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Mid Cheshire Hospitals
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Education Bulletin – September 2023

Compiled by John Gale
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General Healthcare Education

When the lecturers lose the learners

Source: Sustainability

In a nutshell: Whilst we might not all display the same behaviour as [Royal Blood](#) – “I’m called John Gale and this is evidence-base medicine. Who likes evidence-based medicine?” – it’s often a temptation, particularly when students are more-than-usually overt in displaying their indifference to your offerings. In this study Xinyuan Xu, from Shanghai Normal University, and Robert M. Klassen, from York University studied how 99 lecturers reacted to disruptive behaviour from students. 47 of the lecturers were Chinese and 52 British. The researchers found that the Chinese teachers showed a significantly higher level of shame and anxiety faced with disruptive behaviour, than the British ones. More in-depth interviews with the lecturers found that “the appraisal dimension of accountability and self-construals, shaped by cultural values, were the key factors influencing teachers’ emotional experiences.”

You can read the whole of this article at

<https://www.mdpi.com/2071-1050/15/15/11798>

Empathy and chronic pain

Source: Nurse Education Today

In a nutshell: As I stride down the hospital corridor past serried ranks of patients on Zimmer frames *en route* to my lunchtime coffee – the physiological equivalent of the Duke of Westminster driving through Oldham throwing five-pound notes from the window of his Rolls Royce* – I often wonder whether I’d have the requisite degree of empathy for a career in the caring professions. Thankfully for all concerned I’ve never been tempted to find out. In this study Alicia E. López-Martínez, from Malaga University in Spain, led a team of researchers studying 203 health-sciences undergraduates and the degree of empathy they demonstrated to patients in chronic pain. A diagnosis of chronic pain did not affect the students’ levels of empathy but the students’ own tendencies to take other people’s perspectives and feel distress on their behalf did. The researchers concluded that “it would seem appropriate to foster intra-individual empathy factors among health science undergraduates such that they can more readily understand the process of individual adaptation to chronic pain and thus manage it more effectively.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2023.105922>

*Not, of course, that I’m suggesting His Grace is wont to do this.

Mobile and blended. Is it the Café Royale or the student-union diner?

Source: Sustainability

In a nutshell: The words “mobile,” and “blended,” ineluctably call to mind coffee sneaked into the interstices of the day as I travelled from one meeting to another in a previous incarnation in London. Fine in one of the choicer brands of Café Nero near Covent Garden, not so much in the student-union café wedged in between sundry over-excited nineteen-year-olds. In this article Kleopatra Nikolopolou, from the National and Kapodistrian University in Athens, interviewed 19 undergraduate and postgraduate students about mobile and blended learning. Most felt that blended learning “helps their autonomy and self-regulated learning when they are facilitated by ownership of, ease of use, and familiarity with mobile devices.” Factors affecting self-regulated mobile learning included:

- Course structure
 - The online component of blended education
 - Appropriateness of learning activities
 - Educational material
- Individual factors
 - Educators’ knowledge, skills, confidence, and attitudes
 - Students’ knowledge, skills, and concerns
- Technological factors
 - Infrastructure and internet connectivity

“Students’ expectations concerning blended education courses are associated with the course organization (e.g., provision of alternative learning possibilities, balance between face-to-face and digital/online learning activities, and access to various teaching material/tools) and the role of students and teachers.”

You can read the whole of this article at

<https://www.mdpi.com/2071-1050/15/16/12284>

What happens when patients can’t say ouch?

Source: BMC Medical Education

In a nutshell: It’s bad enough – one presumes – being in critical care without being unable to say “stop it,” when doctors rip plasters off the hairier parts of your anatomy, or worse. In this study Ali Sarfraz Siddiqui, from Aga Khan University in Pakistan, led a team of researchers investigating the effectiveness of a course designed to teach doctors and nurses about the use of the Critical Care Pain Observation Tool, a questionnaire designed to measure pain in patients unable to speak for themselves. The course lasted six hours and led to a statistically-significant improvement in test scores. The effects of the training were significantly greater for women and those who came from a bigger city.

