

TEACHING STRATEGIES IN ADDRESSING PALLIATIVE CARE WITH NURSING PROFESSIONALS: INTEGRATIVE REVIEW

Estratégias de ensino na abordagem dos cuidados paliativos com profissionais de enfermagem: revisão integrativa

Estrategias de enseñanza para abordar los cuidados paliativos con profesionales de enfermería: revisión integradora

Tatiana Pifano da Silva¹, Liliane Faria da Silva², Emília Gallindo Cursino³, Sandra Teixeira de Araújo Pacheco⁴, Paloma Gonçalves Martins Acioly⁵, Ingrid Luciana Pifano da Silva⁶

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ABSTRACT

Objective: To identify, in scientific productions, the teaching strategies used to approach palliative care with nursing professionals. **Method:** Integrative review made in five databases. **Results:** 12 articles were analyzed, all international. Several teaching strategies were used as: workshops, simulation, group discussion, role plays, lecture. The active methodology was the most used, with the association of several teaching strategies, being the case study the most frequent. **Conclusion:** The association of theory with the simulation of clinical practice is a good teaching strategy. Greater emphasis has to be placed on training nursing professionals through continuing education activities in palliative care to provide safe and qualified care for the patient and their family.

DESCRIPTORS: Nursing; Teaching; Education; Continuing education in nursing; Palliative care.

1 Graduated in nursing from Universidade Estácio de Sá. Master's student at the Aurora de Afonso Costa Nursing School - EEAAC / UFF. Niterói, RJ, Brazil. Nurse at the National Cancer Institute. Rio de Janeiro, RJ, Brazil.

2 Graduated in nursing from UFRJ. PhD in Nursing from EEAN / UFRJ. Adjunct Professor in the Department of Maternal-Child and Psychiatric Nursing. Aurora de Afonso Costa Nursing School - EEAAC / UFF. Niterói, RJ, Brazil.

3 Graduated in nursing from UFBA. PhD in Nursing from EEUSP. Associate Professor Department of Maternal-Child and Psychiatric Nursing. Aurora de Afonso Costa Nursing School - EEAAC UFF. Niterói, RJ, Brazil.

4 Graduated in nursing from UFRJ. PhD in Nursing from EEAN / UFRJ. Adjunct Professor at the Department of Maternal and Child Nursing at the Faculty of Nursing of the State University of Rio de Janeiro. Rio de Janeiro, RJ, Brazil.

5 Graduated in nursing from Severino Sombra University. Master's student at the Aurora de Afonso Costa Nursing School - EEAAC / UFF. Niterói, RJ, Brazil. Nurse at the Fernandes Figueira Institute / FIOCRUZ. Rio de Janeiro, RJ, Brazil.

6 Graduated in nursing from UFRJ. Post-graduated by the University Estácio de Sá. Rio de Janeiro, RJ, Brazil.

RESUMO

Objetivo: Identificar, nas produções científicas, as estratégias de ensino utilizadas na abordagem dos cuidados paliativos com profissionais de enfermagem. **Método:** Revisão integrativa realizada em cinco bases de dados. **Resultados:** Foram analisados 12 artigos, todos internacionais. Várias estratégias de ensino foram utilizadas como: oficinas, simulação, discussão em grupos, dramatizações, aula expositiva. A metodologia ativa foi a mais utilizada, com a associação de várias estratégias de ensino, sendo o estudo de caso a mais frequente. **Conclusão:** A associação da teoria com a simulação da prática clínica é uma boa estratégia de ensino. Maior ênfase tem que ser dada na capacitação dos profissionais de enfermagem através de atividades de educação permanente em cuidados paliativos visando fornecer uma assistência segura e qualificada para o paciente e sua família. **DESCRIPTORIOS:** Enfermagem; Ensino; Educação; Educação continuada em enfermagem; Cuidados paliativos.

RESUMEN

Objetivo: Identificar, en producciones científicas, las estrategias de enseñanza utilizadas para abordar los cuidados paliativos con profesionales de enfermería. **Método:** Revisión integradora realizado en cinco bases de datos. **Resultados:** Se analizaron 12 artículos, todos internacionales. Se utilizaron varias estrategias de enseñanza como: talleres, simulación, discusión grupal, juegos de roles, conferencias. La metodología activa fue la más utilizada, con la asociación de varias estrategias de enseñanza, siendo el estudio de caso el más frecuente. **Conclusión:** La asociación de la teoría con la simulación de la práctica clínica es una buena estrategia de enseñanza. Se debe hacer mayor hincapié en la capacitación de profesionales de enfermería a través de actividades de educación continua en cuidados paliativos para proporcionar atención segura y calificada para el paciente y su familia. **DESCRIPTORIOS:** Enfermería; Enseñanza; Educación; Educación continua en enfermeira; Cuidados paliativos.

