



Education Bulletin – July 2024

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Allied Health Education

Learning physiotherapy via video

Source: BMC Medical Education

In a nutshell: It's only a matter of time before YouTube launches its own university. All well and good for the humanities but it's a moot point whether you'd get anything really important – installing a new kitchen or rewiring a house, for example – commissioned from someone trained in this fashion. In this study a team of researchers, led by Nicola C.M. Towersey from Auckland University of Technology, assessed the quality of task-specific training videos for physiotherapists freely available on the internet. Ten videos met the researchers' criteria. Most were presented by physiotherapists or occupational therapists, came from the US, and featured stroke as the condition of the person being treated. They involved a range of interventions: upper limb, constraint-induced movement therapy; balance, and bicycling. Most were created by either universities or private practices and only two used people with a neurological condition as the participant. Five of the videos were rated "very suitable," and five "moderately suitable," to guide skill acquisition. Most failed to demonstrate and provide instruction on each key component of the skill and were missing at least one component, with feedback being most-frequently omitted.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05545-5

Student placements – what do the staff get out of it?

Source: BMC Medical Education

In a nutshell: Teachers often say they learn from their pupils. Anything from Pokemon and Minecraft at one end of the age spectrum to Taylor Swift's back catalogue and where to score a few lines of cocaine for the aftermath of the Ofsted inspection at the other. But does the same hold true for staff hosting allied-health students for their clinical placements? That was what a team of researchers, led by Mohammad Hamiduzzaman, from The University of Sydney, attempted to find out in this "integrative review." The researchers found 12 papers which met their quality criteria, but found "no high-quality methodologies measuring student placements' impact on staff knowledge and skills. Four themes were identified:

- Meaningful student integration in service delivery
- Targeted educational support to healthcare staff
- Development of staff procedural skills and confidence
- The mechanisms of why students placements work in this aspect

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05632-7

Straight out of college and straight into teaching

Source: BMC Medical Education

In a nutshell: Although youngsters can now – thanks to YouTube and Spotify – share much of the same music as their parents, generational divides can still be maintained via Instagram, the ability to work QR codes, and social-media influencers. It's a moot point whether students on placement are best taught by old dogs who know more of the tricks, or eager beavers closer to their age, untainted by cynicism, and less prone to take short cuts. In this study Victoria Stirling, from Gold Coast Hospital and Health Service in Australia, led a team of researchers who interviewed 10 early-career occupational therapists who had supervised their first or second student on a professional-practice placement. 10 occupational therapists who had been working for an average of just over two years took part in the study. At first they had mixed feelings about taking on the clinical-educator role. "They then described their adjustment to the role responsibilities, challenges encountered, and the development of the educator-student relationship. Participants found that the experience of supervising a student enhanced their educator, clinical, and professional skills and confidence. The important support elements of tailored educator preparation, placement design, and timely access to relevant resources and experienced staff were identified."

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05652-3

Caregiver Education

Helping caregivers communicate

Source: British Journal of Educational Technology

In a nutshell: If nothing else recent electoral developments should make life easier for dementia nurses who can be confident that not knowing the name of the Prime Minister might actually be a sign of cognitive troubles, not simply having nipped out for a pint of milk at an inopportune moment. In this study Hui-Chen Lin, from Taipei Medical University, led a team of researchers studying the effectiveness of a virtualreality based simulated communication training system for family caregivers of dementia patients. The system allowed family caregivers to simulate real-world situations in a virtual-reality environment, experience the daily communication barriers and stress with dementia patients, and apply their acquired knowledge and skills to solve related problems. 63 family caregivers took part in the study. They were divided into two groups. One group learned with the virtual-reality system to interact with virtual dementia patients and practice communication skills whilst the other group use a more traditional role-playing method. The researchers found that using the virtual reality approach significantly improved people's knowledge of dementia care, attitudes, communication confidence, and communication skills, compared to the control group. People using the virtual-reality system could see where they had been going wrong in the past, which allowed them to adjust their communication strategies, and increase their self-confidence.