You can read the abstract of this article at

<https://bmcomededuc.biomedcentral.com/articles/10.1186/s12909-023-04523-7#Sec6>

Is e-learning best done in company?

Source: International Journal of Educational Technology in Higher Education

In a nutshell: Serial killers are well-known for keeping themselves to themselves. After all the last thing you want when you're busy trying to flush someone's elbow down a toilet is Mavis from next door popping round to borrow a cup of sugar. All of which makes opportunities for solitude few and far between. Video lectures might have been thought to be one of them – sparing at least the lecturers the horror of massed ranks of students on a Monday morning – but in this study a team of researchers, led by Zhongling Pi, from Shaanxi Normal University in China, studied the difference between “synchronous online learning,” on one's own; with a familiar peer; or with an unfamiliar person. They found that students paired with a familiar peer reported higher motivation in learning, and more self-monitoring behaviour, than those paired with an unfamiliar peer, or those learning alone. Students paired with both familiar peers *and* strangers both did better than those who attended classes alone.

You can read the abstract of this article at

<https://educationaltechnologyjournal.springeropen.com/articles/10.1186/s41239-023-00418-1>

Does 360° mean better?

Source: Computers & Education

In a nutshell: Virtual-reality simulations offer people whole new vistas of experience and opportunity; you can be rejected and humiliated, grope people, and vandalize thirteen-year-old girls' Minecraft projects should you be so inclined - and plenty are. It also offers opportunities for education, of course, and in this study Noah L. Schroeder, from Wright State University in Ohio, led a team of researchers reviewing the research on 360° video. They found that there was “no significant benefit nor detriment from learning with 360° videos. The researchers concluded that “if supporting cognitive learning outcomes is the goal, as opposed to affective or perceptive outcomes, there are likely other technologies that may be more resource efficient for supporting learning.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.compedu.2023.104901>

Why sunny-side up is best in the escape room

Source: Sustainability

In a nutshell: Elon Musk has been quoted as thinking that the world might well be a giant computer simulation. It's tempting to press Ctrl+Alt+Delete given the state of

the world, and the people in charge of it, at present; or perhaps it's just a giant escape room where everyone has forgotten the purpose of the exercise, and can't remember the safe word to be let out. In this study Sara González-Yubero, from the University of Zaragoza, led a team of researchers who studied 135 first-year students' experience of an escape room. The researchers found that creative thinking, activation, and dominance predicted intrinsic motivation toward knowledge achievement and stimulating experiences. "Likewise, a higher level of negative affect was predictive of amotivation and external regulation motivation in students." In other words creative, proactive and socially-dominant students enjoyed it whereas more negative ones failed to see the point and only went along because they had to.

You can read the whole of this article at
<https://www.mdpi.com/2071-1050/15/17/13001>

Medical Education

Are the Chinese ready to go digital?

Source: BMC Medical Education

In a nutshell: Faced with Joe Biden or Donald Trump in one camp it's perhaps not too surprising that increasingly large portions of the world are looking to China for leadership; even the most sex-averse panda fastidiously turning its nose up at anything but bamboo, let alone Xi Jinping, might be a better bet than sleepy Joe or dodgy Donald. One thing that puzzles this observer is how the Chinese cope with computers. With thousands of characters in their alphabet do they have keyboards the size of grand pianos and [Inspector Gadget](#) arms, or do they just do everything in English? Investigating this issue was a team of researchers, led by Mingxue Ma, from Harbin Medical University who surveyed 2,122 medical students from 467 medical schools. Most of them had positive expectations about the way in which digital health would change the future of medicine. 85.53% believed in the benefits of wearable devices, 84.16% that telemedicine was a good thing, and 86.38% were in favour of medical "big data." However, a smaller percentage (63.81%) were convinced of the benefits of clinical-decision-support systems. Most said they urgently needed digital health knowledge and skills and by a large majority (78.02% vs 10.54%) favoured practical training and internship as a way of learning about this over traditional lectures. Only 41.45% wanted to learn about the ethical and legal issues surrounding digital health.