INTRODUCTION

With the growing demand for Palliative Care (PC), it is essential that health institutions carry out educational activities for professionals. According to the World Health Organization, every year, around 40 million people need PC and 78% of them live in low and middle-income countries.¹

In a systematic review study on palliative care education programs in Latin America, the conclusion that there is a need to integrate existing courses into training programs and ensure that training is available at the graduation level as well as in the form of permanent education.² That is, the importance of PC education from vocational training and its continuity through educational activities with professionals was highlighted.

Palliative care aims to improve the quality of life of the patient and his/her family, and should prevent and alleviate suffering, should be initiated as early as possible and be implemented to patients with life-threatening diseases.¹ In order to promote such care, it is essential that professionals know about palliative care.

Nursing plays a key role in palliative care, since it is the profession that has the prescription of care by means of work, and therefore its assistance must be guided by the palliative care model.³ However, many professionals may not be prepared to provide this qualified care.

Due to the health care complexity that these patients require, the scientific literature points to the need to develop activities for PC training.⁴⁻⁵ One of the factors associated with this need is precisely the low investment in education in work and vocational training.⁶

Health institutions can and should develop educational activities for their employees. In Brazil, the National Policy of Permanent Health Education (NPPHE) was established as a strategy of SUS (Sistema Único de Saúde: Single Health System) for the training and improvement of workers for the sector.⁷

Permanent Health Education (PHE) is the learning in service, the process of qualification of health workers that should aim at changes in professional practices and the organization of work itself, being then structured from the problematization that results from the work process.⁸ It is expected that the PHE proposals in the institutions will meet the educational demands pointed out by the professionals or identified by the services management in the care of the population.

Every PHE process requires planning, design and execution based on a strategic analysis and institutional culture of the health services in which they will be implemented.⁸ And, for the elaboration of the pedagogical proposal, the choice of appropriate teaching methods and teaching strategies should be made to promote the effective direction of the teaching-learning process.⁹

For nursing professionals working with patients in PC, the teaching strategies adopted should be attractive to stimulate the involvement of the professional, since it is a complex subject and little addressed in the training of the professional. For this reason, it is necessary to give visibility to the studies dealing with such strategies applied with professionals.

In the light of the above, the following objective was outlined: to identify, in scientific productions, the teaching strategies used in the approach of palliative care with nursing professionals.

METHOD

This is an integrative review. The methodological path pursued the following steps: formulation of the guiding question of the research, search in databases, data collection, evaluation of the collected data, analysis and interpretation of the collected data and presentation of the results.¹⁰

Thus, the guiding question of the study was: "What are the teaching strategies used in the activities of permanent education of nursing professionals in palliative care?"

Original articles with summary and full text were included, published between 2014 and 2019, available electronically, in Portuguese, English or Spanish; that presented the educational strategy, performed with nursing professionals; with the evaluation of the educational intervention. Those involved academics and trainers trainings were excluded.

The articles were searched in February and March 2019 in the following databases: CINAHL (*Cummulative index*

to nursing and allied health literature), LILACS (Latin American and Caribbean Literature in Health Sciences), BDENF (Nursing database), SCIELO (*Scientific Electronic Library Online*) and PubMed (*Public/Publish Medline*). The descriptors used, combined with the Boolean operators (AND / OR), are exemplified in the search strategy below:

