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Mid Cheshire Hospitals
NHS Foundation Trust

Education Bulletin – June 2026

Compiled by John Gale
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General Healthcare Education

Personality and online learning

Source: Educational Psychology

In a nutshell: Whether personality is innate and immutable or a function of sleep, coffee, and biscuit consumption is a moot point. All I'm saying is that it takes me a flat white and a pint of bitter respectively to get me back to the factory settings for Conscientiousness and Agreeableness. In this study a team of researchers – led by Huanyou Chai from Central China Normal University – investigated the effect of personality on online learning. They carried out a meta-analysis of 61 studies covering a total of 59,497 participants and found that “agreeableness, conscientiousness, and openness were positively associated with cognitive outcomes, while all five traits [the three above, plus neuroticism and extraversion] showed significant relationships with both behavioural and affective outcomes.”

You can read this article at

<https://doi.org/10.1007/s10648-026-10178-9>

How do autistic healthcare students find their placements?

Source: Autism

In a nutshell: In this study a team of researchers, led by Emilie Edwards from Middlesex University, reviewed the evidence on autistic healthcare students' experiences of clinical placements. The researchers found six studies which met their quality criteria from which four themes emerged:

- Autistic profiles
- Sensory environments
- Disclosure and support
- Belonging and inclusion

“Students reported strengths including empathy and attention to detail, alongside challenges like sensory sensitivities and social communication difficulties. Disclosure experiences varied, and a strong sense of belonging was linked to improved mental health and academic success.”

You can read the abstract of this article at

<https://doi.org/10.1177/13623613261427125>

Interprofessional Education

Personality and interprofessional education

Source: Nurse Education Today

In a nutshell: Life can be like the sea when it comes to personality. For some it smooths off the rough edges turning jagged shards of glass into beautiful translucent pebbles; others can find themselves bobbing up and down outside the outfall pipe in a tangled mess of incontinence pads, last year's flip-flops and smoky-bacon crisp

packets. In this study a team of researchers, led by Sofia Hemle Jerntorp from Malmö University in Sweden, investigated the links between personality and students' preparedness for interprofessional learning. The researchers studied 598 healthcare students. 281 of them were studying nursing, 199 medicine, 65 physiotherapy, and 46 occupational therapy. The students' self-efficacy in interprofessional learning were positively correlated with extraversion and conscientiousness, but were negatively correlated with neuroticism. Medical students scored less well on readiness for interprofessional learning but women scored higher than men.

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107193>

Going interprofessional on placement

Source: Nurse Education Today

In a nutshell: You can be the best guitarist in the world, but if you're drunk all the time, constantly quarrel with the other band members, get bored and start playing all the chords in alphabetical order to liven things up a bit you'll probably end up busking behind Caerphilly bus station. In the same way however good nursing students are qua nurse they need to be able to work alongside the rest of the healthcare team. But do they get a chance to do this when they're on placement? In this study Paula Ince, from Australian Catholic University, led a team of researchers reviewing the evidence on this issue. The researchers found 32 articles which met their quality criteria. Interprofessional education varied in length of placement, placement settings, and educational activities. The length of interprofessional placements and activities was linked to a lack of placement availability and how much it cost the hospital. The three main settings for placements were primary health care, nursing homes, and rehabilitation wards. Most of the articles were about multidisciplinary teams created for the purposes of researching interprofessional education. A qualitative analysis of the articles found five themes: Authentic and valuable learning experience; Communication and Collaboration; Constraints and Challenges; Professional Hierarchies; Professional Identity.

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107197>

Medical Education

[Have you really got consent for this?](#)

Source: Patient Education and Counselling

In a nutshell: "Toby's interested in near-death experiences. I was wondering whether you'd like to help us out with that? Blink once for yes, and twice for no." Consent to bedside teaching can be fraught with difficulty and in this study a team of researchers – led by Lucy-Ann O'Kane from George Eliot hospital in Nuneaton –

investigated a “quality-improvement initiative to improve consent and awareness through patient education.” The researchers developed a patient-information leaflet using “adult learning theory and plain language.” There were significant improvements in the number of patients who were aware that participation was voluntary and in the patients’ knowledge of how to raise concerns. Patients’ mean knowledge score rose from 60.8% to 90.8%.