You can read the whole of this article at
<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04407-w>

Are junior doctors getting the basics right?

Source: BMC Education

In a nutshell: Although I've been a driver for several years now anyone witnessing me aligning the white line of a parking space down the centre of our car, or the car itself diagonally across a parking space, might question whether I'd really got a grip on the basics of the whole business. All I can say is that whilst I exchanged a celebratory hug with my driving examiner shortly after passing, I'm willing to swear in a court of law that I'd never clapped eyes on her before my test. In this study Paul O'Connor, from the University of Galway, led a team of researchers who observed 17 junior doctors performing nine clinical procedures in June 2021 and again in January 2022. The researchers found that at the first assessment the number of steps performed correctly ranged from 41.9% to 83.5% and at the second assessment the range was from 41.9% to 97.8%. The most-common median proficiency rating at the first assessment was "close supervision," and at the second assessment it was "indirect supervision." "There was a significant and large effect size in the improvement in performance from assessment one to assessment two." The researchers found that there was a poor match between how the students rated their own skills and how the experts rated them.

You can read the whole of this article at

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04545-1>

Do you need to be in the room to read an ECG?

Source: BMC Medical Education

In a nutshell: Beyond a general feeling that one's graph should resemble the evenly-spaced undulations of the Devon countryside rather than the jagged peaks - followed by an extended period of flatness - characteristic of the Rockies and the American prairies I'm probably not to be trusted reading an ECG. But do you need to be in the same room to get to grips with one? That was the question a team of researchers, led by Aida Bazrgar, from Shiraz University of Medical Science, attempted to get to grips with in this study. They studied 215 medical students who were divided into three groups. One group learned solely online; one group solely in the flesh; and a third group via a blend of online and face-to-face. A narrow majority (54.9% vs 45.1%) preferred face-to-face over online but the blended method produced the best results in terms of exam scores.

You can read the whole of this article at

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04546-0>

Can watching films make you a better doctor?

Source: BMC Medical Education

In a nutshell: It's a moot point whether any film has a lasting effect on people for longer than the half-hour it takes to get back home from the cinema. Better, I suppose, that doctors take their cue from *Lorenzo's Oil* rather than *The Texas Chainsaw Massacre*. In this study a team of researchers, led by Elsemarijn Leijenaar, from Utrecht University, studied the effectiveness of a narrative-medicine

course for fourth-year medical students. The course consisted of an introductory lecture, close reading and watching of a book or film, a discussion group, and a short reflective-writing exercise. “Students were divided over three thematic pairings (or book and film combinations): “The doctor as patient,” “The mysterious brain,” and “Until death do us part.”” The students “demonstrated reflection on a professional level and connected this to future intentions as medical practitioners, for example to use specific communication strategies or to deliver healthcare in a broader sense... Approximately half of the students showed an in-depth and authentic reflection.”

You can read the whole of this article at

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04492-x>

... and do medical humanities make a difference?

Source: BMC Medical Education

In a nutshell: “Man is a spirit/This the poor flesh knows/Yet serves him well for host/When the wind blows/Why should this guest go/Wrinkling up its nose?” wrote Stevie Smith. Medical humanities – doctors watching films and reading books, for instance – is an attempt to make doctors pay attention to the spirit as well as the flesh, but does it actually make any difference? In this study a team of researchers, led by Shiau-Shian Huang, from Taipei Veterans General Hospital in Taiwan, attempted to find out. 354 students took part in the study which found that those who had experienced a medical humanities curriculum with a good learning outcome were significantly more likely to have higher scores on the clinical curriculum, a better performance on placement, and a higher “weighted average mark.”