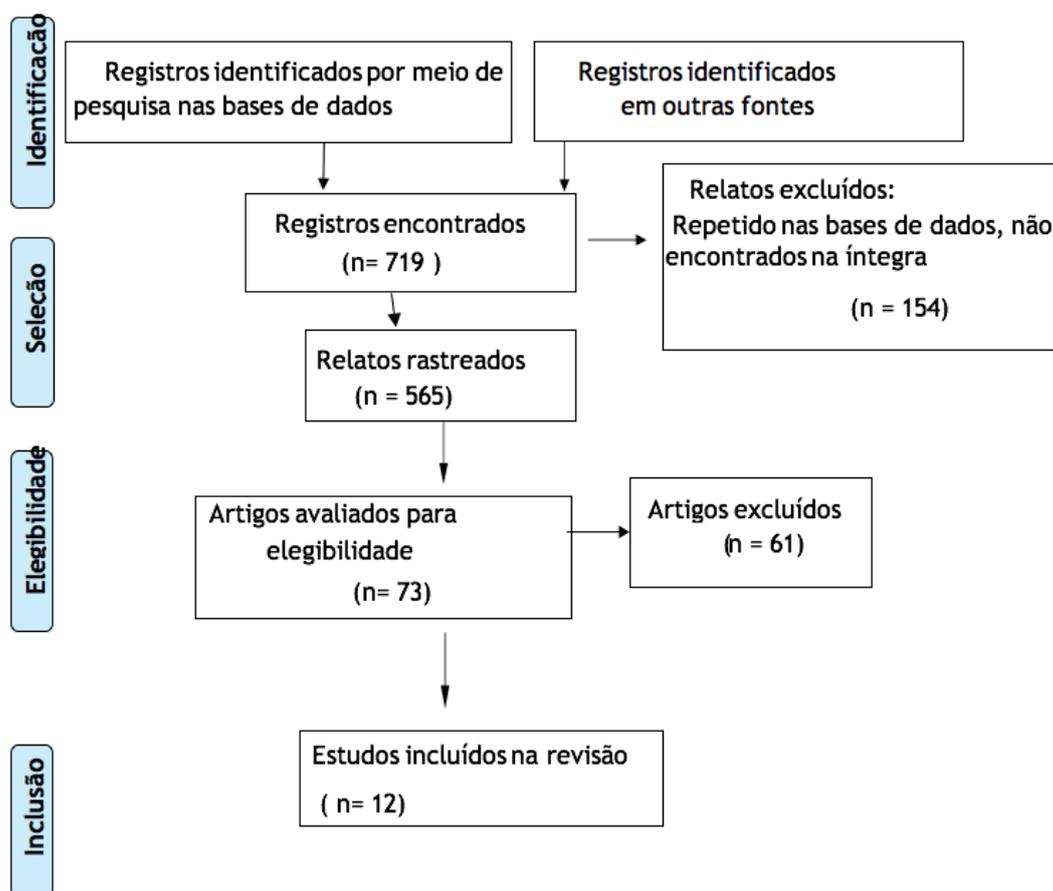
Table 01 - Database search strategy. Rio de Janeiro, RJ, Brazil, 2019.

CINAHL Titles	Decs terms/ BDNF SCIELO and LILACS	MeSH Terms/ PUBMED
"nurse" OR "nurses" OR "nursing" AND "continuing education in nursing" OR "continuing education for nurses" OR "continuing education" AND "method of teaching" OR "teaching strategies" AND "palliative care education" OR "palliative care education for nurses"	"Nurse" OR nursing AND continuing education in nursing OR continuing education AND Teaching OR education AND palliative care	"Nurses" OR "Nursing" AND "Education, Nursing, Continuing" OR "Education, Continuing" AND "Teaching" OR "education" AND "Hospice and Palliative Care Nursing" OR "Palliative Care"

Source: Research data, 2019

For the selection of the studies, PRISMA recommendations (*Preferred Reporting Items for Systematic Reviews and Meta-Analyses*) were used as a guideline to help authors improve the quality of the reporting of the data from the Systematic Reviews and Meta-Analysis. The PRISMA consists of a checklist of 27 items and a flow diagram of selection of four-phase articles (identification, selection, eligibility and inclusion) is described in the flow chart below:¹¹

Figure 1 - Flow chart of study selection from PRISMA recommendation. Rio de Janeiro, RJ, Brazil, 2019.



RESULTS AND DISCUSSION

For the identification of the studies included in the RI, the table 02 was developed, containing: articles code, main author, year of publication, country of study, main objective and participants.