You can read the abstract of this article at

Dental Education

Virtual re-cavity

Source: BMC Medical Education

In a nutshell: It's perhaps a good job that some of the participants in virtual reality are made up wholly of software and pixels. I might struggle to find someone to open the batting for England alongside me or submit to my leadership on a polar expedition; and I'm not wholly convinced the real Jodie Comer would consider fishand-chips and a pint of bitter at the nearest branch of Wetherspoons to be her idea of a thrilling night out*. Luckily for dental students you don't need real virtual-reality users to submit to having their teeth extracted, and in this study Yiseul Choi, from Yonsei University in Korea, "evaluated the effectiveness of teaching dental students the surgical tooth extraction procedure through clinical observation using virtual reality." Third- and fourth-year dental students were divided into two groups. One group visited an outpatients' clinic and watched an oral and maxillofacial specialist perform surgical extraction whilst the VR group watched a 360-degree video of surgical tooth-extraction using a head-mounted display. The VR group had a significantly higher understanding of the procedure and satisfaction with the observation. Compared to the conventional clinical observation virtual-reality clinical observation improved learning motivation and medical thinking and judgement. However, the VR group lacked "interaction between professors and students."

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05605-w

General Healthcare Education

"I'm virtually a researcher now"

Source: BMC Medical Education

In a nutshell: Germany, Brazil, Peru, Spain and Italy sounds like a particularly tough group in the World Cup; one guaranteed to produce rather more entertainment than that provided by the recent European Championships in Germany. They were also the countries from which health professionals took part in a recent initiative called vSEMERA – the Virtual Semester for Medical Research Aachen. The 12-week programme was developed by universities in Germany, Brazil, and Peru and aimed to "provide students with skills in health-science research and prepare them for scientific career paths." In this study Laura Bell, from RWTH Aachen University, led a team of researchers investigating the experiences of the 30 students taking part in the programme. On a one-to-five scale the programme got 4.38 overall, and 4.29 for meeting expectations. However participants said they were

^{*}More fool her, of course.

unable to attend as much of the course as they liked because of scheduling conflicts with their "home," university (46%); internships (23%); and general timing issues (31%). But the participants did acknowledge considerable improvements in their scientific skills, their English-language skills, their confidence in scientific project management, their research-career progression, and their enthusiasm for a scientific career.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05528-6

What does the evidence say about ChatGPT?

Source: Computers & Education

In a nutshell: It's perhaps a good job that the same approach isn't adopted to gathering evidence for police inquiries as it is for research topics. We'd still be halfway through a randomized-controlled trial involving nuns, burglars, and gold ingots; or rounding up Black/homeless/Irish people and beating them up in an attempt to find the cause of Covid. Examining the evidence for the use of ChatGPT in education were a team of researchers, led by Chung Kwan Lo from the Education University of Hong Kong, who reviewed 72 studies into this topic. They found "robust but narrowly-focused evidence," about behavioural engagement (working with ChatGPT) and disengagement – i.e. cheating. Evidence about the emotional aspects of ChatGPT was also mixed. On the positive side it created satisfaction and was seen as fun and interesting; on the negative side it could sometimes lead to disappointment, worry, and anxiety. The researchers found "broad but weak evidence," regarding cognitive engagement – increased understanding and positive self-perception and disengagement (reduced critical thinking and over-reliance).

You can read the abstract of this article at https://doi.org/10.1016/j.compedu.2024.105100

Do student-led placements really work?

Source: Nurse Education in Practice

In a nutshell: I shudder to think what form a student-led work placement would have taken had I been given the opportunity to organize one ca. 1990. Morning coffee, a quick flip through the paper to get my brain warmed up, elevenses, a pub lunch followed by some light nodding off and dribbling and another quick cuppa before home-time I imagine. Student-led placement models involve students taking responsibility for patient-care episodes in clinical settings under the supervision of practice-based educators or clinical supervisors. In this article a team of researchers, led by Sunita Channa from University Hospitals Birmingham NHS Foundation Trust, investigated the effectiveness of a student-led clinical learning environment (SLCLE). 132 nursing and allied-health students took part in the study by filling out a survey and 80 of them were subsequently interviewed. 74% said that the SLCLE had met their expectations and 82% reported feeling more confidence after it. 78% felt supported by staff and 90% felt supported by their peers. Four themes emerged from

interviews with the students which were: preconceptions and initial anxiety; empowerment, growth and a unique learning experience; collaborative interprofessional learning and support; and insights and anticipations.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104035

Students, placements, and patient safety

Source: Nurse Education in Practice

In a nutshell: Some people are <u>centripetal</u> getting drawn towards the centre of events or groups, whereas others are centrifugal always finding themselves at the furthermost extremity of a group or situation. In this study, a team of researchers, led by Daniela Javornická, from Palacký University in the Czech Republic, interviewed 20 healthcare students about their experiences on placement, in particular as they applied to patient safety. Three themes emerged from the interviews which were:

- Clinical and emotional companionship [centripetal, so to speak] the students' feelings of being welcomed, respected, heard, trusted, and supported
- Abandonment [centrifugal] feelings of being unheard, vulnerable, humiliated, afraid, and abandoned
- Sense of agency professional and personal growth

When it came to patient safety the students had used their agency to identify patient safety issues – usually by stepping in to rectify the situation rather than formally "speaking up."