You can read the whole of this article at

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04073-y>

How doctors cope in Kabul

Source: BMC Medical Education

In a nutshell: Tempting though it is to send Piers Morgan, Jeremy Vine and Michael Mosley on a one-way ticket to Helmand – “nip out for a stroll boys, don’t worry about the landmines” – it’s unlikely that the forthcoming series of *Celebrity Race Across the World* will feature Afghanistan among its destinations. Life goes on though, including medicine, and in this study a team of researchers, led by Muhammad Haroon Stanikzai, from Kandahar University, asked 665 Afghan medical students how they were getting on. 22.6% of them rated their medical training as excellent and 37% said it was good. Nearly half (48.7%) said they would prefer to stay in Afghanistan. The two main reasons for going abroad were “to obtain more advanced and quality education (69.9%), and “a decent personal life,” (43.9%). Nearly two-thirds (67.4%) said that “current political and armed conflicts in Afghanistan may have influenced their professional choices.”

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-023-04577-7>

There's a club, if you'd like to go

Source: BMC Medical Education

In a nutshell: Whilst some people prefer the dancing variety my idea of the perfect club features leather armchairs, freshly-ironed newspapers, coffee, a good library and a billiard room all attended to by a latter-day Jeeves in white gloves. It's a dream unlikely to be realized – the only club I get asked to is a journal club which, even at its absolute peak, only runs to a cup of instant coffee and a ginger biscuit that makes Methuselah seem like the new kid on the block. In this study Jonathan Gold, from Michigan State University, led a team of researchers investigating the Council on Medical Student Education in Paediatrics (COMSEP) Journal Club in which those charged with teaching doctors how to treat children discussed the latest research. 125 people responded to a survey of whom 38% said they read the featured articles “most months or always.” Reasons for reading the featured articles included: a topic of interest, keeping up-to-date on medical education literature, and gaining practical tips for teaching and implementing new curricula. Motivations for writing a review included: keeping up-to-date; contributing to a professional organization; and developing skills in analysing medical literature. The most common barriers to taking part in the club were lack of time and lack of confidence or training in one's ability to analyse medical-education literature.

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-023-04550-4>

What do medical students want to do when they graduate?

Source: BMC Medical Education

In a nutshell: Leaving aside other shortcomings, too many to mention here, I suspect that my constitutional attachment to the nine to five,* and an attitude to humanity that only ever reaches the giddy heights of bemused indifference, would have precluded anything but the more recherché branches of pathology as a medical career. Medical students are made of sterner stuff though and in this study a team of researchers, led by Jean-Sebastien Rachoin, from Rowan University in New Jersey, studied how the career choices of 10,233 medical students changes from their second year to their graduation. Fields into which the students “preferentially switched,” from year two to graduation included: anaesthesia, dermatology, ENT, family medicine, obstetrics and gynaecology, pathology, physical medicine and rehabilitation, psychiatry, radiology, urology, and vascular surgery. “Many characteristics, including future salary, the competitiveness of the field, and the importance of work-life balance, were significantly associated with a higher likelihood of changing career choices. On the other hand, having a mentor and the specialty content were associated with a lower likelihood of change.”

You can read the whole of this article at

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04598-2>

*Five-past eleven that is

Emotional intelligence and medical students

Source: BMC Medical Education

In a nutshell: It must be lovely to regard interactions with other human beings as more than simply a fresh opportunity for fear, loathing, and humiliation. Emotional intelligence, among other things, allows people to do this and is increasingly being seen as a useful quality to have in doctors. In this study Aziz Bitar, from Umeå University in Sweden, led a team of researchers assessing emotional intelligence in 429 medical students. Overall the students scored 5.33 out of seven for emotional intelligence. Final-year students had higher emotional intelligence than first-year ones and people's sex made no difference. Students aged between 25 and 29 had higher emotional intelligence than students aged 21-24. Higher emotional-intelligence scores were also associated with previous work and leadership experiences.

