

NET2021 Conference

Live session full abstracts

Theme Session 5E

Educational enhancement

5Ei, 10:30 - 12:20, 2 September 2021

Innovation paper

Low fidelity simulation on sensory impairments in older adults: Undergraduate Nursing students' self-reported perceptions on learning

Abigail Tracey, University of the Highlands and Islands

Promotional abstract: Sensory impairment often co-exists in older adults with dementia. A simulation resource has been designed for year 1 Pre-Registration Nursing students to provide experiential learning on sensory and cognitive impairment prior to their first clinical placement. Knowledge, insights and values gained through this simulated activity have the potential for transferability across a range of contexts. A recent evaluation of this pedagogical approach reports the impact of the simulation experience on the clinical practice of students across all three years of the Pre-Registration Nursing programme.

Background, context and evidence base for the innovation, including, where possible, its international relevance: Population demographics are changing globally with a dramatic increase in numbers of older people (Mathers & Loncar, 2006). Sensory impairment can affect any age group within the population; however, it is identified as one of the most common chronic conditions of later life (World Health Organisation, 2018; 2019) and cognitive impairments such as dementia are estimated to more than double over the next 30 years (Prince, Guerchet, Ali, Wu & Prina, 2015). Sensory and cognitive impairments are significantly disabling, and healthcare environments for older adults can be particularly challenging, resulting in poor outcomes of care (Alhusein *et al.*, 2018).

Aim/focus of the innovation: It is essential that healthcare professionals have an empathetic understanding of the impact of sensory and cognitive impairment. Simulation in healthcare education has been shown to be interesting, interactive, effective and helps incorporate the affective component of learning (Kelly, Berragan, Husebø, & Orr, 2016; Burke & Mancuso, 2012). More specifically, sensory impairment simulation has been shown to improve awareness of disability amongst Registered Nurses (Smith, Shepherd, Macaden & Macleod, 2018). This innovation aims to raise that awareness in pre-registration nurses and to develop core nursing values including a person-centred approach prior to students' first practice experience.

Implementation of the innovation: Year 1 Nursing students have been offered sensory and cognitive simulation workshops at the University of the Highlands and Islands since 2017. The workshop enables students to experience some of the day-to-day challenges posed by sensory and cognitive impairments. Five learning stations create "microworlds" (Wilford & Doyle, 2006) for students to experience a combination of either visual, hearing, taste, smell or peripheral sensory impairment. Each workshop is introduced by facilitators. Students then rotate around each station in groups of four, alternating between the role of service user/provider to experience both perspectives. The workshop concludes with a collective debrief and reflection.

Methods used to assess the innovation: All Nursing students across two campuses were invited to complete an online survey after their clinical practice placements to establish the extent to which the simulation impacted their clinical practice. Data from the survey will be fully analysed using SPSS in May 2020. In addition, focus groups of mixed years will be conducted in April 2020 to identify key themes, benefits and suggestions for improvement from the students. Focus groups will use the Ketso method (Ketso, 2014) to collate data.

Key findings: Findings from a preliminary evaluation in 2014 reported that the simulation enhanced students' knowledge and understanding on the impact of sensory impairment. They reported increased insight and understanding of emotions and frustrations, and an awareness of the need for empathy, communication, compassion and patience whilst caring for older adults with dementia/sensory impairments (Macaden, Smith & Croy, 2017). This study will provide additional evidence on the sustained impact of sensory impairment simulation on the clinical practice of Nursing students over the three years of the Pre-Registration programme.

Three key points to indicate how your work contributes to knowledge development within the selected theme:

- Despite endorsement by NMC (2018) of the use of simulation in undergraduate Nursing curricula, the impact of simulation on professional practice has not been widely reported.
- Increasing awareness of the effects of sensory and cognitive impairment through experiential learning enables the future nursing workforce to provide person-centred care to people with contextually relevant healthcare needs.
- Current evidence reports predominantly on clinical simulation. This study will provide evidence on the impact of a 90-minute, low-tech simulation workshop on important healthcare issues that are globally relevant and significant.

References:

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World Health Organisation (2019) Deafness and hearing loss factsheet WHO. Available at: <https://www.who.int/news-room/fact-sheets/detail/deafness-and-hearing-loss> [Accessed 17/01/2020].

Keywords: Simulation, Sensory Impairment, Nursing Students, Pedagogy, Clinical Practice.