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104041

Interprofessional Education

Simulation, resuscitation, and communication

Source: BMC Medical Education

In a nutshell: As sometime devotees of *Grand Designs* my wife and I are often struck by how calmly, clearly, and concisely people communicate with one another as they lower pieces of glass the size of Rotherham into slots scarcely wide enough for a bee's tongue. Good communication is, one imagines, at even more of a premium when it comes to resuscitating newborn babies, and in this study Shinhye Chae and Soonyoung Shon, from Keimyung University in Korea, led a team of researchers investigating the effectiveness of a "simulation-based interprofessional education programme for medical staff working in a nursery and neonatal intensive care unit (NICU)." The education was made up of three sessions lasting a total of two hours, 20 minutes; two simulation exercises; and one theoretical education session. 18

nurses working in the nursery and NICU and nine doctors working in the paediatrics department took part in the study. The study found that after the programme teamwork, communication skills, clinical performance, clinical judgement and interprofessional attitude all significantly improved.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05581-1

Interprofessional and interdependent

Source: Nurse Education in Practice

In a nutshell: It's become something of a cliché to claim that a butterfly flapping its wings in Ecuador can cause a hurricane in Kansas. Meteorological consequences to contemplate, perhaps, as you break wind by the cheese counter in Morrison's. In this study Sarah Oerther, from Barnes-Jewish College in St Louis, led a team of researchers analysing the evaluations of an interprofessional education course designed to teach global interdependence. The course incorporated the US Centres for Disease Control's "Climate Effects on Health," framework and was taken by a mixture of athletic-training, nursing, nutrition and dietetics, occupational therapy, physical therapy, radiation therapy, and MRI students. "Ways interprofessional teams can address global challenges like the Anthropocene, climate-related illnesses and severe weather events were revealed in student responses. Three themes that emerged from the student responses included: public health collaborations, holistic health promotion and policy advocacy."

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104025

Medical Education

Medical schools – are they bored before they even begin?

Source: BMC Medical Education

In a nutshell: Given the relative robustness of weeds – horse tail, in particular, capable of surviving everything short of the heat death of the Universe – and cultivated plants (often seeming positively to yearn for Death's sweet oblivion) I sometimes wonder whether it would be easier to simply evolve to eat bindweed, couch grass and horse tail rather than trying to extirpate them. But are medical students thriving and robust, or, like our seedlings, fading away before they even get planted out at the allotment of clinical practice? A team of researchers, led by Tomas Ferreira, from Cambridge University, attempted to find out in this survey of all 44 UK medical schools, in which 10,486 medical students took part. 2.89% of the students wanted to leave medicine altogether with Cambridge University itself having the highest proportion of students saying this. A third (32.35%) wanted to emigrate to practise medicine with students at the University of Central Lancashire being the most likely to say this. Cardiff Medical School had the greatest percentage

of students intending to assume non-training clinical posts after finishing FY2. 35% of the students wanted to leave the NHS within two years of graduating with students at Brighton and Sussex being most likely to say this. Only 17.26% were satisfied with the prospect of working in the NHS; students at Barts and the London had the highest rates of dissatisfaction.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05366-6

When you ace the theory test but go to pieces on the road

Source: BMC Medical Education

In a nutshell: There's nothing like the presence of another human being to put you off your stride, make you feel self-conscious, and distract you – at least that's what I'll tell my wife when we miss the turn-off for the ferry port at Liverpool and head inexorably down the Mersey Tunnel for a week in Birkenhead, rather than the Isle of Man, this summer. In this study a team of researchers, led by Sari Puspa Dewi, from Universitas Padjadjaran in Indonesia, studied medical students as they practised their communication skills in the classroom, with patients, and as part of an objective structured clinical examination (OSCE). The researchers found that whilst the students were able to practise a broad range of communication skills in the classroom, when they met patients information-gathering and relationship-building became the focus of their encounters. In the test limited time and the high-pressure scenario caused them to rush to complete the task leading them to focus solely on information-gathering and explanation and reducing the opportunity to build a rapport with the patient.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05596-8

