

Effectiveness of Using Case Simulation to Develop Communication Skills of Nursing Students in English Language Learning

Maria Theresia Priyastuti

Program Studi S1 Ilmu Keperawatan Stikes St. Elisabeth
Email: mariapriyastuti03@gmail.com

This study aimed to examine the effectiveness of case simulation in improving nursing students' communication skills in English language learning. Using a quantitative descriptive design, 200 purposively selected S1 and D3 Nursing students at STIKes Elisabeth Semarang participated in case simulations integrated into an English for Nursing course. Data were collected using a questionnaire based on the Communication Skills Assessment Tool (CSAT) and a performance rubric assessing verbal clarity, medical terminology use, patient response, non-verbal communication, professional attitude, teamwork, and empathy. The results showed that empathy, non-verbal communication, and professional attitude received the highest mean scores, while medical terminology use was the lowest. The instrument demonstrated excellent reliability (Cronbach's Alpha = 0.966). Significant positive correlations were found between students' perceptions of simulation effectiveness and their assessed communication skills, particularly in patient response and verbal clarity. The findings indicate that case simulation is an effective approach for integrating technical and interpersonal communication skills and enhancing students' readiness for real-world multicultural healthcare interactions. However, improvements are still needed in verbal clarity and medical terminology, suggesting the importance of structured instruction, systematic feedback, vocabulary-focused modules, and teamwork-oriented learning activities. Limitations of the study include reliance on self-reported data, the absence of observer-based teamwork assessment, and its non-experimental design. Future research is recommended to use mixed-method and longitudinal approaches to better evaluate skill transfer into clinical practice.

Keywords: case simulation, communication skills, nursing students, English language learning.

This is an open access article under the [CC BY-NC](#) license



Corresponding Author:

Maria Theresia Priyastuti
Program Studi S1 Ilmu Keperawatan Stikes St. Elisabeth
mariapriyastuti03@gmail.com

1. Introduction

Effective communication skills are one of the main pillars of nursing practice, where good interaction with patients, colleagues, and other health team members is crucial to delivering high-quality care. In a global context, mastery of English as a lingua franca in healthcare is increasingly important, given the abundance of literature, practice guidelines, and professional interactions conducted in English. However, nursing students often face challenges in developing these communication skills, particularly in English, which can hinder their ability to function optimally in clinical settings. To address these challenges, innovative learning methods such as case simulation have emerged as promising approaches, allowing students to practice in realistic situations and engage with scenarios relevant to nursing practice (Lesa et al., 2021). Nevertheless, the use of case simulation in teaching English to nursing students has not been extensively researched, warranting further investigation into its potential to enhance their communication skills.

With advances in technology and changes in educational approaches, there is an urgent need to design learning strategies that are more adaptive and responsive to student needs. Case simulations offer an interactive and contextual learning environment, enabling students to apply theory to practice and refine communication skills in situations that resemble real-world experiences. Therefore, this research not only

Effectiveness of Using Case Simulation to Develop Communication Skills of Nursing Students in English Language Learning. Maria Theresia Priyastuti

focuses on the effectiveness of the case simulation method but also explores its impact on students' confidence in communicating in English (Howells et al., 2019). Through this research, it is hoped to provide valuable new insights for educators and educational institutions to enhance the quality of nursing education and prepare graduates to face challenges in the field.

Despite the importance of mastering English communication skills for nursing students, there is a significant gap between expectations and reality in this regard. Many nursing students feel insecure and struggle to communicate effectively with patients and medical teams, especially in English-speaking contexts. This is due to several factors, including a lack of exposure to realistic communication situations during the learning process and inadequate teaching methods. Furthermore, English language learning in many nursing education institutions often fails to integrate with relevant clinical practice, preventing students from linking theory to real-world applications. These limitations not only affect the quality of student interactions in clinical settings but may also impact the quality of care provided to patients. Therefore, there is a need for further research that specifically examines the effectiveness of case simulation in improving nursing students' English communication skills and identifies how this approach can help address existing issues.

