Abstract

Ensuring students develop person-centred practice for diverse groups of people across health care settings is an important outcome of undergraduate nursing education. This paper presents the development and evaluation of a learning innovation, an integrated virtual patient case study and complementary online resources for person-centred nursing practice. The virtual patient case study of an Australian Aboriginal woman diagnosed with breast cancer was integrated within four core subjects of a Bachelor of Nursing program, for a total of 600 second-year students. The evaluation of this learning strategy was encouraging. Students reported that the online learning activities were engaging, particularly due to the level of realism, their understanding of Aboriginal Peoples' healthcare needs increased, and they developed therapeutic communication skills, applicable in a variety of healthcare contexts. Staff concerns about student wellbeing when learning sensitive content online were unfounded. When carefully planned, a virtual patient case study and online learning resources can support students to enhance their person-centred nursing practice. Further evaluation, including student outcomes through assessment, is an important next step.

Introduction

Ensuring optimal health care for all populations is a challenge for those who provide health services. Australia is a culturally diverse country inclusive of Aboriginal and Torres Strait Islander Peoples and a large migrant population. Given the negative health outcomes for Aboriginal and Torres Strait Islander Peoples, due to colonisation (Griffiths et al., 2016; Hunt et al., 2015; Sherwood, 2013), person-centred practices are

paramount. Helping nursing students to develop the requisite knowledge and skills is a responsibility of educators.

With the increasing expectation from universities and students for diverse approaches to learning, utilising a flipped classroom offers increased flexibility (Betihavas et al., 2016) and complements in-class learning. In response, a virtual patient case study (VPCS) supported by interactive, online resources, integrated across four subjects of a Bachelor of Nursing (BN) program, were developed to enhance nursing students' person-centred practice. This paper highlights the development and evaluation of a learning innovation that has relevance for nursing education given the increasing demand for remote and online learning.

1. **Background and literature**

Traditionally, didactic teaching methods were the primary means of conveying knowledge from the teacher to the student (Ramsden, 2003; Betihavas et al., 2016). During the 1990s, educational research shifted the focus from passive to active learning (Bergmann & Sams, 2012; Betihavas et al., 2016; Hussey, Fleck, & Richmond, 2014; Presti, 2016). Within University settings, the use of online resources has created flexible ways of learning (Yuan & Powell, 2013), including flipped classrooms (Bernard, 2015; Betihavas et al., 2016; Herreid & Schiller, 2013; Lage, Platt & Treglia, 2000; Roehl, Reddy & Shannon, 2013).

Flipped classrooms are an example of a student-centred approach to learning. Underpinned by the adult learning principles of self-direction and self-motivation, students engage with online learning resources in preparation for classroom learning. In-

class activities, such as discussion, consolidate learning (Betihavas et al.,

2016), through the co-production of new knowledge and understanding (Presti,

2016). Increasingly, the flipped classroom has been used in undergraduate nursing

programs, and the reported benefits include flexibility and application of critical thinking

skills (Betihavas et al., 2016), knowledge development (Hu et al., 2017), improved

communication skills and increased enjoyment of learning (Xu et al., 2019), working at your

own pace (El-Banna et al., 2017), and increased satisfaction (Njie-Carr et al., 2017).

Case studies that replicate real-life patients and clinical situations assist nurses to

develop their understanding, critical thinking and decision-making skills (Hooper,

2014; Huang et al., 2012; West, Usher & Delaney, 2013) and can be readily used as online

learning resources. The VPCS developed for this project featured an Aboriginal person. In

Australia, the original population are Aboriginal and Torres Strait Islander Peoples, the

traditional owners of the land, and 3.3 % of the country's population identify as Aboriginal

and Torres Strait Islander (Australian Bureau of Statistics (ABS), 2018a).

Social, political, and historical factors adversely affect the health outcomes of

Aboriginal Peoples (Griffiths et al., 2016; Hunt et al., 2015; Nugyen, 2008; Sherwood,

2013). The reduction of health disparities in Aboriginal Peoples is dependent on culturally

safe health care that supports empowerment, focuses on the person's experiences of the

care, and is person-centred (Nugyen, 2008). This requires health professionals

to communicate effectively, support the person's decisions about care, and collaborate with

the family (Australian Institute of Health and Welfare (AIHW), 2019b).

