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## Keynote speakers

### Social care nursing: The land of opportunity

Deborah Sturdy CBE, Chief Nurse for Adult Social Care, Department of Health and Social Care

#### Biography

Deborah was appointed as the first Chief Nurse for Adult Social Care in 2021. She has held a number of previous roles including senior posts in practice, research and policy, in both social care services and the NHS. She was appointed the expert nurse on the Gosport Independent Panel the report of which was laid before Parliament in 2018.

She is a passionate care sector advocate and believes the workforce is its greatest asset. Developing careers, opening new pathways of opportunity and boosting recognition of care colleagues' skills, value and expertise are, in her view, vital to the future success of the profession.

She holds two Visiting Chairs in Nursing at Manchester Metropolitan and Buckinghamshire New Universities. Deborah has written numerous papers for publications and presented at national and international meetings.

She was awarded a CBE in the 2023 Honours list and an OBE in the 2017. She is a Fellow of the QNI and RCN and received the British Geriatric President's Medal for her contribution to older people nursing the first nurse to receive this.

### Nursing education: future policy direction and expansion to meet health and care needs

Professor Mark Radford CBE, Deputy Chief Nursing Officer & National Director of Intensive Support, Former

Chief Nurse of Health Education England

#### Biography

During the COVID-19 pandemic, Mark led the national NHS vaccine workforce program ensuring the success in phase 1 delivery of 15m vaccinations. In his role Mark supports the Chief Nursing Officer in ensuring the NHS workforce is fit for the future. Mark was also honoured with a CBE in The Queen's New Year Honours 2022 list

### Oliver's Story and The Oliver McGowan Mandatory Training on learning disability and autism.

Paula McGowan OBE, Founder of the Oliver McGowan Campaign

#### Abstract

The Oliver McGowan Campaign was founded by Paula McGowan following the death of her son Oliver.

Oliver McGowan died after being given anti-psychotic medication despite medical staff being told repeatedly by Oliver, his parents and other medical staff that knew him well, that he had reacted badly to it in the past. The drug caused his brain to swell severely, and he died in intensive care.

Oliver's death shone a light on the need for healthcare professionals to have a greater understanding of autism and learning disabilities, as well as improved skills and confidence when delivering care. As a result, Paula has campaigned and succeeded in making training in learning disability and autism mandatory for healthcare staff.

In collaboration with Philippa Spicer from Health Education England, Paula's presentation will provide insight into Oliver's life, the lessons learnt from his untimely death, and her campaign to bring The Oliver



McGowan Mandatory Training in Learning Disability and Autism to fruition.

## Biography

Paula McGowan grew up in Liverpool and is married to Tom McGowan who is a Senior Officer in the Air Force. Paula is an early year's teacher and specialises in children who have additional needs.

Paula is a multi award-winning activist who has dedicated her life to campaigning for equality of Health and Social Care for Intellectually Disabled and or Autistic people. She is an ambassador for several charities and organisations. In 2018, Paula successfully launched a parliamentary petition asking for doctors and nurses in England to receive mandatory training in Learning disability and Autism awareness. As a direct consequence Government announced that Health and Social Care Staff would receive The Oliver McGowan Mandatory Training in Learning Disability and Autism.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/844356/autism-and-learning-disability-training-for-staff-consultation-response.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/844356/autism-and-learning-disability-training-for-staff-consultation-response.pdf)

In June 2021 Paula was conferred into the Membership of The Most Excellent Order of the British Empire and was appointed Officer of the Order of the British Empire (OBE) to reward outstanding service to People with Autism and Intellectual Disabilities.

Paula continues to work with Government, Health Education England and Skills for Care in the design and development of Oliver's training. She speaks at universities, medical schools and hospital trusts across the Globe. Recently Paula spoke for The Australian Royal Commission hearing 6, Psychotropic medication, behaviour support and behaviours of concern.

Paula has co-authored several papers which have been published in the [British Medical Journal](#).

## Talk DARE TO Creating AntiRacist Environment Understanding the lived experiences of Black, Asian and Minority Ethnic minority students and nurses in Higher Education

Professor Winifred Eboh, Professor of Nursing and Director of Staff Development and Wellbeing, School of Health and Social Care, University of Essex

### Abstract

The DARE TO CARE website was developed collaboratively with staff and students at the School of Health and Social Care in the University of Essex. Its development was sparked by the brutal killing of George Floyd on the 25 May 2020 in the USA. The university and the school formed working groups to hear from staff and students about their experiences of racism. These contributions along with experiences shared by Black students over many years in academia were central to DARE TO CARE website and informed scenarios used to depict situations where students had been discriminated.

With the funding from Health Education England (HEE), we felt that a website would produce a lasting and far reaching resource that could be a catalyst to bring about meaningful conversations about racism and lasting changes within healthcare: <https://www.essex.ac.uk/departments/healthandsocialcare/daretocare>

### 3 learning outcomes

1 To provide clear examples of what 'racism' looks like within healthcare settings.

2 To identify ways that we can challenge racism in the learning environment.

3 To understand what true allyship entails.

### Biography

Winifred is a nurse and midwife who has taught in Higher Education since 1998. Winifred's PhD looked at screening services for the haemoglobinopathies and awareness of this group of disorders amongst frontline practitioners. She advocates for the inclusion of sickle cell and thalassaemia in nursing and midwifery curriculum. Laterally, Winifred worked with colleagues at the School of Health and Social Care to develop a website that highlights discrimination experienced by Black, Asian and Ethnic minority students in higher education. She successfully secured funding from HEE to develop this website that offers insight into experiences of racism amongst health professionals, namely nurses in healthcare

<https://www.essex.ac.uk/departments/healthandsocialcare/daretocare>

## RCN Education Learning and Development Strategy 2021-2024 – An update

### Speakers:

Dr Nicola Ashby, Deputy Director of Nursing: Education, Research and Ethics

Andrea Childe, Professional Lead – Education, RCN

### Abstract

The RCN Education, Learning and Development (ELD) offer will enable the development of a competent and capable workforce influencing, leading

and delivering person-centred, safe and effective health and social care. The RCN strategy supports the growth, recruitment and retention of the entire workforce. 43 words

### Strategic aim 1:

We will provide professional leadership, education, personal development, clinical and research opportunities that enable the nursing workforce throughout their career across health and social care, to have a positive impact on patient care, safety, experience and evidence-based outcomes.

### Strategic aim 2:

We will develop an RCN education centre of excellence, utilising innovative delivery platforms through face to face, blended, online, virtual, digital, work and practice-based learning methods, to enable ease and equity of access to resources.

### Strategic aim 3:

We will assure the quality, effectiveness, and benefits realisation of ELD resources and events which provide Continuing Professional Development and Lifelong Learning opportunities for the whole nursing workforce.

Achieving these objectives will enable to RCN/RCNi to deliver a transformational, innovative and responsive professional offer of learning and development in our role of a Professional Body and Trade Union, raising the voice of nursing and establishing further the art and science of nursing as an innovative, responsive and evidence-based profession.

<https://www.rcn.org.uk/Professional-Development/education-learning-and-development-strategy>

### **Biography – Dr Nichola Ashby**

Dr Nichola Ashby is the Deputy Director of Nursing, Education, Research and Ethics, at the Royal College of Nursing. She strategically leads organisational delivery of the RCN education, learning and development offer, research, International Diaspora and student membership across the UK. Nichola influences through the development of global health policy and representing nursing and nurses from across the entire health and social care provision. She is also an Associate Professor at Nottingham University (hon).

