

The Australian Nurse Teachers' Society e-Bulletin

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NATIONAL PRESIDENT'S REPORT

September 2014

Welcome to another e-bulletin and the beginning of Spring ... although today in Adelaide you'd have no idea the season has changed!

I would like to remind all members that the ANTS Moodle site is there for you to start discussions and keep in contact with members from all over Australia ... there has been little activity coming from the website recently and as a few branches are having difficulty in reaching members and getting together the site offers an alternative.

If you have questions, comments or need some assistance from your educator colleagues ... log on and start a chat forum ... it is that easy!

Congratulations need to go the WA Branch for maintaining a strong branch focus and keeping the committee together and events happening. It's difficult to keep volunteering time after hours and attending events, but this team are doing it well and working hard to keep their state branch running. So well done to you all.

Some other states have lost the committees to maintain branches running ... so if you are willing to donate some time, you don't need to run a full committee, participate in some education planning for your local area, national exec are here to support educational events and assist with advertising etc so that you can make it happen.

SA members from the South East (Mt Gambier) are planning a rural professional development day for November 2014. Flyers and registrations forms will be available on the ANTS site in the next few days. If you're in the vicinity (or don't mind a road trip) attend and support the team.

That's all from me this time ... stay safe and I hope to see lots of activity on the Moodle.

Until the next bulletin.

Michelle

Michelle Girdler, ANTS National President



NNEC 2014 CHANGING BOARDS PRESENTATION ABSTRACTS

Black

Job Shadowing moves into well lit rooms...

Munro, Gloria (TQEH, Woodville South, SA)

Job Shadowing in the past has always been a bit hit and miss in terms of providing a rewarding and interesting experience for the student whilst ensuring individual, staff and patient safety. After all the students are school kids with no clinical skills or experience. They are given a one hour orientation before they venture out onto the ward areas but this was barely enough to settle the nerves, show them the amenities and inform them they can't do anything anyway.....the question always came up: "what will I be doing then?" Sounds like a silly reply but in reality to a fit young keen individual, doing nothing had no appeal.

The problem has always been that staff are often resource or time poor and the students are not the priority of the ward staff and shouldn't be. I read the feedback from our job shadowing past and made the changes so that the new program is as real as we can make it outside of the clinical environment and thankfully the students have reported positive experiences where they feel more confident in being able to make informed decisions about their future career aspirations.

Flexible, fun & Effective: STI Syndromic Management Training Game - A low-tech, high impact education tool

Jachimowicz, Edwina (The Second Story Youth Health Service, Mt Barker, SA); Graves, Jenni; Hennessy, Ruth ; Cherry, Robert (The Albion Centre, Surry Hills, NSW)

With the advance of the internet and electronic devices to assist in delivery of educational content, many modern educational presentations assume access to such tools. However, one country's present can be another's future and when presenting in remote or resource poor areas, access to even basic technology can be unreliable and even unobtainable.

Responding to the educational needs of health workers in Papua New Guinea (PNG), the Sexually Transmitted Infections (STI) Syndromic Management Training Game was developed as an interactive resource to assist health workers to assess and treat STIs according to syndromic management guidelines. Structured as a large puzzle, the game encourages collaborative practice whilst reinforcing and broadening existing clinical knowledge and practice. It is suitable for health workers in countries which use a syndromic management approach to STI care. Produced by the AusAID-funded PNG Australia Sexual Health Improvement Program (PASHIP) 4As consortium (Anglicare PNG, Anglican Health Services, Anglican Board of Mission-Australia and The Albion Centre), approval, input and encouragement were provided by PNG National Department of Health. Participant feedback indicates the game is an enjoyable and useful learning tool, relevant to Syndromic Management of STIs. Quantitative evaluations indicate

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that the activity promotes STI knowledge and teamwork among participants and could be used in a variety of settings. The resource thus offers a flexible and practical approach to learning about STI diagnosis and management without the need for access to complex technology.

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BEST PRESENTER COMMENDATION .. Congratulations

Professional role modelling and communication during interprofessional undergraduate clinical simulation

Owen, Suzanne (Griffith University, Southport, QLD); Shaw, Julie (Griffith University, Griffith University, QLD); Mitchell, Creina (Griffith University, Griffith University, QLD)

This teaching and learning project aimed to assess clinical reasoning and communication skills in a low-fidelity clinical simulation workshop for undergraduate students from five health disciplines.

The project recruited volunteer health students who consented to participate in a workshop comprising four interprofessional clinical simulation sessions. Each facilitated session included a theoretical case study, a group physiology and pharmacology tutorial, and a video-recorded, low-fidelity clinical experience involving a simulated patient.

The facilitator assessed each student in real-time and the patient assessed each student post-simulation when all students completed a self-evaluation of their clinical reasoning and communication skills. During the facilitated debriefing and reflection group discussion participants watched the video recording of the session then the facilitator provided students with constructive feedback on their skills.

At the end of the four sessions, students completed a post-workshop evaluation. Students reported that they benefited from the opportunity to apply theoretical knowledge in the clinical simulation and gained insight on their clinical reasoning and communication skills. Facilitators' feedback identified that students struggled with data gathering, interpretation of clinical findings and verbal reporting of these findings.

Students who had prior modelling of their professional role were not patient-centred yet they were assessed by patients as competent. The post-workshop evaluation highlighted strengths and limitations of the sessions.

Overall, clinical reasoning skills were poorly developed and communication skills varied by discipline group. Despite workshop limitations, sessions provided a valued learning experience for students and facilitators.

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White

Graduate Year - What a Choice!

Casey, Angela (La Trobe University, Prahran, VIC); McKenzie, Gayle (La Trobe University, Prahran, VIC)

How do graduate nurses make their decisions regarding the choice of a graduate year?

This presentation will explore the variables influencing student choices in their choice of graduate year.

These variables, as identified by a cohort of students completing their Bachelor of Nursing degree at the La Trobe Alfred Clinical School in 2013, included clinical placement location, healthcare facility location, residential address, and opportunity for specialities.

Final choices made by this cohort of students included acute metropolitan, rural, community and mental health. Students were invited to participate in a survey prior to the Victorian Computer Match results being released. 67% of eligible students responded to the survey.

Leaders of the Future - a fast track to management and clinical leadership

Foster, Suzanne (SWSLHD, Bankstown, NSW); Lim, Kung (SWSLHD, NSW); Meiruntu, Rose (CEWD SWSLHD, NSW); McGreal, Nicole (CEWD, NSW); Crause, Jessica (Sydney LHD, NSW)

Leaders of the Future (LOTF) is a tailored leadership and management development program that aims to inspire registered nurses and midwives to progress to senior clinical and management roles. Using a combination of theory, mentoring, and practical skill application, the program is designed to boost participants' confidence and assist career succession planning.

Until the program's inception in 2012, South West Sydney Local Health District (SWSLHD) did not have an equivalent initiative to fast-track career development for Registered Nurses and Midwives. LOTF aimed to fill this training gap with a mentoring program that includes clinical observation opportunities.

The program's content and selection criteria were informed by consultation between the Centre for Education and Workforce Development (CEWD) and Directors of Nursing (DONs). Participants were selected through an expression of interest across the District and with the approval of facility/service DONs. Participants attended nine face-to-face workshops over 10 months, mentoring sessions with senior clinicians and nursing/ midwifery executives and two half-day observation sessions.

Results from 26 evaluations found that 100% of participants rated the workshops as either meeting or exceeding their expectations. The vast majority of participants (95%) felt that the content was appropriate, met the learning objectives, and increased their confidence. They also incorporated what they had learnt into the workplace. During and after the course completion, 19 participants (73%) moved into higher graded positions.

Overall, the LOTF program has successfully delivered an important pathway for registered nurses and midwives to earn promotions to leadership and management positions and increase their self-confidence.

8 9 10 ready or not here I come! Teaching neonatal resuscitation to emergency nurses in a non birthing hospital

Pearson, Nicole (Qld Health, Brisbane, QLD); Neal, Joclyn (Qld health, QLD)

The presentation of a woman in imminent delivery or the presentation of a newborn infant to a non birthing hospital emergency department is not always anticipated or predicted. Therefore staff must be

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HEALTH MOODLEMOOT 2014

Innovation
Sydney 27-28 Nov



The inaugural Health MoodleMoot in Australia is being presented by the Sydney Adventist Hospital (SAH), supported by Pukunui Technology

Platinum Sponsor

Australian Nurse Teachers Society (ANTS)

The theme is “**Moodle and Innovation in Healthcare Education**” focusing on the complex challenges in delivering education in the healthcare sector. The use of Moodle, mobile devices and the latest digital educational tools, is enabling healthcare organisations to:

- be innovative and use technology to reshape learning, making training more affordable and accessible
- build skills by giving people a compelling, helpful and authentic learning experience
- create and access multimedia-rich training resources to keep up with clinical practices
- use simulation-based learning approaches to provide decision-making opportunities, exploration, reflective learning & sharing of experiences

WHO SHOULD ATTEND?

The Health MoodleMoot is aimed at:

- eLearning and LMS Managers and Experts
- Multi-media Specialists and Instructional Designers
- Healthcare Educators (both clinical and non-clinical)
- HealthCare Managers and Strategists
- Tertiary Education Health Faculties (University and TAFE)
- Learning and Curriculum Development Centres

KEY DATES

- Early Bird Registration closes: 25 Sept 2014
- Registration closes: 12 November 2014

<http://health.moodlemoot.com.au/>

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prepared to resuscitate the newborn infant at anytime.

This descriptive paper will provide the early findings on the implementation of the NeoResus specialised training program developed by the Victorian Newborn Resuscitation Project in a non birthing hospital. This program is the preferred method of providing education and training to medical and nursing staff working in hospitals that have maternity services in Queensland Health.

The acquisition of knowledge and skills is supported by a blended learning model using an active learning methodology. This includes web based learning modules that compliment skills based, team work focused hands on training modules. The key benefits of increased efficiency due to decreased face to face didactic teaching time and partnership and collaboration with experienced NeoResus facilitators within the Metro North Hospital and Health Service District will be highlighted.

Virtual

Right person - Right course - Right report

Whittington, Mark (Flinders Medical Centre, Chandlers Hill, SA)

What is the use of transitioning from chalkboard to white board to virtual board if the right person is not enrolled into the right course and managers are unable to get the right report? The original user management process of our Moodle website (www.saheducation.net) was labour intensive and could only be done by one individual. This was a risk to the organisation. Over the past few months the Centre for Nursing and Midwifery Education and Research (CNMER), in collaboration with a contracted Excel specialist, have increased the ease and functionality of the system.