You can read the abstract of this article at
<https://doi.org/10.1016/j.pec.2026.109595>

What do people make of entrustable professional activities?

Source: The Clinical Teacher

In a nutshell: “[You let Dougal do a funeral?!](#)” is one of the more popular cultural references on the internet with a background of fighting relatives, toppling gravestones, and hearses on fire used to call into question anything from Boris Johnson negotiating Brexit, to Liz Truss running the economy, or Ed Miliband crossing the road on his own. In medicine the concept of “entrustable professional activities,” (what you should expect resident doctors to be able to do unsupervised) has often been used as part of their assessment but what do the protagonists feel about it. That was what a team of researchers – led by Elif Bilgic from McMaster University in Canada – investigated in this study. They interviewed 10 resident doctors and 13 lecturers. “Seven themes were identified: (1) Residents and faculty describe changing emotions regarding EPA assessment experiences across implementation stages; (2) Residents and faculty feel uncertain about the educational relevance of EPAs, while procedural EPAs and assessments are perceived as more meaningful for learning; (3) Faculty and residents describe frustration when EPA assessment platforms disrupt workflow and assessment engagement; (4) Confusion and frustration arise when numerical scores do not align with feedback in EPA assessments; (5) Emotions regarding simulation-based EPA assessments depend on perceived authenticity and opportunities for learning; (6) Residents and faculty feel overwhelmed and fatigued when high assessment volume is perceived as misaligned with learning and realities of the clinical setting; (7) Sharing EPA assessment experiences with leadership and colleagues: Not as common as one might think.”

You can read the abstract of this article at
<https://doi.org/10.1111/tct.70449>

Nurse Education

Does “stat and mand,” really make a difference?

Source: Nurse Education in Practice

In a nutshell: Next to “I was just passing B&Q on the way home,” and “I thought we’d start with a few ice-breakers,” nothing chills the blood and freezes the marrow

quite like “I’ve noticed you’re not up-to-date with your “stat-and-mand,” training,” promising as it does to make watching Andy Warhol’s *Empire* look like *Indiana Jones and the Temple of Doom*. In this study Sara Dentice, from the University of Udine in Italy, led a team of researchers reviewing the evidence on “e-learning in healthcare continuing education.” The researchers found 17 studies from 16 countries which met their quality criteria and concluded that “e-learning was consistently perceived as effective in improving knowledge, confidence, attitudes and selected skills, while evidence of practice change was less consistent and only partly documented in routine care.”

You can read the abstract of this article at <https://doi.org/10.1016/j.nepr.2026.104866>

Training nurses to steward antibiotics

Source: Nurse Education in Practice

In a nutshell: Despite being bespectacled, no good at sport, and rather keen on learning I managed to win friends and influence people at school with my magnetic and charming personality. Only joking – I just let everyone copy my homework. Whilst doling out antibiotics like liquorice allsorts can win popularity for the healthcare professions it tends to be frowned upon and in this study a team of researchers, led by Enrique Castro-Sánchez from Imperial College London, carried out “a qualitative study of antimicrobial learning during clinical placements in European nursing education.” The researchers interviewed 17 undergraduate nursing students – 10 from the US and seven from Spain and found that they “found themselves navigating what we describe as an 'educational quicksand', a shifting terrain shaped by hidden curricula and systemic opacity, a disorienting and fragmented learning space marked by unclear roles, minimally structured teaching, workload-driven deviations in practice and sparse opportunities for reflection or interprofessional learning. Overall, four interconnected themes emerged: (1) antimicrobial stewardship is marginalised in both practice and pedagogy; (2) learning is self-directed and fragmented; (3) embodied learning and the role of modelling: between hesitation and enactment; and (4) students aspire to stewardship roles despite systemic constraints.”

You can read the abstract of this article at <https://doi.org/10.1016/j.nepr.2026.104864>

Can NICO soup up nurses’ computer training?