The VPCS depicted an Aboriginal woman's journey from accessing

regional community health services through to treatment in a city-based acute care

hospital (see supplementary information). It showcased person-centred interactions with

nurses in each phase of the woman's healthcare

experience, highlighted effective communications, and demonstrated supported decision

making. The students engaged with the self-paced VPCS and related online learning

resources prior to in-class learning activities that applied knowledge to practice.

2. **Design**

2.1 Setting and participants

The participants were 600 second-year nursing students, at a large urban Australian

University, who were enrolled in four subjects of the Bachelor of

Nursing (BN) program: mental health nursing, medical-surgical nursing, nursing care of the

older person, and contemporary Indigenous health and wellbeing. Each of

the subjects had approximately 150 students. Second-year students were purposely

targeted to build on their first-year foundational knowledge and clinical experiences.

2.2 Development of the virtual patient case study (VPCS) and related online learning

resources

The development of the VPCS incorporated two of the Australian national

health priority areas - cancer and mental health (AIHW, 2017a). The VPCS was based on an

older Aboriginal woman (50 years of age), *Diane Coorah*, from regional Australia, with

a diagnosis of metastatic breast cancer. An Aboriginal woman of 50 years of age is

considered an older person due to a lower life expectancy compared to other Australian

populations (ABS, 2018b; AIHW, 2019a). Aboriginal healthcare educators were consulted to

ensure authenticity of the VPCS. Furthermore, experienced breast care nurses from a

prominent organisation, the McGrath

Foundation, (http://www.mcgrathfoundation.com.au/Default.aspx),

were also consulted.

(i) Co-production of the online learning modules

External funding (Health Workforce Australia) supported employment of a learning technologist/designer who collaborated with the academic team in the co-production of the online modules. An adaptive eLearning platform project partner (https://www.smartsparrow.com/) was utilised. Online modules were created for each of the four subjects and encompassed the VPCS, audio-visual (AV) vignettes of person-centred nurse-patient interactions, relevant websites, and interactive questions with immediate (pre-configured) feedback. The success of the project team is attributed to several factors, including a designated team leader, regular team meetings, a highly skilled learning technologist, experienced content specialist academics, and the enthusiasm and skill of the Aboriginal actor who portrayed the patient.

(ii) Integration of the VPCS and online resources as a module within four subjects

The specific learning objectives within each of the four subjects (six-credit point weighting per subject) and addressed in the online modules are expanded below. Students undertook the self-paced module in the week prior to attending in-class learning. Each of the modules required approximately two hours of students' time

(a) Mental health nursing

The learning objectives of the subject addressed in the online module were the development of person-centred practice, particularly therapeutic communication skills in the context of experiences of emotional and psychological distress. The module featured AV exemplars of nurse-patient interactions and formed the basis for the development of therapeutic communication skills within the other three subjects.

The nurse-patient interactions took place in an Aboriginal Medical Service, a primary

healthcare setting, where the patient learnt of her cancer diagnosis.

The interactions were unscripted to allow the actor, portraying the patient, to draw on

her own lived experiences and to ensure that the nurse's responses were

authentic. Responses such as fear and grief were portrayed, and therapeutic

communication skills that engendered an understanding of the patient's

perspective, including the wider family (Geia et al. 2011), were demonstrated by the

nurse. In-class, using carefully devised role-play scenarios, students

practised active listening for themes and feelings and empathic responding, followed

by teacher-led reflection on the application of learning to nursing practice.

(b) Medical-surgical nursing

The learning objectives of this subject addressed in the online module included

development of knowledge related to diagnosis and in-hospital treatment of metastatic

breast cancer, the side effects of treatments, initiating palliative care, and person-centred

nursing practice. The AV vignettes of the nurse-

patient interactions reflected nursing care related to medical treatments and fears of losing

dignity and independence as the disease progressed. They demonstrated cultural

nuances including the patient's responsibilities as an Elder in her community,

her connection to family, and her role in the transmission of Aboriginal knowledge, history,

and beliefs.