Although much research has been conducted on teaching methods in nursing education, there is a significant gap in the literature specifically exploring the use of case simulation to enhance communication skills, particularly in the context of English. Most previous studies have focused more on the technical aspects of simulation, such as effectiveness in teaching clinical procedures, without adequately addressing its impact on students' communication abilities. Additionally, existing research often fails to consider the specific needs of nursing students learning English as a second language, which creates additional communication challenges. Thus, this study aims to bridge that gap by providing an in-depth analysis of how case simulations can serve as an effective tool for improving English communication skills. Through this approach, it is expected to yield new insights that not only enrich the academic literature but also provide practical guidance for educators in creating more effective learning environments responsive to nursing students' needs.

This study offers a significant new contribution to the field of nursing education by exploring the effectiveness of case simulation as a learning method for enhancing English communication skills. The uniqueness of this research lies in its integration of theory and practice within the context of nursing education, as well as its focus on the specific needs of students studying English as a second language. By using case simulations, this research not only identifies ways to improve students' communication skills but also creates a realistic learning environment that supports the development of the interaction skills necessary for clinical practice. The justification for this research is further strengthened by the challenges of globalization in healthcare, where effective English communication is crucial for nursing students who will practice in multicultural environments. Therefore, the results of this research are expected to provide relevant insights and recommendations for the development of nursing curricula, while also emphasizing the importance of innovative educational approaches that can enhance students' readiness to face challenges in the field.

2. Methods

This study uses a quantitative descriptive design to describe nursing students' English language communication skills after participating in case simulations. This design does not involve an experimental treatment but rather aims to measure students' perceptions and skill levels after participating in case simulation activities. This design enables efficient data collection from many respondents using validated

questionnaires or assessment rubrics. The population in this study consists of nursing students in the Bachelor of Nursing Science Program (S1) and the Diploma in Nursing (D3) Program at STIKes Elisabeth Semarang, who have taken the English for Nursing course. The sample was selected purposively, with 200 students chosen as respondents. These students had participated in case simulations as part of the English learning curriculum. This sample is considered representative because they were involved in activities relevant to the research objectives.

The research instrument used was a questionnaire. This questionnaire was designed to measure students' perceptions of the effectiveness of case simulations in developing their communication skills. The questionnaire uses a 5-point Likert scale, asking respondents to rate aspects of communication skills (e.g., clarity of speech, listening ability, and the ability to convey medical information) and their perceptions of the learning experience through simulations. This questionnaire was adapted from the Communication Skills Assessment Tool (CSAT), which has been validated in the context of health education. The Communication Skills Assessment Tool (CSAT) can be applied in English instruction, particularly in case simulations. This tool is designed to measure communication skills relevant to medical interactions, such as the ability to clearly convey information, listen effectively, and appropriately respond to patient questions. These skills are essential in nursing communication and are also an integral part of English language learning in healthcare.

Additionally, an assessment rubric by Rahimi et al. (2022) was used by instructors or researchers to evaluate students' communication skills during case simulations. This rubric includes indicators of verbal and non-verbal communication skills, such as giving instructions to patients, appropriate use of medical terminology, and professional behavior during simulations. The rubric was adapted from a communication skills assessment model used in nursing education. The data collection procedure was carried out in several stages:

1. Preparation Stage: Students participated in several case simulation sessions designed as part of their English language learning. After all sessions were completed, the questionnaire was distributed to students to evaluate their perceptions of the case simulations' effectiveness.
2. Filling Out the Questionnaire: Students were asked to complete a questionnaire focused on their evaluation of the communication skills they developed during the simulations. The questionnaire was collected online.
3. Rubric-Based Assessment: During the simulations, instructors conducted assessments using the prepared rubric. This assessment was done objectively and covered all relevant aspects of communication in professional interactions using English.
4. Data from the questionnaires and rubrics will be statistically analyzed using quantitative descriptive methods. The steps for analysis include:
5. Descriptive Statistics: To provide an overview of students' perceptions of the case simulations and their communication skills, descriptive statistics, including mean, median, and standard deviation, will be calculated. This helps illustrate general trends and the distribution of data.
6. Correlation Analysis: If there is a need to explore the relationship between students' perceptions of the effectiveness of case simulations and the level of communication skills as assessed by observers, Pearson's correlation test will be used to examine this relationship.
7. Reliability Test: To ensure that the questionnaire and rubric used are consistent and reliable, a reliability test will be conducted using Cronbach's Alpha. An alpha value above 0.7 indicates good reliability.

