Promoting Patient Advocacy During an Interprofessional Parkinson Simulation

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ABSTRACT

Background: Parkinson's is the second-most common neurodegenerative disease after Alzheimer's disease with about 90,000 people in the United States being diagnosed each year [1]. These staggering numbers make it essential for future nurses to understand the disease process and treatment regimes.

Methods: The study is a mixed method design using quantitative data from 5 post simulation questions utilizing the Likert scale and 1 open ended question.

Results: The majority of students answered between a 4-5 on the Likert scale indicating they felt very comfortable/confident to somewhat comfortable/confident on all 5 questions. The student takeaways from the simulation experience were positive indicating they learned the importance of listening to the patient and family, the importance of medication, adhering to the medication schedule, and communication with the physician.

Conclusions: Using an interprofessional simulation experience that focused on the medication schedule of a patient with Parkinson’s to help student learn patient advocacy has proven effective. A well planned out simulation scenario created a space where educator could focus on soft skills, like communication, collaboration, and advocacy.

Keywords
Interprofessional, Parkinson, Advocate, Simulation, Student.

Key Points
It is essential to give students the interprofessional experience in nursing school. It is crucial for future nurses to understand the disease process and treatment regimens of Parkinson’s patients. Surveying student participants will shed light on the areas where educators can fine-tune the simulation for future simulation participants.

Introduction
Parkinson's is the second-most common neurodegenerative disease after Alzheimer's disease with about 90,000 people in the United States being diagnosed each year [1]. By 2030 this number is expected to rise in the United States to 1.2 million people [1]. These staggering numbers make it essential for future nurses to understand the disease process and treatment regimes. Interprofessional simulation experiences provides a learning environment well suited for providing exposure to the knowledge base, clinical skills, and soft skills associated with supporting patients with Parkinson’s.

Background
Parkinson’s disease is a motor disorder that mainly affects the dopamine-producing neurons in a specific area of the brain called substantia nigra [2]. The dopaminergic neurons regulate
movement. When the communication pathways are altered, someone with Parkinson’s disease may experience resting tremors, rigidity, bradykinesia/akinesia, postural disturbances, dysarthria, dysphagia, problems stopping suddenly, masked face, depression, sleep disturbances, anxiety, and fatigue.

Currently there is no cure for Parkinson’s disease. The treatment goals are focused on symptom management, which must be highly individualized [2]. For symptom management to be the most successful, the patient needs to adhere to a strict time schedule of medication therapy. If the medication schedule is delayed by more than one hour, it can cause patients with Parkinson’s disease to experience worsening tremors, increased rigidity, loss of balance, confusion, agitation, and difficulty communicating [3]. It has been reported that three out of four hospitalized patients with Parkinson’s disease do not receive their medications on time or have had doses entirely omitted [3]. The National Parkinson Foundation says that 70% of neurologists report that their patients do not get the medications they need when hospitalized [3].

In light of the current Parkinson’s data, it is important for educators to develop learning activities that focus on Parkinson’s disease management processes. The project goal was to use a combination of in-class content review paired with an interprofessional simulation experience. Inadequate medication management was reviewed in the classroom setting. INASCAL guidelines were used to develop an interprofessional simulation that focused on patient advocacy through medication management. During the simulation, nursing students had an opportunity to exercise their knowledge and skills while collaborating with medical residence. The nursing students engaged with a high-fidelity mannequin patient and volunteer family member and a volunteer medical resident. After interacting with the patient and family member, the nursing student was responsible for advocating for the patient by bridging communication to the medical residents related to medication therapy concerns.

Theoretical Framework

The theoretical underpinning for the study is Benner’s Novice to Expert Model Perspective and The Experimental Learning Theory. The Experimental Learning Theory paired with the simulation experience gives emphasizes on learning by doing. Benner’s Novice to Expert Model can guide faculty in the didactic, clinical, and simulation setting as it relates to the professional development of nurses [4]. The traditional nursing student has limited experiences upon graduation. The instructors must give students responsibility to plan and implement patient care with the foreknowledge of possible changes in their conditions [4]. The interprofessional collaboration experience gives students the opportunity to work through some realistic patient care situations to gain knowledge on correct guidelines and decision-making strategies.

Sample

Senior level nursing students in the undergraduate nursing program participated in the interprofessional simulation. The participants were in the final semester of nursing school. A convenience sample was used to identify students to participate in the corresponding survey. Fifty-two students completed the survey. The student’s survey responses provided insight into their comfortability with Parkinson’s patients, collaborating with other health professionals and advocating for patients.