The representation of the nursing voice is essential to embedding nurse leadership across UK health and social care delivery and she represents the RCN 450,000 plus members voices working closely with regulators, Professional Bodies, UK senior stakeholder groups and Governments. Nichola sits on the steering and advisory groups leading care audit and strategic planning, such as the National Clinical Enquiry of Outcome and Clinical Death.

As an active researcher, Nichola's PhD explored the stigmatising attitudes values and beliefs of healthcare workers towards iatrogenic infections, and she has developed a longitudinal educational model. She is a Senior Fellow of the Higher Education Academy. She continues to actively support research into student experiences of learning during Covid 19.

### **Biography – Andrea Childe**

Andrea Childe is a UK Professional Lead Education at the Royal College of Nursing. Andrea leads the RCN Education Learning and Development (ELD) Strategy in the development of RCN Learn. She is a Registered Nurse

and qualified educator working within the wider RCN ELD team to develop and deliver the RCN ELD offer to the nursing health, and social care workforce.

Andrea has career experiences in different health environments, including the NHS, Supporting the British Armed Forces in Germany and Cyprus. These experiences motivate and inspire Andrea to represent the voice of the nursing workforce when developing and delivering nurse education. She has worked as a national and international lead across the UK with teams delivering nursing care and activism

## Sponsored sessions



### Blended Learning UK

#### Learning through innovation

##### About

As a result of the Covid-19 pandemic, online learning has become more commonplace. Blended Learning UK have been providing blended education solutions for over 10 years and are global leaders in delivering cutting edge CPD and Master's level courses, winning many National awards.

We are acknowledged as a Centre of Excellence by Healthcare UK (NHS) based on excellent student feedback of 90% and the positive impact of our courses on clinical practice.

Our courses promote critical thinking and improved decision making. Our aim is to support the delivery of safe and effective care by providing excellent online, flexible training courses to educate, support and develop staff.

The main benefit of online learning is the convenience it offers - you can learn in your own environment, at your own pace, and at a time that suits you.

##### **By the end of this session attendees will be able to:**

- Demonstrate an understanding of the term 'blended learning'
- Describe the range of virtual e-learning tools available for healthcare professionals
- Understand how blended learning can promote nursing career development

##### Speakers:

Professor Jerome Pereira, Executive Director Blended Learning UK | Trust and Programme Director, James Paget University Hospital NHS Foundation | Specialist Masterships in Surgery Programmes, University of East Anglian Norwich

Yvonne Hacon, Project Manager for Blended Learning UK | James Paget University Hospital NHS Foundation



### My Knowledge Map

#### How an ePAD improved student placement support, engagement and retention

##### About

At Anglia Ruskin University the adoption of an electronic practice assessment document (ePAD) by MyKnowledgeMap improved interconnectivity between academics, students and mentors, resulting in active participation by mentors and academics throughout the practice assessment process. This session will present evidence, from case study research, that the use of innovative technology resulted in more timely completion of assessment, particularly formative practice assessment. This contributed to increased student nurse retention. This session will provide insight into how to overcome the challenges of adopting an ePAD and the benefits that digital practice assessment can provide including supporting an increase in placement capacity.

##### **By the end of this session attendees will be able to:**

- Understand the benefits of an electronic practice assessment document for enhancing support for

student nurses in practice and improving the assessment process.

- Gain insight into some of the challenges in adopting an ePAD and how to overcome them.
- Develop insight into how the application of Lave and Wenger theory Communities of Practice (1991) explains how technology such as an ePAD is legitimised within nursing practice.

### Speaker

Dr Sian Shaw, Associate Professor Digital Innovation in Nursing, Anglia Ruskin University



## NMC

[Theme: 1.5 Improving mental and physical health.

The impact of the COVID-19 pandemic has highlighted the need for strategies to improve mental and physical health wellness, and wellbeing. Abstracts will focus on education, learning and development, compassionate leadership, and evidence of outcomes for improvement in mental and physical health and wellbeing.]

The four fields of nursing and holistic person-centred care.

Nursing practice today is different from a decade ago and we know it will change even more in the next ten years. Our new standards of proficiency for registered nurses have been in use since 2018; they are ambitious and focus on outcome- based requirements for the Future nurse.

**Using our new standards as a resource, this presentation aims to:**

- Improve understanding of how the holistic standards apply to the four fields of nursing in all care settings
- Help supervisors and assessors to support learners' experiences of holistic approaches to person-centred care across the four fields
- Explore the holistic standards and how they can be used for Revalidation

**By the end of this session participants will be able to:**

- Understand the holistic style of the new standards and the importance of working with the 'whole person'
- Apply holistic thinking to a variety of approaches to student support, learning and development and identify opportunities for learning and Continuing Professional Development (CPD)
- Have the opportunity to discuss meeting the standards in practice
- The standards of proficiency for registered nurses are grouped together under seven platforms:
- Being an accountable professional
- Promoting health and preventing ill health
- Assessing needs and planning care
- Providing and evaluating care
- Leading and managing nursing care and working in teams
- Improving safety and quality of care
- Coordinating care

The standards also include two annexes, one focuses on communication and relationship skills and the other on nursing procedures. The level of expertise a nurse needs in each skill depends on what area of nursing they will register in.

This presentation focuses on providing information to help with implementing the educational and practice standards (standards for student supervision and assessment -SSSA) to enable holistic person-centred care across the four fields of nursing.

### Speakers

Wendy Fowler and Julie Dixon, Nursing Education Advisers, Nursing and Midwifery Council

## Successful submissions

### #19 “What is the Hospital based Advanced Nurse Practitioners’ Perceptions on their role in general?”

#### Authors

Mrs. Abigail T Zvakaramba - Milton Keynes University Hospital

#### Aim of paper

To explore the general perceptions of the Advanced Nurse Practitioner (ANP) and Advanced Clinical Practitioner (ACP) roles in hospital-based practices.

#### Abstract

**Background:** The nurse-based ANP role has been in practice since the 1980s, with the multi-healthcare professional ACP roles being introduced as recent as 2017. Unlike some countries like Ireland, the NMC, (2018) has not warranted a separate register for advanced nurse practice, thus leaving the ANP/ACP without a clear scope of practice

and with very grey boundaries of autonomy (HHE, 2017). This has left not only the ANPs/ACPs/ACP trainees, in a state of uncertainty and fear, as they lack the understanding to their role, but the rest of the multi-disciplinary teams (MDT), asking questions of what their advanced practice role entails or where the “nurse ends, and the doctor begins”? The lack of in-house role underpinning policies, guidelines, and adequate management support, has only made the role ambiguity worse, thus leading ANPs to report a lack of job satisfaction, and feeling of being between two roles: “neither nurse nor doctor”, thus causing detrimental psychological and physiological effects to their health.

**Design:** A literature review of empirical, peer-reviewed, qualitative studies, that were conducted with the aim of exploring the perception of the hospital-based ANP/ACP on their role in general. To be current and relevant, the literature age was kept to 10 years and below, and international literature relevant to the topic was included.

**Methods:** A thematic analysis of chosen literature was conducted through the 6 stages process as per Braun & Clarke (2006).

**Results:** Five over-arching themes were identified, which were: Role identity and ambiguity, ANP Regulating body and role guidance policies, Autonomy and fitting into teams, Management support, and Stress effects to ANPs.

**Conclusion:** It was evident that all 5 themes are intertwined and cannot be separated to ensure a well-formulated, well-informed, clearly defined, and functional ANP/ACP role in a hospital-based practice.

#### Biography - Abigail T Zvakaramba

This work was completed as part of a now-completed MSc ACP programme by the author, who has been practising at an Advanced Level for over 8 years at an NHS



Hospital, both in Emergency Care and acute care level.