5Eii, 10:30 - 12:20, 2 September 2021

Research paper

Identifying and providing the education clinicians require for sharing diagnostic imaging with patients

William Cox, The University of Portsmouth

Promotional abstract: Radiology services are rapidly changing as a result of both technological innovations within the industry and an increasing focus on patient-centric care. In particular, it is becoming easier to share patients' diagnostic radiological images with them, but are clinicians prepared for this?

Background, including underpinning literature and, wherever possible, the international relevance of the research: Radiology services are rapidly changing as a result of both technological innovations and an increasing focus on patient centric care. Particularly, it is becoming easier to share patients' diagnostic radiological images with them. There are two modes by which sharing may occur: The images may be shared directly by a clinician or patients may access them remotely via technology (Sectra, 2020). A previous study by the authors identified the risks and benefits of such practices (Cox, Cavenagh & Bello, 2019). However, no work considering how these benefits might be realised and the risks mitigated existed. This work addresses this gap.

Aim(s) and/or research question(s)/research hypothesis(es): To create a strategy to enable the safe and meaningful sharing of diagnostic radiological images with patients.

Research methodology/research design, any ethical issues, and methods of data collection and analysis: This study utilises a mixed-methods approach (questionnaires and interviews) from within the pragmatic paradigm.

The questionnaire was based on findings from a preceding literature review viewed through a Behavioural Theory lens (Ajzen, 1991) and mapped against the Essential Elements Communication in Medical Encounters as laid down in the Kalamazoo Statement (2001). Semi-structured interviews with clinical experts were conducted by the lead researcher (WC) in order to assess their perspectives on conditions required for realising benefit from sharing

patients' radiological images with them as well as how associated risks might be mitigated. NHS REC Reference - 17/LO/0864.

Key findings and recommendations: A number of key considerations for image sharing emerged. It was noted that the sharing of images with patients could support benefits including:

- Improved outcomes for patients through providing potential for e.g. improved adherence, increased engagement and enhanced communication.
- Professional development for the workforce through providing avenues for role development.
- Innovative services e.g. radiographer led discharge
- Several risks of image sharing were also identified. These were centred on the potential to elicit negative emotional responses from patients. Such risks included:
 - Upsetting patients;
 - Confusing patients;
 - Increasing patient anxiety.

Further, participants identified several requirements to support them in sharing images with patients in a way which is both effective in realising the potential benefits and safe in mitigating the potential risks of this process.

Among these were specific educational requirements for the experts themselves. Particularly, participants noted that they required training in the following areas:

- Image interpretation;
- Patient pathways;
- Communication.

Three key points to indicate how your work contributes to knowledge development within the selected theme:

- There is potential benefit to sharing patients' images with them but conditions must be met if this is to be meaningful and safe.
- Clinicians will require specific education in key areas.
- Education providers and employing organisations have a role to play in facilitating this education

References:

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Keywords: Image Sharing, Communication, Development, Innovation, Engagement.

5Eiii, 10:30 - 12:20, 2 September 2021

Research paper

Making every contact count: A novel approach to patient consultations

Catherine Langran, University of Reading

Promotional abstract: Making every contact count (MECC) is an evidence-based approach aiming to improve people's health and wellbeing by facilitating and engaging individuals to make lifestyle changes using techniques such as motivational interviewing. MECC training was piloted on 39 Year 2 and Year 3 undergraduate Pharmacy students. This presentation outlines the quantitative and qualitative evaluation of the impact of MECC training on these students.

Background, including underpinning literature and, wherever possible, the international relevance of the research: Making every consultation count (MECC) is an evidence-based approach used within the National Health Service (NHS) to improve people's health and wellbeing through engaging people in conversations about their lifestyle (HEE 2017). MECC conversations involve: identifying and creating opportunities to have healthy conversations, using open discovery questions, listening and supporting individually derived goal setting. Key outcomes of the Masters of Pharmacy degree include: awareness of health needs of yourself and others, recognising inappropriate health behaviours and promoting healthy lifestyles to improve health outcomes. Implementing MECC within an undergraduate curriculum will help prepare our graduates to be NHS workforce ready.

Aim(s) and/or research question(s)/research hypothesis(es): This study aims to evaluate the impact of MECC training on a small group of pharmacy students, to determine if MECC should be implemented for the entire cohort.

Does completing MECC training:

- Influence pharmacy students' confidence supporting individuals to make a lifestyle change?
- Influence pharmacy students' approach to conversations about lifestyles?

