Professional Practice Gap
- A needs assessment was conducted to determine the knowledge and skills needed to care for this patient population. Data collection methods included focus groups as well as the dissemination of a survey. From these findings a gap analysis was identified along with the development of target goals.
- The annual children’s hospital education survey showed that 82% of the nurses wanted more education on end of life care to feel prepared to care for not only their patients, but their families as well.

Implementation

Pediatric End of Life Simulation Education

This innovative educational intervention was a new method to engage the learners in the topic of pediatric end of life care and have an opportunity to practice utilizing the resources available on the End of Life Toolkit webpage for staff. A simulation-based learning course for pediatric end of life care was developed to introduce communication techniques and end of life interventions to improve the level of confidence with the PICU nurse and to help decrease the anxiety with end of life care and provide support for the second victim.

- A pre-briefing was done to prepare the nurses for the two pediatric end of life simulation education scenarios.
- Scenario 1: An interprofessional opportunity for learning involves a PICU Attending Physician, Pediatric Social Worker, and Nursing working with the family actors to provide a simulation based learning experience for a family conference encompassing the end of life to discussion delivering bad news and suggesting withdrawing support on a brain death determination exam.
- Scenario 2: Involves the actual withdrawing of support including providing an opportunity for family to hold the patient as the patient is extubated and awaiting death. A moment of reflection is sent out on Vocera to all nurses on the unit to alert them that a death has occurred and allow them to come say good bye to the family and support the bedside nurse. Hand and foot prints, memory making, bathing, hair locks and body bag and tag while utilizing the End of Life Checklist. Walking through the death packet, end of life checklist and what needs to be done according to hospital policy as well as transport of the body and guiding the family in this difficult time. Peer responder support offered to the bedside nurse and others caring for the patient and the family. The scenario ends with a Room Renewal.
- A debriefing was done after the scenarios to enhance learning and introduce the Support U Peer Responder Program to support second victims. Trained Support U Peer Responders were available for all students after the class to provide support to the students as the content was emotionally difficult.

Evaluation Outcomes

- 95% of the nurses indicated that they did not have any pediatric end of life training
- 100% of the nurses indicated that they have never received any pediatric end of life simulation education.
- 100% of the nurses stated that they felt that the end of life simulation education opportunity will help them to better care for their patients and families.
- 100% of the nurses stated that they felt this learning experience will help to promote resilience in their nursing practice and enhance their compassion satisfaction.
- 100% of the nurses stated they now feel more prepared to care for a pediatric patient at the end of life after this educational opportunity.

Next Steps
- Continue offering Pediatric End of Life Simulation Education to all newly hired nurses.
- Follow-up survey with nurses one year later utilizing Press Ganey Resilience metrics.
- Continue to evaluate outcomes looking for areas of improvement in End of Life Education in the Children’s Hospital.

References

Contact Information:
Michelle Linenberger MSN Ed, RN, CCRN-K, NPD-BC
UC Davis Children’s Hospital
UC Davis Health
mlinenber@ucdavis.edu
916-704-3487