3. Results and Discussion

This study investigated the effectiveness of case simulations as a learning strategy for developing nursing students' English communication skills. A quantitative descriptive design was employed with a purposive sample of 200 students from both the Bachelor of Nursing Science (S1) and Nursing (D3) Diploma programs at STIKes Elisabeth Semarang. Data were collected using a validated questionnaire adapted from the Communication Skills Assessment Tool (CSAT) and an assessment rubric adapted from Rahimi et al. (2022). The instrument measured multiple dimensions of communication competence, including clarity of verbal communication, use of medical terminology, responsiveness to patients, nonverbal communication skills, professional attitude, management of team interactions, and empathy.

Descriptive statistics indicated that the highest-rated dimension was empathy in communication ($M = 4.190$), followed closely by non-verbal communication skills ($M = 4.108$) and professional attitude ($M = 4.095$). The lowest-rated dimension was use of medical terminology ($M = 3.248$). Reliability analysis yielded an overall Cronbach's Alpha of 0.966, confirming excellent internal consistency across the instrument. Correlation analyses demonstrated strong, statistically significant relationships between students' perceptions of the effectiveness of case simulations and their assessed communication skills. The strongest correlation was observed for patient response ($r = 0.810$, $p < .001$), followed by clarity of verbal communication ($r = 0.733$, $p < .001$) and use of medical terminology ($r = 0.688$, $p < .001$). These findings indicate that students who perceived simulations as more effective tended to demonstrate higher communication skills across most dimensions.

A discussion of results grounded in the existing literature suggests that case simulations offer a robust pedagogical platform for integrating technical and interpersonal communication training in nursing education. This method aligns with contemporary educational strategies that advocate experiential and scenario-based learning, thereby enhancing students' readiness for real-world clinical communication challenges. The study reinforces prior evidence that case simulations can improve both verbal and non-verbal communication, empathy, and interprofessional collaboration skills.

The findings have practical implications for curriculum designers, educators, and policymakers in nursing education. It is recommended that case simulation-based English learning activities be systematically integrated into nursing programs, with additional emphasis on the development of precise medical terminology. Furthermore, incorporating structured feedback sessions and enhancing simulation components related to teamwork may further optimize learning outcomes. Limitations include reliance on self-reported measures for some dimensions, absence of observational rubric scores for team interaction, and the non-experimental design, which precludes causal inferences. Future studies should consider mixed-methods approaches, longitudinal tracking, and diverse simulation scenarios to extend the applicability and generalizability of the findings.

Detail Results

Sample size: 200 respondents. Overall instrument reliability (Cronbach's Alpha): 0.966 indicates excellent internal consistency.

Table. Descriptive statistics and reliability by rubric category:

Rubric Category	No. items	Mean (category)	Std. Dev.	Cronbach's Alpha	r with perception (p-value)
Clarity of Verbal Communication	5	3.347	0.799	0.887	0.733 ($p=0.000$)
Use of Medical Terminology	2	3.248	0.946	0.808	0.688 ($p=0.000$)

Rubric Category	No. items	Mean (category)	Std. Dev.	Cronbach's Alpha	r with perception (p-value)
Response to Patients	6	3.566	0.763	0.867	0.810 (p=0.000)
Non-verbal Communication Skills	4	4.107	0.792	0.870	0.656 (p=0.000)
Professional Attitude	1	4.095	0.980	-	0.618 (p=0.000)
Team Interaction Management	0	-	-	-	-
Empathy in Communication	1	4.190	0.893	-	0.594 (p=0.000)