AI behind the Bamboo Curtain

Source: BMC Medical Education

In a nutshell: At time of writing this summer has scarcely called for a "chilling effect" it being far more likely for librarians to cluster pitifully around a pyre of burning books in an attempt to keep chilblains at bay. From personal experience I can reveal that you can create one by announcing you won't be voting in the General Election although this is likely to be followed by a certain amount of conversational heat, if not enlightenment. In this study Meijie Wu, from Dalian Medical University in China, led a team of researchers studying 657 medical students and their willingness (or not) to use AI. They found that information quality and perceived usefulness were "pivotal factors that positively influence the willingness to use AI products." However, this relationship was moderated by the "chilling effect" — "people's fear of publicity or indifference to public affairs due to repression, fear of punishment, or feelings of surveillance." It was also affected by the students' STARA awareness; STARA being an acronym for Smart Technology, Artificial intelligence, Robotics and Algorithms.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05627-4

Autonomy, collaboration, and evidence-based medicine

Source: BMC Medical Education

In a nutshell: The search for a good way of teaching evidence-based medicine to medical students is akin to Ed Miliband's for a reliable source of green energy (keep pedalling Ed, you can have a bacon sandwich when you've made enough to boil a kettle), the US's search for a president neither senile nor convicted, or the UK's search for a Eurovision entry that doesn't sound like a cat stuck inside a washing machine on the spin cycle. Hope springs eternal though and in this study Xiao-Huan Li, from Affiliated Zhongshan Hospital of Dalian University, led a team of researchers analysing the effectiveness of a new approach called "autonomy-collaboration." In the autonomy part the students were given a case to look into and had to research it for themselves, before coming back into class and working with other students to draw up a search strategy to look for evidence on it. 91 undergraduates took part in the study which found that "this learning modality [method] effectively enhanced independent learning ability of the students, stimulated their interest in learning, and strengthened the communication between students and teachers, thereby improving the quality of teaching."

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05447-6

Getting medical students to follow the script

Source: BMC Medical Education

In a nutshell: I remember reading to our children – not notably sensitive by any means – only to find them bursting into tears as Hansel and Gretel wandered alone and hungry through the woods; they were simply unaware of the "script," of fairy tales which states that they almost all end "happily ever after." In much the same way I remember my mother's ability to spot plot arcs more obvious than Sydney Harbour Bridge in TV programmes leading my sister and I to suspect she had something akin to second sight. Doctors often use "illness scripts," to help them make sense of patients, but it takes a while for medical students to learn them. In this study Jihyun Si, from Dong-A University College of Medicine in Korea, investigated the effects of "an illness script worksheet approach in flipped learning on the development of clinical reasoning abilities in pre-clinical students." 36 second-year medical students took part in the study. A "clinical reasoning method," course was redesigned as an "illness-script worksheet approach in flipped learning." The course took eight weeks. The students met once or twice a week with a different professor each time and engaged with 15 clinical cases in small groups in one classroom with one professor facilitating seven groups in a single classroom. The students showed an 8.68% improvement in their "pre-diagnostic thinking inventory," score with students whose clinical reasoning was initially worse showing a greater improvement.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05614-9

Is WBA fit for purpose?

Source: BMC Medical Education

In a nutshell: Despite having the highest football ground in the Football League WBA (West Bromwich Albion) are – for the time being at least – under-achieving, not quite ready for the big time, and with their best years behind them. But is the same true of the other WBA – workplace-based assessment? In this study Vasiliki Andreou, from KU Leuven in Belgium, led a team of researchers interviewing GP trainees, GP trainers, and GP tutors about it. The researchers analysed the interviews. The stakeholders found WBA essential primarily for establishing learning goals; secondarily for assessment purposes, and thirdly for providing or receiving feedback. They all saw WBA as valuable when it fostered learning and "the identified needs were notably influenced by agency, trust, availability, and mutual understanding."

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05636-3

Off to bootcamp? Don't forget your torch!