Human Resource files can now be easily manipulated by the "User Management System" so that new user accounts are created; existing user accounts are updated and users who have left the organisation are archived. The users are automatically enrolled into predetermined courses based upon their location and pay classification. Users then have an easy to use a "My Courses" menu that includes all courses expected to be completed by that individual. (accreditations and mandatory training).

Never has the requirement for easy access to accurate reporting of compliance rates of staff undertaking accreditations and mandatory training been such an imperative since the introduction of the 10 National Safety and Quality Health Service Standards. From the SAH Education and Training website, middle managers use the Departmental Reporting Tool to view/download their area's staff compliance with Accreditation type courses. This is an instantaneous real-time view. Executives can view monthly progress reports filtered by Institution; Division; Cost Centre/Department; and Pay Classification. We can now ensure the Right person in the Right course with the Right reports.

Using web technologies to link research, education and practice

Parker, Steve (Flinders University); Wright, Victoria (Flinders University); Tucker, Katie (Flinders University); Gillham, David (Flinders University, SA); Mathews, Gregory (Flinders University)

Health professional education is undergoing unprecedented change as mobile and web technologies now provide rapid access to research evidence, practice guidelines and support for clinical decisions. However, the range and volume of information able to be accessed through these evolving technologies create a rapidly changing and complex environment for health professional education.

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This paper describes an innovative response to addressing nurse education priorities implemented at Flinders University involving development of CaseWorld (a prototype virtual case based learning environment) and Pods (collections of learning resources addressing specific topics). The new undergraduate Bachelor of Nursing (BN) curriculum at Flinders has provided an interesting context for the implementation of CaseWorld because prototype development has occurred simultaneous to large scale uptake and implementation.

This approach is unique because both innovation and implementation have occurred as part of routine curriculum development rather than via teaching and learning grants. The outcome is the emergence of a new technology enriched approach to case based learning that is both cost effective and practical as scripted unfolding cases provide low fidelity simulation¹. Students engage with authentic cases and complete problem solving activities that promote critical thinking and clinical decision making².

Evaluation data from survey and focus group investigations of the new BN, CaseWorld and Pods are reported in this paper. This data provides the basis for discussion of technological innovation for health professional education generally by focusing both on university education and the application of knowledge and research in the clinical practice setting.

NOVICE PRESENTER COMMENDATION .. Congratulations

Closing the Gap - RN 2 to RN 3

Hannaford, Steve (TQEH, Woodville, SA)

Fresh out of the training organisation as a nurse/midwife we transition from theory to practice into the "real world" often with support and an understanding of the expectations of our role. The transition to the next levels provides increased opportunity and responsibility to utilise acquired clinical knowledge and skill in providing organisational education directives. From a Level 2 Clinical Educator to a Level Three it allows increased scope to be innovative, creative and flexible in developing education resources/programs in fulfilling these needs. Greater autonomy is required within the role to evaluate current education practice to ensure content is pertinent and relevant to identified needs. Revision and updating of existing education procedures/ resources is central to the role. Leadership is also expected within the role and may include resolving education issues and changing practice. This is my personal journey...

E-learning in Preregistration programs issues for students and educators: A review of the literature

Button, Didy (Flinders University School of Nursing & Midwifery, Adelaide, SA)

Objective: To examine primary research published between January 2001 and December 2012 that focused on the issues for students and educators involved with E-learning and associated technology in preregistration nursing programmes.

Background: E-learning is arguably the most significant change to occur in nursing education since the move from hospital training to the tertiary sector. Differences in computer and information literacy levels for both students and educators influence the successful implementation of E-learning into current curricula.

Data Sources: Online databases including CINAHL, MEDLINE, OVID, the ProQuest Central, PubMed, ERIC

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and Science Direct were used.

Methods: The criteria used for selecting studies reviewed were:

- primary focus issues faced by nursing students and/or nurse educators from undergraduate preregistration nursing programs
- using electronic learning and associated information computer technology; published in English in peer reviewed journals between January 2001 and December 2012.

Results: Analysis of the 28 reviewed studies revealed the following three themes: issues relating to E-learning for students; use of information technologies; educator (faculty) issues involving pedagogy, workload and staff development in E-learning and associated technology.

Conclusion: Commencing preregistration nursing students required ongoing education and support surrounding nursing informatics. Support would enable students to progress and be equipped with the life-long learning skills required to provide safe evidence based care. There are increased time and skill demands placed on nurse educators to adapt their current education methodologies and teaching strategies to incorporate E-learning. This presentation will discuss the themes from the review and suggest implications for further research.

BEST PRESENTER AWARD .. Congratulations

The book, the app, the MOOC and the future

Muir-Cochrane, Eimear (Flinders University, SA); O'Kane, Deb (Flinders University, Adelaide, SA); Barkway, Pat (Flinders University, Adelaide, SA)

Education about mental health is a vital and embedded component of curriculum in Bachelor of Nursing programs. The core aspects of engaging with people with mental health problems, namely engagement, empathy and specialized knowledge and care lend themselves to the use of a variety of traditional and innovative new media in the provision of quality education to students.

In this presentation, we will explore the advantages and pitfalls of working with new media to assist students be confident to work clinically with people with mental health problems. Specifically we will examine how we used our own text Mosby's Pocket Book of Mental Health as a basis for the material to explore the use of virtual reality (Second Life) to provide simulations of altered thinking and perceptions, an App to facilitate learning about mental state assessment and a MOOC and social media to explore global and local mental health issues.

Quantitative and qualitative data from a pilot MOOC title Mental Wealth to be launched during Mental Health Week in October 2013 will be discussed in order to provide insights into the possibilities of the use of new media in mental health nursing education. We believe this is the first mental health MOOC to be delivered in Australia and our experiences will inform future directions for us as academics in this field.

Nurse education in the virtual environment: From one reality to another

Owen, Suzanne (Griffith University, Southport, QLD); Baumann-Birkbeck, Lyndsee (Griffith University, QLD); Dukie, Shailendra (Griffith University, QLD); Grant, Gary (Griffith University, QLD)

Today's students demand the use of technology in the classroom; immersive learning technology caters to those needs. It has been proposed that technological advancement can assist academic educators overcome challenges and meet the growing needs and expectations for improving education quality,

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ANTS SCHOLARSHIP REPORT

Jayne Hartwig, Transition Nurse Coordinator, WCH

CONFERENCE REVIEW

My 2014 ANTS scholarship allowed me to travel to Banff Canada to attend the '*Workplace Integration of New Nurses - Nursing the Future*' conference. This was a wonderful opportunity to gain further knowledge about transition to practice education and support. Collegial networks were also renewed and new contacts created. This conference is an excellent opportunity for educators, managers, nursing Graduates and students to come together to learn from each other and grow together. This is possibly one of the only such conferences in the world where students through to managers meet to discuss the issues related to the transition journey of new staff.

I was able to present three different sessions:

- The Women's and Children's Hospital TPPP
- Creating a Positive Learning Environment
- Innovative Strategies to Support Transitioning Staff

Extremely positive feedback was received from each session which helped to confirm my passion for this area of nurse education. I was also able to meet with individual attendees who wanted more information.

IMPACT

As a result of attending this conference I have

- Confirmed my passion for this specialised area of nurse education
- Renewed previous collegial relationships
- Created new collegial relationships
- Learnt new and innovative ways to support transitioning staff which I have already been able to implement
- Recommended my Masters research into the experiences of transitioning staff

Since returning home I have been able to share my new knowledge with Graduate Nurses and Midwives at WCH; Managers at WCH; Educators at WCH and across CHSA and metropolitan SA. I will also be using this knowledge in a new project position which I am undertaking for SA Health Nursing and Midwifery Office.

RECOMMENDATIONS

I would highly recommend this conference to anyone who has an interest in transition to practice. I am currently working with the conference organiser to determine if this conference could be held in Australia in the future as I believe it would be very beneficial for students, Graduates, educators and managers alike.

SCHOLARSHIPS AND GRANTS

ANTS Scholarship

Encourage ongoing professional development at an education related conference

The Australian Nurse Teacher Society Scholarship is aimed to encourage the professional development of members to attend a conference or seminar with an education-related focus.

Funding is available QUARTERLY to a maximum of \$1000 for registration, travel and accommodation. In the event of multiple applications priority will be given to conferences with a strong nursing education focus.

Applicants must hold membership for a minimum of (24) consecutive calendar months prior to application and have not received a scholarship within the previous (2) years.

CLOSING DATES: 31st January 30th April 31st July 31st October

CRITERIA AND GUIDELINES: <http://www.ants.org.au/ants/mod/page/view.php?id=7>

ANTS Research Grant

To encourage research with a primary focus on Nurse and/or Midwifery Education.

To encourage research in all fields of nursing/midwifery educational practice the Australian Nurse Teacher Society provides seeding grant of \$2,000 to members for research with a primary focus on Nurse and/or Midwifery Education

Grant applications are offered annually based on the quality of the proposal in a manner consistent with accepted standards of research ethics. Applicants must hold membership for a minimum of (24) consecutive calendar months prior to application.

Additional applications will be considered by the National Committee as the demand dictates

CRITERIA AND GUIDELINES: <http://www.ants.org.au/ants/mod/page/view.php?id=7>

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whilst encouraging student-focused learning and developing independent life-long learners.

Simulation and immersive learning tools provide advantages over traditional teaching delivery methods by engaging students in structured, yet realistic settings that stimulate interest and enthusiasm for the subject matter. Studies show implementation of immersive simulation technologies to be attractive and highly motivating to today's generation of students, serving to improve education provider's student retention and participation.

This project aims to develop immersive learning environments to improve technology utilisation. In a pilot study, interactive scenarios were designed using The Brain(R) software to expose students to the pharmacological management of non-steroidal anti-inflammatory agents. Students interacted with developed scenarios in a workshop setting. Students reported on their self-perceived level of engagement, preference, and understanding of the topic.

Overall students reported a high preference towards the interactive activity and described improvement in their depth of understanding of the topic. Future studies will objectively measure student engagement and learning outcomes.

Distance Approach

Teaching on the Edge: exploring the lived experience of academics teaching undergraduate nursing at satellite campuses

Wirihana, Lisa (Queensland University of Technology, QLD); Welch, Anthony (Central Queensland University, QLD); Williamson, Moira (Central Queensland University, QLD)

With the completion of the final Hospital based Nursing training courses in Australia in 1993, came the necessity for Registered Nurses in Australia to be educated in Universities. While there are many valid arguments as to the virtues of this form of education, there were some areas of concern.