You can read the whole of this article at

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04570-0>

Self-regulated learning on placements

Source: BMC Medical Education

In a nutshell: Medicine is chock full of ethical dilemmas. Do you Google something in front of a patient, for example, or front it out and pick a drug from roughly the same section of the alphabet from the BNF? In this study Laura Corazza, from the Technical University of Munich, led a team of researchers studying the strategies for self-directed learning used by 43 final-year medical students. The most used self-regulated learning strategy was “seeking information from the internet in the form of a text,” (i.e. Googling it). This was followed by “seeking social assistance from doctors,” and “seeking information in books.” 95.3% of students sought “social assistance from doctors,” when they were having difficulty on the ward, but only 55.8% sought help with written tasks. 79.1% used books to prepare for oral/practical tasks, whereas 97.7% used an “e-learning tool,” to prepare for a written exam.

You can read the whole of this article at

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04607-4>

Can METAPAD help students navigate metabolic pathways?

Source: BMC Medical Education

In a nutshell: Sadly my O-level Chemistry – yes I went to school before the general collapse of secondary education (GCSE) – never went much beyond CO₂ and H₂O.

Medical students are expected to tangle with much more complex chemicals, something made even more tricky by the fact that they are forever changing into one another like a hyperactive child let loose with the dressing-up box. When it happens inside humans these processes are known as metabolic pathways and in this study Krishna Mohan Surapaneni, from Panimalar Medical College Hospital and Research Institute in India, examined the effectiveness of a “gaming innovation,” called METAPAD (METAbolic PATHways Decoded) at teaching them to 103 first-year medical students. Most of the students thought the game was an effective and innovative style of learning regardless of their age and sex.

You can read the whole of this article at

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04587-5>

Nurse Education

When the permanent nurses don't behave properly

Source: Nurse Education in Practice

In a nutshell: “We shape our buildings,” said Churchill “thereafter, they shape us.” The same could be said for social environments with people moulding themselves to the pre-existing milieu, as much as they shape conditions themselves; fine if you're a mild-mannered baritone joining one of Gareth Malone's choirs, not so good if you're a Benedictine monk nipping into the Big Brother house to borrow a cup of sugar. In this study Ilana Livshiz-Riven, from Ben-Gurion University of the Negev, studied the experiences of 369 nursing students as they went out on clinical placements. 301 of them reported experiences of unprofessional behaviour while they were on placement. “Students with reported skills to speak up about unprofessional behaviour were less likely to report having experienced these behaviours. Students who did not experience unprofessional behaviours were more likely to report higher compliance with standard and Covid-19 precaution guidelines. These students also had a higher perception of personal responsibility toward patient safety.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2023.103739>

Can an app help people deal with bullying?

Source: Nurse Education Today

In a nutshell: Despite being bespectacled, lanky, and socially awkward I've never really been the victim of bullying; a testament perhaps to the power of helping other kids with their homework; genuine indifference to what other people think of me; and the forbearance of my colleagues. Others are less fortunate, and in this study Shiau-Ting Tsai and Fan-Hao Chu, from Kaohsiung Medical University in Taiwan, studied the effectiveness of an app called Easy Play Communication at helping nurses deal with incivility and bullying at work. The app combined [cognitive rehearsal](#) approaches with clinical situations. 47 nurses took part in the study. 96.3% were

happy with the app's accessibility, 81.4% with its practicality; 92.6% were willing to use it; 88.9% liked its content and 88.9% liked its interface. "Participants' perceived incivility in their interactions with other nurses, physicians, and patients and their family members decreased over the study period."

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2023.105925>

What do nursing students make of AI?