Source: BMC Medical Education

In a nutshell: Some people have nightmares about being locked in the Chamber of Horrors at Madame Tussaud's after closing time, but if you really want to have lots of horrific experiences with (ear)wax and a torch in a confined space you could do worse than become a junior doctor working in ENT. In this study Amar Rai, from Imperial College Healthcare NHS Trust, led a team of researchers investigating the effectiveness of a two-day induction bootcamp for new ENT first-year specialty registrars. The bootcamp covered common problems arriving at the door of an ENT department, and in elective and emergency settings. 29 junior doctors took part in the study which found that they reported a significant increase in confidence and preparedness following the course. The greatest improvements came in rigid bronchoscopy and sphenopalatine artery ligation.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05691-w

Spirituality, resilience and empathy

Source: BMC Medical Education

In a nutshell: Spirituality is to religion what beer is to Wetherspoon's. You can get it elsewhere but you don't get a sense of fellowship or conserve the nation's architectural heritage without becoming a loyal customer. In this study Anna T.M.S.

Moura, from Universidade Estadual do Rio de Janeiro in Brazil, led a team of researchers investigating the links between spirituality, empathy and resilience in 1,370 medical students. The researchers found that medical students with a high level of spirituality had higher scores for both resilience and empathy. Female students had higher levels of spirituality and empathy than male students, but no more empathy. Which year the students were in made no difference to their levels of spirituality, empathy, or resilience.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05687-6

Helping guinea pigs go gently

Source: BMC Medical Education

In a nutshell: Our attitudes to how we treat animals can be somewhat conflicted. Logically finding a cure for cancer is more important than my barbecue tomorrow night, but I feel queasier about animal experimentation than I do about abbatoirs. At the same time many people who happily tuck into pigs kept in captivity feel squeamish about fox-hunting, venison, and rabbit. In this study Wang Zhang, from Wuhan University in China, studied the effectiveness of adding education about laboratory-animal ethics into a general-surgery laboratory course. Teaching sessions focused on teaching the fundamental principles of laboratory-animal ethics, whilst practical sessions emphasized the application of these principles in laboratory classes. 189 third-year medical students took part in the study which found that the course helped students know more about the regulations related to laboratory animals; welfare issues, and the 3R principle (reduction, refinement, and replacement). The students also scored significantly better on a test of their knowledge after the course.

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05703-9

Nurse Education

Learning nursing via video

Source: Nurse Education in Practice

In a nutshell: "Don't worry," said the surgeon, as he picked pieces of bone from between the teeth of his hacksaw, "I've watched loads of videos on this." This might be enough to send even the lamest arthroplasty seeker running for the hills, but educational videos have their uses, and in this study Afang Li, from Universiti Sains Malaysia, led a team of researchers reviewing their effectiveness at teaching nurses practical skills. The researchers found 18 studies which met their quality criteria, covering 2,274 nursing students. They found that online teaching of practical skills led to an increase in skills, knowledge, satisfaction, and confidence.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.103988

The net and nurses in the nursing home

Source: Nurse Education Today

In a nutshell: For many nursing students doing a placement in a nursing home must feel like Father Ted's sojourn on Craggy Island; it's a long way from the seminary and people are prone to forget about you once you get there. In this study a team of researchers, led by Ingrid E. Dalsmo from the University of Agder in Norway, developed a "digital education resource," to support nursing students on placements in care homes. 23 students were interviewed by the researchers who concluded that "the digital educational resource gave a feeling of being acknowledged as a learner by providing a structure and preparation that made the placement feel less overwhelming; supporting personal reflection and assessment practices; and facilitating collaboration when all stakeholders used the resource actively.

You can read the abstract of this article at https://doi.org/10.1016/j.nedt.2024.106271

Are cases better when they unfold?

Source: Nurse Education in Practice

In a nutshell: When it comes to cases in education teachers want nurses to carry out a nice set of knowledge with them and incorporate it into the rest of their professional lives not leave it circling round on the baggage carousel of ignorance along with some fishing rods, a wooden leg, and a surface-to-air missile. Rather than being one-offs, unfolding case studies gradually develop over time allowing students to "engage in a more immersive and realistic learning experience." In this study Maysa Kassabry, from the Arab American University in Palestine, led a team of researchers investigating the effect of "applying unfolding case-study learning on critical-care nursing students' knowledge, critical-thinking and self-efficacy." The researchers found that compared to a conventionally-taught group those using unfolding case studies scored better for post-test knowledge, critical thinking and self-efficacy.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104015