Source: Nurse Education Today

In a nutshell: In addition to being a singer on [The Velvet Underground’s eponymous debut album](#) NICO also stands for Nurse Informatics Competency Organizational – a model which “provides a structured framework for competency development in nursing informatics.” It’s a moot point which endeavour might necessitate the consumption of more drugs to get through. In this study a team of researchers – led by Yuan Chen from Xiamen University in China – studied the

“effectiveness of a NICO model-based nursing informatics course in improving nursing informatics competency among first-year undergraduate nursing students.” 80 students took part in the study. 40 of them “received NICO-based project management training in addition to computer literacy,” whilst the rest “received general computer courses only.” The researchers found that the students who received the NICO training “showed significantly greater improvements in nursing informatics competencies compared with those in the control group... Significant gains were observed in informatics roles, basic computer knowledge and skills, and wireless device competencies... No significant differences were found in applied computer skills or clinical informatics attitudes.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107187>

What do midwifery students make of continuity of care?

Source: Nurse Education in Practice

In a nutshell: With a new arrival due any moment, constant changes of people nominally in charge, and exhausting physical hardship it can be hard to tell the difference between a [Nottingham Forest footballer](#) and an expectant mother although you’d expect the former to be a bit nippier in a 100 yards’ dash. Midwifery continuity of care (MCoC) is designed to provide the same midwife in charge throughout an entire pregnancy and in this study a team of researchers – led by Maria Lindqvist from Umeå University in Sweden – investigated midwifery students’ perspectives on it. The researchers found that “midwifery students held strong and positive views about the importance of MCoC and many were interested in working in such a model. However, some expressed concerns about work-life balance.” Four themes emerged from the students’ free-text responses which were “*Developing confidence in the professional role, Enhancing midwifery skills and expertise, Stronger relational bond and Challenging work conditions.*”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2026.104873>

Does stirring the pot make things come to the boil quicker?

Source: Nurse Education Today

In a nutshell: Opinions vary on stirring chez Gale. Mrs G tends to think that too much stirring prevents things cooking whilst I contend that not enough stirring leaves the washer-upper (Muggins) battling with rock-hard shards of comestibles superglued to the bottom of the pan. In this study Amina Suleiman Rajah, from Bayero University in Kenya, led a team of researchers investigating the merits of these contrasting approaches on nursing students’ academic achievement. Two different cohorts of students took part in the study. One cohort (the no-stirring one, so to speak) received a traditional blend of lectures followed by question-and-answer sessions. The other cohort were poked and prodded with “structured cycles of goal

clarification, guided information seeking, peer sense-making, and formative feedback.” The latter cohort “achieved higher post-test scores and larger gains than the lecture cohort ... and greater mean gain ... and the adjusted between-group difference remained significant after controlling for baseline scores.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107192>

Can you really debrief yourself?

Source: Nurse Education Today

In a nutshell: “Thought it went rather well tonight, darling! Bit of a kerfuffle up in the dress circle in the last Act, but I thought it was going swimmingly up until then,” might well have been one of the “self-debriefs,” given by the cast of *Our American Cousin* prior to the unfortunate business featuring John Wilkes Booth. As the old joke goes “other than that, Mrs Lincoln, how was the play?” In this study a team of researchers – led by Sabrina de Oliveira Carvalho from the Federal University of Piauí in Brazil reviewed the evidence on self-debriefing. The researchers found 13 studies which met their quality criteria. “Self-debriefing was predominantly implemented in virtual simulation contexts and commonly structured through theoretically informed reflective questions. Considerable variability was identified in session duration, instructional guidance, and feedback mechanisms, including video review, simulator-generated reports, and peer input. While self-debriefing was frequently used as the only strategy to promote autonomy, several studies suggested enhanced outcomes when it preceded facilitated debriefing.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107175>

Mobile microlearning and patient safety

Source: Nurse Education in Practice

In a nutshell: In this study a team of researchers – led by Zahra Khosravi from Baqiyatallah University of Medical Sciences – investigated the “effects of mobile microlearning on patient safety competency in nursing students.” 70 nursing students took part in the study. 35 of them “received a one-month patient safety training program delivered through mobile microlearning, including short videos, infographics and concise educational materials shared via social media platforms. The control group received no training during the study period.” The researchers found that the microlearning group “demonstrated significant improvements in total knowledge, attitude and skill scores.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2026.104880>

Time management and deep learning

Source: Nurse Education Today

In a nutshell: Contrasting approaches to time management mean that when Mrs G takes the kids to school they arrive just in time to enjoy their lunch whereas when I take them they stand outside shivering for hours waiting for the gates to open. “Don’t worry darling. You’ll warm up a bit when the sun rises!” In this study Xinyue Niu, from Zhejiang Chinese Medical University, led a team of researchers investigating the links between “time management disposition,” and deep-learning ability in 238 nursing students. The researchers found that “deep learning ability was significantly and positively correlated with time management disposition... and self-efficacy. There was also a significant positive correlation between time-management disposition and self-efficacy, and self-efficacy partially mediated the relationship between time-management disposition and deep learning. Interesting student leadership roles negatively affected deep-learning ability.