Expanded Discussion

Clarity of Verbal Communication

Results summary for Clarity of Verbal Communication:

1. Number of items: 5.
2. Composite mean (category) = 3.347; SD = 0.799.
3. Cronbach's Alpha (category) = 0.887.
4. Item-level statistics:

I can speak clearly and be easily understood when explaining a diagnosis to a patient in English (Saya dapat berbicara dengan jelas dan mudah dipahami saat menjelaskan diagnosis kepada pasien dalam bahasa Inggris) — mean = 3.450, SD = 0.912. My pronunciation is correct and does not cause confusion for the patient (Pengucapan saya tepat dan tidak menimbulkan kebingungan bagi pasien) — mean = 3.370, SD = 0.915. I can explain medical procedures clearly to patients in English (Saya mampu menjelaskan prosedur medis kepada pasien dengan jelas dalam bahasa Inggris) — mean = 3.315, SD = 1.025. I can explain medical test results in English in a way that the patient can understand (Saya dapat menjelaskan hasil tes medis dalam bahasa Inggris dengan cara yang dapat dipahami oleh pasien) — mean = 3.300, SD = 1.003. I can convey information about care plans clearly and concisely in English (Saya dapat menyampaikan informasi tentang rencana perawatan dengan jelas dan ringkas dalam bahasa Inggris) — mean = 3.300, SD = 0.956. Interpretation: Performance rated FAIR; there is room for targeted improvement.

Discussion :

- a. The composite mean of ~3.35 indicates that students generally perform at a fair level in verbal clarity. Item differences show that 'explaining diagnosis' scored slightly higher than 'explaining test results' and 'conveying care plans', suggesting that students may be more comfortable with routine diagnostic explanations than with translating technical results or summarizing plans.
- b. In line with McCabe (2004) and Thompson et al. (2022), these results suggest the need for structured speaking drills focusing on clarity, information chunking, and the use of signposting language (e.g., 'In summary', 'What this means for you is...').
- c. Pedagogical implication: integrate microteaching sessions, formative feedback with audio recordings, and peer review focused on intelligibility and information structuring.

Statistical note: Correlation with perception score $r = 0.733$ ($p = 0.000$). The correlation is statistically significant ($p < 0.05$), suggesting an association between perceived simulation effectiveness and performance in this category. Caution: correlation does not prove causation.

Use of Medical Terminology

Results summary for Use of Medical Terminology:

- Number of items: 2.
- Composite mean (category) = 3.248; SD = 0.946.
- Cronbach's Alpha (category) = 0.808.
- Item-level statistics :

I use medical terminology in English appropriately and clearly (Saya menggunakan terminologi medis dalam bahasa Inggris secara tepat dan jelas) — mean = 3.260, SD = 1.033. I can explain difficult medical terms in English in a way that is easy for the patient to understand (Saya dapat menjelaskan istilah medis yang sulit dalam bahasa Inggris dengan cara yang mudah dipahami oleh pasien) — mean = 3.235, SD = 1.032. Interpretation: Performance rated FAIR; there is room for targeted improvement.

Discussion :

- The mean (~3.25) reflects that students find medical terminology somewhat challenging. While they can use terms appropriately at times, the ability to rephrase difficult terms for patients remains limited.
- Duff et al. (2002) and Rahimi et al. (2022) emphasize the importance of explicit vocabulary instruction and tasks that require paraphrasing medical concepts into lay language. This aligns with the lower mean here.
- Pedagogical implication: introduce vocabulary notebooks, context-rich tasks (role-plays with glossary support), and 'teach-back' activities in which students must explain terms to the patient in plain English.

Statistical note: Correlation with perception score $r = 0.688$ ($p = 0.000$). The correlation is statistically significant ($p < 0.05$), suggesting an association between perceived simulation effectiveness and performance in this category. Caution: correlation does not prove causation.

Response to Patients

Results summary for Response to Patients:

- Number of items: 6.
- Composite mean (category) = 3.566; SD = 0.763.
- Cronbach's Alpha (category) = 0.867.
- Item-level statistics:

Interpretation: Performance rated GOOD to EXCELLENT according to the rubric thresholds.