Rural, regional and outer urban areas did not have the access or equity of a Higher Education Institution close to home. Thus potential Registered Nurses living in outer urban, regional and rural areas, needed to attend Universities that were commonly situated in metropolitan areas, some distance from their home.

Satellite campuses have become the answer to this dilemma by providing Higher Education to these areas. The emergence of satellite campuses in outer urban, regional and rural areas of Australia has brought challenges and opportunities for students and academics teaching at these campuses.

Students that enrol at these campuses have different characteristics to their urban counterparts. These students are more likely to be mature age, from lower socio-economic status and may be academically challenged. Academics that work at satellite campuses are an essential component in the success of students who enrol at these campuses and thus the success of education programs in those regions. This presentation will explore the challenges and opportunities that face nurse academics teaching at satellite campuses.

BEST NOVICE PRESENTER .. Congratulations

Flexible options for Enrolled Nurse Training in regional South Australia

Sanders, Ali (TAFESA)

South Australia has a large geographically dispersed regional population with many health facilities

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located in rural, remote and regional areas. The challenge is to deliver Diploma of Nursing training to all who would like it across all communities of regional South Australia irrespective of where they choose to live and work.

TAFESA have progressed from offering a classroom based model or an external print based model to use an exciting flexible delivery methodology. TAFESA have a fully flexible program for Enrolled Nursing training, using innovative methodologies of online classrooms with facilitated teaching, combined with intensive clinical skills workshop weeks in clinical labs and clinical placements.

Key components of the methodology are:

- facilitated delivery using online classrooms within the Moodle learning management system
- intensive student support offering opportunities using video conferencing networks, telelink, tutorials, discussion forums and local study groups
- clinical skills intensive workshop weeks held in clinical labs located in key regional communities, designed to spend specialist time with lecturer demonstration and supervised student practice sessions
- scheduled clinical placements
- one on one student/lecturer relationship for support throughout the course

The methodology allows the student to complete theory study in their home location, whilst being a part of a supported and facilitated online classroom and learning community. Students are provided an opportunity to interact with and learn from specialist nursing lecturers across the State of South Australia. Students are able to accelerate or reduce their studies as may be required for them personally. It is a successful methodology using latest technology.

Clinical reasoning assessment in a virtual environment: utilising Moodle Lesson to provide equity between on-campus and distance education nursing and midwifery students

Timms, Hayley (University of South Australia, SA); McDonough, Deborah (La Trobe University, VIC)

This paper showcases the innovative use of technology enhanced learning whilst utilising an inquiry based

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PEER REVIEW CONTRIBUTORS

The ANTS e-Bulletin is seeking original, previously unpublished articles from ANTS members which can be manuscripts on contemporary clinical or academic education issues, workforce issues relevant to nurse education, and educational research of interest to ANTS members. New and nephrite writers are encouraged to submit their work for consideration.

Guidelines for Contributors can be accessed on page 37 of this issue OR at the link on the ANTS website OR by direct contact to the Peer Review Editor at david.stanley@uwa.edu.au

REMINDER: ANTS e-Bulletin is now CINHAL Indexed

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learning approach.

This transformative process from real world to virtual environment was achieved by creating multiple online Moodle Lessons, both formative and summative to assess students for an Online Clinical Reasoning Assessment (OCRA). The OCRA had previously been conducted in the Practice Based Laboratory in a face-to-face manner. This had a number of implications for staff and students, such as a physical presence required, use of multiple consumables and human resources.

This interactive online activity was developed to replace the OCRA. The Moodle lesson in the form of an OCRA incorporated four different patient scenarios, medication charts, admission forms, observation charts and multiple choice questions to assess the student's knowledge application.

The main aims for using the Moodle Lesson were to:

- provide equitable and simultaneous assessment opportunities for all students enrolled in the Bachelor of Nursing program (both on-campus and off-campus)
- replicate real world practice of clinical reasoning in a virtual environment
- facilitate Inquiry Based Learning approaches
- establish capacity and representation of real world practice, through the assessment of safe delivery of patient care, clinical comprehension and written communication.
- enhance the professional discourse of nursing students, augmented through the engagement with multi-disciplinary clinical case study scenarios.

This paper will show the effectiveness of the Moodle Lesson as an alternative OCRA online assessment, formative activity and the student response to the new form of assessment and learning.

Challenges and Opportunities

Life-Changing and Challenging - Providing Health Worker Education in PNG

Jachimowicz, Edwina (The Second Story Youth Health Service, Mt Barker, SA); Hennessy, Ruth; Graves, Jenni; Cherry, Robert (The Albion Centre, Surry Hills, NSW) .

Working in Australia, particularly in metropolitan and large country regions with ready access to technology and resources, health educators may be forgiven for taking availability of same for granted. Remote areas and resource poor countries however, require less sophisticated and technological modes of program delivery. Cultural factors may also necessitate revision of content, language and approach.

Working as Technical Advisors under the AusAID-funded Papua New Guinea (PNG) Australia Sexual Health Improvement Program (PASHIP) the authors provided periodic in-country consultancy, mentorship and health worker education in PNG. While humanitarian work can be mutually life changing and beneficial for workers and host communities alike, it also presents challenges:

- Lack of resources (access to reference material, availability of medical supplies/equipment)
- Lack of technology (electricity, internet, phone access)
- Systematic and organizational factors which promote or impinge on clinical capacity
- Limited application of multidisciplinary collaboration in PNG
- Differences between countries in vocational training, preparation & support for professional roles

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- Context of professional roles
- Clientele and impact of culture, religion and politics
- Image versus reality of international work

The authors present their life-changing experience of providing education to health workers in PNG, discussing the various challenges and how they were overcome. They also present two resources developed and produced by PASHIP 4A's Consortium as a result of identified need for health worker education in STIs and counselling of clients. These interactive tools have been proven through trials to foster collaborative practice, communication and expansion of professional skills.

Progression is a wonderful thing

Gallacher, Mandy (TQEH, Woodville, SA)

This presentation describes the progression of the Enrolled Nurse (Registered Nurse Level 2) Transition Program at The Queen Elizabeth Hospital.

The Queen Elizabeth Hospital Enrolled Nurse Transition Program (ENTP) commenced in 2008 and has gone through troughs and peaks as it has progressed through time. Primarily, the program was developed in response to a lack of consolidated clinical experience as nursing studies moved in to the tertiary sector. The original program had a set time frame of six (6) months within a competency based framework and graduates would rotate throughout general wards and areas.

The program today remains true to its conception supporting graduates to establish themselves within the profession as an Enrolled Nurse. Enhancement and adaptations to the program continues to meet the needs of the organisation as a major recruiting tool and facilitate the progression from student to enrolled nurse. The key to the success of the program, and what makes it different is that it has remained flexible and innovative in today's fiscal environment.

Don't throw the baby out with the bath water: Integrating the old with new approaches in education for rural generalist nurses in palliative care

Rabbetts, Lyn (Centre for Regional Engagement, University of South Australia, Mount Gambier, SA)

Technology is having a huge impact on delivery modes in nursing education programs. In regional areas in South Australia there are challenges such as travel cost, travel time and diminishing staffing levels leading to less opportunity for nurses to have rostered time off to pursue education programs in metropolitan centres. Is it feasible to provide education at the coal face as well as utilizing technology to enhance teaching in regional areas in South Australia?

This presentation will highlight the evaluation of a post graduate short course in palliative care nursing. This course was facilitated in face to face mode of delivery in the South East Region of South Australia by the Centre for Regional Engagement, University of South Australia. As best practice in palliative care nursing was explored the participating nurses experienced the value of receiving personalized training while the world of online learning and the vast amount of literature which is available to continue their learning journey was introduced. The value and challenges of using technology including virtual classroom sessions to provide the participating nurses with ongoing education after completing the short course will be discussed in this presentation. Pursuing this mixed mode of education for nurses working in regional areas is in line with the increasing choice of country health care facilities in supporting nursing staff to

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engage more with the online learning environment. Nurses do embrace post graduate education programs being made available at regional levels while the use of technology is explored and established.

Creating opportunities for undergraduate nursing education in remote Western Australia:

Pathways and technology

Clark, Sally (The University of Notre Dame Australia Broome Campus, Broome, WA); Piercey, Carol (The University of Notre Dame Australia)

This paper is about the challenges that have faced a remote university school of nursing and midwifery in Western Australia. A brief history of the school and its location will be presented to set the context. Currently a redirection is set to be the schools biggest challenge since its inception 15 years ago. The recognition that other remote schools may gain knowledge from the strategies that have been necessary to address these challenges was the impetus for this paper.

Economic, geographic and demographic circumstances have underpinned the changes that have been requisite in the school in its effort to provide nurse education commensurate with other Australian centres of higher education, and to compliment the rural nursing workforce. These strategies together with the university responses will form the major thrust of the paper.

Interprofessional Practice

Interprofessional Education: Past, present and future

Bell, Elaine (WCHN)

Introduction: Interprofessional education faces a number of challenges, including professional socialisation and hierarchies; heavy clinical workloads; poor understanding among professional groups and the effects of organisational change. Within acute hospital care, these issues are further complicated by the wide range of professionals who may be involved in patient care at any one time (Cortvriend, 2004; Reeves & Lewin, 2004; Roald & Edgren, 2001). These factors suggest not only that IPL may be difficult to establish and sustain within the acute health care setting, but consideration also needs to be given to how perceptions of IPL may vary across different settings and professional groups (Lewin & Reeves, 2011). We need to learn from the past, embrace the present and look to the future.

Past: The possession of teaching or training skills has been considered an important component of professionalism since the time of Hippocrates. throughout time tensions remain throughout health between clinical service delivery and education, with a perceived gulf between professional groups (Andrew and Robb, 2011).

Present: Much of the present literature surrounding education focuses on specific professional groups, but there is little evidence across professions to determine if each profession's perspective, jargon, mandates, and culture influence the quality of education (Nicolini, Mengis & Swan, 2011).

Future: It is suggested that a collaborative approach to education that promotes shared language, labels and expectations across all professional groups could inform the development of an effective and efficient healthcare model to support the clarity and quality of education needs across health (Stone, 2007).

