

Education Horizon-Scanning Bulletin – June 2017

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General Healthcare Education

A STITCH in time saves lives

Source: Academy of Fabulous NHS Stuff

Date of Publication: May 2017

In a nutshell: Simulation is now a common way of teaching people to carry out practical skills in a realistic environment. Staff at Barts in London have gone one step further though and have started to carry out simulations within the hospital's critical-care unit in a programme called STITCH (Simulation Training and Interprofessional Teambuilding for Critical Care Healthworkers). In the first year the teams used national guidance and local-governance reports to write simulation scenarios based on airway and tracheostomy emergencies. Using the SimMan Classic on the critical-care unit they ran 12 simulation sessions with three to four scenarios per session over 12 months. All the sessions were multi-disciplinary including intensive-care doctors, physiotherapists, health-care assistants and technicians and over 200 staff took part in the first year of the programme. All the participants valued the exposure to equipment on the difficult airway trolley while 72% described an improved understanding of the difficult-airway algorithm. All the participants described the sessions as directly relevant to their clinical practice and over half said that they were "essential for patient safety."

You can read the whole of this article [here](#).

Medical Education

Giving feedback to the markers. Does it make any difference?

Source: BMC Medical Education

Date of Publication: May 2017

In a nutshell: Trainee doctors who want to become GPs have to do clinical assessments where they treat people pretending to be patients and are assessed on how well they do it. Until such time as they come up with a robot to do this job assessments are carried out by people with all the fallibility and unreliability that this entails. Past schemes that gave feedback to assessors proved about as effective as giving The Angel of the North a facelift with toothpicks but God loves a trier and in this study Nancy Sturman, from the University of Queensland, led a team of researchers giving 16 examiners a written summary of their ratings of medical students and comparing them with other examiners. The examiners ratings of their severity (or lack thereof) didn't really match up to reality and giving theme feedback had "no significant effect." The assessors who took part in the study said it had been "interesting and useful," and their comments indicated that "fairness, reassurance, and understanding examiner colleagues are important to examiners."

You can read the whole of this article [here](#).

In a Viennese whirl about cancer

Source: BMC Medical Education

Date of Publication: May 2017

In a nutshell: Depending on your musical tastes – although it's perfectly possible to like both of course – Vienna either conjures up an epic ballad by Ultravox unjustly kept off the number one spot by Joe Dolce's "Shaddapa Ya Face," or Mozart, Schubert and Strauss. As well as music (and cakes) Vienna also hosts the Vienna Summer School of Oncology – an international, integrated, undergraduate oncology course aimed at teaching medical students interdisciplinary team communication and the "application of treatment concepts/algorithms in a multidisciplinary setting." Teaching is based on "an inter- and multi-disciplinary faculty," (i.e. some of the lecturers aren't doctors) "and a multimodal education approach to address different learning styles" In this study Carola Lütgendorf-Caucig, from the Medical University of Vienna, led a team of researchers evaluating the summer school. The students gave the summer school 4.47 out of 5 for organisation, 4.68 out of 5 for range of topics and 4.36 out of 5 for teaching. The students also showed significant gains in their knowledge of general and specific aspects of cancer after the course.

You can read the abstract of this article [here](#).

[Do junior doctors speak up about professionalism?](#)

Source: BMJ Quality and Safety

Date of Publication: June 2017

In a nutshell: Unprofessional behaviour covers a multitude of sins from pinching nurses' bottoms to dialling out for a lamb bhuna and some poppadoms during a tricky heart-bypass operation. In this study William Martinez, from Vanderbilt University Medical Centre in Nashville, led a team of researchers looking into how often junior doctors came across instances of unprofessional behaviour and threats to patient safety and how likely they were to speak up about them. 1,800 first- and second-year junior doctors took part in the study – three-quarters of them had seen unprofessional behaviour while around half had seen threats to patient safety. However less than half of the junior doctors had spoken up about unprofessional behaviour while seven out of ten had spoken up about threats to patient safety. Fear of conflict was seen as a barrier preventing people from speaking up about unprofessional behaviour. Positive perceptions of one's team and a high regard for patients' safety was linked to speaking up about safety concerns while a greater concern for professionalism was linked to speaking up about unprofessional behaviour.

You can read the whole of this article [here](#).

[How much do doctors know about radiation?](#)

Source: BMC Health Services

Date of Publication: June 2017

In a nutshell: Many medical procedures involve patients being exposed to radiation. But how much do doctors really know about the risks (or lack thereof) of various procedures and what needs to be done to protect patients? In this study Francesca Campanella, from the University of Pavia in Italy, led a team of researchers, who asked 419 doctors about this topic. 52% of doctors said they had received no training in radiation protection while the average percentage of correct answers on knowledge about ionizing radiation was 62.29%. 5% of the doctors did not know that

ultrasonography does *not* expose patients to ionising radiation and 13% did not know that MRI was also harmless. Only 5% of the physicians properly identified the cancer risk rate associated with computed tomography of the abdomen.