Table 02 - Identification of studies. Rio de Janeiro, RJ, Brazil, 2019

Article Code	Main author Year / Country	Objective	Participants
A1 ¹²	Harden K 2017/ USA	Improve knowledge, attitudes and behaviors of nurses in oncology about PC.	46 Nurses (Nur.)
A2 ¹³	Taleghani F 2018/ Iran	Train nurses to provide PC to cancer patients and their families.	24 Nur.
A3 ¹⁴	Pesut B 2015/ Canada	Evaluate the results of an educational intervention in PC using a team-based method.	22 Nur. and 13 home workers
A4 ¹⁵	Chen Y 2017/ Taiwan	Evaluate the impact on the confidence of pediatric professionals and attitudes related to the management of pain and symptoms.	53 Nur. and 18 pediatricians
A5 ¹⁶	Morita T 2014/ Japan	Determine the impact of a new education program focusing on the care of patients' feelings of insignificance.	76 Nur.
A6 ¹⁷	Mehta A 2017/ USA	Assessing whether nurses from a community hospital demonstrate knowledge of PC.	50 Nur.
A7 ¹⁸	Boyle D 2017/ USA	Describe the development, implementation and results of a multicentre collaboration to teach PC communication skills in the ICU.	458 Nur.
A8 ¹⁹	Pan H 2017/ Taiwan	Investigate the effectiveness of two methods on PC knowledge, attitude and practice.	180 Nur.
A9 ²⁰	Anderson W 2017/ USA	Implement and evaluate a PC development program in the ICU.	428 Nur.
A10 ²¹	Sand L 2018/Sweden	Investigate whether a training model could give the CP team greater knowledge and preparation.	24 Nur. and 11 health professionals
A11 ²²	Griffiths J 2015/ England	Pilot a model of communication skills based on evidence with nurses.	33 Nur.
A12 ²³	Renton K 2017/ England	Establish whether participation in a pediatric palliative simulation day improved confidence and knowledge.	57 (Nur. and other health professionals)

Source: Research data, 2019

Table 3 provides a summary of the method, teaching strategies and results of the articles selected for this review.

Table 3 - Summary of selected articles. Rio de Janeiro, RJ, Brazil, 2019

Article Code	Teaching Method/Strategy	Result
A1 ¹²	Active/discussion in class, case study and group discussions.	Increased knowledge, attitudes and behavior. The number of conversations with the family has increased.
A2 ¹³	Traditional and active/exhibitive class and clinical training on the edge of the bed.	Increased knowledge, attitude and behavior. Professional development was the most important consequence.
A3 ¹⁴	Active/team-based learning, presential and online classes/group discussions and case study.	Increased knowledge and competence for home health workers. However, there were no significant changes in the self-competence of nurses.
A4 ¹⁵	Active/Lectures, case studies, dramatization and video visualizations.	Increased levels of confidence and attitudes. However, they emphasize the need to deepen the subject and address others.
A5 ¹⁶	Active/Lectures, case study, dramatization.	Increase in the confidence of nurses and modest effects on attitudes and practices.
A6 ¹⁷	Traditional and Active/exhibition class, printed sheet and group discussion.	Increased knowledge and confidence to initiate conversations with patient and family about PC.

Article Code	Teaching Method/Strategy	Result
A7 ¹⁸	Active/communication workshop, case study.	Increased confidence and ability to perform PC communication tasks and contribute to family meetings.
A8 ¹⁹	Traditional and Active/printed sheet (control group) and video (experimental group).	Compared to the traditional paper education group, the multimedia video education group improved in knowledge.
A9 ²⁰	Active/workshop, group discussions, dramatization, case study.	Increased communication skills in PC.
A10 ²¹	Active/seminars, lectures, group discussions.	Knowledge of coping strategies has increased, such as differentiating the types of loneliness and insignificance.
A11 ²²	Active/working in focal group and dramatization.	Increased confidence in communication skills.
A12 ²³	Active/realistic simulation, case study.	Increased confidence and knowledge after the simulation course.

Source: Research data, 2019

Final sample comprised 12 (100%) articles (table 02), all of which were international periodicals. The countries of origin of the publications that composed the sample were: United States of America (USA) with four (33.33%), Taiwan and England with two (16.66%) each. Iran, Canada, Japan and Sweden with one (8.33%) study each. Regarding the year of publication, 2017 was the year that obtained the highest number of seven publications (58.31%), followed by 2018 and 2015 with two (16.66%) each and 2014 with one (8.33%) publication.

Eight (66.64%) studies were conducted only with nursing professionals and four (33.33%) studies were conducted with nursing professionals and other categories.

The studies had a large variation in the number of participants, the highest with 458 and the lowest with 24 participants. This variation did not influence the results. In the results, the fields most investigated were: knowledge, attitude, behavior and trust. The 12 (100%) studies showed gains in investigated fields. The field of knowledge was the most evaluated, with seven (58.31%) studies.

Nine (75%) studies used exclusively Active Methodologies (AM) and three (25%) of the studies performed mixed teaching methodologies, with the use of the Traditional Method (TM), as an exhibition class, associated with AM, as seminars. None, zero (0%), study performed only TM of teaching.