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Nurses Quick reference to: Common Laboratory & Diagnostic tests 5th edition

Published in 2011 by Wolters Kluwer: Lippincott Williams and Wilkins

This guide is set up into three chapters:

1. the nursing role in diagnostic testing
2. Nursing standards and protocols for specimen collection
3. Alphabetical list of laboratory tests of body fluids, imaging procedures and special studies of body functions

Followed by an appendix: Standard precautions

Chapter 1:

This chapter discussed the nurses role in diagnostic testing and procedures , testin gin various environments such as home care , acute care and other health facilities. Discussed the elements of safe , effective and informed care looking at nursing diagnosis , legal and ethical implications and moves on to collection of samples and procedure management.

Chapter 2:

Provides an refers to standards and practice codes from US based organisations such as the American Nurses Association, some of may have variations from Australian practices depending on the local procedures in health services, but none the less this is a comprehensive section on protocols that can be referred to as a guideline for practice.

Chapter 3:

Has an alphabetical listing of laboratory tests, imaging procedures and special studies. Some tests do have slight differences on names that are used across Australia, but this shouldn't cause any problems for users of the guide. All test are written in an easy to follow format that provide an descriptor of the test / intervention, indications for the test, reference values, the procedure for the test / intervention, nursing interventions- pre, during and post-test.

The Appendix:

Covers standard precaution guidelines and includes PPE, medical waste disposal and general environmental cautions. Always good for a refresher for experienced nurses and definitely good for student and novice nurses to be reminded of these protocols.

The index:

Is well set out and easy to find tests an interventions by known names.

Overall this text is user friendly and would provide any clinician or educator with a quick access and easy to read reference guide to tests and interventions. Its small enough and light enough to carry around yet comprehensive enough to supply the information needed

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Teaching Advanced Life Support to the Multidisciplinary Audience

Whiston, Paul (The Queen Elizabeth Hospital, SA)

Resuscitation Training Officers are making their way into Australian hospitals as a new emerging role - due to the need to have one person coordinate Advanced and Basic Life Support training. These positions are often filled by an experienced critical care Registered Nurse, often with a background in Coronary Care, Intensive Care Nursing or the Emergency Department.

In addition to the clinical skill required for these resuscitation roles, the training officer must also gain proficiency in teaching to an audience that comprises a multidisciplinary team. It's quite a challenge as a nurse educator to have sufficient confidence to inform a professor or senior consultant that their technique and knowledge is lacking!

This presentation will focus on the requirements of teaching to a wide group of professionals – where its important to apply tact and diplomacy, whilst still adhering to standards and exit criteria – regardless of the candidate. It will touch on different learning styles and appreciation of work environments and context. The training officer must appreciate adaptability in delivery and content, whilst appreciating the background of the audience.

The Antineoplastic Drug Administration Course

Latimer Hill, Elizabeth (Cancer Institute NSW, Eveleigh, NSW); Tomkins, Sarah (Cancer Institute NSW, Eveleigh, NSW)

The Cancer Institute NSW has developed online educational material that uses eviQ content, providing cancer health professionals with online blended learning courses that standardise and promote best clinical practice for the care of patients of all ages with a cancer diagnosis.

The Antineoplastic Drug Administration Course (ADAC) supports health professionals develop the necessary knowledge and clinical skills to administer antineoplastic drugs and handle related waste safely. The course includes high quality interactive scenario based eLearning guides, eQuizzes, supervised clinical practice, competency assessments and a clinical skills workshop to consolidate theory to practice. ADAC is designed for registered nurses, however some modules within the course are relevant to other clinical and non-clinical staff health care professionals. eviQ education courses are designed to be incorporated within the health care organisation's staff professional development strategy.

The course is designed so participants are assessed both on their knowledge and clinical skills in the administration of oral and intravenous antineoplastic drugs. The course has three exit points recognising the increasing complexity between administration of oral and intravenous antineoplastic drugs.

To ensure accuracy and currency the course is maintained through consultation with external key stakeholders by the Cancer Institute NSW thus removing the need for local educators to maintain multiple different courses.

While originally developed for use within NSW, ADAC is now implemented nationally. The current total number of hospitals, both public and private, implementing ADAC is over 180 with New Zealand expressing interest in the course for all District Health Boards.

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Using Simulation to Build Better Trauma Teams

Strube, Petra (ICU - Princess Alexandra Hospital, Brisbane, QLD)

A trauma patient requires many professions in the modern health care system to work in collaboration. This innovative educational program uses simulation to improve inter-professional and inter-departmental communication and collaboration that has demonstrated positive links to the quality and safety of trauma patient care.

A 3 part simulation was utilised to reflect the 3 acute clinical areas, Emergency Department, Operating Theatres and Intensive Care Unit, a complex trauma patient would transit through. Each simulation scenario was followed by a debriefing, led by the educator and medical officer from each respective clinical area, to guide and highlight key simulation/learning objectives and debriefing points. Thus allowing the opportunity for relevant clinical feedback, as well as assisting participants to integrate changes back into their daily clinical practices.

Formal evaluation revealed an improved awareness of the importance of interprofessional and interdepartmental team communication such as patient handover. As well as improved team collaboration by developing a shared understanding of interdepartmental functioning and processes. This includes information sharing and collaboration to improve prioritisation of care and patient flow between departments.

Research and Evidence

The development of a conceptual model for the Continuity of Care experience for midwifery students

Glover, Pauline (Flinders University, SA); Sweet, Linda (Flinders University, Adelaide, SA)

Midwifery students are required to produce evidence of twenty Continuity of Care experiences over the three years of their education program. Whilst being a national standard for midwifery education, there is no one model or pedagogical approach in which these experiences are embedded and enacted within curricula. It is recognised that each institution that offers midwifery curricula across Australia has implemented the Continuity of Care experiences differently.

This Study builds on previous research that demonstrated that the Continuity of Care experience does optimise student learning. This study aimed to develop a conceptual model that demonstrates how conceptual, procedural and dispositional knowledge development might be maximised before, during and after the Continuity of Care experiences.

A mixed method approach was used that incorporated document analysis of curricula and processes for implementing the Continuity of Care experiences, and online surveys with stakeholders. This triangulation enabled exploration of both the expected and the actual implementation of the Continuity of Care experiences. The findings and the conceptual model will be presented at the conference.

A conceptual model for the Continuity of Care experience will provide strategies for midwifery students to develop their agency as a learner operating in autonomous circumstances. This model will have the potential to provide national strategic leadership and facilitate the sharing of knowledge and practice for this mandate practice.

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Evidence-Based Practice in Undergraduate Nursing Education: A Curriculum Analysis

Malik, Gulzar (Monash University, Melbourne, VIC); McKenna, Lisa (Monash University); Griffiths, Debra (Monash University)

Evidence-based practice (EBP) remains a relatively new concept to nursing, causing many challenges to become apparent when making curriculum decisions. Most of the available literature on EBP focuses on clinical nurses to a great extent.

There is limited literature available addressing the incorporation of EBP into the nursing curriculum, particularly at the undergraduate level. Available literature highlights discrepancies in how EBP is implemented into the nursing curriculum. There is ambiguity in defining the concepts of EBP, the appropriate year/s in which to initiate EBP skills training and in the merging of EBP with the research process.

In the Australian context and internationally, EBP is variably addressed within undergraduate nursing education. This paper reports findings of an analysis of curriculum outlines from tertiary education providers of Bachelor of Nursing (BN) programs in Australia exploring how EBP is incorporated. Curriculum outlines of BN programs were extracted through websites. Each unit of study was reviewed in relation to units offered on research, and EBP in isolation or combined.

Content analysis was performed to analyse the findings. In Australia, 32 universities and 2 colleges offer BN programs. Results revealed that of these, three did not appear to offer any units related to research or EBP. The majority of education providers combined units on research and EBP with major emphasis on research concepts and methodologies. Few offered separate units on both research and evidence-based practice. In addition, twenty-nine education providers integrated EBP related objectives throughout their curricula ranging between one to twelve units of study.

Variations among institutions were found in terms of years and semesters in which research and EBP units were introduced. It is paramount that EBP should be considered an integral part of curricula and be embedded in all units of study.

Systematic review of instruments for measuring nurses' knowledge, skills and attitudes for evidence-based practice

Leung, Kat (University of Sydney, Camperdown, NSW); Trevena, Lyndal (University of Sydney); Waters, Donna (University of Sydney)

Aim: To identify, appraise and describe the characteristics and validity of instruments for measuring evidence-based knowledge, skills and/or attitudes in nursing practice. **Background:** The move towards evidence-based practice (EBP) for optimum patient care has been growing for more than three decades, yet competence in EBP knowledge and skills among nurse clinicians remains difficult to measure. There is a need to identify well-validated and relevant instruments for assessing competence for EBP in nursing.

Design: Systematic review. **Data sources:** The MEDLINE, EMBASE, CINAHL, ERIC, CDSR, All EBM reviews, and PsycInfo databases were searched from 1960 through April 2013; with no language restrictions applied.

Review methods: Using pre-determined inclusion criteria, three reviewers independently identified studies for full-text review, extracting data and grading instrument validity using a psychometric framework.

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BOOK REVIEWS

Published and Supplied by Elsevier



Clinical Cases Series

Fundamentals of Nursing Care Case Studies:

Published in 2014

Authors: Natasha Scully and Damian Wilson

Medical and Surgical Nursing Case studies:

Published: 2014

Author: Janine Booth

Nursing Care Case Studies

Published: 2014

Author: Ellie Kirov and Margaret Webb

Case Studies Series have been written by Australian Nurses all have extensive experience in their chosen fields and provide case studies that are based on practices in Australia and include legal and ethical considerations for practice. They are well designed to assist the reader to identify a situations, review the phases of the episode, review the conclusion (the patient outcome) finally each case study has a discussion at the end, that provides information and further resources for the reader.

The case studies are well set out and cover a wide variety of conditions both acute and non-acute. The reader is challenged to answer questions throughout the case study and a separate section of the book provides the answers to cross check with. Each section also provides referenced utilised in the text and many case studies provide direction for further reading material that may assist the reader if they require more information on a topic.

The books have been designed to be used as a study tool for exams and revision and would be useful in teaching and learning sessions both clinically based and non-clinically based.

Each of these texts are available from Elsevier books.

ANTS Teach and Learn <http://www.ants.org.au/ants/course/view.php?id=42>

The Teach and Learn area is available on the website to all members and guests to highlight and discuss matters of educational interest.

As an ANTS member we would like to encourage you to exchange and share your experience, professional ideas, experiences, knowledge and resources freely.

All members have Moodle Teacher level access and can utilise all currently installed Moodle modules.

If anyone would like additional modules loaded (see <https://moodle.org>) please make a post in the Teach and Learn News Forum below or email office@ants.org.au

You can make posts or create a topic areas highlighting some educational resource of interest.