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2026.107198>

Preparing nursing students for disaster

Source: Nurse Education Today

In a nutshell: The [Great Storm of 1703](#) blew the roof off Westminster Abbey, led to Queen Anne having to shelter in a cellar, destroyed 5,000 homes in London alone, sank 300 Royal Navy ships and is estimated to have killed at least 8,000 people. Apart from anything else think of all those poor Government officials having to write “lessons will be learned,” over and over again with their quill pens. In this study Merav Ben Natan and Yelena Hazanov from Tel Aviv University reviewed the evidence on “how nursing education programmes prepare students for disaster response, crisis situations, and conflict-related healthcare delivery.” The researchers found 12 studied which met their quality criteria. “Four main domains emerged: disaster preparedness competencies, educational strategies for crisis training, psychological and contextual challenges in crisis and conflict environments, and nursing students' willingness to participate in emergency response. Overall, students reported positive attitudes toward disaster response but variable levels of perceived preparedness and practical competency. Structured training programs and experiential learning approaches were associated with higher perceived readiness.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2026.107194>

Teaching nurses gerontology – is integrated or stand-alone better?

Source: Nurse Education Today

In a nutshell: If beer and tea can be adduced as proof that God loves us and wants us to be happy then surely marzipan can’t be far behind? In a [Simnel cake](#) marzipan is present both melted into the body of the cake and plastered over its top. But is

integrated or stand-alone the best way of teaching nursing students about looking after older people? That was what a team of researchers – led by Kelly Henrichs from the University of Colorado College of Nursing – investigated in this study. They compared two groups of students. One group took a stand-alone gerontology course whereas the other group had gerontology integrated throughout the curriculum. The researchers found that “students in the stand-alone course achieved significantly higher knowledge scores and more positive attitudes toward older adults across all time points compared to those in the integrated curriculum. While both groups showed improvements in knowledge and attitude over time, attitude consistently predicted stronger intent to work with older adults.” One statistical model found that the more students knew about older people the less inclined they were to work with them. However, “most intent questions remained stable across time points, with some showing slight declines six months after graduation.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107196>

Innovation, creativity and self-directed learning

Source: Nurse Education Today

In a nutshell: “I cannot do with any more education, Jeeves,” says Bertie Wooster in response to Jeeves’ suggestion that “travel is highly educational.” “I was full up years ago!” I feel much the same way about innovation having become full up some time between the zenith of [Britpop](#) and the unravelling of Blairism. In this study Xinjun Jiang, from Hainan Medical University in China, led a team of researchers investigating the links between self-directed learning ability, creative self-efficacy and innovative ability in a four-year study of 163 nursing students which tracked them from their first year to their graduation. The researchers found that “self-directed learning ability demonstrated sustained associations with innovative ability across four academic years, whereas creative self-efficacy was more strongly associated with innovative ability during the early stages of nursing education.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107189>

The loneliness of the long-distance learner

Source: Nurse Education in Practice

In a nutshell: Students used to go to university meet lots of people and emerge, debt-free, ready to take on whatever the job market could throw at them*. Now they sit in their rooms hooked up to Zoom, graduate with liabilities that would make [Enron](#) blush, and have to work at a petrol station to save up for the MA, that, so the brochure says, will “make all the difference in the job market.” Well, that’s progress for you I suppose. In this study a team of researchers – led by Stacey D. Green from the Joe C. Wen UCLA School of Nursing in Los Angeles – investigated “social isolation in remote nursing education.” The researchers reviewed all the evidence and concluded that “there is a significant correlation between loneliness and

impaired social and academic functioning among learners in remote nursing programs, mirroring loneliness and social isolation in the workforce. Specific interventions are identified as effective in enhancing social connections and providing support. The review highlights the necessity of integrating social interaction strategies into online curricula.”