When CPR stops for a selfie

Source: Nurse Education in Practice

In a nutshell: With a strong force field of social awkwardness, Mr Magoo glasses, and teeth which look as though they've been jammed in by a hungover dentist with a train to catch, I'm not always ecstatic about seeing myself on camera. Young people have no such qualms though, and in this study Hye Won Jeong, from Korea National

University of Transportation, and Sun-Hee Moon, from Chonnam National University investigated the effect of filming nursing students as they practised advance cardiac life support. 110 nurses took part in the study, and they were divided into three groups. One group watched simulations featuring their own participation, one group watched instructor-led simulations, and a third group took part in the simulations without subsequent "video boosting." After four and eight months the groups who watched the videos showed significantly superior performance and significantly increase knowledge scores, although watching the videos had no significant effect in terms of CPR self-efficacy or stress.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104010

What makes nurses xenophobic?

Source: Nurse Education in Practice

In a nutshell: Xenophobia is no laughing matter — unless you're playing Scrabble and manage to get the X on a triple-letter score. In this study Merv Mert-Karadas, from Haceteppe University in Ankara, led a team of researchers examining xenophobia in a sample of 227 nursing students in Turkey. They found that students who were male, in their third year, had low economic status, received information about immigrants from social media, and lived in regions with a high concentration of immigrants had higher levels of xenophobia. Interviews with some of the students revealed that negative experiences with refugees, economic and social worries, perception of security threats, cultural conflicts, and negative media messages all contributed to xenophobia. The students suggested that "lessons about immigrants and caring for them in clinics," could improve their ability to empathize with them.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104013

Making nurses more like horsetails

Source: Nurse Education in Practice

In a nutshell: Horsetails are amazing plants. They can regenerate from a single fragment, shed regenerative segments every time you attempt to weed them, can survive for weeks without light, and have roots that go much deeper than the plants they compete with. No wonder they've survived since the time of the dinosaurs. It's just a shame that you they are neither pretty, nor edible. Much effort has been expended finding ways to make nursing students as resilient and in this article a team of researchers, led by Hira Ejaz, from Shifa College of Nursing in Islamabad, reviewed the evidence on resilience-focused educational programmes. They found six studies which met their quality criteria, covering a total of 472 participants. From the four experimental studies there was no evidence the interventions made any difference. The other two studies were randomized controlled trials. One showed no difference but whilst the other showed no difference straight after the intervention it did show an improvement in the students' resilience a month later. Somewhat

optimistically – resiliently perhaps – the researchers concluded that "this review has provided evidence of a delayed effect of educational intervention to improve resilience among nursing students. The resilience-focused educational intervention has the potential to improve the resilience of nursing students."

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104014

Were new Pandemic nurses fit to dole out drugs?

Source: Nurse Education in Practice

In a nutshell: As if death, disease, and loneliness weren't already enough to grapple with during the Pandemic newly-qualified nurses also had to get to grips with fractions as they attempted to make sure the right patients got the right amount of drugs, at the right time. But how well-equipped were they to get things right? That was the question a team of researchers – led by Susan Irvine from Victoria University in Australia – attempted to answer in this study. 214 nursing students in their final semester took part in it. Overall, they reported high preparedness scores for medication. International students felt better-prepared than domestic ones and older students were more confident "in applying principles of pharmacology to practice."

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104011

Auscultation and simulation

Source: Nurse Education in Practice

In a nutshell: Auscultation is the art of listening — usually with a stethoscope — to what goes on inside patients' bodies, distinguishing the effects of too many lentils for tea last night from a pulmonary embolism, and a Lego brick stuck up a toddler's nose from pleurisy. In this study Evrim Saritaş, from Gazi University Faculty of Nursing in Turkey, led a team of researchers comparing the use of a simulated patient, a high-fidelity simulator, and traditional education in teaching nursing students auscultation of heart, lung, and bowel sounds. 86 nurses took part in the study. 28 studied using a simulated patient, 30 using a high-fidelity simulator, and 28 using "traditional education." The researchers found that both simulation and traditional approaches were effective in learning auscultation skills. However, the positive effects of simulation, particularly in enhancing students' self-confidence and reducing anxiety levels, "appear to be more permanent and impactful than traditional education."

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104016

Are your OSCEs robust enough?