Its a Blank canvas awaiting some paint!

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Results: Of 91 studies identified for full-text review, 59 met the inclusion criteria representing 24 different instruments. The Psychometric Grading Framework determined that only two instruments had adequate validity - the Evidence Based Practice Questionnaire (EBPQ) measuring all three (knowledge, attitudes and skills) and another un-named instrument measuring only EBP knowledge and attitudes. Instruments used in another nine studies were graded as having 'weak'; validity with the remaining 24 studies graded as 'very weak'.

Conclusion: The EBPQ was assessed as having the highest validity and was the most practical and feasible instrument for use in practice. However, the EBPQ relies totally on self-report rather than direct measurement of competence; suggesting a need for a performance-based instrument for measuring EBP knowledge, skills and attitudes in nursing.

Immediate Response Training (IRT): Evaluating a blended delivery model of training in the detection and management of patient deterioration

Bingham, Gordon (Alfred Health, VIC); Hagan, Natalie (Alfred Health); Metcalfe, Suzanne (Alfred Health)

Background: Development and implementation of training for nurses in charge to recognise and respond to deteriorating patients.

Methods: A program was developed for nurses in charge (n=16) of a ward to recognise and respond to deteriorating patients. The program had three phases; prerequisite E-learning, low fidelity simulation day and ward based assessment competencies. Evaluation was by Likert scale responses and an audit of documentation before and one month following completion of the program.

Results: Participant evaluation reported; improved assessment abilities (57% to 93%), increased interventions to prevent deterioration (57% to 93%), improved confidence to escalate care (50% to 93%), increased likelihood of using ISBAR (21% to 93%) and increased confidence in teamwork (36% to 93%). The documentation audit (n=44 v n=34) demonstrated deteriorating patients were more likely to have care escalated to the nurse in charge (29% v 72%), receive more nursing interventions (25% v 72%) and were more likely to have the medical team contacted (58% v 72%) regarding changes.

Conclusions: The blended delivery model used is effective to improve staff attitudes and abilities related to management of deteriorating patients. The program is being implemented across all in-patient areas for the nurse in charge group. Further study of the implications in a larger cohort will be required.

The Impact of an Education Program on Nurses' Recognition and Response to Deteriorating Patients

Duff, Beverley (Sunshine Coast Hospital and Health Service, Nambour, QLD); Gooch, Russell (Sunshine Coast Hospital and Health Service, Nambour, QLD)

Aims and Background: The literature revealed that most nursing education programs were evaluated with an emphasis on participant's satisfaction with teaching factors within a program rather than the impact of participants' learning on patient care.

A simulation based workshop was implemented at a regional health service. The program introduced an observation form including an Adult Deterioration Detection System (ADDS), containing guidelines for clinical actions, communication and interventions between acute care ward nurses, and the emergency response team (ERT). The active engagement of educators and coaches in the clinical context integrated

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the links between clinicians facilitating interprofessional communication. These educational strategies aimed to consolidate learning and foster operationalisation of early detection of the deteriorating patient.

Methods: Data were collated and analysed following each emergency response. Each call initiated by ward nurses to the ERT used a situation, background, assessment, recommendation (SBAR) mnemonic and followed ADDs form guidelines as practised in the workshop. Questionnaires were circulated to education program participants immediately post workshop and at three, six and twelve months intervals to evaluate skills, behavioural and attitudinal changes.

Results: Initial results demonstrated that there was a sustained 300% increase in early detection and reporting of patient deterioration. Findings included increased use of assessment skills in clinical practice and earlier reporting of deteriorating patients resulting in more timely access of ERTs.

Conclusion: The application of learner-centred educational strategies facilitated participants' reported use of patient assessment skills contributing to significantly earlier detection of patient deterioration demonstrated by data analysis of calls made to the ERT.

BEST PRESENTER COMMENDATION .. Congratulations

Value for Money: The Economic Evidence for Clinical Nurse Education and Health Libraries

Harris, Lindsay (SA Health Library Service, Woodville, SA); Simunov, Karen (The Queen Elizabeth Hospital, Woodville, SA)

With the shrinking healthcare dollar Health Libraries and Clinical Education Units are being increasingly scrutinised. Their purpose is frequently questioned owing to the availability of online resources and courses in tertiary institutions.

An independent and comprehensive assessment by SGS Economics on the value of health libraries and their 'Return on Investment' (ROI) identified an end-client benefit with a 9:1 ratio. Clinical Education Units are beginning to face the same issues and need to begin the process to quantify their value with a body of evidence.

Is there a relationship between learning preference and web-based academic engagement among graduate entry nursing students?

Salamonson, Yenna (University of Western Sydney, Penrith South, NSW); Koch, Jane (University of Western Sydney); Metcalfe, Lauren (University of Western Sydney); Everett, Bronwyn (University of Western Sydney)

Background: Graduate-entry nursing programs in Australia are relatively new compared to similar programs in the United States and Canada.¹ Nevertheless, recent Australian data examining this group of nursing students demonstrates similar findings, with graduate-entry students likely to utilise learning strategies that focus on their academic pursuits,^{2,3} and thus less likely to engage in extraneous information or learning activities.^{4,5}

Aim: To examine students' academic engagement in two types of online learning activities offered through:

- 1) course website; and
- 2) enhanced-learning website, and their relationships with learning preference using the Visual, Aural, Read/write and Kinaesthetic (VARK) questionnaire.

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Method: Graduate-entry nursing students were invited to complete a survey; we also sought their consent to link their completed survey to their online engagement (measured by the number of hits).

Results: There was a positive correlation between students' engagement with the course website and the enhanced-learning website ($r=0.35$, $p=0.014$). Although none of the learning preference components were related to students' engagement with the course website, students with higher visual learning preference were more likely to engage with the enhanced-learning website ($r=0.28$, $p=0.032$). This relationship remained statistically significant ($r=0.30$, $p=0.035$), after controlling for students' gender and enrolment category (international versus local student status).

Conclusion: Findings from this study further supports the use of a combination of learning activities, other than those that favoured visual learners, to cater for different learning preferences of graduate entry nursing students.

Setting the Student Environment within the Online Community - The Implementation of the Maraha Tool for Professional Doctoral Nursing Students

Kuypers, Ann (La Trobe University, Wodonga, VIC); Hercelinskyj, Gylo (Julie) (University of Canberra, Bruce, ACT); Petrie, Eileen (University of Canberra, Bruce, ACT)

The face of education today in the tertiary sector has significantly shifted over the last decade with changing demographics of our students' cohort and demands. There is significant research evidence to effectively support the need for an online learning environment that constantly changes along with the advancement of technology, however as well noted throughout the research this advancement of learning technology alone will not change the way students learn.

Considerable significance is placed on the concept of learning being social in nature; authentic activities and student engagement with content as being essential components for effective online teaching and learning that promotes a socially interactive climate.

As the concept of online teaching and learning becomes more prominent; so too, is it vital that we consider the effectiveness of various pedagogical approaches. This presentation describes how the utilisation of the Mahara tool was implemented into the Nurse Practitioner Professional Doctorate program to support students across their candidature years to enhance a community of collegial work within an online learning environment.

Lived Experiences

Launching our replacements: introducing clinical practice development to undergraduate nursing students

Brideson, Genevieve (Flinders University, Adelaide, SA); Stephenson, Jane (Flinders University, Adelaide, SA)

As part of the creative curriculum at Flinders University that commenced in 2013, first year undergraduate nursing students are involved in a stimulating clinical practice innovation.

The clinical skills intensive week is 24 hours of focussed clinical skill development and practice for students enrolled in the topic 'Applied Science in Professional Practice'. The students work to develop their fundamental nursing skills as a small team, assisted by experienced clinical facilitators. This supports the

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AROUND THE STATES



WESTERN AUSTRALIA

Three new committee members have joined the ANTS WA team. We are pleased to welcome Fiona MacDonald (*Royal Perth Hospital*), Michelle McKivett (*Silver Chain*) and Tihana Vojnovic (*Fremantle Hospital*). The ladies bring extensive education skills and knowledge to the committee and are already hard at work helping to organise our next event.

WA ANTS held it's first new look ANTS Networking Night at the Wembley Hotel. Members (old and new) and non-members were fortunate to listen to Dr Janie Brown from Curtin University present on the perils of blindly believing all published materials and how to effectively evaluate research. A lively discussion ensued, as participants shared their own personal stories.

A great time was had by all and the overwhelmingly positive feedback has convinced us that members would like to us use this type of forum again [*Photo gallery page 25*]. ANTS WA will be Networking Night on the 13th November, so watch out for updates on Moodle.

Unfortunately due to low registration numbers the 1/2 Day Education Forum planned for the 6th September has had to be cancelled, but if this is they type of event you would like to see run in the future, please let your committee members know.

NEW MEMBERS [JUNE - AUGUST]: Fiona MacDonald, South Lake and Tihana Vojnovic, Beeliar

Sandra Craigie
ANTS WA Chair

SOUTH AUSTRALIA

As a follow-on from NNEC 2014 the SA members organised educational activities. Sadly due to low registration numbers (and perhaps the weather) the metropolitan networking and 'pamper' night planned for the 1st October was cancelled. On a brighter note the country study day the South-East members are planning for the 13-14 November is forging ahead [*see flyer page 30*]. As the event is being held in Mt Gambier it is open to both members and non-members in SA and across the border (or really as far as you want to travel to attend). Corporate rates have been secured for accommodation. Please print the flyer and put on notice-boards around your workplace.

We look forward to seeing you there!

NEW MEMBERS [JUNE- AUGUST]: MAXINE TREDREA, ST AGNES

Miriam Bayes, Heather Ashby and Karen Simunov
SA Members
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students to develop confidence and competence in their skills, prior to commencing their first professional experience placement.

Examples of the fundamental nursing skills developed include communication, documentation, patient assessment, manual handling, basic life support and the practical skills of basic hygiene - showering, sponging, changing an occupied bed etc. Students are supported and facilitated to think critically and provide rationales for all the skills they are undertaking.

During the presentation delegates will be provided with a bird's eye view of what occurred during the intensive, along with a summary of the staff and student's evaluation of the innovation.

Nursing students' perceptions of the clinical learning environment during a fast-track nursing degree

Chan, Alex (University of Tasmania, Sydney, NSW); Cronin, Nigel; Pertile, Joy; Molloy, Luke (University of Tasmania)

Background: Clinical education is an important component of undergraduate nursing curriculum. It provides opportunities for students to apply the theory-based knowledge to clinical practice. Compared to the classroom based learning, clinical learning environment is often less structured in general and learning opportunities/activities are mostly unplanned.