Discussion :

- With the highest composite mean among communication-technical categories (~3.57), students demonstrate relative strength in listening, reconfirmation, and giving instructions.
- The very strong correlation ($r \sim \{.3f\}$) with perception suggests that when students feel simulations benefit them, they also perform better in response behaviors. This supports Ha & Longnecker (2010) in their argument for the value of simulated practice for communicative responsiveness.
- Pedagogical implication: sustain the use of scenario-based feedback, focusing on response timing and empathy; include timed drills to deliver urgent information quickly without sacrificing clarity.
- Statistical note: Correlation with perception score $r = 0.810$ ($p = 0.000$). The correlation is statistically significant ($p < 0.05$), suggesting an association between perceived simulation effectiveness and performance in this category. Caution: correlation does not prove causation.

Non-verbal Communication Skills

Results summary for Non-verbal Communication Skills:

- Number of items: 4.
- Composite mean (category) = 4.107; SD = 0.792.
- Cronbach's Alpha (category) = 0.870.
- Item-level statistics:

I always maintain good eye contact with the patient when speaking in English (Saya selalu menjaga kontak mata yang baik dengan pasien saat berbicara dalam bahasa Inggris) — mean = 4.135, SD = 0.960. I demonstrate empathy through positive body language and attitude (Saya menunjukkan empati melalui sikap dan bahasa tubuh yang positif) — mean = 4.190, SD = 0.893. My facial expressions and body posture support effective communication with the patient (Ekspresi wajah dan postur tubuh saya mendukung komunikasi yang efektif dengan pasien) — mean = 3.995, SD = 0.922. I understand the importance of non-verbal communication in interactions with patients (Saya memahami pentingnya komunikasi non-verbal dalam interaksi dengan pasien) — mean = 4.110, SD = 0.955. Interpretation: Performance rated GOOD to EXCELLENT according to the rubric thresholds.

Discussion :

- The high composite mean (~4.11) indicates that students are strong in non-verbal behaviors (eye contact, posture, and positive body language).
- This supports Fawaz & Hamdan-Mansour (2016) and McCabe (2004), who link non-verbal competence with patient trust and perceived empathy.
- Pedagogical implication: continue simulation with video-recorded debriefs so learners can self-observe non-verbal cues and align them with verbal messages; scaffold instruction to integrate non-verbal signals with explicit empathetic phrases.

Statistical note: Correlation with perception score $r = 0.656$ ($p = 0.000$).

The correlation is statistically significant ($p < 0.05$), suggesting an association between perceived simulation effectiveness and performance in this category. Caution: correlation does not prove causation.

Professional Attitude

Results summary for Professional Attitude:

- Number of items: 1.
- Composite mean (category) = 4.095; SD = 0.980.
- Cronbach's Alpha not applicable (single item).
- Item-level statistics:

I am able to maintain politeness and professionalism when communicating with patients (mampu menjaga kesopanan dan profesionalisme dalam berkomunikasi dengan pasien) — mean = 4.095, SD = 0.980.

Interpretation: Performance rated GOOD to EXCELLENT according to the rubric thresholds.

Discussion :

- The high mean (~4.09) suggests students generally demonstrate politeness and professionalism in simulated encounters.
- Encourage reflective practice on boundary-setting and interprofessional communication as recommended by Weatherspoon & Wyatt (2019).
- Pedagogical implication: add interprofessional simulation sessions to practice professional language with colleagues and to clarify roles.
- Statistical note: Correlation with perception score $r = 0.618$ ($p = 0.000$).

Effectiveness of Using Case Simulation to Develop Communication Skills of Nursing Students in English Language Learning. Maria Theresia Priyastuti

- e. The correlation is statistically significant ($p < 0.05$), suggesting an association between perceived simulation effectiveness and performance in this category. Caution: correlation does not prove causation.

Team Interaction Management

Results summary for Team Interaction Management: No direct questionnaire items mapped to this rubric category in the dataset. Recommend adding observer-rated items.