*In my case bugger all, but perhaps, on reflection, the job market was right.

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2026.104881>

Thumbs up for AI?

Source: Nurse Education in Practice

In a nutshell: When AI writes the syllabuses, sets the questions, prepares the slides, and marks all the work lecturers’ jobs will be safe because of the warm relationships they have with, and added value they can give to, the students. Well, OK, if you say so... In this study Linda Nugent, from Fakeeh College of Health Sciences in Saudi Arabia, led a team of researchers attempting “to map current evidence on AI integration in nursing education, identifying pedagogical applications, learning outcomes, future research directions.” The researchers found nine studies which met their quality criteria. “AI tools including ChatGPT, MindMeld NLP and Deepgram were applied mainly as pedagogical enhancers providing simulation, adaptive feedback and reflective learning support. Five themes emerged: (1) knowledge and skills development; (2) self-efficacy and confidence building; (3) clinical reasoning and decision-making; (4) communication and empathy; and (5) engagement and pedagogical acceptability. Collectively, these studies demonstrated consistent improvements across cognitive, affective and behavioural learning domains.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2026.104878>

Teaching nurses to talk to parents

Source: Nurse Education in Practice

In a nutshell: Compared to a club with gin-and-tonic and dry-roasted peanuts on tap a room full of incubators – one of them containing a small child belonging to one of the participants – might not be the best place to start up a conversation; especially as “going anywhere nice for your holidays this year?” might precipitate the answer “here.” In this study a team of researchers, led by Tahani Almkhlafi from Queen’s University Belfast, evaluated the evidence on “educational interventions used within neonatal intensive care units globally to enhance communication between nurses and parents.” The researchers found 13 studies which met their quality criteria. An analysis of the studies elicited three themes which were:

1. The design of an intervention influenced its effectiveness, particularly through the use of explicit theoretical frameworks and the extent of stakeholder engagement
2. Interventions employing experiential learning approaches were generally effective, but their impact in practice was constrained by feasibility challenges and systemic barriers, such as a high clinical workload
3. The quality of the evidence base was impaired by methodological weaknesses, including an over-reliance on self-reported outcomes, small sample sizes and short-term follow-up.

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2026.104879>

Are you ready for micro-credentials?

Source: Nurse Education Today

In a nutshell: With time at a premium and attention spans shrinking even the celebrated elevator pitch (in itself only a few notches up from wetting yourself in a lift) has probably been trimmed back to two floors max. In this study Jakob Renko, from the University of Primorska in Slovenia, led a team of researchers examining the ins and outs of micro-credentials (MCs). 19 people were interviewed for the study which found that “the most commonly mentioned potential challenges of MCs implementation were the regulation of knowledge output, accreditation of MCs, funding, and a lack of workplace communication. The most frequently occurring opportunities and advantages were the accessibility of education and training, competence improvement, career development, and standardisation.” The researchers concluded that “MCs could help develop better competence in specialised fields of healthcare, individual interventions, and non-technical skills, as well as fields that are not strictly related to nursing, such as management and mentor training.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107199>

Is incivility just an opportunity to learn?

Source: Nurse Education Today

In a nutshell: “I know Mr Jenkins said you’d got a fat bottom, but there’s no need to squirt some raspberry juice into his bedpan and tell him he’s got prostate cancer.” However provoking the patients incivility tends to be frowned upon in the nursing profession but should it be regarded as an opportunity to learn rather than a behaviour to be corrected? In this study Luzviminda Banez Miguel, from the University of Hawai’i, adopted this approach in a study of 37 nursing students. The students prioritized relational communication behaviour and “professionalism enacted through fairness.” Four qualitative themes emerged from the research which were: Relational presence; Fairness and consistency; Clinical credibility through humility; and Psychological safety. The study concluded that “the [Aloha](#)

[Spirit](#) functions as a pedagogical ethic of reciprocity and compassion that transforms technical standards into transformative practice. Student incivility should be reframed as a ‘diagnostic signal’ to evaluate the relational climate rather than a mere behavioural issue. International faculty development must move beyond instructional technology to prioritise emotional intelligence and conflict resolution, fostering environments where both educators and learners can thrive.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2026.107211>