You can read the whole of this article [here](#).

Even the lecturers are getting younger these days

Source: BMC Medical Education

Date of Publication: June 2017

In a nutshell: One of the signs of getting old is when people in positions of authority begin to look as though they've only just started shaving. Some medical schools have been accelerating this trend by getting slightly-older students to teach the younger ones – something known as cross-year peer tutoring (CYPT). In this study Osamu Nomura, from Hirosaki University in Japan, led a team of researchers looking into the effectiveness of getting fifth-year medical students to teach fourth-year ones communication skills in preparation for their OSCEs (objective, structured clinical examinations). The students had all done the tests the year before and were given tuition in how to teach other students. The results of the students taught by the fifth-years were compared to the results of another group of students who had been taught by lecturers. There was no difference in the two groups scores for their OSCEs and a focus group with the students and student teachers identified three main themes which were: *Benefits of CYPT*, *Reflections of tutees and tutors* and *Comparison with faculty* which affected the interactions among students, tutors and lecturers.

You can read the whole of this article [here](#)

Nurse Education

Smoothing the path into nursing in Lancashire

Source: The Academy of Fabulous NHS Stuff

Date of Publication: May 2017

In a nutshell: Lancashire Teaching Hospitals' BSc Nursing Adult Programme (BNAP) has run since February 2015. To promote the programme the Trust sent a flyer to 120,300 homes asking if anyone was interested in becoming a nurse. The Trust got 87 replies from people who did not have the academic qualifications to start a nursing course but who were nonetheless interested in nursing as a career. The Trust met with Preston College and developed a Level Three Clinical Healthcare Apprenticeship. The Pre-Nursing Apprenticeship (PNA) lasts a year and the Trust accepts it as a qualification for entry to the BNAP. All PNA students who want to go on to train as a nurse are guaranteed an interview. At the moment 94 apprentices are registered on the programme of whom it is estimated 50 will go on to the nursing course.

You can read more about this initiative [here](#).

Foreign nursing students and their struggles

Source: Nurse Education Today

Date of Publication: May 2017

In a nutshell: A number of nursing students come from abroad and in this study Creina Mitchell, Letitia Del Fabbro and Julie Shaw from Griffith University in Queensland interviewed 17 of them to see how they had found it. Two main themes emerged from the interviews which were *Expressing myself* and *Finding my place*. The students said it took them longer to study and that stress made communication worse particularly on the wards. The students said they needed to find supportive opportunities to speak English to develop their proficiency. Going onto the wards gave the students opportunities to speak English but raised the risk of being identified as lacking language proficiency or being clinically unsafe. At first the foreign students had felt lonely and it had taken them a while to find their feet; during this time they experienced 'otherness' and discrimination.

You can read the abstract of this article [here](#).

[Pairing up to learn in Sweden](#)

Source: Nurse Education in Practice

Date of Publication: June 2017

In a nutshell: In Sweden nurses do their clinical placements in Developing and Learning Care Units where the students' learning in pairs is supported with a '[lifeworld approach](#).' In this study Hanna Holst, from Linnaeus University in Sweden, led a team of researchers looking at how supervisors experienced this approach. They carried out 25 interviews with supervisors and found that supervisors supported students' learning in pairs through a reflective approach, creating learning space in the encounter with patients, students and supervisors. Supervisors experienced "a movement that resembles balancing between providing support in learning together and individual learning." The researchers concluded that "the learning space has the potential of creating a relative level of independency in the interaction between pairs of students and their supervisor when the supervisor strives towards a reflective approach."

You can read the abstract of this article [here](#).

[Getting libraries to teach research in Norway](#)

Source: Nurse Education Today

Date of Publication: June 2017

In a nutshell: Health-care professionals are now expected to be familiar with evidence-based practice (EBP) – the idea that the treatments they give to people should have been proven to work. One of the ways nurses are being taught to get to grips with EBP is by doing a research project and in this study Anita Nordsteien, from Oslo and Akershus University College of Applied Sciences, led a team of researchers looking into the effectiveness of a project in which librarians and lecturers worked together on a project to teach nurses research skills. 194 students' dissertations were analysed and the researchers found that the students' research skills had improved. They used more EBP tools, their grades improved and there was a correlation between the students' improved grades and the improvements in their abilities to evaluate research gained by doing the course.

You can see the abstract of this article [here](#).