Source: Nurse Education in Practice

In a nutshell: Being asked about the robustness of your OSCEs sounds like one of those questions that ought to produce at worst a slap round the chops, and at best an awkward silence at a dinner party, followed by a short spell of social ostracism. Objective Structured Clinical Examinations, in which trainee doctors are assessed on their ability to treat people pretending to be patients, are one of the foundation stones of medical exams though, so it's important that they are judged fit to do their job. In this study Sandra Sharp, from Edinburgh Napier University, led a team of researchers, assessing the effectiveness of OSCEs for student nurses. The researchers found that examiners were inclined to give students either very low, or very high, marks with not much in between. They found that although the overall performance of the students was good, some had failed in at least one station. They concluded that instead of having four pretend patients "using a one-station case study-based, phased approach enabled the examiner to build up a more holistic picture of student knowledge and skills. It also provided the student opportunity to develop a rapport with the examiner and standardised patient, thereby putting them more at ease." You can read the abstract of this article at

https://doi.org/10.1016/j.nepr.2024.104021

Nurses and evidence-based medicine

Source: Nurse Education in Practice

In a nutshell: TV detectives' attitude to evidence can vary greatly. Some – Morse, Poirot, Marple – rely on a blinding flash of inspiration, whereas others like Tennison and Hastings painstakingly build up evidence to lead them to the culprits. Getting health professionals to engage with evidence can sometimes feel a little like getting Morse to fill out a time sheet and go on an alcohol-awareness course and in this study Hang Li, from Chengdu University of Traditional Chinese Medicine, led a team of researchers investigating how much nursing students know about evidence-based medicine. The researchers reviewed the evidence and found 25 studies covering 4,557 nursing students and 6,806 nurses from 13 countries. Both nursing students and nurses lacked evidence-based practical knowledge and skills but both groups had a positive attitude towards evidence-based practice. Senior nurses and nurses with a master's degree or above had better attitudes to evidence-based practice, better knowledge, and more skills.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104024

Can nurses cope with Jehovah's witnesses?

Source: BMC Medical Education

In a nutshell: Along with the occasional chance to sing a few belting hymns, and the fact that you're never more than a few days away from a piece of cake. one of the other consolations of Anglicanism is the fact that you've got a cast-iron excuse when the Jehovah's Witnesses knock on the door. These dedicated evangelists for their faith are also known for not wanting to receive blood transfusions; something which can tax the "cultural competence," of many a nurse or doctor. In this study Jan Domaradzki, from Poznan University of Medical Sciences in Poland, led a team of researchers investigating 349 master's midwifery and nursing students' awareness of this issue. The study "unequivocally demonstrates that nursing and midwifery students possess inadequate knowledge regarding Jehovah's Witnesses' stance on blood transfusions and their acceptance of specific blood products and medical procedures." The students lacked an understanding of patients' autonomy to reject blood transfusions and their need for bloodless medicine. The students also "articulated educational needs regarding cultural competencies regarding the Jehovah's Witnesses' beliefs on blood transfusions and non-blood management techniques."

You can read the whole of this article at https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05646-1

Are nurses up to speed on IT?

Source: Nurse Education in Practice

In a nutshell: It's been stated that the average smartphone contains more computing power than that deployed during the moon landings in the 1960s. Interesting to note then, that while it's perfectly possible to use the latter to land the lunar capsule 235,000 miles away, it's nigh on impossible to use the former to pay for parking for a Skoda Octavia in Llandudno. In this study Abdulaziz Mofdy Almarwani, from Taibah University in Saudi Arabia, reviewed the evidence on "nursing informatics competency among nursing students." He found 13 articles which met his quality criteria and they showed that the students were "generally competent," with good scores for "the clinical informatics role," attitude, basic computer knowledge and skills, and wireless device skills.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104007

Putting your hand up without putting your foot in your mouth

Source: Nurse Education in Practice

In a nutshell: Once a class reaches a certain size — that threshold in itself, perhaps, being worthy of a scientific study — it's amazing if any of the students opens their mouth. If you know the answer you risk being — literally or metaphorically — beaten up behind the bike sheds afterwards for being a teacher's pet, and if you don't know the answer you expose hitherto unplumbed depths of ignorance. In this study Simon To Keung Chan and Graeme D. Smith, from Saint Francis University in Hong Kong, attempted to tackle this conundrum. Eight nursing graduates were invited to participate in two focus groups about "teaching and learning strategies," and 12 nursing teachers were also interviewed. The researchers found that the Chinese students were concerned with "losing face," and the fear of being teased by their peers in a collectivist culture. The researchers developed three teaching-and-learning

strategies for engaging students in questioning and collaborative activities: using digital learning platforms; promoting communication; and fostering interpersonal relationships.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104023