Empathy in Communication

Results summary for Empathy in Communication:

- a. Number of items: 1.
- b. Composite mean (category) = 4.190; SD = 0.893.
- c. Cronbach's Alpha not applicable (single item).
- d. Item-level statistics:

I demonstrate empathy through positive body language and attitude (Saya menunjukkan empati melalui sikap dan bahasa tubuh yang positif) — mean = 4.190, SD = 0.893. Interpretation: Performance rated GOOD to EXCELLENT according to the rubric thresholds.

Discussion :

- a. A high mean (~4.19) on the empathy item indicates students perceive themselves as empathetic in simulations; this correlates moderately with perception ($r \sim 0.594$).
- b. Aligns with Rahimi et al. (2022) and Feingold et al. (2004), who found that simulation supports affective skill development.
- c. Pedagogical implication: add affective-domain reflective prompts after simulations and train students in empathic language scripts (e.g., 'I can see this is difficult for you...').
- d. Statistical note: Correlation with perception score $r = 0.594$ ($p = 0.000$).
- e. The correlation is statistically significant ($p < 0.05$), suggesting an association between perceived simulation effectiveness and performance in this category. Caution: correlation does not prove causation.

Cross-cutting Discussion Points

1. Relationship between perception and skill dimensions: Across categories, perception of the simulation's usefulness (items 16-18) is strongly and positively correlated with measured category means, particularly for 'Response to Patients' and 'Clarity of Verbal Communication'. This pattern suggests that when students perceive simulations as effective, they also rate their practical communication skills higher. Note that these are self-reported measures and may be subject to shared-method variance (self-report bias).
2. Practical significance vs. statistical significance: Several correlations are statistically significant ($p < 0.001$) and of moderate-to-large magnitude ($r > 0.50$). These effect sizes are educationally meaningful and justify maintaining simulation as a core pedagogical strategy. However, targeted interventions (pronunciation, medical terminology, high-stress drills) should be prioritized to raise weaker subdomains.
3. Instrumentation and measurement considerations: High overall Cronbach's Alpha indicates internal consistency but may in part reflect item redundancy. Future instrument refinement could balance breadth (covering more teamwork and observer-rated behaviors) with precision. Adding observer rubrics would triangulate self-reports and strengthen validity.
4. Recommendations for educators and curriculum designers: (a) Integrate focused communication modules addressing identified weaknesses; (b) use mixed assessment methods (self-report, observ-

er rubrics, OSCE-style stations); (c) employ video-assisted debriefing and formative feedback loops; (d) incorporate interprofessional team simulations to capture Team Interaction Management.

Limitations (expanded)

1. Reliance on self-reported data may introduce social desirability and common-method bias.
2. The dataset lacked observer-rated rubric entries for team-based behaviors (Team Interaction Management), reducing the ability to evaluate collaborative competencies.
3. A cross-sectional/descriptive design prevents causal claims.
4. Cultural and language proficiency factors are not fully controlled (e.g., prior English exposure), which could mediate results.
5. Some single-item categories (e.g., Professional Attitude, Empathy) limit the reliability estimation; consider multi-item scales in future studies.

4. Conclusion

The study concludes that case simulation is strongly perceived as an effective method for developing communicative behaviors among nursing students, particularly in non-verbal communication and empathy. Students demonstrated relative strengths in response behaviors and non-verbal communication; however, verbal clarity and the use of medical terminology require more targeted instructional attention. The significant positive correlations between students' perceptions and performance scores further support the continued use of simulation-based learning, with targeted enhancements to maximize its effectiveness.

To address these gaps, it is recommended to introduce focused instructional modules on pronunciation, paraphrasing medical terminology, and summarizing patient test results. Future implementation should also incorporate observer-rated rubrics and peer-assessment to improve the objectivity of teamwork evaluation. In addition, repeated and spaced simulation sessions accompanied by video-based debriefing and formative feedback are suggested to strengthen skill development over time. Longitudinal follow-up studies are needed to assess the transferability of these communication skills into clinical placements and patient outcomes, while mixed-method approaches, including qualitative interviews, are recommended to gain deeper insights into students' learning experiences.