All studies, 12 (100%), used more than one Educational Strategy (ES). The most widely used strategy in seven studies (58.31%) was the case study. One (8,33%) study carried out comparison between AM and TM, in this comparison AM presented the best result.

The studies highlighted the need to promote ongoing education activities with health professionals in palliative care. It can be observed in the results that the activities provided benefits for professionals, such as the increase of knowledge, the confidence to attend the patient in PC and his/her family.

For nursing professionals who are directly related to Patient Care,³ often accompany them from diagnosis to the end-of-life phase, PC education should be prioritized.

To promote PC education for nursing professionals and achieve success, the components of the training programs and

the methods used should be considered.¹² It is essential that your content is attractive and is directed to the field of expertise of the professionals and of the methods used, the teaching strategies used should allow for interaction between health professionals and teachers to bring together the theory and the reality of practice, thus stimulating the entry of professionals into the education, which should be obvious.

In the development of the educational activities, the AM was the most used in the studies. The active methodology has a critical-reflective education concept based on stimulating the teaching-learning process, resulting in student involvement in the search for knowledge.²⁴ It is centered on the student, who should together with the teacher be part of the teaching-learning process.

While in the traditional method, teachers pass on their knowledge to the students, usually through verbal exposure of the matter and/or demonstration.²⁵ In this method, the objective is the transmission of content.

The choice of method will also be related to the choice of teaching strategies.⁹ As examples of teaching strategies, which are used in studies, we have: lectures; team-based learning; seminars; case study; workshops; film presentation; dramatizations, among others.²⁶

Several teaching strategies were used, the most used being the case study. The case study is carried out through empirical research that seeks to explore a contemporary phenomenon in its natural context, using various sources of evidence.²⁷ The case study allows, through the simulation of a clinical case, reflection, using the theoretical foundation, on the nursing care to be carried out.

As the focus of PC is a holistic attention, aimed at treating patients in all their dimensions, not only physical-biological, but emotional, spiritual and support to their family, the use of ES as the dramatization, which was used in studies A4, A5, A9 and A11, represents a possibility to be further explored in PC teaching. Dramatization is a strategy that favors learning, gives meaning to content, helps in the development of technical and communication skills, in the understanding of the human being in a holistic way, as well as providing a calm and safe environment for the teaching-learning process, with more confidence.²⁸ This type of ES can stimulate interaction, the exchange of experiences,

the perception of the role of the other, the collaboration with the team and with patient/family.

Study A1 addressed the experience of empowering oncology nurses to develop conversations about PC. This need for professional training comes from the observation that they often do not have the knowledge and confidence to conduct meaningful conversations about PC.^{20,29} The teaching strategies used, classroom discussion, case study and group discussions were effective. Nurses received educational credits and access to an online learning management system.¹² The stimulation of professional participation and the continuity of learning is noted, what is desired in PHE activities.

The A3 study reported the experience of training nurses and health workers through team-based learning (TBL). TBL can be understood as a teaching strategy based on team study, with appreciation of the responsibility of each of the participants to their work teams and also values the application of the knowledge acquired to resolve important issues in the context of professional practice.³⁰ According to the authors, the term “health workers” in the study refers to non-regulated providers who give care in residential care facilities. The results pointed to the perception of real educational augmentation for those with a lower degree of education.¹⁴ While studies A4, A10 and A12, which carried out training with nurses and other high-level health professionals, did not point to differences, both categories felt benefited from the training. The ES used, the non-suitability of the program to the participants, or the large difference in the level of education between them may have influenced the result of study A3.

Study A8 relates the comparison of teaching methodologies, using for the experimental group an AM (multimedia video) and the control group a TM (printed text). The multimedia content was the same as the one used on the printed sheet. As a result, the group that received the AM education improved the level of knowledge about PC. Video can improve knowledge apprehension, making information not so abstract, which can improve knowledge development.¹⁹ It can facilitate the approach of the theme and stimulate discussions, being able to instrumentalize the pedagogical practices of nursing, contributing to the construction of caring.³¹

Only the A4 and A12 studies were directed to training for pediatrics assistance, which points to the need for more studies for the care of this population. No studies have been found focusing on neonatal PC and end-of-life care in pediatrics, which represent gaps.