Ceasing active treatment and accepting impending death were explored

during facilitated in-class discussions about palliation in the acute care setting, 'do not

resuscitate' orders, spiritual care assessment, and communicating with patients about death

and dying. These aspects of patient care are not often afforded to students during clinical

placement experiences (Gillan, van der Riet, & Jeong, 2014).

(c) Nursing care of older people

The learning objectives in this subject focused on developing skills of person-

centred practice, therapeutic communication, and Indigenous cultural respect through the

medium of palliative care. The online learning module was based on end of life care within

the hospital setting. The patient was in the last few days of life and had chosen to remain in

hospital rather than 'return to land' for her end-of-life care. It provided students with

insights about how to support patients who are imminently dying and their families,

particularly the cultural and spiritual implications, and staff self-care practices.

Further nurse-patient interactions in the AV vignettes depicted the signs of imminent

death and therapeutic responding. Content was based on palliative

care guidelines (Ravenscroft et al., 2010) and curricula guidance from the Palliative Care

Curriculum for Undergraduates (PCC4U) (http://www.pcc4u.org/). In laboratory

classes, students practised managing a syringe driver as part of pain

relief strategies. Incorporating palliative care was an important feature that is generally

under-represented in nursing curricula (Gillan et al., 2014).

(d) Contemporary Indigenous health and wellbeing

Within this subject, the learning objectives were the development of Indigenous

cultural respect and knowledge and understanding about the importance of "Closing the

Gap", an initiative of the Governments of Australia to address the significant disparity in

health and wellbeing between Indigenous and non-Indigenous Australians

(http://closingthegap.dpmc.gov.au/). Within the online module, links to key websites,

government initiatives and reports, and relevant community groups were central to

ensuring students' awareness of the current issues experienced by Aboriginal peoples.

Historical perspectives and government actions, which had profound effects

on the current health and wellbeing for Indigenous Australians (Sherwood

2013), were included. Exploration of complex issues affecting the health and wellbeing of

Aboriginal peoples was facilitated in a safe in-class environment by academics who had

completed specific training by Indigenous experts and elders.

Figure 1 conceptualizes the VPCS within the four subjects and the related

influences that informed its development.

(insert figure 1 here)

Figure 1: The influences that informed development of the virtual patient case study

(e) General content

In addition to information derived directly from

the VPCS, the online learning modules also focused on the pathophysiology of metastatic

breast cancer, relevant diagnostic tests, evidence-based symptom management, support

services, cancer mortality rates in the Australian Aboriginal population, and Indigenous ways

of knowing, being and doing regarding health and wellbeing. Table 1 provides a summary of

the main resources used to develop the VPCS.

(insert Table 1 here)

2.3 Evaluation

A feature of all the online learning modules was an opportunity

for voluntary, anonymous student feedback. The built-in evaluation comprised a twelve-

item survey, including five open-ended questions about students' learning experiences. The

open-ended questions are presented in Table 2. Each of the four subject

coordinators extracted the students' responses to the open-ended questions related

to their subject's learning objectives. The first two authors undertook an inductive content

analysis of the responses (Olson, Young, & Schultz, 2016), and five themes were identified.

(Insert Table 2 here).

2.4 Ethical considerations

The project was considered by the University as a low-risk evaluation of a teaching and

learning activity that did not require ethics approval. Participation in the online

student evaluation was anonymous, voluntary, and conducted in the students' own time.

Informed consent to participate in the evaluation was assumed to be given when a student

completed and submitted the survey. The online modules were complementary but

separate to the face-to-face teaching and assessment within each of the four subjects. The

teaching staff were not involved in the built-in evaluation process and

students' decisions to participate or not did not impact on their assessment outcomes in the

subjects.

3.   **Findings**

The analysis of the student responses identified the following five themes:

therapeutic communication skills development, engagement and the level of

realism stimulated learning, preparation for palliative care, greater insight about Aboriginal

people, and improving the online experience.

