

**Introduction:** This module focuses on synthesizing and applying knowledge that the interprofessional health sciences students have gained in the last half of this semester. This will be done through the conduction of PHASE 2 of an interactive "virtual" interprofessional simulation. When possible, students will be scheduled with their previously assigned cohort for this simulation. The scenario will focus on the patient's continued deterioration in health leading to hospice evaluation, making meaning, and end of life, with the goal of demonstrating transitions both across health settings and through stages of illness.

### Learning Objectives

- Collaboration with interprofessional team members to apply palliative care principles across health settings and illness trajectories.
- Demonstration of advocacy and respect of human dignity by building trusting relationships, eliciting grounded hope, and facilitating goals of care discussions with seriously ill patients and their family.
- Exhibition of respect, compassionate presence, and self-awareness in the delivery of palliative and end-of-life care to culturally and spiritually diverse patients and their families.
- Provide compassionate support to patients, families, self, and other team members during grief and coping cycles.
- Engagement of all team members in effective planning of symptom management and delivery of holistic, patient and family-centered palliative care.

### Required Resources (Prelab for Simulation)

- View PHASE 2 Simulation Prequel Video [Play media comment](#). (If you are unable to access this, the same information is shared within the patient's chart.)
- Review patient chart (H&P, labs, etc.)
  - [Palliative Care Clinic Visit Summary.docx](#)
  - Updated Advance Directive:
    - Son, Bradley Smith, is Surrogate Decision-Maker (his wife is successor surrogate decision-maker)
    - Information about healthcare/treatment may be discussed with Bradley and his wife
    - Hazel indicated that she does not wish to be intubated or resuscitated (DNR/DNI); she would like to die peacefully without medical intervention (no medically assisted nutrition or hydration, ventilator, or rescue medications)
    - Scripture and music bring her comfort; wants to die at home
    - No organ donation or autopsy; preference for cremation, services with Kramer Funeral Home, and burial next to her husband

### Optional Resources

- Review previous module materials.
- Refer to resources for coping with difficult experiences listed in syllabus.
- Review spiritual, cultural, and religious end of life practices.

### Assignments

- Adequately prepare for simulation prior to scheduled experience (see required resources above).
- Attend scheduled simulation (1.5 synchronous online simulation via Zoom) -- Students have been assigned to a simulation session based on availability and coordination of diverse interprofessional student team. Attendance in this IPE passport activity is required and worth additional passport stamp.

**Notice: Standardized patient may die** by the end of scenario. Student **may experience some emotional distress given the nature of the scenario and discussion regarding end of life.** The faculty wish to promote students' psychological safety and preparation for this event. There are also resources posted in the syllabus for those needing additional support following the simulation.

**Plan for scheduled simulation:**

1. Interprofessional student team (as Palliative Care team) to discuss coordination of hospice care (20-30 minutes): Your team will be responsible for coordinating hospice care (who will visit, what orders are appropriate for symptom management, resources for Hazel and her family, etc.). Please note that Hazel's son, Bradley, has agreed to stay with her to assist in providing her hospice cares.
2. *(Imagine two-week time lapse - Your team's coordinated hospice care plan has been in place for Hazel for 2 weeks)* Palliative Care team to "visit" home 2 weeks into hospice and discuss patient status and care with son, answering questions (20-30 minutes): Two weeks into Hospice you will have two designated members of your team arrive for a home visit (other team members are available as "on-call"). Hazel, Bradley, and Bradley's wife Joyce are home at the time. **Hazel is no longer fully conscious** and able to participate in the discussion, so this interview will occur with Bradley and Joyce only, while Hazel rests in a separate room. Please simulate this visit.
3. Faculty-led debrief session, providing resources for grief/counseling (20-30 minutes): Following the visit, the faculty facilitator will lead a debriefing discussion.