[Are nurses ready to care in the community?](#)

Source: Nurse Education Today

In a nutshell: With the community ranging from Earl Grey and lavender shortbread with a retired paediatrician in Castle Combe to changing a colostomy bag for a retired plasterer in Peckham it’s hardly surprising that not all nurses feel adequately prepared for community nursing. In this study Qiuping Tang, from Southwest Medical University in China, led a team of researchers investigating the theory-practice gap in “undergraduate community nursing education.” The researchers interviewed 15 nursing students who had finished their two-three week community placement. Three themes emerged from the interviews which were: “(1) gaps, manifesting in individual competencies, pedagogical aspects, and healthcare system; (2) factors, including individual aspects, environmental aspects, and systemic issues; (3) strategies, focusing on enhancing talent development, adjusting teaching plans, and building collaborative mechanisms.” The researchers concluded that the theory-practice gap was “primarily influenced by factors such as the disconnect between theoretical and practical curricula, uneven teaching quality, and insufficient support from community institutions.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2026.107215>

[New nurses’ transition to the workplace. Part 3714](#)

Source: Nurse Education Today

In a nutshell: Overcrowding can often turn wards into a cross between the games of “[sardines](#),” and “hide and seek” (“Did somebody drop Mrs Rowbotham on you Mr Perks or did you crawl under her yourself?”). It’s hard not to imagine this isn’t made worse by the fact that every new graduate nurse starting work seems to be accompanied by about half a dozen researchers investigating the quality of their transition to this new state of affairs. Adding to the pile, so to speak, were this team of researchers led by Megan Ann Wise from Princess Alexandra Hospital in Australia. The researchers studied 521 new nurses and 1,142 of their performance appraisals garnered at three different times. The nurses’ average scores increased significantly with “comprehensive nursing practice,” showing the largest improvement over time. Previous employment - either within or outside healthcare – made no difference to how the nurses adjusted to life on the wards. However training

programmes with “integrated postgraduate education ... demonstrated statistically significant improvement trajectories across all domains.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107213>

New nurses’ transition to the workplace. Part 3715

Source: Nurse Education Today

In a nutshell: In this study Yichen Geng, from Hunan Normal University in China, led a team of researchers investigating the “transition-shock trajectories,” of new nurses. Did they take off quickly and soar through the air like an F-35 launched off an aircraft carrier or land with a thud like a [dead donkey fired over the walls of a castle by a trebuchet](#)? The researchers studied 826 new nurses who answered surveys at weeks four, 24, and 40 of their first job. The researchers indentified three trajectories:

1. Low-shock stable group (45%)
2. High shock at first falling later (32%)
3. High shock the whole time (23%)

Lower psychological capital and higher levels of bullying were associated with the permanent high-shock category.

You can read the whole of this article at
<https://doi.org/10.1016/j.nedt.2026.107225>

Risk perception, professional identity, and patient safety

Source: Nurse Education Today

In a nutshell: “If you could just hold the hypodermic between your teeth and press down on the bit of cotton wool with one hand while I try and find the end of this piece of sellotape. It’s always tricky without my glasses. Try not to breathe in ... oh, too late!” Risk perception can be an important part of life as a nurse and in this study – led by Afen Zheng from Wenzhou Medical University in China – a team of researchers investigated the link between risk perception, professional identity and patient safety competency in a sample of 204 nursing postgraduates from five universities. The researchers found that “adverse event risk perception, professional identity, and patient safety competency were all positively correlated with each other.” Risk perception and professional identity were “significant positive predictors of patient safety competency,” and professional identity “partially mediated the relationship between adverse event risk perception and patient safety competency.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107216>

Looking after the dead and dying

Source: Nurse Education Today

In a nutshell: In *The Kipper and the Corpse* Basil Fawlty delivers breakfast in bed to a guest who has died in the night. When a doctor asks him why he hasn't noticed he replies "I'm just delivering a tray, right? If the guest isn't singing, 'Oh, what a beautiful morning,' I don't immediately think, 'There's another one snuffed it in the night. Another name in the Fawlty Towers Book of Remembrance.'" You'd hope nursing students would cope better with this kind of thing and in this study a team of researchers, led by D. G. Bove from Roskilde University, asked 18 nursing students all about it. Three themes emerged from interviews with the students which were:

- Death is minimized and often concealed from students in the ED
- Facing death: emotional impact and the absences of support
- Caring in the absence of guidance and rituals

The researchers concluded that "the findings reveal a significant gap in nursing education, where care for dying or deceased persons and their relatives remains marginalized despite its clinical relevance. Addressing this gap requires the integration of structured and supportive learning opportunities into nursing curricula, including simulations, supervised practice, and emotional debriefing, to help students develop the knowledge, skills, and emotional resilience needed to provide high-quality care for dying individuals and their bereaved relatives in emergency settings."

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2026.107223>

Proactive personality, deep learning and innovation

Source: BMC Nursing

In a nutshell: If it wasn't for proactive people engaging in innovative behaviour we could all be communicating with one another in the language of Shakespeare, Dickens, and PG Wodehouse now instead of using words like "utilise," and "advancements," and grunting digitally at one another with emojis. Some people still have a child-like faith in the idea of progress though and in this study Qing Guan and Lina Meng from Harbin Medical University investigated the links between proactive personality, deep learning, and innovative behaviour in a study of 1,885 nursing students. The researchers found that proactive personality had a significant positive correlation with the deep-learning approach which, in turn, was linked to innovative behaviour. Deep-learning mediated 38.98% of the relationship between proactive personality and innovative behaviour.

You can read the whole of this article at

<https://doi.org/10.1186/s12912-026-04609-9>

Are there no limits to the marvels of mindfulness?

Source: Nurse Education in Practice

In a nutshell: If you were to draw up a league table of restful holiday destinations Somalia might not be in the top 10. It would probably nestle a bit lower down the table somewhere between the *Icon of the Seas* (fat German men in budgie smugglers) and Blackpool Pleasure Beach (Grandma losing her false teeth on the roller-coaster). But could mindfulness help nursing students there? In this study Fadime Kayuncu from the University of Health Sciences in Ankara, and Bugse Yuceer from Bremen University studied the effects of mindfulness on 44 nursing students. 22 of them did some mindfulness whilst the rest were a control group. The mindfulness group too part in a “three-week, culturally adapted mindfulness-based programme delivered online.” The researchers found that “compared with the control group, students in the intervention group demonstrated a significant reduction in perceived stress and significant increases in psychological resilience and academic self-efficacy over time.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2026.104888>

What makes people remember life-support training?

Source: Nurse Education in Practice

In a nutshell: “What rhythm was it again? The Blue Danube Waltz, Dancing Queen, Firestarter? And who was the actor in the video? Was it Vinnie Jones, Danny Dyer, Ray Winstone? I hope the person filming it on their mobile isn’t going to stick it up on YouTube I haven’t had a shave this morning,” are all thoughts liable to run through your head while you contemplate the ins and outs of giving CPR to someone. In this study Tara Kelly and Linda Devaney from Atlantic Technological University in Sligo reviewed the evidence “relating to the retention of cardiopulmonary resuscitation (CPR) skills and knowledge following Basic Life Support (BLS) training among nurses.” The researchers found 13 studies which met their quality criteria. “Three themes emerged: skill decay post-training, particularly in compression depth and ventilation accuracy; the impact of training intervals, with shorter, more frequent sessions associated with greater retention; and the effectiveness of technology-enhanced training. Tailored training and real-time feedback supported skill retention.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2026.104889>

Social and emotional learning in nurse education

Source: Nurse Education Today

In a nutshell: Human beings are social creatures who depend on the emotional bonds they form with others to nurture and sustain them. At least until Elon Musk comes up with a “mute,” button we can deploy during the World Cup. In this study Yoonjung Ji, from Gachon University in Korea, led a team of researchers who

examined “the social and emotional learning essential for nursing students and nurses within the Collaborative for Academic, Social, and Emotional Learning framework.” The researchers reviewed the evidence on this topic and found 18 studies which met their quality criteria covering 2,952 people. The researchers found that “social and emotional learning was consistently associated with enhanced adaptation, communication, leadership, relationships, and clinical performance. Effective strategies included blended learning, simulation, reflective activities, and mentorship, which are aligned with Generation Z’s learning preferences.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107221>

What do nurses learn from going to prison?