As a result, some students may experience learning difficulties in clinical setting. Evidence indicates that there is a strong link between students' perceptions of learning environment and learning outcome.

Fast-track nursing degree is a very intensive and demanding program. This program attracts people from different age group and culturally and linguistically diverse backgrounds. Therefore an understanding of their needs and perceptions of clinical learning environment would be valuable in the development of future nursing curriculum.

Objectives: The objectives of this quantitative exploratory study are:

- 1) identify factors that impact student learning in clinical setting using the Clinical Education Environment (SECEE) inventory subscales, and
- 2) investigate student perceptions of interactions with hospital and university staff, and perceived support in applying newly acquired clinical skill.

Methods: SECEE inventory was used to collect data in this study. Permission was granted from the author. The inventory was administered to a group of undergraduate nursing students (n=42) in a large Australian university to evaluate their most recent clinical placement.

Results: Factors that impact student learning in clinical setting and their perception of interactions with hospital and university staff, and perceived support in applying newly acquired clinical skills were identified in this study.

Student perspectives of the unit Family Health Care: Health issues and Australian Indigenous people

Hunt, Leanne (University of Western Sydney, Rouse Hill, NSW)

It is essential for undergraduate nursing students in Australia to increase their knowledge of the health issues surrounding and impacting on Indigenous communities. This aspect of nursing education is particularly relevant, given continuing health disparities in the Indigenous population and the cultural

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and linguistic diversity of current and future student cohorts. The Bachelor of Nursing program at the University of Western Sydney (UWS) embedded the subject area of Indigenous health into the undergraduate program via the unit 'Family Health Care: Health Issues and the Australian Indigenous Peoples.'

This mixed methods research study investigated student perspectives on the effectiveness of the unit's weekly learning activities and overall content in terms of benefits to individual nursing practice and quality teaching and learning outcomes.

Two hundred and seventy-nine second-year students consented to participate in pre and post intervention surveys. An hypothesis of the study was Australian-born participants were more likely to rate themselves higher on knowledge of Indigenous issues, interest in Indigenous nursing contexts and confidence in working with Indigenous people when compared with self-reports of students from culturally and linguistically diverse (CALD) backgrounds.

Although this hypothesis was supported by baseline survey results, study findings post-intervention indicated that CALD-background students' perceptions were further enhanced than other students. Several implications for teaching and learning strategies in the important area of Indigenous health stemming from these unexpected findings will be examined.

Supporting Learners

ECG Education for Nurses. Who, What and Why?

Cunningham, David (TQEH, Adelaide, SA)

This presentation will aim to address the educational requirements of nursing staff across all disciplines, specifically related to ECG acquisition and basic interpretation.

A patient without any cardiac history may suffer an acute cardiac event, and there are a variety of medications with cardiac side effects administered on a daily basis. Therefore, I would argue that all nurses require some level of ECG knowledge and capability. The argument is not purely regarding interpretation of the waveforms. It is especially important that nursing staff are able to acquire an ECG accurately, understanding the principles of lead placement and patient management during the process.

Away from the critical care setting, such as the post-operative ward, populated with predominantly elective patients in a stable condition, ECG analysis is by no means an everyday occurrence, yet this staff cohort is often the last to be considered to attend cardiac training. Through this paper I will present the information that supports the need for all nurses, regardless of discipline, to participate in ECG education.

How to weave a cultural quilt: Increasing cultural awareness amongst non-academic School of Nursing & Midwifery staff

Kelton, Moira (Flinders University, Adelaide, SA); Button, Didy (Flinders University, Adelaide, SA)

In many Schools of Nursing and Midwifery across Australia the proportion of students from culturally and linguistically diverse backgrounds (CALD) is increasing annually in both undergraduate and post graduate programs. Students arriving from overseas may experience culture shock as well as having many essential responsibilities that need to be attended to in addition to commencing their studies. These include

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QUEENSLAND/NORTHERN TERRITORY

NEW MEMBERS [JUNE - AUGUST]: Joanne McMillan, Mount Coolom (QLD); Carolyn Sutcliffe, Narangba (QLD) and Pamela Wood, Palmerston (NT)

VICTORIA

NEW MEMBERS [JUNE - AUGUST]: Anna Walsh, Toorak and Rachel Weaver, Frankston

NEW SOUTH WALES (INCORPORATING AUSTRALIAN CAPITAL TERRITORY)

NEW MEMBERS [JUNE - AUGUST]: Andrew Woods, Bangalow; Peter Jones Rushcutters Bay; Taya Straw, Grafton; Nadine Quennell, Dapto and Wendy Gleeson Broken Hill

TASMANIA

NEW MEMBERS [JUNE - AUGUST]: No new members.

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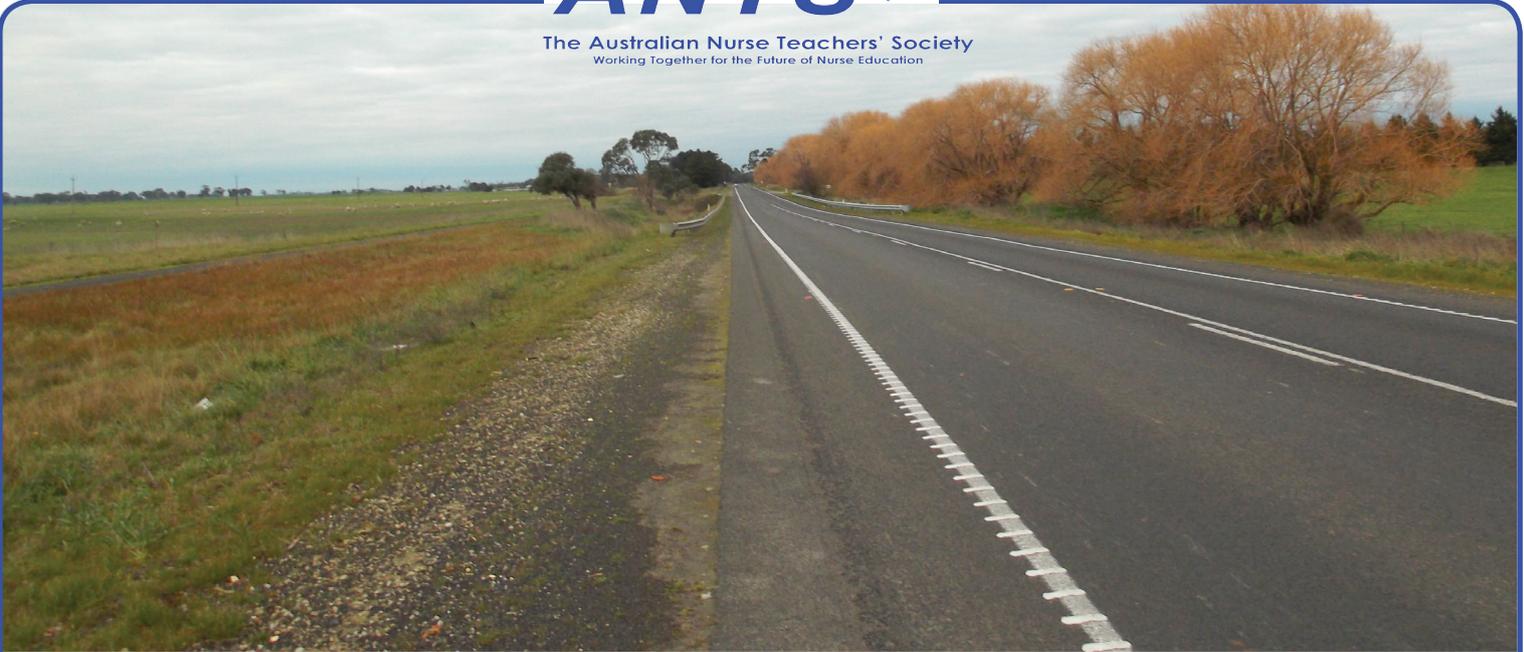
Create a course to share with whoever you wish.

Be an active member in your local area organise a networking or education session.

Use the forum in your state on the website to advertise and encourage others.

If you require assistance please contact ANTS National

General discussion forum or office@ants.org.au



ANTS promotes the advancement of all aspects of nurse education and seeks to encourage the free exchange of education and professional ideas

Celebrating the Nursing Journey from a Regional Perspective: Strengthening links between Regions and the City' Conference

This interactive education event is to show case the many excellent nursing specialists in the regions and to provide vital updates in current evidence base nursing practice.

Evidence Based Practice in:

Mental Health, Palliative Care, Trauma Care, Innovative Teaching Practices-Simulation and Interprofessional Learning, Birthing in Non-Birthing Hospitals, Community Support Programs and Communication Using Team Steps



Key Note Speaker :

**Professor
Nicholas Procter**

Chair Of Mental Health Service,
Division Of Health Sciences,
University Of South Australia

Best Western Southgate Motel, 175 Commercial St East Mt Gambier

Thursday 13 November 2014 : 5.30pm - 7pm Welcome Reception

Friday 14 November 2014 : 8am - 16.15pm (Dinner to follow from 6.30pm)

Cost: Early Bird Rate \$120 Until 14 October 2014; Full Registration \$150

Registration Closes 31 October 2014

Further Enquiries: Heather-Jean Ashby & Miriam Bayes - Phone: 08 8721 1515

Email: Heather.Ashby@health.sa.gov.au or Miriam.Bayes@health.sa.gov.au

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finding accommodation perhaps for their entire family, purchasing texts, finding their way around the campus to name just a few. Providing sensitive, welcoming and inclusive interactions with commencing students by non-academic staff can greatly assist in decreasing some of the impact from the culture shock experienced. Flinders University values and respects the social, cultural and linguistic diversity of its community and encourages inclusive practices in order to provide an environment that is creative, innovative, flexible and productive.

To support these principles, culturally diverse and inclusive practice (CDIP) grants are awarded annually to staff to encourage the development of innovative strategies to promote ways of increasing cultural awareness. This presentation will discuss the outline, resources and participant evaluations from two workshops held for School of Nursing and Midwifery non-academic staff and part time clinical facilitators to promote and increase culturally inclusive practice.