## #21 The Trickle Approach: a pedagogical innovative for pre-registration nursing placements

### Authors

Mrs. Alice Girling - University Hospitals Dorset NHS Foundation Trust

### Aim of paper

- To present a new, innovative approach to placement provision for pre-registration student nurses at a large acute NHS Trust
- To share the successes and learning from the roll out of The Trickle Approach during the Covid pandemic, including how it has improved retention, placement capacity and placement experience
- To outline how this model can be applied to the wider healthcare community to produce professionals ready for practice at the point of registration, and to improve early career retention

### Abstract

In response to the Emergency Standards for Nursing and Midwifery Education during the Coronavirus pandemic, 110 student nurses from four HEIs joined a large acute hospital in South West England in 2020 in an extended 12-week placement, with a further 89 opting-in in February 2021.

The Trickle Approach, consisting of four pillars; **Transformational Learning, Resilience, Coaching, and Long-Arm Assessment** was implemented to protect the psychological wellbeing of these students, whilst supporting diverse learning needs and outcomes.

195 students passed all learning outcomes, three required a four-week extension to meet medicines management competencies,

and one was referred on grounds of professionalism and leadership. 100% retention was achieved throughout the extended placement. Placement capacity increased by 35% and has been maintained.

Critical analysis identified that the quality of learning environments is key to transformational learning, with immersive simulation experiences producing high learner satisfaction. Compassionate pedagogy through meaningful pastoral support is a protective factor for learner resilience and improves retention. Coaching principles when used as a model for encouraging critical thinking and problem solving engages the students as co-creators of their education. Reciprocal Peer Teaching develops professional identity and improves employability through a social constructivist lens. Long-arm assessment is an emerging concept in nursing education, and proactive measures are indicated to include students as partners.

Recommendations for practice and policy include collaboration with key stakeholders to establish The Trickle Approach as a substantive work-based-learning model. Formal empirical research is indicated to establish measurable impact of the four pillars of the Trickle Approach.

Conclusion: The Trickle Approach is an emergent, innovative pedagogical method of meaningful pastoral and educational support for the pre-registration nursing students that warrants further exploration and enquiry. The model enables employability, learner autonomy and agency, and effectively prepares them for professional practice at the point of registration.

### 3 learning outcomes

1. Comprehensive understanding of the four pillars of The Trickle Approach
2. Analyse how The Trickle Approach will apply to the wider student and learner



population to enable application in diverse settings

3. Understand the contextual factors and challenges which can occur during the implementation and operational leadership of The Trickle Approach

### **Recommended reading titles (please enter up to 3)**

Evans, C., Muijs, D., Tomlinson, D. 2015. Engaged student learning: high impact strategies to enhance student achievement. York: HEA

Health Education England. 2021. The 'Impact of COVID-19 on Students' Survey: Key Findings [online]. Health Education England.

Higher Education Academy. 2015. The Framework for Student Engagement through Partnership in Higher Education. York: Higher Education Academy

### **Biography - Alice Girling**

Alice Girling is a registered midwife and Fellow of Higher Education Academy. As Deputy Head of Education for University Hospitals Dorset NHS Foundation Trust, she leads on pre-registration students, preceptorship, post-registration professional development and the Library and Knowledge Services.

Alice is passionate about the learner journey and how this has a long-term and lasting impact on professional identity and career progression. Under Alice's leadership, nursing placement capacity at University Hospitals Dorset has increased by 35% and newly qualified preceptorship onboarding is up by over 50%.

## **#22 Use of a two-week fixed-rota to support student nurses in gaining Future Nurse Proficiencies in critical care**

### **Authors**

Mr. Daniel Harris - Cambridge University Hospitals (CUH)

Ms. Megan Willmore - Cambridge University Hospitals (CUH)

### **Aim of paper**

To evaluate the use of a two-week insight placement to CC for student nurses to achieve specific FNPs. Additionally, assess the impact of increased student numbers on CCRNs.

### **Abstract**

#### **Introduction and Background**

The Future Nurse Proficiencies (FNPs) were introduced to ensure equity and define required skills (NMC, 2018). Increasing student numbers has made allocation to appropriate clinical areas challenging. Critical care registered nurses (CCRN) are experts in respiratory and cardiovascular assessment (CC3N, 2015). Thus, critical care (CC) should be an ideal placement for completing FNPs.

A two-week insight placement was introduced to CC to enable more students to sign-off specific proficiencies (Leigh & Roberts, 2018). To ensure all students had the required knowledge, they attended a mandated systems-based study day before placement. A fixed-rota maximised student numbers.

### **Methodology**

Feedback was gathered pre- and post- study day. A peer-reviewed questionnaire was utilised pre- and post- placement to examine student nurses' confidence in undertaking the FNPs and whether they were completed

(n=66). Students' ID numbers ensured anonymity. Qualitative and quantitative data analysis was used to develop action plans to improve students' attainment of FNPs for future cohorts.

## Results

88% of students (n=58) attended the study day. Their confidence undertaking FNPs increased post-study day. Post-placement response rate was 46% (n=30). All respondents signed off their respiratory assessment proficiency, 50% signed off all proficiencies. Students' feedback regarding the study day, learning opportunities and bedside teaching was positive. However, they requested less night shifts and longer placements. CCRNs enjoyed working with students but found it increased their workload.

## Conclusion

Use of a two-week fixed-rota enabled more student nurses to complete FNPs in CC. To alleviate CCRN workload use of more frequent and potentially longer insight placements with less students could be utilised. However, further investigation is required to optimise CC placements for student nurses.

## 3 learning outcomes

1. Explore the experiences of Registered nurses supporting students to undertake future nurse proficiencies within critical care
2. Discuss the use of a fixed-rota for student nurses to allow for increased numbers within critical care.
3. Explain how best to teach and support student nurses in obtaining their Future Nurse Proficiencies.

## Recommended reading titles (please enter up to 3)

Critical Care National Nurse Network Leads (2015) **National Competency Framework for Registered Nurses in Adult Critical Care:**

**Step 1 Competencies.** [Online] Available at: [https://www.cc3n.org.uk/uploads/9/8/4/2/98425184/01\\_new\\_step\\_1\\_final\\_\\_1\\_.pdf](https://www.cc3n.org.uk/uploads/9/8/4/2/98425184/01_new_step_1_final__1_.pdf) [Accessed 27/04/2022]

Leigh, J. & Roberts, D. (2018) Critical exploration of the new NMC Standards of Proficiency for registered nurses. *British Journal of Nursing*. 27(18), pp1068-1072.

Nursing and Midwifery Council (NMC) (2018) **Future nurse: Standards of proficiency for registered nurses.** [Online] Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/standards-of-proficiency/nurses/future-nurse-proficiencies.pdf> [Accessed 26/04/2022]

## Biography - Daniel Harris

Daniel is currently seconded as the Lead nurse for clinical apprentices. He has worked as a Practice Development Charge nurse for over 4 years within critical care. Having obtained his PgCert in Medical and healthcare education in 2022 and undertaking a bridging scholarship has a keen interest in researching education in critical care. Having extensive experience working clinically across a tertiary centre and leading on many educational projects.

## #23 An experimental comparison between simulation education and traditional classroom-based activity to facilitate learning in nursing students

## Authors

Dr. Maureen Jersby - Northumbria University

## Aim of paper

The aim of this study was to compare simulation teaching with traditional classroom-based activities for the teaching of clinical skills relating to the recognition of an acutely ill patient by objectively measuring the participants clinical performance.