5. Reference

- Alqahtani, M., & Alshahrani, M. (2019). English language learning and simulation in clinical education: A review. *Journal of Nursing Education and Practice*, 9(10), 70–74.
- Cant, R. P., & Cooper, S. J. (2010). Simulation-based learning in nurse education: Systematic review. *Journal of Advanced Nursing*, 66(1), 3–15.
- Duff, P. A., Wong, P., & Early, M. (2002). Learning language for work and life: The linguistic socialization of immigrant Canadians seeking careers in healthcare. *The Modern Language Journal*, 86(3), 397–422.
- Fawaz, M., & Hamdan-Mansour, A. M. (2016). Impact of high-fidelity simulation on the development of clinical judgment and motivation among Lebanese nursing students. *Nurse Education Today*, 46, 36–42.
- Feingold, C. E., Calaluce, M., & Kallen, M. A. (2004). Computerized patient model and simulated clinical experiences: Evaluation with baccalaureate nursing students. *Journal of Nursing Education*, 43(4), 156–163.
- Howells, S. R., Cardell, E., Waite, M., Bialocerkowski, A., & Tuttle, N. A. (2019). A simulation-based learning experience in augmentative and alternative communication using telepractice: speech Effectiveness of Using Case Simulation to Develop Communication Skills of Nursing Students in English Language Learning. Maria Theresia Priyastuti

- pathology students' confidence and perceptions. *Advances in Simulation*. <https://doi.org/10.1186/S41077-019-0113>
- Khaled, F., Al-Tarawneh, H., & El-Ebiary, Y. (2016). The role of simulation in improving nursing students' clinical skills and competence. *Global Journal of Health Science*, 8(1), 144-155.
- Kim, M., & Park, S. (2021). Communication failure in healthcare: A review of contributing factors. *Journal of Nursing Management*, 29(2), 281–291.
- Lai, K. C., & Wang, Y. (2020). Using simulation to enhance English language skills in healthcare settings: A qualitative study. *Journal of Nursing Education*, 59(4), 202-208.
- Lateef, F. (2020). Simulation-based learning: Just like the real thing. *Journal of Emergencies, Trauma, and Shock*, 13(1), 10–14.
- Lesa, R., Daniel, B.K., & Harland, T. (2021). Learning With Simulation: The Experience of Nursing Students. *Clinical Simulation in Nursing*. <https://doi.org/10.1016/J.ECNS.2021.02.009>
- Mahmoud, H., & Rehim, E. (2019). The effect of using simulation on nursing students' clinical competence and communication skills. *International Journal of Nursing*, 7(2), 92–101.
- McCabe, C. (2004). Nurse-patient communication: An exploration of patients' experiences. *Journal of Clinical Nursing*, 13(1), 41–49.
- Rahimi, F., Amini, F., & Gholami, H. (2022). The impact of simulation on nursing students' verbal and non-verbal communication skills. *Journal of Clinical Nursing*, 31(3-4), 478–486.
- Shin, H., & Kim, H. (2019). The impact of English language proficiency on nursing students' ability to engage in clinical placements. *Nurse Education in Practice*, 39, 114–120.
- Thompson, C., Harris, M., & Murray, E. (2022). Enhancing nurse-patient communication skills through simulation. *Nurse Education Today*, 103, 104934.
- Tsai, J., Lin, S., & Chen, L. (2020). Simulation-based learning in enhancing nursing students' communication skills: A mixed-methods study. *BMC Nursing*, 19(1), 1-8.
- Weatherspoon, D. L., & Wyatt, T. H. (2019). The effect of simulation on learning teamwork among nursing students: An integrative review. *Clinical Simulation in Nursing*, 29, 29–34.
- Xu, J., & Wu, Z. (2021). Simulation-based evaluation of English communication skills in nursing students. *Journal of Nursing Research*, 29(6), e159.