Enabling Clinical Supervisors to Undertake Critical Conversations with Pre-Registration Nursing Students

Mackay, Maria (University of Wollongong, NSW); Brown, Angela (University of Wollongong, NSW); Bourgeois, Sharon (University of Wollongong, NSW)

Clinical supervisors work independently across a wide geographical area often at a distance to the university. Being often isolated in their practice they have identified that undertaking critical conversations with nursing students in a practice context is one the most parts of their role. They express feelings of being underprepared for the complex interpersonal communications that are required of them. Clinical supervisors identified a need to gain knowledge and skills in the area of critical conversations.

Through the use of participatory action research and practice development, critical conversations have been embedded within the reconnaissance phase of a wider action research project. This project has drawn from the work of Tichen (2000) on critical companionship, which aligns critical companionship to a helping relationship that enables human flourishing.

The aim of this presentation is to share how the provision of knowledge and skills of critical conversations enables clinical supervisors to work in solution focussed ways with pre-registration nursing students and other members the interdisciplinary team.

The project has resulted in the development of a suite of skills to empower clinical supervisors to work proactively with nursing students in a solution focussed way of working. Through the implementation of this way of working clinical supervisors are empowered to undertake positive and future focussed critical conversations. Arising from the project has been the enabling of clinical supervisors and health care professionals to develop improved positive learning environments for pre-registration nursing students during their workplace experience.

iMid: mobile devices to support facilitation of midwifery professional experience placements

Sweet, Linda (Flinders University, Adelaide, SA); Graham, Kristen (Flinders University, SA)

Midwifery students undertake 1,696 hours of practice experience placements across the three year Bachelor of Midwifery program. Our institution uses a model of facilitation which involves only (3) primary clinical facilitators. These clinical facilitators meet regularly with the students on placement and

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CONFERENCE DIARY DATES

SEPTEMBER

Australian Nurses & Midwives Conference

11 - 12 September 2014 | Melbourne

<http://anmfvic.asn.au/calendar/44041.html>

Diversional Therapy Australia National Conference

18 - 20 September 2014 | Adelaide, SA

<http://www.diversionaltherapy.org.au/Events/tabid/59/Default.aspx>

New Zealand Nurses Organisation (NZNO) Conference - "Nurses – champions for change"

18 September 2014 | Wellington, New Zealand

www.nzno.org.nz/2014conference

CATSINaM 16th National Conference - "Embrace the difference within our people"

23 - 25 September 2014, Perth WA

<http://catsin.org.au/>

OCTOBER

Australasian Association of Bioethics and Health Law Conference - "How should we decide"

2 - 4 October | Perth WA

<http://www.conferencedesign.com.au/aabh2014/>

31st Annual National Conference Health Information Management

7 – 9 October 2014 | Darwin, NT

<http://hima2.org/conference/>

ANZSVS 2014 - "Revolution and Evolution in Vascular and Endovascular Interventions"

11 - 13 October 2014 | Canberra, ACT

<http://www.vascularconference.com/2014/>

MASK-ED™ Inaugural Conference

16 October 2014 | Brisbane, QLD

<http://www.cqu.edu.au/masked/conference>

NOVEMBER

National Nursing Forum

2 - 4 November | Adelaide, SA

http://www.acn.edu.au/forum_2014

6th Australian Rural & Remote Mental Health Symposium

12—14 November 2014 | Albury, NSW

www.anzrmh.asn.au/rrmh/

Health Moodle Moot

27—28 November 2014 | Sydney, NSW

health.moodlemoot.com.au

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responsible to liaise with their clinical preceptors, undertake their assessments and provide feedback, and to deliver educational and debriefing sessions. Furthermore, these clinical facilitators manage administrative activities such as the students' rosters, roster changes, attendance, placement records, assessments records and all communication with the university Clinical Coordinator Midwifery programs.

This project involved distribution of iMid mobile devices, set up for immediate access to a) the midwifery Pod of educational resources such as videos, diagrams and eBooks for onsite teaching, b) the midwifery miniCEX assessment tool, c) cloud based documents shared with the clinical coordinator, and d) links to the student portal for the immediate documentation of assessment, feedback and learning contracts etc. The iMid trial will evaluate the applicability, utilisation and benefits if these mobile resources from the perspective of both staff and students involved in the project.

BEST PRESENTER COMMENDATION .. Congratulations

Ways to support international student's speech and pronunciation

Muller, Amanda (Flinders University, Adelaide, SA)

This paper will explore ways that the speech and pronunciation of international nursing students can be supported by nurse educators. Speaking is perhaps the least practiced of the four language skills in the university setting - students do plenty of reading and listening, and some writing, but speaking in English is sometimes the least frequent activity. Despite this, speaking is very important in the clinical setting, and an inability to speak comprehensibly is a frequent source of poor assessments given to students.

The linguistic skill of speaking and the social skill of communicating will be explored as a part of this paper. However, students can be supported in a number of ways, both at the university and in the placement, to improve their speaking skills.

This paper will first explain the anatomy of long words, the reason why they pose difficulties, and how nurse educators can help students with pronunciation using a little-known back-chaining technique. The importance of word stress and its effect on comprehensibility will also be discussed. Speed of delivery is also considered in this paper, both for the educator and student. Finally, some advice is given on how to support students using online resources, including recordings, activities, word lists, flashcards, software, and educational games.

Clinical Placement Modelling: Success through Synergy

El Haddad, May (Sunshine Coast Hospital and Health Service, Coolum Beach, QLD)

Introduction: A significant number of graduate RNs are increasingly required to join the workforce each year in response to growing healthcare demands of Australia's aging population. The transition period of graduate RNs is acknowledged as a time of significant stress as graduates endeavour to consolidate their nursing knowledge and gain mastery of clinical skills in unfamiliar working environment.

Recent budget cuts in healthcare requiring fiscal responsibility have necessitated the implementation of an innovative model of final clinical placement of nursing students. A collaborative approach between education providers and a regional health service introduced a clinical placement model for third year students - one month in an acute medical/surgical ward and one in a specialty setting. Students worked the same rosters as their preceptor/s including nights and weekends. Consequently, students successful in securing a graduate RN position were offered work in the ward where they completed their final

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placement.

Method: Focus group meetings were held separately with graduates and clinical coaches over intervals of 3 and 6 months after employment. Data were analysed using thematic analysis.

Results: Findings demonstrated that familiarity with ward routines, culture, practices, guidelines and resources enabled graduates to better develop a sense of belongingness and collegial relationships while focusing on their transition to RN role. This placement model has also led to improvements in clinicians' involvement in student learning.

Conclusion: This approach has led to improvements in graduate RNs' transition into professional practice while enhancing clinical placement capacity in response to increasing workforce demands.

Collaborative Approach

A ReHSeN -able Option for Virtual Teaching

Wilson, Sue (Northeast Health Wangaratta, Benalla Health, University of Melbourne, Wangaratta, VIC)

The adoption of a national recency of practice standard is a reflection of the rapidly increasing and ever advancing scope of nursing practice. This fact in conjunction with Health Workforce Australia's workforce modelling suggesting the need to re think how we provide for and respond to the health care needs of our community, demand we fundamentally change how we think about and support clinical education.

ReHSeN (Victorian Regional Health Service elearning Network) is one such innovation in healthcare training. ReHSeN is a virtual classroom open anytime, anywhere that it is convenient for the individual. Its uniqueness stems from the fact that it is an elearning platform developed as a collaboration between e3 and multiple health services from across the Grampians, Loddon-Mallee and Hume regions of Victoria.

ReHSeN has the capacity to target competency training for specific skill sets; to link the training records of individuals working across multiple services; to collate professional practice portfolio records; and provide a single portal for linking individuals with the diverse and ever growing numbers of elearning packages and resources available for the ongoing professional development and training of those working in healthcare.

As a collaboration, and as a public / private partnership, it has the facility to ensure both the ongoing development and enduring sustainability of the available learning packages. Built on the original work of the Dr. Allan Donnelly from the Department of Health's Ballarat Recruitment and Retention Office, the application of and possibilities for ReHSeN are only just beginning to be realised.

Partners in Delivering an Evidenced-based Approach to Minimise Restraint & Challenging Behaviour

Behrendt, Grant (CALHN Mental Health Directorate, Woodville South, SA)

A growing concern within society is the rise in aggressive and challenging behaviours of which healthcare workers are often at the coal-face with incidents ranging from verbal abuse through to violence.

In early 2012 Western Mental Health based at The Queen Elizabeth Hospital commenced delivery of an evidenced based training program for "Challenging Behaviours" with a focus to minimise restraint and seclusion. Through clinical need and co-location a partnership developed between CALHN Mental Health and Clinical Education with general staff (educators and clinical staff) trained as instructors from late 2012

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onwards for a standardised approach across the site.

The program is delivered as a full day workshop with two accredited trainers at a minimum of two sessions per month. Open to both clinical and nonclinical staff, the objectives is promote least restrictive principles, a crisis development framework and identify how the interactions between staff and consumer are integrated and influence behaviours.

An extension of the model which offers advanced de-escalation and safe restraint techniques has also been adopted and provided to the site Aggression Management Team with (59) attendees including (24) key mental health and general nurses to assist with advanced de-escalation in conjunction with the Team with de-escalation. From the successful implementation of the program, ongoing sustainability and overall effectiveness; CALHN MH directorate across all sites have now adopted the model for all Mental Health staff.

Cardiovascular Learning Pathways Project: A cross institutional cardiac nursing education program

Harris, Jayne (Flinders Medical Centre, Bedford Park, SA); Gaskin, Laura (Royal Adelaide Hospital, Adelaide, SA)

Aims and Background: The Cardiovascular Learning Pathways Project arises from an identified need to provide progressive staff development for cardiovascular nurses in both the Royal Adelaide Hospital and Flinders Medical Centre. Transition support, ongoing professional development for staff and the evolving clinical needs of cardiovascular patients across the continuum drives this work and provides the underpinning rationale.

Methods: A collaborative relationship between (2) cardiac Nurse Education Facilitators was established across two tertiary healthcare institutions and scoping of resources and methodologies for delivery discussed. Key stakeholders were engaged and the program framework was developed following a workforce learning and development analysis across State-wide Health Networks.

Results: This project has resulted in the development of a new and innovative model for education delivery for cardiac nursing as a specialty. The program is structured using an online format for the delivery of theoretical knowledge, uses a clinical skills portfolio for the acquisition of clinical abilities and skills and has strategically placed workshops (sequentially focused) to consolidate theory to practice. The unique collaboration between two traditionally siloed institutions has proven key to the program's success and the subsequent education provided.

Conclusion: The program is supporting new and existing cardiac specialist nurses across the state and successfully integrates theory to practice through the involvement of clinical mentors and experienced educators. The collaborative nature of the work has delivered an innovative workplace model/framework that has ensured the most effective use of resources in a fiscal environment whilst still promoting best outcomes for nursing staff and patients.