## Abstract

### Background

Previous research has demonstrated that students report an increase in confidence in their assessment of patients and their clinical judgement skills following simulation experience. However, a comparison between simulation and classroom teaching of similar content is needed to establish if these reported findings are due to simulation alone. Likewise, evidence that simulation translates into student's ability in clinical practice is purely anecdotal.

### Objectives

This research aimed to identify to what extent exposing nursing students to simulated clinical scenarios informs their clinical decision-making skills in a practice setting and compare simulation with traditional classroom-based activities.

### Design

In order to compare classroom teaching with simulation, the study used an experimental design to test the effect of mode of teaching on students' clinical performance.

### Settings

The study took place in a Higher Education Institute in the North of England.

### Participants

Participants were first-year preregistration nursing students (studying for a master's in nursing) from three fields of nursing studies (mental health, adult and child).

### Methods

A mixed-measures design was used with two independent variables: teaching method (simulation or classroom learning) and test occasion to take two measurements (the first one after the first simulation or classroom education and the second one after clinical placement). Data were

analysed using descriptive and inferential statistics.

### Results

Where simulation is contrasted directly with classroom teaching, it is the presence of visual prompts that has a significant effect on students' clinical performance not the mode of teaching that has been utilised.

### Conclusions

This research contributes to the knowledge base that underpins the use of simulation in educational practice by supporting the use of simulation as a credible pedagogy for nursing education, identifying the importance of cue recognition for learning decision-making skills and assessment of clinical competence.

## 3 learning outcomes

To develop understanding of why SBE is credible pedagogy for nursing education

To identify how SBE supports the transfer of knowledge from the classroom to the clinical setting

The importance of cue recognition for learning decision-making skills

## Recommended reading titles (please enter up to 3)

Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice*. Menlo Park, CA: Addison-Wesley.

Dreyfus, S. and Dreyfus, H.L. (1980). *A Five-Stage Model of the Mental Activities Involved in Directed Skill Acquisition* University of California: Berkeley

Kahneman, D. and Klein, G. (2009) Conditions for intuitive expertise: A failure to disagree. *American Psychologist*, 64(6): 515-526.

## Biography - Maureen Jersby

Maureen has a history of educational innovation and has played a leading role in

the development of the Continuing Professional Development undergraduate programme and the Surgical Care Practitioner postgraduate diploma in her previous academic role at Teesside University. She is co-author of the RCS 2014 Curriculum Framework for the Surgical Care Practitioner. She has recently completed 12-month tenure as 'simulation officer' with the Association for Simulated Practice in Health Care.

Maureen completed her Ph.D. studies Establishing the Benefits of Utilising Simulation-based Education in an Undergraduate Nursing Programme under the supervision of Professor Paul Van Schaik at Teesside University.

### **#33 A pilot study exploring how facilitators can support nursing students through simulation scenarios.**

#### **Authors**

Mrs. Amanda Wilford - The Open University

#### **Aim of paper**

To explore strategies to support learning through simulation scenarios for student nurses

#### **Abstract**

There has been a significant body of work surrounding simulation design, pre-brief, debrief, and evaluation within healthcare simulation that has informed several frameworks and national guidance The 2021 INACSL Standards of Best Practice Facilitation direct the facilitator to deliver cues to redirect learners during the scenario to achieve the learning outcomes (Persico et al., 2021).

Cue is the term used to describe additional information provided by the facilitator to the learners about the patient to enable them to achieve the learning outcomes (Paige and

Morin , 2013) Cueing examples include providing additional blood results or changing a vital sign.

A literature review found a gap between facilitators supporting learners in simulation in the scenario and led to two initial research questions (RQ)

*RQ 1 –How do facilitators support student nurses' learning in simulation scenarios?*

*RQ2 –What support do student nurses require from facilitators in simulation scenarios to aid their learning?*

This pilot study explored how simulation facilitators working with undergraduate nursing students can support learning through simulation at a university in England using a descriptive case study. The pilot study has been granted Ethical Approval by the Institution (HREC 4853). Semi-structured interviews will be used to gather a rich data set to describe the current situation from the lens of facilitators and student nurses.

Results from the case study will be shared. The data is being analysed using Reflexive Thematic Analysis (TA) (Braun and Clarke 2006). Following data analysis, the results will be shared with suggested approaches that facilitators from academic or clinical practice can employ to support learning through the scenario phase of simulation-based education.

#### **3 learning outcomes**

To describe a range of support strategies from the facilitator's perspective during a simulation scenario.

To define what support student nurses need to support their learning through simulation scenarios.

To discuss how to support student nurses through scenarios.

### Recommended reading titles (please enter up to 3)

Persico, L., Belle, A., DiGregorio, H., Wilson-Keates, B. and Shelton, C. (2021) "Healthcare Simulation Standards of Best Practice<sup>TM</sup> Facilitation," *Clinical Simulation in Nursing*, Elsevier Inc., vol. 58, pp. 22–26 [Online]. DOI: 10.1016/j.ecns.2021.08.010.

Paige, J. B. and Morin, K. H. (2013) "Simulation fidelity and cueing: A systematic review of the literature," *Clinical Simulation in Nursing* [Online]. DOI: 10.1016/j.ecns.2013.01.001.

Braun, V. and Clarke, V. (2006) "Using thematic analysis in psychology," *Qualitative Research in Psychology*, vol. 3, no. 2, pp. 77–101.

### Biography - Amanda Wilford

Amanda (Mandy) Wilford is currently a Senior Lecturer in Patient Safety and Simulation at The School of Health, Science and Wellbeing, Staffordshire University. Mandy has worked in healthcare simulation in commercial and NHS settings. As a Registered Nurse, her specialism is Cardiac Nursing. Mandy is currently a part-time postgraduate research student as part of the Professional Doctorate in Education at The Open University. Her research is centred around unfolding healthcare simulations and how learning is supported from both the learner's and facilitator's perspectives. Mandy volunteers for SESAM and is the Secretary of the Special Interest Group for Nursing. As a volunteer for INACSL she contributed to the 2021 Update of the Professional Integrity Standard and is faculty for their ISEP programme.

### #36 Is Experience Enough? Though it is possible to learn from experience formal reflection and guidance is needed for its effective implementation.

#### Authors

Dr. Jane Greaves - Northumbria University

Dr. Meaghan Grabrovaz - Northumbria University

Dr. Petra Mandysova - Palacky University, Olomouc

Dr. Sam Browning - West Yorkshire Leeds ICB

Ms. Julie Alderson - Northumbria University

Prof. Alison Steven - Northumbria University

#### Aim of paper

To explore the understanding acquired in their workplace, without formal or informal teaching by experienced caregivers in learning disabilities, of the soft signs that often precede the onset of acute illness.

To explore the effect of a formal teaching session on this prior, informal learning, and of the caregivers' confidence to communicate their observations to other members of the clinical team.

#### Abstract

**Background:** Much of the learning in healthcare occurs during the performance of routine work. It is accepted that pedagogical systems should surround the learner to ensure that they learn the appropriate lessons from their practice. An important aspect of workplace learning is reflection, and learners should share their insights with experienced guides.

We have recently had the opportunity to study the unguided experiential learning of "Soft signs" by caregivers in learning

disabilities. “Soft signs” are minor changes in a person’s condition and behaviour that may precede the onset of acute illness.

Caregivers in learning disabilities often need to refer those for whom they care for advice about possible episodes of acute illness. A recent study demonstrated that they find it difficult to express their concerns to health professionals. Severity scoring systems are often used to standardise communication but systems such as NEWS2 that use vital signs data are often unsuitable for care home and domestic use.