The studies concluded that the educational activities, using various ES, produced the increase in knowledge about PC. With this new or improved knowledge, it was hoped to broaden the perception of professionals about their role in the team, generate more confidence to intervene for the benefit of the patient and consequently improve patient and family assistance and interdisciplinary communication. They also pointed out the need for continuity of educational activities.

CONCLUSION

The teaching strategies adopted should stimulate the participation of learners. The association of theory with the simulation of clinical practice is a good teaching strategy. The active teaching methodology is a trend in educational activities in palliative care and has achieved the best result. Greater emphasis has to be given to the training of nursing professionals through permanent education activities in palliative care aimed at providing safe and qualified care for the patient and his family. In developing the activities, it is necessary to adapt the programmatic content to the educational needs of the participants. In addition, further studies on methods, education strategies in PC must be carried out. It is expected to inspire the development of national research on proposals for teaching-learning methods for palliative care professionals.

As a limitation, some selected studies presented little detail on the methodologies used and the variety of ES employed in the same study.

REFERENCES

1. Organização Mundial da Saúde (OMS). Cuidados paliativos [Internet]. 2018 [acesso em 20 mar 2019]. Disponível em: <http://www.who.int/es/news-room/fact-sheets/detail/palliative-care>
2. Vindrola-padro C, Mertnoff R, Lasmarias C, Gomez-batiste X. *Palliative care education in Latin America: A systematic review of training programs for healthcare professionals*. Palliat Support Care (Online) [periódico na internet]. 2018 [acesso em 20 mar 2019]. Disponível em: <https://www.cambridge.org/core/journals/palliative-and-supportive-care/article/palliative-care-education-in-latin-america-a-systematic-review-of-training-programs-for-healthcare-professionals/E273E1E5F7371C6B9B500B2F36FD7032> DOI: 10.1017/S147895151700061X
3. Franco H, Stigar R, Souza S, Burci L. Papel da enfermagem na equipe de cuidados paliativos: a humanização no processo da morte e morrer. RGS (Online) [periódico na internet]. 2017 [acesso em 18 abr 2019]; 17(2): 48-61. Disponível em: <http://www.herrero.com.br/files/revista/file56fb2faad065b8f7980ccdf2d0aa2da1.pdf>
4. Rodrigues G, Duarte M, Mamede R, Simões K, Santos J, Oliveira T. Cuidados paliativos direcionados ao cliente oncológico: estudo bibliométrico. Rev enferm UFPE [periódico na internet]. 2017 [acesso em 05 abr 2019]; 11(Supl. 3):1349-56, mar. Disponível em: <https://periodicos.ufpe.br/revistas/revistaenfermagem/article/download/13976/16824>
5. Price D, Strodtman L, Montagnini M, Smith HM, Miller J, Zybert J, et al. *Palliative and End-of-Life Care Education Needs of Nurses Across Inpatient Care Settings*. J Contin Educ Nurs (Online) [periódico na internet]. 2017 [acesso em 05 abr 2019]; Vol 48, No 7. Disponível em: <https://doi.org/10.3928/00220124-20170616-10>
6. Araújo M, Silva M. O conhecimento de estratégias de comunicação no atendimento à dimensão emocional em cuidados paliativos. Texto & contexto enferm (Online) [periódico na internet]. 2012 [acesso em 20 mar 2019]; 21(1):121-129. Disponível em: <http://www.scielo.br/pdf/tce/v21n1/a14v21n1.pdf>
7. Brasil. Portaria nº 198 GM/MS, de 13 de fevereiro de 2004. Institui a Política Nacional de Educação Permanente em Saúde como estratégia do Sistema Único de Saúde para a formação e o desenvolvimento de trabalhadores para o setor e dá outras providências. Diário Oficial da União [Internet]. 2004 [acesso em 20 mar 2019]; 13 fev. Disponível em: <http://bvsmms.saude.gov.br/bvs/saudelegis/gm/2017/MatrizesConsolidacao/comum/13150.html>
8. Brasil. Portaria nº 1.996 GM/MS, de 20 de agosto de 2007. Dispõe sobre as diretrizes para a implementação da Política Nacional de Educação Permanente em Saúde. Diário Oficial da União [Internet]. 2007 [acesso em 20 mar 2019]. Disponível em: http://bvsmms.saude.gov.br/bvs/saudelegis/gm/2007/prt1996_20_08_2007.html