Source: Nurse Education in Practice

In a nutshell: It would hardly surprise me to find a TV crew journeying into the rainforest for six days, hacking their way through the undergrowth and finding a tribe of people with blowpipes, only to discover that they'd all got Amazon lockers and were waiting with bated breath for the next series of *Line of Duty*. There's certainly no escaping artificial intelligence (AI) – or at least being asked questions about it as part of somebody's research project. In this study Anita Lukić, from the University of Applied Sciences in Croatia, led a team of researchers investigating 336 first-year nursing students' attitudes towards AI. The nurses scored 64 out of 100 for their attitude to AI with a score of 60 being deemed to be neutral; this attitude did not differ with the nurses' ages. Male nurses were more enthusiastic than female ones. Scores on "Benefits of artificial intelligence in nursing," "Willingness to use artificial intelligence in nursing practice," and "Dangers of artificial intelligence," were all favourable towards AI-based solutions. However, scores on "Practical advantages of artificial intelligence," were "somewhat unfavourable."

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2023.103735>

That was The Wedding Present. Now here's the new one from Korotkoff Sounds

Source: Nurse Education in Practice

In a nutshell: Korotkoff Sounds sounds like the kind of thing the late John Peel might have played between some German industrial music and the latest Japanese hardcore. In fact they're the noises people listen out for when they're measuring people's blood pressure, and in this study Türkan Ülker and Sevda Korkut from Erciyes University in Turkey examined the effects of an audio-visual video created with Korotkoff sounds on the anxiety levels and blood-pressure-measurement skills of 130 nursing students. Before practising taking people's blood pressure 67 of the students listened to the Korotkoff sounds while the rest formed a control group. The researchers found that listening to the Korotkoff sounds led to less anxiety, and a statistically-significant improvement in the ability to hear the sounds in practice and in measuring blood pressure correctly.

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2023.103737>

Do nursing textbooks get the tone right?

Source: Nurse Education Today

In a nutshell: Until recently it hadn't really occurred to me that the stuff plasters are made from – in itself something of a mystery – could be any colour other than pink. Latterly I've discovered chefs sport blue plasters on the basis that these show up better lurking in table 23's ratatouille, but it was only when some Nigerian friends of ours raised the topic that the issue of skin-coloured plasters for darker-coloured people came to my notice. Also grappling with skin tone were a team of researchers, led by Eleonor Pusey-Reid, from MBH Institute of Health Professions in Boston. They analysed pictures of people in a range of nursing textbooks aimed at undergraduate students. The books contained 14,192 "photo images," of which 68% represented light-skinned people; 15% "medium,"skinned; and 9.4% dark skinned. This compared to the US population of which 60% are "non-Hispanic White,"; 13.6% Black African; and 26.6% "person[s] of color [sic]" The researchers concluded "for teaching-learning, more visual representation of dark skin tones and comparative images between what to expect in dark, medium, and light skin tones can help improve knowledge deficits and increase health equity."

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2023.105927>

Flipped learning and patient safety

Source: Nurse Education in Practice

In a nutshell: In this study Evrim Saritaş and Zehra Göcmen Baykara, both from Gazi University Faculty of Nursing, studied the effects of flipped learning on nursing students' learning of patient safety; a safer bet, one imagines, than flipping either the nursing students or the patients. The researchers found that the students taught via a flipped-classroom approach scored significantly higher in an "achievement test," and on the Patient Safety Competence Self-Evaluation Scale.

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2023.103742>

Helping nurses turn into doctors

Source: Nurse Education in Practice

In a nutshell: Such is the complexity of the whole process, and the Levitical pickiness of those overseeing it, that it wouldn't surprise me in the slightest to find a university somewhere offering a degree in Footnotes and References. Perhaps it

fulfils the same function for lecturers as handshakes and initiation rites do for the Masons. In this study L.J.C. van Dongen, from the University of Turku in Finland, led a team of researchers interviewing 21 “doctorally-prepared nurses,” and doctoral nursing students about their experience of being mentored. Five themes emerged from the interviews which were:

- Preferred characteristics of mentors
- Developing trusting relationships
- Engagement of the mentors
- Becoming a proficient researcher
- Becoming an empowered and confident professional

You can read the abstract of this article at <https://doi.org/10.1016/j.nepr.2023.103744>