Methodology

The study is a mixed method design using quantitative data from 5 post simulation questions utilizing the Likert scale and 1 open ended question. IRB approval was obtained at the university level. Consent was obtained with a Qualtrics survey link. The nursing student participants had an educational update on Parkinson’s disease, clinical manifestations, treatments, interdisciplinary care, video examples, and a case study. After the in-class preparation, the students had a Parkinson patient in simulation with a student volunteer playing the role of the family member who was present at the bedside. The medical residents were recruited from the local medical center. The simulation objectives were: 1. Conduct a head-to-toe assessment of the patient 2. Identify critical assessment findings: confusion and incontinent episodes of urine 3. Recognize the importance of maintaining a scheduled medication regimen.

The purpose of the project was to emphasize the importance of medication regime with Parkinson’s patients in hospital and to provide an opportunity for nursing student to advocate for those patients. An Experimental Learning Theory paired with the simulation experience gives emphasizes on learning by doing. Based on that theory, the didactic in-class review method paired with the simulation experience will better prepare students to advocate for Parkinson’s patients and be comfortable and confident. The goal was for the survey result to indicate that majority of the nursing students to denote a have a score of 4-5 on Likert scale when asking a patient about their medication regime, calling the provider to question orders and patient medications, interacting with a Parkinson patient's family member or support person while providing care for the patient, providing report to other professionals about their patient, and the ability to be a patient advocate. The results would then be used to adjust the in-class review and/or the interprofessional simulation.

Results

Out of 66 undergraduate nursing students, 52 completed the Qualtrics survey with 3 declining to participate. 94% of students answered on the Likert scale of 4-5 when asked, how comfortable are you asking a patient about their medication regime? 73% answered a 4-5 on the Likert scale when asked, how comfortable are you calling the provider to question orders and patient medications? 86% answered a 4-5 on the Likert scale when asked, how comfortable do you feel interacting with a Parkinson patient's family member or support person while providing care for the patient? 94% of students answered on the Likert scale of 4-5 when asked, how confident do you feel providing report to other professionals about your patient? 94% of students answered on the Likert scale of 4-5 when asked, how comfortable do you feel in your ability to be a patient advocate?
Post Survey Qualitative Question
The open-ended survey question was, “What would you say is your biggest takeaway from this simulation experience related to the Parkinson patient?” The 5 themes that were identified from the answers to this question were: a.) The importance of including the family in patient care; b.) The importance of maintaining the medication schedule; c.) An awareness of symptoms related to missed/late medications; d.) An understanding of the communication skills needed to interact with the patient, family and provider; e.) And the need to more effectively advocate for the patient when speaking to the provider. Some of the student feedback associated with these themes are as follows. “Be aware of symptoms of late/missed medications.” “Recognize the significance of symptoms that may arise during care.” “That the medication regimen is very important for their care.” “How important it is to keep support person in the loop.” “The importance of medication adherence for Parkinson’s patients.” “Talking to a patient with Parkinson’s and the family.” “Calling the real physicians was great practice!”

The majority of students answered between a 4-5 on the Likert scale indicating they felt very comfortable/confident to somewhat comfortable/confident on all 5 questions. Refer to table 1 for the questions and results. Over 85% of students answered between 4-5 on 4 of the 5 survey questions. The 5th question referencing comfortability contacting the physician, indicated the lowest Likert scale score. 73% of students rated a 4-5 on the 5th question. Educators are considering incorporating more opportunities for students to discuss and simulate contacting providers. Additionally, the student takeaways from the simulation experience were positive indicating they learned the importance of listening to the patient and family, the importance of medication, adhering to the medication schedule, and communication with the physician.

Conclusion
Using an interprofessional simulation experience that focused on the medication schedule of a patient with Parkinson’s to help student learn patient advocacy has proven effective. A well-planned out simulation scenario created a space where educator could focus on soft skills, like communication, collaboration and advocacy. Surveying the student participants shed light on the areas where educators can fine tune the simulation for future simulations participants. After a review of survey responses, nurse educators found that students could benefit from more focus on communication with other providers to advocate for patients. Collaboration and advocacy can be tasks that makes students uncomfortable, but incorporating learning opportunities like the Interprofessional Parkinson’s simulation can help them fine tune these vital nursing skills.

References