9. Libâneo J. Didática. 2ª ed. São Paulo (SP): Cortez; 2013.
10. Souza M, Silva M, Carvalho R. Revisão integrativa: o que é e como fazer? Educ Contin Saúde Einstein (Online) [periódico na internet]. 2010 [acesso em 10 mar 2019]; 8(1Pt1):102-6. Disponível em: http://www.scielo.br/pdf/eins/v8n1/pt_1679-4508-eins-8-1-0102
11. Brasil. Ministério da Saúde. Diretrizes metodológicas: elaboração de revisão sistemática e metanálise de ensaios clínicos randomizados [Internet]. Brasília, DF: MS; 2012. [acesso em 20 mar 2019]. Disponível em: http://bvsmms.saude.gov.br/bvs/publicacoes/diretrizes_metodologicas_elaboracao_sistematica.pdf
12. Harden K, Price D, Duffy E, Galunas L, Rodgers C. *Palliative care Improving nursing knowledge, attitudes, and behaviors*. Clin j oncol nurs (Online) [periódico na internet]. 2017 [acesso em 27 fev 2019]. Disponível em: <https://www.ncbi.nlm.nih.gov/pubmed/28945719> DOI: 10.1188/17.CJON.E232-E238.
13. Taleghani F, Shahrirari M, Alimohammadi N. *Empowering nurses in providing palliative care to cancer patients: action research study*. Indian J Palliat Care (Online) [periódico na internet]. 2018 [acesso em 27 fev 2019]. Disponível em: <https://www.ncbi.nlm.nih.gov/pubmed/29440816> DOI: 10.4103/IJPC.IJPC_64_17.
14. Pesut B, Potter G, Stajduhar K, Sawatzky R, McLeod B, Drabot K. *Palliative approach education for rural nurses and health-care workers: a mixed-method study*. Int J Palliat Nurs (Online) [periódico na internet]. 2015 [acesso em 27 fev 2019]. Disponível em: <https://www.ncbi.nlm.nih.gov/pubmed/25815763> DOI: 10.12968/ijpn.2015.21.3.142.
15. Chen Y, Peng N, Chen C, Lu F, Chang Y, Liu H, et al. *Effectiveness of pain and symptom management training for paediatric clinicians*. J Res Nurs (Online) [periódico na internet]. 2017 [acesso em 27 fev 2019]. Disponível em: <https://doi-org.ez24.periodicos.capes.gov.br/10.1177/1744987117690195> DOI: 10.1177/1744987117690195.
16. Morita T, Tamura K, Kusajima E, Sakai S, Kawa M, Imura C, et al. *Nurse Education Program on Meaninglessness in Terminally Ill Cancer Patients: A Randomized Controlled Study of a Novel Two-Day Workshop*. J palliat med (Online) [periódico na internet]. 2014 [acesso em 27 fev 2019]. Disponível em : <https://www.ncbi.nlm.nih.gov/pubmed/25225952> DOI: 10.1089/jpm.2013.0559.
17. Mehta A, Wilks S, Cheng M, Baker K, Berger A. *Nurses' Interest in Independently Initiating End-of-Life Conversations and Palliative Care Consultations in a Suburban, Community Hospital*. Am J hosp Palliat Care (Online) [periódico na internet]. 2017 [acesso em 27 fev 2019]. Disponível em : <https://www.ncbi.nlm.nih.gov/pubmed/28413929> DOI: 10.1177/1049909117704403.
18. Boyle D, Barbour S, Anderson W, Noort J, Grywaslki M, Myer J, et al. *Palliative care communication in the ICU: implications for an oncology-critical care nursing partnership*. Semin oncol nurs (Online) [periódico na internet]. 2017 [acesso em 27 fev 2019]. Disponível em: <https://www.ncbi.nlm.nih.gov/pubmed/29107532> DOI: 10.1016/j.soncn.2017.10.003.
19. Pan H, Wu L, Hung Y, Chu C, Wang K. *Long-term effectiveness of two educational methods on knowledge, attitude, and practice toward palliative care consultation services among nursing staff: a longitudinal follow-up study*. Clin nurs res (Online) [periódico na internet]. 2017 [acesso em 27 fev 2019]. Disponível em: <https://www.ncbi.nlm.nih.gov/pubmed/29228811> DOI: 10.1177/1054773817692082.
20. Anderson W, Puntillo K, Cimino J, Noort J, Pearson D, Boyle D, et al. *Palliative Care Professional Development for Critical Care Nurses: A Multicenter Program*. Am J Crit Care (Online) [periódico na internet]. 2017 [acesso em 27 fev 2019]. Disponível em: <https://www.ncbi.nlm.nih.gov/pubmed/28864431> DOI: 10.4037/ajcc2017336.