RESTORE2™ Mini is a scoring system based on the recognition of soft signs. Training sessions for RESTORE2™ Mini, provided an opportunity to understand the caregivers’ prior workplace-based learning.

**Ethical approval and consent:** Northumbria University gave ethical approval for the study. 19 caregivers gave informed consent to participate. Participants had at least three years experience of caring in learning difficulties and had recently attended a teaching session for RESTORE2™ Mini.

**Design:** Thematic analysis of semi-structured interviews with caregivers for persons with learning disabilities.

**Results:** The caregivers understood from experience that behavioural changes foreshadowed the emergence of acute illness, but they lacked the confidence to share their insights with health professionals. The teaching associated with the introduction of RESTORE2™ Mini validated their perceptions and given them the confidence to present their observations.

### 3 learning outcomes

- Health professionals develop a personal understanding of complex issues in the course of their work.

- This learning occurs without any teaching, discussion, or shared reflection.
- An episode of teaching and discussion can reassure learners sufficiently for them to have confidence in what their experience has taught them and to express their understandings to other members of the team.

### Recommended reading titles (please enter up to 3)

Billett S. 2016. Learning through health care work: premises, contributions and practices. *Medical education*. 50(1):124-131.

Kolb DA. 2014. *Experiential learning: Experience as the source of learning and development*. FT press.

GREAVES PJ, S. A., ALDERSON J, GRABROVAZ M. 2021. An exploration and evaluation of mechanisms to aid recognition of acute deterioration in people with learning disabilities: “What do I need to know?”. Northumbria University Repository. <https://wessexahsn.org.uk/img/projects/Acute%20deterioration%20report%20Nov%2021%20Northumbria%20Uni-1660905614.pdf>

### Biography - Jane Greaves

Jane is an associate professor in the department of Nursing Midwifery and Health at Northumbria University. She is an RGN with long experience of clinical nursing in critical care and has worked in patient safety at trust and NHS England level. Current research interests are the recognition of patient deterioration, particularly in out-of-hospital contexts, the staffing of critical care units and the delivery of acute care to persons with learning disabilities. Jane was formerly a member of the RCN Critical Care and In-Flight nursing forums and is the current chair of the RCN Northern Research Committee.



## **#38 Using virtual reality in medicine management education for children's nurses strengths and pitfalls**

### **Authors**

Mrs. Julia Tod - Cardiff University

Mr. Peter Smith - Cardiff University

Mr. Nelson Selvaraj - Cardiff University

Mrs. Angharad Barklam - Cardiff University

### **Aim of paper**

The aim of the development of this teaching method was to promote safe nursing practice in children's nurses medicines management. Through the immersive experience of virtual reality student nurses would understand decision making, cause and consequence of medication errors.

### **Abstract**

Medication in errors in nursing is a persistent challenge to safe nursing practice in children's care. In children's nursing practice second checking by qualified nurses can mean that student nurses do not fully engage in the medicines administration process. This dependence of their supervisor reduces their sense of responsibility and ability to recognise errors. The use of virtual reality allowed students to experience 3 scenarios from the medicine administrator's point of view. The scenarios included 'swiss cheese model' errors in practice. Through this immersive experience the students were able make immediate decisions and reflections in a safe simulated environment. An evaluation of the teaching session identified that students were able to develop and improve their knowledge of medication error. This improvement in knowledge is reflective of a recently published meta-analysis of virtual reality education (Chen et al 2020). Following evaluation of the learning experience most

students appreciated the immersive experience and felt it increased their sense of responsibility and engagement with the process. Over 85% were satisfied with the teaching experience. There were some notable challenges with a minority of students experiencing motion sickness.

### **3 learning outcomes**

Exploring the role of virtual reality technology in nurse education

how immersive experience can both increase the experience of responsibility and enhance decision making skills.

The importance of academic and technologist team working in nurse education.

### **Recommended reading titles (please enter up to 3)**

Chen et al (2020) Effectiveness of Virtual Reality in Nursing Education: Meta-Analysis Journal of Medical Internet Research 22.9 10.2196/18290

Cobbett S, Snelgrove-Clarke E. (2016) Virtual versus face-to-face clinical simulation in relation to student knowledge, anxiety, and self-confidence in maternal-new born nursing: A randomized controlled trial. Nurse Educ Today Oct;45:179-184. [doi: 10.1016/j.nedt.2016.08.004]

### **Biography - Julia Tod**

Senior Lecturer in children's nursing at Cardiff university. Programme manager for the CN23 future nurse programme. My education at Degree and Master's level was in the field of Psychology, and my clinical career was within neonatal intensive and critical care. These are areas of expertise that I have applied to teaching at undergraduate, post registration and postgraduate levels. I seek to use a range of approaches to enhance nurse education and student experience.



## #44 A realistic evaluation of an innovative simulation and skills programme to replace placement hours

### Authors

Rd. Claire Ford - Northumbria University

Mrs. Barbara Davies - Northumbria University

Dr. Laura Park - Northumbria University

### Aim of paper

The research aims to evaluate student and staff perspectives on using simulated practice and technology-enhanced learning pedagogies to replace clinical practice hours and help inform practice assessments.

### Abstract

#### Background

Due to placement pressures, Northumbria University created a programme of events to replace 150 clinical practice hours with simulation: 'SkillsFest'. June/July 2022 saw 500 second-year nursing students undertake a 4-week simulated learning programme consisting of skills stations, skills assessment, simulation events, Virtual Reality, and other technology-enhanced learning platforms. The aim was to ensure students had the skills required for progression to year 3, they were able to make up hours and were supported in their assessment of practice.

#### Methodology and Methods

A research project was approved, using a realistic evaluation approach, to explore and examine the use of the interventions and to evaluate the second-year students, academic staff, Academic Assessors', Practice Assessors' and Practice Partners' perspectives of the 'SkillsFest' programme and the use of simulated practice and

technology enhanced learning pedagogies in replacing clinical practice hours. 190 surveys have been received to date, and interim results of the online surveys have produced some interesting data which is being analysed. The coding and initial thematic analysis is being completed independently and concurrently by the research team before being shared to triangulate results and increase rigour.

### Early Results and Way Forward

Although data analysis is still ongoing, initial results demonstrate that there are benefits to continuing the SkillsFest approach. It is anticipated that the data will lead to a better understanding of how simulation can inform and contribute to placement assessment. It will also allow access to the views of students and practitioners and whether they see value in this programme to support practice assessment and student learning. Additionally, useful information may emerge which will enable education providers to understand the key barriers to using simulated practices to support placement assessment and provide valuable insight into how simulated and technology-enhanced practices can be integrated into future nursing programmes.

### 3 learning outcomes

- To explore student perspectives on replacing placement hours with simulated practice and technology-enhanced learning platforms
- To evaluate the implementation of the technology-enhanced learning platforms in order to learn what worked well and what needs to be changed going forward
- To ascertain how student engagement in the simulated programme can be improved

### Recommended reading titles (please enter up to 3)

Intrac (2017) *Realist Evaluation*. Available at: <https://www.intrac.org/wpcms/wp->

## **Biography - Claire Ford**

Claire joined the teaching team at Northumbria University in 2013, having spent time working in perioperative care and completing a Postgraduate Diploma in Midwifery. She studied for her BSc (Hons) and PG Dip at Northumbria University, and won academic awards for both, as well as the Heath Award in 2009. As a Lecturer, she teaches a range of modules in national and international preregistration healthcare programmes. In addition to teaching, Claire is involved in several research projects ranging from the examination of pain practices in perioperative care, to exploring the use of technology-enhanced learning and virtual reality to augment undergraduate students learning. Claire has a passion for pain management, clinical skills, women's health, gynaecology, perioperative care, and simulation and has published many articles. She also has an interest in using other forms of media and technology to facilitate and enhance deep learning and is the co-founder of the 'Skills for Practice' website, which acts as a central repository for videos, posters, and podcasts focusing on a range of clinical nursing procedures. In 2016, the website was shortlisted for the Student Nursing Times Awards – Teaching Innovation of the Year.