Preparing students to deal with the dying

Source: Nurse Education in Practice

Date of Publication: June 2017

In a nutshell: Dealing with dying people is always hard; one might argue that if it isn't one is doing it wrong. However people can be better- or worse-prepared for doing so and in this study Ingela Henoch, from the University of Gothenburg, led a team of researchers looking at how nursing students' attitudes towards caring for the dying changed over time and how prepared they felt to carry out end-of-life care. 117 students took part in the study completing the Frommelt Attitude Toward Care of the Dying Scale at the start of their first and second years and at the end of their third year. The study found that the nurses' scores on the scale increased from 126 to 132 over the course of their education and that having five weeks' worth of theoretical palliative-care education significantly predicted positive changes in attitudes towards caring for dying patients. However, only a minority of the nurses felt prepared to take care of a dead body or to meet the relatives of dead or dying people.

You can read an abstract of this article [here](#).

Developing simulations in mental-health nursing

Source: Nurse Education in Practice

Date of Publication: June 2017

In a nutshell: Although widely-used in a number of different educational settings simulation has been under-used in mental-health nursing. In this study Anne Felton and Nicola Wright, from the University of Nottingham, developed a simulation for final-year mental-health nursing students. Scenarios involving managing care in an acute inpatient ward and community older persons' team were designed to help students develop their complex decision making skills. An evaluation of the simulation found that it provided a realistic environment in which students were able to develop skills and manage clinical situations autonomously without fear of being assessed or making mistakes.

You can read the abstract of this article [here](#).

Do Turkish nurses get to the bottom of injections?

Source: Nurse Education Today

Date of Publication: June 2017

In a nutshell: Depending on one's point of view sticking needles into people's bottoms can either be the stuff of nightmares or an enjoyable piece of slapstick in a Carry On film. Some recent research has suggested it may be safer to stick needles into the sides of people's bottoms rather than into the backs of them, so to speak. This technique is known as ventrogluteal injection and in this study Dilek Sari, from Ege University in Turkey, led a team of researchers looking into nursing students' knowledge of this technique. The study found that only 17.1% of the nurses said they used the ventrogluteal site frequently, whereas 35.9% said they did not use it frequently because they were

not used to giving injections in this site. Levels of knowledge of ventrogluteal skills were also limited with the average score (out of 24) on a questionnaire being 14.37.

You can read more about this story [here](#).

Using the flipped classroom in accelerated courses

Source: Nurse Education Today

Date of Publication: June 2017

In a nutshell: The flipped classroom – in which students do at least some studying before they go to their classes – has become increasingly popular in recent years. However, this approach has not often been adopted in accelerated nursing courses where students complete their studies in a shorter time. In this study Majeda M. El Banna, Malinda Whitlow and Angela McNeilis from the George Washington University in Virginia looked at the experience of using the flipped-classroom approach in an accelerated nursing programme. They found that the students using the flipped-classroom approach did significantly better than students being taught more traditionally on their first pharmacology exam but that this advantage had disappeared by the time they took their second exam. Three themes emerged when the researchers interviewed the students about the flipped-classroom approach which were: *don't fix what isn't broken, treat me as an adult, remember the work is overwhelming*.

You can read the abstract of this article [here](#).

Simulation or real-life. Does it matter which comes first?

Source: Nurse Education in Practice

Date of Publication: June 2017

In a nutshell: Simulation has become a standard part of most medical and nursing courses now. Sometimes students take part in simulations before they start their clinical placements while at other times they do their placements before they start on the wards. But does the order in which students do their placements and work experience really matter? In this study Aimee Woda, from Marquette University College of Nursing in Milwaukee, led a team of researchers who compared one group of students doing their simulation and placement in one order with another group doing it in the opposite order. The researchers found that while the nursing students' decision making was as good in both groups the students who had done a simulation first were more confident and less anxious than the other group.

You can see an abstract of this article [here](#).

What makes for a good preceptorship?

Source: Nurse Education in Practice

Date of Publication: June 2017

In a nutshell: One of the ways of getting newly-qualified nurses up to speed is by using preceptorship whereby an older, more-experienced nurse takes a newer one under their wing. Preceptorship has been going on for a while but little is known about the best way of doing it. In this study Karina Nielsen, from the Department of Cardiology in Denmark, led a team of researchers who undertook “a qualitative study guided by a hermeneutic phenomenological approach and inspired by ethnographic fieldwork includ[ing] 28 participant observations and 58 interviews.” The findings from the study fell into three themes which were:

Being Together: student and preceptor were physically present in the same room making the most of the opportunities for learning and focusing on complexity, using one’s senses and patient safety

Doing Together: working together to learn skills focusing on independence, practical skills and communication

Getting Along Together: Teacher and student focused on their patients, their relationship and managing a balance between their professional and personal relationship.

You can read the abstract of this article [here](#).