21. Sand L, Olsson M, Strang P. *Supporting in an existential crisis: A mixed-methods evaluation of a training model in palliative care*. Palliat Support Care (Online) [periódico na internet]. 2018 [acesso em 27 fev 2019]. Disponível em: <https://www.ncbi.nlm.nih.gov/pubmed/28629488> DOI: 10.1017/S1478951517000633.
22. Griffiths J, Wilson C, Ewing G, Connolly M, Grande G. *Improving communication with palliative care cancer patients at home - A pilot study of SAGE & THYME communication skills model*. Eur J Oncol Nurs (Online) [periódico na internet]. 2015 [acesso em 27 fev 2019]. Disponível em: <https://www-scienceirect.ez24.periodicos.capes.gov.br/science/article/pii/S1462388915000265> DOI: 10.1016/j.ejon.2015.02.005.
23. Renton K, Quinton H, Mayer A. *Educational impact of paediatric palliative simulation study days*. BMJ (Online) [periódico na internet]. 2017 [acesso em 27 fev 2019]. Disponível em: <https://spcare.bmj.com/content/7/1/88> DOI: 10.1136/bmjspcare-2015-000883.
24. Macedo K, Acosta B, Silva E, Souza N, Beck C, Silva K. *Metodologias ativas no ensino em saúde*. Esc Anna Nery Rev Enferm (Online) [periódico na internet]. 2018 [acesso em 21 mar 2019]. Disponível em: https://www.scielo.org/scielo.php?pid=S1413-81232008000900018&script=sci_arttext&tlng=es
25. Libâneo J. *Democratização da escola pública: a pedagogia crítico-social dos conteúdos*. São Paulo: Loyola; 1992.
26. Paiva M, Parente J, Brandão I, Queiroz A. *Metodologias ativas de ensino-aprendizagem: revisão integrativa*. Sanare (Sobral, Online) [periódico na internet]. 2016 [acesso em 21 mar 2019]; v.15 n.02, p.145-153, jun./dez. Disponível em: <https://sanare.emnuvens.com.br/sanare/article/view/1049>
27. Yin R. *Estudo de Caso. Planejamento e Métodos*. Porto Alegre: Bookman; 2005.
28. Tobase L. *A dramatização como estratégia facilitadora no processo ensino aprendizagem dos estudantes de enfermagem*. Rev Paul Enferm (Online) [periódico na internet]. 2018 [acesso em 18 abr 2019]; 29(1-2-3):77-99. Disponível em: <http://repen.com.br/revista/wp-content/uploads/2018/11/A-dramatiza%C3%A7%C3%A3o-como-estrat%C3%A9gia-facilitadora-no-processo-ensino-aprendizagem-dos-estudantes-de-enfermagem.pdf>
29. Wittenberg-Lyles E, Goldsmith J, Platt S. *Palliative care communication*. Semin Oncol Nurs (Online) [periódico na internet]. 2014 [acesso em 21 mar 2019]. Disponível em : <https://www.sciencedirect.com/science/article/abs/pii/S0749208114000709> DOI: 10.1016/j.soncn.2014.08.010
30. Bollela V, Senger M, Tourinho F, Amaral E. *Aprendizagem baseada em equipes: da teoria à prática*. Medicina (Ribeirão preto, Online) [periódico na internet]. 2014 [acesso em 20 abr 2019];47(3):293-300. Disponível em : http://revista.fmrp.usp.br/2014/vol47n3/7_Aprendizagem-baseada-em-equipes-da-teoria-a-pratica.pdf
31. Dalmolin A, Girardon-Perlini N, Coppetti L, Rossato G, Gomes, Silva M. *Video educativo como recurso para educação em saúde a pessoas com colostomia e familiares*. Rev Gaúch Enferm (Online) [periódico na internet]. 2016 [acesso em 21 mar 2019].;37(esp):e68373. Disponível em: <http://www.scielo.br/pdf/rgenf/v37nspe/0102-6933-rgenf-1983-14472016esp68373.pdf>DOI: 10.1590/1983-1447.2016. esp.68373

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Corresponding author

Tatiana Pifano da Silva
Address: Rua Degas, 400, Cachambi
Rio de Janeiro/RJ, Brazil
Zip code: 20.771-580
Email address: tatipisil@yahoo.com.br
Telephone number: +55 (21) 96416-1913

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