## **#56 Implementation of a hub and spoke model in the practice learning environment for student nurses at a cancer centre to improve student experience and knowledge of the cancer patient journey**

### **Authors**

Mrs. Hannah Russon - Velindre University NHS Trust

## **Aim of paper**

The aim of this project is to pilot a hub and spoke model at the cancer centre to improve student experience and better understanding of the patient journey in cancer care. It also has the potential to address issues with placement capacity by increasing the number of students that can be accepted at the cancer centre.

## **Abstract**

Undergraduate nursing has been witness to significant changes, most recently being the introduction of new standards and a new model of supervision and assessment designed to allow flexibility and create innovation in the practice learning environment. There are many different models of practice learning to support the practice learning environment, the most common being the team based model and in more recent years, the emergence of the hub and spoke model has been noted.

There are significant shortages in the nursing workforce which is set to increase. In response to this, universities delivering nurse education programmes are being commissioned to accept rising numbers of student nurses and with the requirement for each student to spend 50% of their time in the practice learning environment, the pressure on placements is increasing.

1 in 2 of us will get cancer in our lifetime so the chances of student nurses encountering patients with cancer in the non-cancer specialist areas is high. The student is likely to have a disjointed, incomplete view of where that patient is in their treatment and wider journey.

To ensure that students attending clinical placement in a cancer centre gain a wider understanding into the patient journey and receive a worthwhile experience through high quality learning, an implementation project was undertaken to introduce a hub and spoke model. This model allows

students to experience a wider variety of clinical areas than that of the existing team model, which restricted the student to the inpatient unit.

An improvement model was used to structure the implementation and student experience was assessed through focus groups.

The project found that student nurse experience was high and they gained valuable insight and understanding of the wider cancer patient journey. The project also has the potential to increase placement capacity in the future.

### 3 learning outcomes

- Improve student experience
- Improve students understanding of the cancer patient journey
- Ease placement capacity

### Recommended reading titles (please enter up to 3)

Nursing and Midwifery Council. 2018a. *Programme Standards: Standards for pre-registration nursing programmes*. Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/standards-of-proficiency/standards-for-pre-registration-nursing-programmes/programme-standards-nursing.pdf> [Accessed 05 July 2022].

Nursing and Midwifery Council. 2018b. *Standards for student supervision and assessment*. Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/standards-of-proficiency/standards-for-student-supervision-and-assessment/student-supervision-assessment.pdf> [Accessed 05 July 2022].

Roxburgh, M, Conlon, M, Banks, D. 2012. Evaluating Hub and Spoke models of practice learning in Scotland, UK: A multiple

case study approach. *Nurse Education Today*. 32(7), pp. 782-789.

### Biography - Hannah Russon

I have enjoyed a career spanning 16 years in the NHS. Within those 16 years I have had the privilege of holding a wide variety of roles in emergency medicine but mainly in haematology and oncology care. These roles have included staff nurse, sister and clinical nurse educator. In my role as nurse educator I was responsible for the education, training and professional development of registered nurses and health care support workers and ensuring that undergraduate nurses received a meaningful, safe and effective practice learning experience.

Most recently I have been appointed the clinical lead for the Velindre School of Oncology project in which I hope to deliver multi-professional & pre-registration education and training to improve cancer care outcomes by developing a highly skilled workforce.

### #59 Using a Blended Approach to Deliver Practice Simulation Placements in Pre-registration Nursing Programmes

#### Authors

Mrs. Suzanne Robinson - University of Plymouth

#### Aim of paper

The aim of this abstract submission is to demonstrate the use of a blended approach to deliver an alternative to clinical placement for pre-registration Nursing Students, enabling a diverse learning experience over a 6-week period, while retaining a focus on clinical practice. It demonstrates how the use of innovative technologies such as high fidelity simulation and Virtual Reality software, together with a more traditional approach to learning, can

deliver a valuable learning experience in the absence of a clinical placement.

## Abstract

A significant shortfall of clinical placements due to operational changes post-pandemic, resulted in a reduction of the capacity of Trusts to accommodate all students. This led to the urgent development of a Simulated Practice Module to be delivered over a period of 12 weeks during May-July 2022. It consisted of 2 consecutive 6-week blocks for 2 separate groups of student nurses in year 1 of the BSc (Hons) Nursing Programme.

The 6-week simulated placement consisted of a 37.5 hour week, enabling students to accumulate practice hours as they would in clinical placement. It was therefore imperative that the students remained engaged in the process to maximise their practice hours and provide a rich and varied, practice focused learning experience.

This was achieved through a blended approach to delivery, combining face to face teaching in the classroom and clinical skills facility, with taught content online and self-directed eLearning. Additional training was sourced through external providers as well as collaboration with international and local healthcare providers.

The Simulated Placement was not formally assessed. Each group were given a project to complete over the 6-week period, to foster group cohesion and develop their management and leadership capabilities. These were presented on the final day of each cohort.

The Simulated Placement appears to have been a great success, enabling students to achieve a maximum of 225 practice hours. Feedback was largely positive, particularly favouring the social aspect of establishing a new peer group, in addition to the wide variety of new and diverse experiences in nursing.

Several recommendations have been made for future deliveries, including: timetabling; attendance monitoring; assessment and documentation of learning, and interprofessional collaboration. The Simulated Placement will continue to play a key part in the undergraduate nursing curriculum, with a 9-week assessed Simulated Placement already planned for the next academic year.

## 3 learning outcomes

1. To provide students with 225 hours of timetabled learning, comprising eLearning; online and face-to-face taught learning, and external training and visits.
2. To use innovative teaching practices, incorporating digital and Virtual Reality technology in simulation
3. To establish a team working environment and foster peer learning

## Recommended reading titles (please enter up to 3)

Bridge, P. et al. (2022) 'Simulated Placements as Partial Replacement of Clinical Training Time: A Delphi Consensus Study', *Clinical Simulation in Nursing*, 68, pp. 42–48. doi:10.1016/j.ecns.2022.04.009.

Taylor, N. et al. (2021) 'Developing and piloting a simulated placement experience for students', *British Journal of Nursing*, 30(13), pp. S19–S24. doi:10.12968/bjon.2021.30.13.S19.

Williams, J., Murphy, M. and Garrow, A. (2022) 'Development of a simulation placement in a pre-registration nursing programme', *British Journal of Nursing*, 31(10), pp. 549–554. doi:10.12968/bjon.2022.31.10.549.

## Biography - Suzanne Robinson

Suzi qualified as a Registered Nurse in 1992, specialising in Accident and Emergency Nursing with a particular interest in Trauma

Care. After several years working in Emergency Departments, she decided to venture into the military environment, culminating in 8 years as a Nursing Officer in the British Army. Two Operational tours of Iraq and a year in Northern Ireland followed, with a final posting to the Academic Department of Military Emergency Medicine in 2008. After a period of maternity leave, the difficult decision to leave the Armed Forces was made and Suzi embarked on a new career as an Emergency Nurse Practitioner in a Minor Injury Unit. In 2016 she decided to venture into Higher Education, gaining a Masters in Education and subsequently taking on the role of Clinical Skills and Simulation Lead in 2018, in addition to her existing teaching role in the School of Nursing and Midwifery. Her keen interest in clinical skills teaching has been key to the development of simulation technologies within the School and the implementation of a full Simulated Placement.