Source: Nurse Education in Practice

In a nutshell: Those looking for a connection between nurses and prison need look no further than Ronnie Barker, locked up in the former in [Porridge](#) and lusting after the latter in [Open All Hours](#). Investigating nurses in prison were a team of researchers, led by Mariela Aguayo-González from the autonomous university of Barcelona. They interviewed 20 second-year nursing students about their experience on placement in a prison. Three themes emerged from the interviews:

1. Students’ personal development as mediated by exposure to non-traditional care contexts
2. Service-Learning as a meaningful approach, which facilitated the development of non-clinical competencies—particularly empathy, cultural competence, social responsibility, teamwork and reflective capacity—through real-world application and reciprocal learning
3. Understanding the culture of correctional settings, characterized by a trajectory from transformative insecurity to the humanization of incarcerated individuals, supported by key relational and institutional factors.

The researchers concluded that “service learning in prison settings fosters non-clinical competencies through structured reflection and community engagement, transforming students’ initial insecurity into meaningful learning. This innovative approach challenges assumptions about incarcerated individuals while requiring pedagogical support for emotional safety and maximum educational impact.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2026.104890>

Sticking a patient in the Gibbs reflective cycle

Source: Nurse Education in Practice

In a nutshell: There can be few health librarians who haven’t been mithered about the [Gibb’s reflective cycle](#) at one point or another. Bundle it up with the [Kirkpatrick model](#) and [Kolb’s learning styles](#) and you’ve pretty much got the pedagogical

equivalent of a Happy Meal. In this study a team of researchers – led by Cansu Polat Dünya, from Istanbul University – investigated what happened when a patient was thrown into the mix. 30 second-year nursing students took part in a session where a patient with multiple sclerosis talked about what it was like having the condition. Afterwards the students wrote “individual reflective reports structured around the six stages of Gibbs’ Reflective Cycle (description, feelings, evaluation, analysis, conclusion, action plan). Four themes emerged from the nurses’ reports which were:

1. Exploring the individual and psychosocial dimensions of illness experience in professional learning
2. Emotional transformation and empathy development
3. Encountering real life at the limits of theoretical knowledge
4. Professional nurse approach and action planning

The students reported “heightened awareness of daily-life losses and uncertainty, stronger empathic and ethical sensitivity, recognition of the theory–practice gap and the need for individualised, holistic care. Reflections also included concrete intentions for future communication, psychosocial support and patient empowerment.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nepr.2026.104887>

Agreeableness, conscientiousness and empathy

Source: Healthcare

In a nutshell: “Ooh, I know. I nicked the tip of my finger doing the filing the other day. They do say ‘there’s nothing worse than a paper cut’” is not, perhaps, the best way to approach someone who’s come off worse in a quarrel with a chainsaw. In this study a team of researchers – led by Sonia Prieto de Benito from the University Hospital of Valladolid in Spain – investigated the links between personality, resilience and empathy in a sample of 66 third- and fourth-year nursing students. The researchers found that higher levels of agreeableness were associated with higher total clinical empathy and perspective-taking and that higher conscientiousness was associated with higher total empathy, perspective-taking, and compassionate care. Resilience was not found to be associated with empathy.

You can read the abstract of this article at
<https://doi.org/10.3390/healthcare14111454>

The ins and outs of Erasmus

Source: Nurse Education Today

In a nutshell: Although [Erasmus](#) got around a bit all his travel – by horse, coach, or boat – was green. He didn’t get an onboard buffet or complimentary peanuts although he was spared rail-replacement services and oafs playing TikTok videos to the rest of the carriage. What he would have made of students jetting all over the

shop on the [Erasmus scheme](#) is anybody's guess but in this study a team of researchers – led by Giuditta Pantaleo from the University of Rome Tor Vergata – investigated how nursing students found it. The researchers reviewed eight studies on this topic and found that students went away for between one and three months. Destinations included the UK, Turkey, and Northern Europe. “Reported outcomes included language improvement, cultural adaptation, and autonomy development, alongside language barriers and disparities in clinical assessment methods.”

You can read the abstract of this article at
<https://doi.org/10.1016/j.nedt.2026.107224>