[The first time ever I saw your face](#)

Source: Nurse Education in Practice

In a nutshell: One of the many blind alleys our society is currently at the end of, jamming down the accelerator until the bonnet buckles and smoke comes out of the engine, is the idea that feelings derive from thoughts rather than that thoughts are a *post facto* rationalization of feelings. In this study Tracey Simes, from Central Queensland University in Australia, led a team of researchers studying the judgements people made about nursing students during their clinical placements before they received their final end-of-placement assessment. The researchers interviewed 15 clinical facilitators, each with over six months of experience. Six modes of pre-assessment judgement emerged from the interviews which were:

- Recognising patterns
- Acknowledging uncertainty
- Understanding key players
- Verifying or refuting the information
- Benchmarking performance
- Contextualising information

You can read the abstract of this article at <https://doi.org/10.1016/j.nepr.2023.103743>

[I started nursing in the Pandemic and all I got was a pottery aardvark](#)

Source: Nurse Education Today

In a nutshell: Given the huge amounts of research devoted to newly-qualified nurses’ transition into the workplace it’s probably only a matter of time before someone resorts to interpretative dance. We’re not quite there yet, but in this study – led by Kathryn Chachula, from Brandon University in Canada – 13 new graduates

were asked to talk about starting full-time work. “Art-based activities included sand tray and figurine object exercise, collaging, reflective and thematic writing, as well as group-concept mapping.” After analysing the nurses’ labours the researchers concluded that “Participants were in a basic psychosocial process of growing personal and professional self. Through co-construction of knowledge with the participants, three substantive interconnected categories were identified: (1) Being thrown into the fire; (2) Adjusting and adapting to the team environment; and (3) Nurturing self and others.”

You can read the abstract of this article at <https://doi.org/10.1016/j.nedt.2023.105946>

What can nurses learn from Granny?

Source: Nurse Education in Practice

In a nutshell: As one gets older one realises that far from being tired, hackneyed cliches, the homespun wisdom of one’s grandparents actually makes rather more sense than the fashionable nostrums one picks up via a youthful dalliance with *The Guardian*. In this study Dympna Tuohy, from the University of Limerick, led a team of researchers who reviewed the evidence on intergenerational learning in nurse-education programmes. The researchers found nine studies which met their quality criteria, from which four themes were identified:

- Seeing beyond first glance
- Connecting and getting to know each other
- Learning together
- Challenges for intergenerational learning

You can read the abstract of this article at <https://doi.org/10.1016/j.nepr.2023.103746>

In-service education for trauma

Source: Nurse Education in Practice

In a nutshell: Old men who should know better climbing ladders; careless chainsaw operators; over-confident motorcyclists and young boys engaged in ill-advised dalliances with iron railings can all have cause to be thankful to trauma nurses. In this study Maha Almarhabi, from King’s College London, led a team of researchers interviewing 40 ICU clinical staff, 12 managers, nine leaders, and seven clinical educators about in-service training for trauma nurses. Two categories emerged from the interviews: care practice and educational practice. “The care practice category highlighted limited competencies and education in trauma care, as well as the perceived challenges and educational needs of nurses. The education practice category described the staff learning behaviours, supervision practices and in-service education systems in the participants’ settings.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2023.103752>

What do nurses think about sexual health?

Source: Nurse Education Today

In a nutshell: Nurses often get a free pass to ask people about their age, weight, and alcohol consumption – issues commonly greeted with at best a frosty glare and at worst a setting to with a handbag and a pair of stilettos in the rest of society. On the basis that everyone is happy to detail their sexual peccadillos on social media for a few Instagram likes these days sexual health has been added to the list and in this study Jamie L. Russell, from Utah Valley University, led a team of researchers investigating nursing students' attitudes towards this new line of enquiry. 159 students took part in the study which concluded that the students felt they would have too much to do to handle sexual issues; needed to get basic knowledge about sexual health; and that they thought it took time to deal with patients' sexual issues.