## **#60 Teaching and Learning in Digital Spaces in Nursing and Midwifery Education: A Systematic Scoping Review**

### **Authors**

Mr. Emmanuel Adesuyi - Birmingham City University, West Midlands, Birmingham, United Kingdom

Dr. Kal Alnababtah - Birmingham City University, West Midlands, Birmingham, United Kingdom

Prof. Matthew O'Leary - Birmingham City University, West Midlands, Birmingham, United Kingdom

### **Aim of paper**

This systematic scoping review intends to synthesize the major themes and emerging concerns in using digital spaces for teaching

and learning in nursing and midwifery education in the UK.

### **Abstract**

**Background:** The world witnessed a massive shift from the conventional mode of interaction during the COVID-19 pandemic to digital spaces. Everything seems to be back to normal, but have we been able to realize the full potential of digital spaces in supporting teaching and learning in a post-COVID era?

**Aim/Objectives:** To synthesize themes and emerging views in the use of digital spaces for teaching and learning in nursing and midwifery education in the UK.

**Method:** We followed the guidelines for conducting systematic and scoping reviews designed by Johanna Briggs Institute and Arksey and O'Malley. Similarly, the results were reported using Preferred Reporting Item for Systematic Review and Meta-analysis for Scoping Review (PRISMA-SCR). An extensive and systematic search for relevant literature was carried out on the subject in various databases including PUBMED and CINAHL. Studies from the UK on the subject between 2012 and 2021 were included in the review. Qualitative synthesis and a thematic analysis were generated from the results.

**Results:** Six studies were selected using the inclusion criteria, thus highlighting the dearth of literature on the subject. Two of the studies used a qualitative research design, while four were mixed-method studies. The results show that the experience of nursing and midwifery students and lecturers with teaching and learning in digital spaces is not well explored and understood. The findings from this review revealed that adapting nursing and midwifery education to digital spaces remains a significant challenge for those working in the field.



**Conclusion:** There is a growing body of knowledge on how combining various digital spaces with a focus on student engagement can influence learning goals and future designs. It is hoped that the gaps identified by this review will inform more research that could be used as a point of reference for designing digital teaching and learning technologies.

### 3 learning outcomes

- To map out the field of teaching and learning in digital spaces in nursing and midwifery education.
- To explore the field to identify what is already known in the field.
- To identify gaps in knowledge that can inform further research.

### Recommended reading titles (please enter up to 3)

Teaching and learning

Digital teaching and learning

Digitalization of nursing and midwifery education

### Biography - Emmanuel Adesuyi

Emmanuel O. Adesuyi is a registered nurse and midwife in Nigeria where he was appointed the Chief Operating Officer of the Institute of Nursing Research, Nigeria. He is currently a UK Registered nurse, doctoral researcher, and assistant lecturer at Birmingham City University, United Kingdom. He has over 10 years of experience working as a nurse at several levels of the health care system both in Nigeria and the UK NHS. His research focus includes digitalization in nursing education, public health conditions, public health education, health promotion, cancer genetics, and genomics.

## #63 Norfolk and Waveney ICS Teaching & Learning Care Home Programme

### Authors

Prof. Jonathan Webster - School of Health Sciences, University of East Anglia

Dr. Kate Sanders - Foundation of Nursing Studies

### Aim of paper

We plan to present the learning from the Norfolk and Waveney Teaching and Learning Care Home programme, the aim of the programme is to facilitate the development of effective, person-centred cultures of care in which people and practice can grow, develop and thrive.

### Abstract

The Norfolk and Waveney (N&W) Teaching and Learning Care Homes (TLCH) programme is based on the national Teaching Care Home Programme.

Commissioned by N&W CCG (now ICS) the programme aims to deliver and evaluate the TLCH Programme across the N&W ICS by developing a geographic network in which participating Care Homes develop and grow as 'Centres of Excellence'. Objectives of the programme include:

1. Improve the experience and outcomes of people who use services by delivering integrated approaches to care leading to better outcomes and preventative care.
2. Demonstrate an ongoing commitment to person-centred care and ways of working experienced by all who live, die, visit and work in the home.
3. Have clinical leaders who are reflective and enabling, working with others to facilitate practice change, development and transformation,

acting as credible clinical ‘champions’ across health and care.

4. Are centres of clinical excellence for skilled nursing and therapeutic care, learning, practice development and research, actively engaging with staff, students, residents and community.

Four Care Homes have been recruited to the programme, each focussing on a workplace project chosen by the Care Home that:

- Is a local priority area for development – participating homes are focussing on falls prevention and management and end of life care.
- Involves active collaboration and joint working from across the ICS.
- Focuses on improving outcomes for residents and their families and staff experience.
- Provides learning and development opportunities across the ICS.

The practice development principle of Collaboration, Inclusion and Participation are underpinning programme delivery and continuous evaluation. Drawing from Realist Evaluation, participants are being invited to identify, ‘*what worked for whom, in what circumstances and why?*’ The primary aim of the evaluation is to identify whether the TLCH programme across N&W ICS has had a positive effect on care, individual and team working, learning, development and system working.

### 3 learning outcomes

1. Demonstrate learning from the TLCH programme based on participatory and continuous evaluation.
2. Identify the potential for Care Homes to be a rich environment for teaching, learning, research and evaluation.
3. To champion nursing and interdisciplinary team working focussing on facilitating the development of effective, person-centred

cultures of care in which people and practice can grow, develop and thrive.

### Recommended reading titles (please enter up to 3)

- Care England, 2017, An Introduction to Teaching Care Home Pilot, 2017, [https://www.careengland.org.uk/sites/careengland/files/ILC-UK%20-%20Report%20One%20-%20An%20introduction%20to%20the%20%27Teaching%20Care%20Home%27%20pilot\\_0.pdf](https://www.careengland.org.uk/sites/careengland/files/ILC-UK%20-%20Report%20One%20-%20An%20introduction%20to%20the%20%27Teaching%20Care%20Home%27%20pilot_0.pdf)
- Foundation of Nursing Studies, 2022, About Teaching Care Homes, <https://www.fons.org/programmes/teaching-care-homes>
- Manley K, Wilson V, Oye C, 2021, Transforming Health and Social Care Using Practice Development in International Practice Development in Health and Social Care eds. Manley, Wilson, Oye, Wiley Blackwell; Chichester, England

### Biography - Jonathan Webster

A Registered General Nurse since 1990 Jonathan has worked in both secondary and community settings in the UK and Australia. His clinical practice expertise is older people’s nursing having held two Consultant Nurse posts for Older People. During this time, he led programmes of education, practitioner centred research, evaluation and practice development having held honorary gerontological and practice development fellowships with the Royal College of Nursing Institute.

Jonathan has held NHS Board level roles as a Director of Nursing/ Quality and Chief Nurse across Clinical Commissioning and Regulatory organisations in London and latterly the South East. In his current post he is leading work on ‘The Guiding Lights for Effective Workplace Cultures’ and ‘The Teaching and Learning Care Home Programme’ working in collaboration with The Foundation of Nursing Studies. In his



role he blends teaching, learning, research and evaluation.

Jonathan has been involved in national and international work related to older persons' care; leadership development; workplace culture; practice development; quality improvement and clinical assurance. His professional interests lie in developing person-centred cultures of practice that enable those involved in health and care to work in partnership with service users and their supporters through practice development, service transformation and action research.