3.1 Therapeutic communication skills development

Students found that the AV vignettes where experienced nurses interacted with the patient across a range of practice contexts, provided opportunities to enhance their therapeutic communication skills:

> *Being given an example as to how a successful therapeutic relationship can be established with a patient through effective communication has been helpful in providing techniques I can use in my scope of practice.*

> *This is a phenomenal new way of learning … much easier way to prepare for tutorials than just reading a textbook … we can now see and hear real nurse-consumer communications!*

Watching experienced nurses' interactions highlighted that talking about concepts such as loss and death need not be daunting:

> *I think the spiritual assessment of Diane Coorah was useful because the videos showed how nurses go about handling sensitive topics and the language they use.*

3.2 Engagement and the level of realism stimulated learning

The active learning inherent in the modules was considered engaging and interesting:

> *What a fantastic way of learning. I really enjoyed this module and feel like I … will be able to use these forms of communication… during clinical placement.*

> *This sort of learning is very helpful and encourages students to learn interactively and actively. I love the structure and the pace of the module and how it managed … to sustain my interest and attention.*

> *This is a phenomenal new way of learning…much easier way to prepare for tutorials than just reading a textbook or listening to 'dry academic' points.*

The depictions of the nurse-patient interactions were valuable learning experiences because of the realism portrayed:

> *They were really excellent demonstrations…the role-playing/ acting was great and credible…Very subtle and realistic demonstrations.*

> *You can actually picture out what it should it look like in the real life. I find this part the most helpful since it is an actual mental health nurse and patient interaction.*

> *…We could see and hear real nurse-consumer communications!*

3.3 Preparation for palliative care

There was a concern that students would become distressed with the learning content that focussed on end of life care when viewed off-campus. Given that 45% of the students noted that the content was *a little distressing* confirms the importance of in-class discussion to follow-up the related issues. Importantly, 88% of students reported improved confidence to work with people who have palliative care needs:

> *Gave me ideas of how to approach palliative care patients…Not as anxious about the thought of talking about death to patients.*

3.4 Greater insight about Aboriginal People

As some students had never met an Aboriginal person, presenting the

VPCS within each module of the four subjects allowed students to see a realistic portrayal of

an Aboriginal woman in the context of her ordinary life, albeit during the crisis

of an illness:

> *… the Diane Coorah case … gave us a far better insight and far more*
>
> *information on issues relating to Aboriginal people.*

3.5 Improving the online learning experience

Students identified several ways in which the online learning experience could be

improved, related to variable internet access when off-campus, the time required

to download resources, and the duration of some AV vignettes.

4.   **Discussion**

The aim of this project was to create and evaluate an integrated virtual patient case

study (VPCS) and related online learning resources (self-paced online module) within

four, six-credit point subjects of a Bachelor of Nursing program. The overarching aim of

the three nursing practice subjects was to develop the students' person-centred nursing

practice. Such practice situates the person and their beliefs, values, and preferences at its

centre and is supportive of the individual's decision-making (McCance & McCormack, 2017).

To achieve this, each of the subjects focused on one or more of the following: therapeutic

communication skill development, supporting patients' decisions about health care, and

delivering evidence-based and culturally appropriate nursing practice in the context

of palliative care. The aim of the Indigenous health and wellbeing subject was

to increase this generation of students' awareness of the impacts of historical, social and

political actions on the health and wellbeing of Aboriginal peoples.

Students reported development of their therapeutic communication

skills, enjoyment of and engagement with the learning, particularly the applicability of

the nurse-patient interactions to their own practice, preparation for palliative

care, and increased awareness of issues facing Aboriginal peoples. Suggestions

for improving the online learning experience were also forthcoming. The aims of each of the

four subjects were realised through this innovative approach to learning. The use of an

authentic VPCS

to model preferred, nursing practice and therapeutic interactions demonstrated to students

how this would look in real practice. Not only was it engaging, but students reported

feeling less anxious when talking about loss and death, and they were more informed about

cultural nuances and issue for Aboriginal peoples.

Key to the success of this learning innovation was the expertise and collaboration of

the interdisciplinary project team. The adaptive eLearning platform was developed

by smartsparrow, a learn-tech company. The academic team developed the VPCS and then

each academic worked with the highly skilled learning technologist/designer to co-

produce engaging online learning experiences for their subject. This required a commitment

over a two-month period to work in partnership, utilising each other's expertise, and

regularly dedicate time to develop and refine the resources prior to their implementation.