Helping midwives remember how to keep babies breathing

Source: Nurse Education in Practice

In a nutshell: As a relatively infrequent driver I can just about remember how the windows open (it was a lot easier when you just wound a handle, believe me), and how the windscreen wipers and headlights work. However, although I read the relevant section in the manual once you might as well ask me to dock our vehicle with the International Space Station as ask me to work the heating or the CD player. Retention of knowledge is a problem in health-care education too, and in this study Ferdows Bameri of Iranshahr University of Medical Sciences in Iran, led a team of researchers investigating how much midwives remembered of the Helping Babies Breathe programme after they had been taught it. The programme is "a simple protocol for neonatal resuscitation in low-resource healthcare settings to decrease the rate of asphyxia and perinatal mortality." 61 midwives took part in the study which found a statistically significant improvement in the midwives' knowledge six months after they had taken the course but no improvement between their knowledge at six months and their knowledge after 12 months. The students' skill scores were still higher after six months, but there was a significant decrease from this level after 12 months.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104020

When simulation goes on tour

Source: Nurse Education in Practice

In a nutshell: In the days when people actually bought records artists could hone their sound to perfection in the studio confident that their album royalties would keep them going. Once streaming arrived they had to get out on tour the whole time, giving themselves sore throats and nervous exhaustion, and playing smaller and smaller venues until they crossed the mysterious dividing line between touring and busking/disturbing the peace. The pedagogical equivalent is carrying out simulations *in situ* – i.e. on the wards – rather than in a classroom or dedicated training facilities. In this study Jane Schweitzer, from Gold Coast Hospital and Health Service in Australia, led a team of researchers exploring "nursing and midwifery clinical educators' preparation practices related to *in situ* simulation-based education, at a tertiary health service in Australia. The researchers interviewed 12 nursing and midwifery teachers and four themes emerged from the interviews which were:

Responsivity [sic] to workplace and clinical priorities

- Clinical educator objectives
- Preparedness for learning and clinical practice
- Evolving educational expertise

The researchers concluded that "in situ simulation-based education is an integral part of the in service repertoire and a key component of departmental education strategies, designed to support practice and hone skills required to deliver quality patient care."

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104030

Can midwives get it right for people with learning disabilities?

Source: Nurse Education Today

In a nutshell: Rather like Millwall and Leeds fans in the 1970s learning-disability and maternity services often seem to be vying with each other as to which can create the most heartbreak, trauma, and negative headlines. Even more care needs to be taken when the two come together and in this study Anna Cox, from the University of Surrey, led a team of researchers who worked with people with learning disabilities to develop a training programme for student midwives. 83 midwifery students and seven people with learning disabilities – "experts by experience" – took part in the study. The midwifery students' reports of their "learning disability awareness," was significantly higher across all domains after the training and was sustained at a three month follow-up. The students said the "most notable," part of the training was learning with, and from, people with learning disabilities. Three themes emerged from interviews with the experts by experience: reasonable adjustments to training and research practices; a positive social, emotional, and learning experience; and perceptions of impact.

You can read the abstract of this article at https://doi.org/10.1016/j.nedt.2024.106289

Can nursing students construct their careers?

Source: Nurse Education in Practice

In a nutshell: Mrs G is one of those people who believes the world can be made a better place, whereas I am more fatalistic. So when we made stuff with Lego with the kids, she would have a clear idea of what she wanted to do and seek out bricks accordingly, whilst I simply closed my eyes, stuck my hand in the box and made the best out of what ensued. She was left with a scale model of Sydney Opera House, whereas I ended up with something a blind dyspraxic with mental-health problems might have thrown up in one of the *favelas* of Rio de Janeiro. But how do nursing students approach the question of "constructing," their careers? That was something a team of researchers, led by Betül Sönmez from Istanbul University-Cerrahpasa in

Turkey, investigated in this article. 536 students took part in the study which found that autonomy, competence, and relatedness all had a "direct significant," effect on career adaptability and "overall career construction score." Autonomy, competence, and relatedness led to greater career adaptability which, in turn, led to higher scores for career construction. Not having willingly chosen the nursing profession had a negative effect on career construction, whereas fulfilling one's need for competence had a positive effect.

You can read the abstract of this article at https://doi.org/10.1016/j.nepr.2024.104017