Simulation

Can Simulation Change the World?

Thompson, Andrea (Princess Alexandra Hospital, QLD); Lyons, Nicole (Princess Alexandra Hospital); Crouch, Shannon (Princess Alexandra Hospital)

Aims: To explore the ways that simulation can create a cultural change by making ward nurses aware of

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the impact of behavioural and professional attributes on patient care, patient safety and patient outcomes.

Background: The principles of Crisis Resource Management (CRM) are a group of tenets that promote good behavioural habits in the management of everyday and crisis events. The CRM principles were adapted from aviation and are predominately used in simulation courses focussing on the critical care areas – anaesthesia, emergency and intensive care. As the majority of patient care occurs in the ward environment we believed that an understanding of the behaviours that promote safe and effective patient care would benefit both the ward nursing staff and the patients they care for.

Method: A full day “CRM for Ward Nurses” course was developed. The course builds on the nurses’ clinical experiences, and explores how the principles of CRM could improve performance. The course material was developed by clinical and simulation experts, with input from patient safety and communication consultants. Each scenario has been developed to deeply explore one or more of the CRM principles.

Results: A search of the simulation and nursing literature found no evidence of a CRM type program being run exclusively for ward nurses. The first pilot courses are to run in October and November 2014. Post course evaluations will be conducted.

Conclusions: Our expectation is that many of the principles of CRM will be concepts that ward will have experienced in clinical practice. The introduction of the CRM principles gives a language to describe these behaviours and may offer a framework for ward nurses to use both in critical events and as effective everyday behaviours.

Medical Emergencies - Education through Simulation

Miller, Patricia (Flinders Medical Centre, Willunga, SA)

Nursing and medical professionals possess the basic knowledge to manage common emergencies. However nursing and medical staff require the management of medical emergencies in which roles are clearly defined, communication is clear, structured and clinical interventions are undertaken in a timely manner. Providing simulation of these emergencies provides a relevant clinical context for the participant in which the environment is controlled.

The implementation of a formal multi-disciplinary education program at Flinders Medical Centre was to provide scenario based education for both Medical Emergency Team (MET) Responders and Clinical Ward Staff. This was in response to the results of the FMC MET Service Staff Knowledge & Satisfaction Survey, and the MET Responder Satisfaction & Needs Analysis from 2012.

These surveys yielded the following themes:

- Teamwork and determination of roles – a challenge in 70% of respondents
- Communication with the MET and ‘home’ team was consistently a challenge
- Only 40% of ward staff understood their role during a Medical Emergency
- MET members were only perceived 50% of the time as demonstrating respectful behaviours most of the time.

The Team MET Workshops target nurses and doctors involved in MET calls. The primary goals of the program were human factors which have the potential to affect patient outcomes, including teamwork, roles definition, communication, leadership, situational awareness and designated technical skills.

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PEER REVIEW CONTRIBUTOR GUIDELINES

ABSTRACT AND KEYWORDS:

An abstract of up to 250 words maximum should be included. The abstract should be informative and report on the key aspects of the publication and include the methodology and key findings of the paper. The abstract should not contain abbreviations or references. Up to five keywords can be provided.

ACKNOWLEDGMENTS:

The acknowledgement of colleagues who are not named as authors should appear just before the reference list. The source of any funding or any potential conflict of interest should also be declared.

REFERENCES:

The author is responsible for providing accurate references. Referencing must follow an Author-Date style, such as APA (American Psychological Association). The reference list must include details only of those works cited in the text, and all references cited in text must be listed.

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WEBSITE

[Links of Interest](#) has links to organisations with relevant nursing resources, including ANMAC and RAO ANTS [Constitution](#) and Nurse Teacher [Professional Practice Standards](#). If you would like to participate in a review of the Constitution please reply via the post in the general discussion forum

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Education Awards for nominating yourself or a colleague for an award in recognition of their contribution to nursing/midwifery education .

Note there are (2) awards .. One for [Academia](#) and the other for [Clinical](#).

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Participants of the program have positively evaluated the workshops by working through a variety of medical emergency scenarios and debriefing in a confidential setting to achieve positive learning outcomes.

Non-Technical skills, undergraduate health professionals and virtual simulated patients

Peddle, Monica (La Trobe University)

Aim: To discuss the process undertaken to create a virtual learning through simulation resource to develop non-technical skills in undergraduate health professional students.

Background: Traditionally undergraduate health professional education programs tend to focus on the discipline and technical expertise, clinical decision making and communication skills. Other non-technical skills that are required for competent practice in the clinical setting are left to be attained through 'on the job' learning experiences.

Learning through simulation, with the recent development and refinement of its methodology is suggested to provide a robust and effective strategy to successfully develop non-technical skills in learners. However application of this methodology to very large undergraduate student numbers is challenging. Virtual simulated patients provide a potential avenue for dissemination of learning through simulation activities to large audiences, allowing student centred experiential learning that is engaging, active and flexible to meet learner needs.

Methods: This project utilised online pedagogy to create a virtual learning resource utilising learning through simulation.

Results: A secure password protected website has been developed at www.vspr.net.au, that consists of six learning interactive and engaging online learning modules. Five learning through simulation scenarios have been created that employ a 'play your own adventure game' approach. Four written scenarios are then available for implementation in hands on learning through simulation activities.

Conclusions: Gaining insight into current application and learning outcomes of virtual patient learning resources will aim to ensure that the effective and efficient resources are developed that will assist in preparing undergraduate health professionals for practice in the clinical environment.

Clinical Applications

Creating visually realistic situations for nursing students to practice medication calculations safely

Ramjan, Lucie (University of Western Sydney, NSW); Stewart, Lyn (University of Western Sydney); Salamonson, Yenna (University of Western Sydney)

Globally, medication errors remain a significant cause of patient harm within clinical settings. These incidents are preventable and for nurses, one major contributor to these errors is the incorrect calculation and administration of medication dose.

Disconcertingly, tertiary institutions preparing nursing students for the clinical environment are confronted by students with poor calculation abilities and confidence. This project implemented five 'visually realistic' interventions into a final year nursing unit, with an aim to improve students' confidence and competence in medication calculation, in safe, non-threatening environments.

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A survey of 405 nursing students at a large university in Sydney, Australia, evaluated the five interventions which included visually realistic online practice quizzes, simulated 'in class' scenarios, contextualized test papers, didactic remediation workshops and 'hands-on' simulation workshops.

The qualitative results demonstrated that the five interventions each had their own benefits for students, with many indicating that their preferred learning style was 'hands on' visually realistic simulation, relevant to clinical practice. Comments such as: 'Putting maths into a scenario makes it more real; not just numbers on a page' confirmed the value of these learning strategies.

The front-end strategies (online practice quizzes) addressed the learning needs of the majority of students (73.6% achieving 100% competency following the first of three test papers), with the intensive workshops reserved for students requiring a higher degree of face-to-face support. Teaching and learning of medication calculations should entail a blended, visual and authentic approach mirroring clinical practice. Technology and simulation play a key role in providing students flexibility in learning.

"Can you please repeat that?": Improving communication skills for culturally and linguistically diverse nursing students through an innovative online program.

Kelton, Moira (Flinders University, Adelaide, SA); Button, Didy (Flinders University, Adelaide, SA); Wotton, Karen (Flinders University, Adelaide, SA)

In the increasingly busy health care environment effective communication is vital for maintaining patient safety. Nursing students with culturally and linguistically diverse (CALD) backgrounds frequently encounter difficulties with demonstrating effective communication skills during their professional clinical placement experiences.

As increasing numbers of International students are undertaking preregistration nursing it is vital that targeted clinical communication support is provided to ensure patient safety and to equip these students with the skills they need to meet the Australian Nursing and Midwifery Competencies prior to completing their studies. It is acknowledged in the clinical environment that providing support to all nursing students increases the workload of staff in the venue. To address a number of these issues an online self-directed clinical communication study aid was developed.

Funded from a grant of \$10,000 the study aid acknowledges the visual, auditory, read write and kinesthetic learning styles by providing a variety of activities that students complete. Some of the resources include an early to late shift adult medical surgical ward handover involving 6 nurses and 13 patients including all abbreviations. Activities involving the handover included answering patient care related questions that would be expected of a nursing student commencing the shift. Additional activities include fluid balance charting and interpretation, medication charting and interpretation of effectiveness. An edited version of the study aid is freely available for all educators to access. The presentation will demonstrate this nationally recognised study aid and provide evidence from students as to study aids effectiveness.

D-Wayne and Wayne: how two 'men' changed competency attainment for an Orthopaedic unit.

McLean, Donna (Princess Alexandra Hospital, Brisbane, QLD)

Aims: Streamline education within an orthopaedic unit utilising simulation based education (SBE). This

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has enabled staff to have greater experience in the application of knowledge and competence in a variety of situations, requiring them to integrate multiple learning events into the care of a 'patient'.

Background: The Orthopaedic unit has a large number of unit specific skills to be achieved by staff as well as a level of competence required by the organisation. This was difficult to achieve in a timely manner with a large volume of staff and limited resources.

A suite of simulation scenarios utilising 'Dwayne' and 'Wayne' (the simulation mannequins) were implemented within the unit to enable staff to apply a range of knowledge gained to specific situations that require multiple demonstrations of knowledge attainment as well as appropriate application within the high fidelity simulation experience.

Method: Time taken to achieve competence and competence percentages across the unit using the new simulation model were compared with the traditional model (paper or online based assessment) utilised throughout the hospital.

Discussion: A significant improvement was found in competency rates within the unit with a 35% increase in competence attainment and 45% decrease in time taken for those skill sets incorporated into the simulation scenarios.

Conclusion: SBE was found to be an excellent medium to enable staff to apply knowledge and demonstrate competence in a non-threatening environment whilst incorporating a large number of competencies into realistic patient scenarios.

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IN CLOSING ... FROM THE EDITOR

A very FULL e-Bulletin this time around packed with abstracts form the conference ... planning has already started for NNEC 2016 to be held in Sydney.

Off to present at the Vascular 2014 Conference to be held in Canberra in a few weeks and will write an overview of the conference for the next e-Bulletin. I am always seeking articles of interest on what is in your workplace, a member profile or an article for the peer-review section. Is there a specific book that you would like to review? Let me know by email and I will see what I can do (and it becomes yours on writing a review for the e-Bulletin).

Karen Simunov, e-Bulletin Editor
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