Betihavas et al., (2016) note the importance of "time and resources (including educational

technology and expertise)...to develop unit content and facilitate the flipped

classroom" (p.20). In a review of flipped classrooms by Njie-Carr et al., (2017), the patient

case studies were often a single focus rather than the complex and integrated VPCS that

is presented in this paper. Certainly, there was no indication of an Aboriginal patient case

study amongst those reviewed by Betihavas et al., (2016) or Njie-Carr et al., (2017).

Developing an authentic VPCS, realistic nurse-patient interactions, and other online

resources encouraged students to take a participatory role in their learning by

preparing before engaging with in-class activities that applied theory to

practice (Betihavas et al., 2016). This is a continuing challenge that others have reported

despite the change in the mode of delivery (Betihavas et al., 2016; Bingen et al., 2019; El-

Banna et al., 2017). Most students took greater responsibility for their own learning rather

than expecting information to be 'delivered' to them passively (Hussey et al., 2014; Presti,

2016) and worked through preparatory materials at their own pace and convenience.

Embedding the VPCS across four subjects provided opportunity for students to

develop a greater understanding of Aboriginal people's views of health, wellbeing, and

illness. Portrayals of Aboriginal Australians are frequently stereotyped and

stigmatising (Sweet, Dudgeon, McCallum, & Ricketson, 2014). The authenticity of the VPCS

was maximised through consultation with Aboriginal healthcare educators and by

employing an Aboriginal actor with lived experiences to portray the

patient. Students reported that these interactions afforded them previously

unknown insights about the health and other issues facing Aboriginal people.

Caring for people with palliative care needs is a fundamental part of nursing practice,

irrespective of care setting. Knowing that students were not particularly troubled by viewing

AV vignettes about palliative care on their own was a positive finding. Incorporating this

type of content validated the online learning medium as 'safe' provided opportunity was

available for discussion. Additionally, the students reported confidence to
have conversations with patients about palliative and end of life care.

Integrating the concepts of person-centred practice around a
central VPCS provided continuity, engaging and meaningful learning for students, and
greater understanding of cultural sensitivities. The unscripted nurse-
patient interactions demonstrated a range of therapeutic communication skills and
were complemented with interactive questions and immediate feedback that assisted the
development of their person-centred practice.

Two major areas for improvement were flagged by students - the need for
shorter AV vignettes and improvements in IT functionality. The IT concerns related
to download times, likely due to internet access or variation in students' home
internet download speeds. As evidenced during the current COVID-19
pandemic where the majority of learning has moved to an online format, internet access
and download speeds are limiting factors and a major disruptor to equitable student
learning experiences (Morin, 2020).

For the future, more generations of family members could be added to the VPCS and
assessment tasks could be embedded in each subject to gauge the impact of this mode of
learning. New VPCSs featuring a diversity of patients and families could be created
to further develop person-centred nursing practice. Overall, given the impacts of COVID-19,
this innovation is a timely creation and an effective example of how to deliver remote,

online content in a practice-based discipline to enhance nursing students' skill development.

4.1 Limitations

The main challenges encountered with creating the VPCS centred on technological issues with the eLearning platform, which have improved following software updates. Further limitations include that the project was conducted at one university, and students who provided feedback are likely to have been more engaged with the learning.

5. **Conclusion**

The VPCS supported by interactive, online resources integrated across four subjects of a Bachelor of Nursing (BN) program achieved positive learning outcomes. Students engaged with and enjoyed the learning which offered insights about nursing care of an Aboriginal woman with complex health issues. The level of student engagement and preparation for on-campus classes exceeded the academic team's expectations. Students reported that this approach increased their understanding and assisted their development of person-centred nursing practice.

Considerations for others that should be determined up-front include the length of AV vignettes and indicating internet access requirements. Future applications include incorporating assessments within the online learning modules and expanding 'the family' within the VPCS. To gauge the translation of learning into practice, research about students' practices during clinical placements and patients' experiences of them, are warranted.

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