Research methodology/research design, any ethical issues, and methods of data collection and analysis: 39 students completed MECC training and e-learning. Ethical approval was gained. Students were asked to complete a pre- and post-MECC evaluation form. The forms asked students to indicate on a Likert scale (1-10) their confidence supporting individuals to make a lifestyle change (1=not confident and 10=very confident). Students were then given four lifestyle scenarios and were asked to write how they would respond to these. Students were also invited to attend a focus group to explore their perceptions on MECC.

Key findings and recommendations: 100% response rate was achieved for the pre- and post-MECC evaluation forms. Three students attended the focus group. Student confidence scores for supporting individuals to make lifestyle changes increased from a mean score of 5 pre-MECC, to a mean score of 9 post-MECC.

Student responses to the four lifestyle scenarios all moved from a directing and giving information style at the pre-MECC stage, to use of open discovery questions and supporting people to come up with their own plan to improve their health post-MECC. The focus group further supported this, with students reporting "MECC made me understand there's no point you just giving them information because they're not going to make that change. Whereas if it comes from themselves, they're way more likely to want to change because they've

decided to do it.” One focus group student described trying to use the MECC approach in their part-time role as a pharmacy counter assistant, but “found it hard to switch off the suggesting, as that’s what I’ve always done”. All focus group students felt that if MECC was implemented into the curriculum, the repeated practice would give them further confidence to undertake these consultations when they qualify as Pharmacists.

Three key points to indicate how your work contributes to knowledge development within the selected theme:

- MECC offers a more patient-centred approach and allows students to recognise the importance of patient derived solutions.
- MECC training increased students’ use of open discovery questions and confidence in listening to and supporting other individuals to make a lifestyle change.
- To sustain this positive impact for students, implementation from year one of their degree has been suggested.

References:

Health Education England. (2017). Making every contact count. Health Education England.

Keywords: Healthy Lifestyle Conversations, Students.

5Ev, 2 September 2021, 10:30 - 12:20

Poster+

Antimicrobial Resistance and Antibiotic Guardianship: What does this mean for Midwifery Education?

Dr Alison Cooke, The University of Manchester

Promotional abstract: It is vital that all maternity healthcare workers and students understand this serious threat and minimise the risk of perinatal infection to help lessen the potential global impact of antibiotic resistance. Reducing infections will lessen the need for antibiotics, and thus help to stem the increase in resistance and ineffectiveness of key medicines. Our undergraduate programme enables future maternity workers to develop their knowledge and understanding of this crucial Public Health challenge, advance their clinical practice to help reduce infection and sepsis, and to provide effective parent education and support. Our presentation provides an overview of some of the innovative strategies used to increase understanding of this Public Health issue in our education programme.

Main focus/theme of, or issues addressed by, the poster: Our undergraduate Midwifery programme has championed Antibiotic Guardianship to develop newly qualified midwives who are fit for practice in an era where antibiotic resistance is a global health concern and anticipated to pose a bigger threat to health than cancer by 2050 unless we take action. Currently, resistant organisms that were once amenable to treatment pose the greatest risk to mortality/morbidity. Some of these organisms contribute to sepsis of the genital tract; a significant cause of maternal mortality/morbidity in the UK. As Midwifery educators, we feel that it is vital that all students understand this serious threat and minimise the risk of perinatal infection to help lessen the potential global impact of antibiotic resistance.

Research approaches and underlying evaluation: Our undergraduate programme is evidence-based and enables future maternity workers to develop knowledge and understanding of this crucial health challenge, to advance their clinical practice to help reduce morbidity/mortality due to infections and sepsis, and to provide effective parent education and support. Regular workshops with our students enable exploration of every opportunity where they could influence antimicrobial resistance in the childbearing

continuum. Midwifery students have also been involved in raising awareness for other students and staff at Antibiotic Guardian stands. Our student midwife stand obtained the highest number of Antibiotic Guardian pledges across the University.

Implications for healthcare education: Midwives have a significant contribution to maternal health; reduced infection incidence is promoted by adoption of healthy lifestyle behaviours. Midwives also have an important role in the prevention of cross-infection by adhering to infection control practices and providing advice on the importance of drug concordance/compliance. Our forward-thinking curriculum reflects the new Future Midwife: Standards of proficiency for midwives comprising background to the global threat of antibiotic resistance, the importance of timely intervention strategies, the role of maternity workers in antibiotic stewardship by reducing maternal/neonatal infection, and innovative strategies to increase understanding of this public health issue.

References:

Nursing and Midwifery Council (2019) Future Midwife: Standards of proficiency for midwives. NMC: London.

Keywords: Antimicrobial Resistance, Antibiotic Guardianship, Education, Midwifery, Pedagogy.