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2023.105953>

Compassion and spiritual care

Source: Nurse Education Today

In a nutshell: To a priest spiritual care can encompass anything from reading the last rites to performing exorcisms over a betting shop in Streatham.* Nurses don't act in an official capacity but they are often present at spiritual crises where they find themselves – ready or not – attempting to give spiritual succour to patients. In this study Cevriye Yüksel Kaçan, from Bursa Uludağ University in Turkey, examined the links between compassion and spiritual care in a sample of 440 nursing students. The students scored highly for both compassion and spiritual care and there was a significant correlation between the two.

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2023.105951>

*This has happened. I'm not sure of the effect on the spirit world but, rather pleasingly, the betting shop closed down.

Long-term care and long-distance learning

Source: Nurse Education in Practice

In a nutshell: Many fairground rides now have longer retention periods for their customers than nursing homes do for staff. Training new workers and upskilling those already in post is, therefore, very important and – like much else in life – was something that had to be done remotely during the Pandemic. In this study Catherine Fitzgerald, from the Royal College of Surgeons of Ireland, led a team of

researchers studying this process. They held four focus groups and surveyed 168 people working in long-term care about their experiences of online CPD during the Pandemic. Five themes emerged from the interviews which were:

- Flexibility
- Networking
- Resources and Support
- Engaging and Meaningful Learning
- Balancing Online and Face-to-Face Learning through Blended Learning

32.1% preferred face-to-face learning and 30.4% blended learning. Most reported that “synchronous online CPD education was convenient, flexible, offers the opportunity to interact with peers, and that its quality depends on educators’ skills.

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2023.103774>

Pharmacy Education

[How did secondment work when the world went online?](#)

Source: BMC Medical Education

In a nutshell: Researchers studying the effects of the Pandemic are like those Japanese soldiers who lived on tiny islands in the Pacific and only emerged to surrender in 1954; you just think you’ve seen the last one when another study emerges from the bushes. In this one Bernadette Cornelison and Beth Zerr, from the University of Arizona, studied the difference between a flipped-classroom course taught online during the Covid outbreak and face-to-face beforehand. 118 students took the course face-to-face in 2019 and 125 did it online in 2020. The researchers found no overall difference in the students’ overall exam performance, their final course score, and their “student experience.” The on-campus students did slightly better in “overall quiz performance,” although the difference was small (88% vs 84.4%).

You can read the whole of this article at
<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-023-04581-x>

Psychology Education

Source: BMC Medical Education

In a nutshell: Rather surprisingly it appears there is a lack of evidence into the effectiveness – or lack thereof – of case-based learning in psychology; perhaps based on the worry that “nut,” might inadvertently slip into proceedings somewhere along the way. In this article Fanghui Wu, from the Army Medical University in China, led a team of researchers reviewing the evidence on this topic. They found 15 studies which met their quality criteria, covering a total of 2,172 people. They concluded that

case-based learning led to a significantly better performance on exams and that most students were satisfied with it as a method of teaching.

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-023-04525-5>

Speech Therapy Education

When simulation comes to speech therapy

Source: Sustainability

In a nutshell: Just as physiotherapy isn't always about stretching exercises so speech-and-language therapy doesn't necessarily involve getting people with stutters to endlessly repeat "Peter Piper picked a peck of pickled peppers." It can involve a fair amount of complex technology which isn't always easy to access remotely and can be a barrier to learning when the number of students exceeds the ability to practise on the kit. In this study Patricia Oyarzún-Díaz from the Universidad Santo Tomás in Chile, led a team of researchers investigating the effectiveness of an "open-source software simulator for autonomously developing procedural audiology therapy competencies." The simulator was called SAEF and the researchers found it was able to deliver immediate feedback about the students' performance, with high ratings for validity and user acceptance.

You can read the whole of this article at

<https://www.mdpi.com/2071-1050/15/16/12340>