## **#64 Cross cultural communication skills workshops - an intervention to tackle student segregation**

### **Authors**

Mrs. Lorna Hollowood - University of Worcester

### **Aim of paper**

To demonstrate that a low resource intervention can promote inclusivity and belonging, tackle student segregation by ethnic minority groups and support students in the development of cross cultural communications which are essential for nursing.

### **Abstract**

As part of the School of Nursing's strategies to create an inclusive environment and dismantle barriers, I have developed an early, intrusive intervention for our undergraduate students to encourage peer support and reduce segregation of students by ethnicity. Co-created with a local charity, The Feast, these interactive workshops provide an opportunity for students to communicate in a safe and fun space. Students share some principles of effective communication, with the charity's Guidelines for Dialogue, tools that promote cross cultural communication skills. This includes

promoting honesty, acknowledging similarities and differences and not treating individuals as spokespersons for their faith or culture. Then the students engage in a series of interactive activities which encourage conversations, from favourite shops, favourite festivals to more challenging topics around politics and culture. Students have responded overwhelmingly positively to the workshops, and we are currently piloting them outside of nursing. They have taken on an additional significance as our undergraduates now emerge from a disrupted social and educational life because of the pandemic.

The new undergraduate students arriving at University in the last couple of years have had significant disruption to their education and their social lives due to the pandemic. The Feast workshops provides an opportunity to re-engage with their peers and hopefully overcome some of the challenges that may have arisen during some of the restricted times, such as confidence to speak to others, social anxiety and loneliness.

They particularly welcome the opportunity to socially engage. The workshops are easy to deliver with facilitation guidance available, they are not resource intensive and provide a genuine opportunity to enhance belonging in higher education. Results from 4 years of student evaluation will be presented.

### **3 learning outcomes**

- Enhance awareness of a strategy to teach cross cultural communication skills

### **Recommended reading titles (please enter up to 3)**

Patel, Bhavini. (2015). Communicating across cultures: proceedings of a workshop to assess health literacy and cross-cultural communication skills. *Journal of Pharmacy Practice and Research*. 45. 10.1002/jppr.1062.

Ladha T, Zubairi M, Hunter A, Audcent T, Johnstone J. Cross-cultural communication: Tools for working with families and children. *Paediatric Child Health*. 2018 Feb;23(1):66-69. doi: 10.1093/pch/pxx126.

<https://thefeast.org.uk/resources>

- Click on Resources to access the Guidelines for Dialogue

### **Biography - Lorna Hollowood**

Lorna is a full time lecturer in the School of Nursing, teaching undergraduate pre-registration nurses. A focus of her teaching is reducing health inequalities and promoting health, and uses teaching as an opportunity to raise the profile of nurses from diverse backgrounds. She is also a clinical associate for the Gold Standards Framework, which involves assessing UK care homes against standards for excellence in end of life care. She was an Academic Board member for the Birmingham and Lewisham Health Inequalities Review Board (BLACHIR Report 2022). Lorna has previously worked clinically as a District Nurse and in Specialist Palliative Care in a hospice setting. She has a BSc in Nursing, MSc in Advancing Practice and a PGCE in teaching. Lorna has published a textbook for student nurses, a literature review in a peer-reviewed journal has presented at conferences. She is committed to promoting inclusion for black students and those from other minority ethnic backgrounds in Higher Education.

Lorna is also a part time PhD student, in the School of Nursing at the University of Birmingham. Lorna is completing a PhD, which is exploring the needs of the Windrush Generation, who are living and dying in UK care homes.

## **#65 Securing safe inclusive care for those who self-harm (SH): Exploring the lived experience of young Ghanaian people who self-harm**

### **Authors**

Dr. Andy Dake - CHESTER UNIVERSITY

Prof. Sue McAndrew - University of Salford

Dr. Neil Murphy - University of Salford

### **Aim of paper**

This paper aims to explore the lived experiences of people who SH in two secure mental health hospitals in Ghana, to ascertain how inclusive and culturally sensitive care can best be delivered.

### **Abstract**

Globally, an increasing number of people are using Self Harm (SH) behaviour. Whilst many are treated in psychiatric hospitals, their inpatient journey often starts in acute care. Incidences of SH are often challenging, with those using the behaviour being highly dependent on staff for care and support. Whilst literature related to the lived experiences of people who SH exists, this is in its infancy in African countries. However, with trends in migration from Non-Western countries rising, hence those providing care in western society need to learn more about cultural differences to ensure delivery of sensitive care. This paper reports on a study exploring the lived experiences of nine people who used SH and were inpatients at two secure mental health hospitals in Ghana. Interpretive Phenomenological Analysis (IPA) was used to explore their experiences, using face to face in-depth semi structured interviews to collect data. All interviews were audio recorded and notes were made by the researcher (first author). Each interview was transcribed and analysed using the IPA seven- step approach. Three superordinate and 11 subordinate themes were identified. The

superordinate themes were: Being let down; Living with the negative self; Forces of the supernatural and religion. Findings suggest staff who understand and acknowledge the complexities and nuances of SH within the context of a person's life, promote better care and more appropriate treatment. If culturally sensitive nursing care is to be implemented there is a need to develop a collaborative health care package for those who SH.

### 3 learning outcomes

To gain insight into why people use self-harming behaviour

To promote an understanding of sub-Saharan culture and how it impacts mental wellbeing

To consider how co-constructed, culturally sensitive care can best be delivered

### Recommended reading titles (please enter up to 3)

Lim, K. S., Wong, C. H., McIntyre, R. S., Wang, J., Zhang, Z., Tran, B. X., ... & Ho, R. C. (2019). Global lifetime and 12-month prevalence of suicidal behaviour, deliberate self-harm and non-suicidal self-injury in children and adolescents between 1989 and 2018: a meta-analysis. *International journal of environmental research and public health*, 16(22), 4581.

Rayner, G. & Warne, T. (2015) Interpersonal Process and Self-Injury. *Journal of Psychiatric and Mental Health Nursing*.23 (1), Pp 54-65.

Roxburgh, S. (2018) Witchcraft and Supernatural Harm: Navigating Spiritual Ethics in Political Science Research. *Journal of Qualitative Research*, 19(6) Pp 703-717.

Smith, J. A (2011) Evaluating the Contribution of Interpretive Phenomenological Analysis. *Health and Psychology*, 5(1), Pp 9-27.

### Biography - Andy Dake

I am an Adult and Mental Health Nurse. I have over 15 years of Forensic mental health nursing with research interest in Self Harm. I also have passion for Neuro- rehabilitation of individuals with Acquired Brain Injury.

### #67 An innovative approach to Foundation Degree apprentices engagement in clinical skills teaching

#### Authors

Mr. Ferdinand Bravo - University of Brighton

Ms. Wendy McCarthy - University of Brighton

Mrs. Charlotte Humphris - University of Brighton

#### Aim of paper

The aim is for the apprentice to stretch and challenge their learning, becoming confident in developing clinical teaching skills within the classroom by working alongside a lecturer to teach their peers. In practice, the apprentice is expected to develop their role as practice supervisors, which includes providing feedback, teaching new skills, and supporting other learners. This project is an opportunity for apprentices to experience teaching in a safe and supportive environment. For the educator, this project is an innovative approach to demonstrate quality improvement initiatives within teaching and learning.

#### Abstract

##### Background

Practice-based learning in education includes learning environments whereby foundation degree apprentices can specifically develop the nursing and clinical skills necessary to facilitate effective teaching & learning. This may include

developing the knowledge and skills required as a supervisor of other health care practitioners (to meet the NMC recommendations 2018) in the work base setting. It will also include further developing the knowledge and skills required to educate patients/service users across the 4 fields of nursing and the lifespan. The apprentices will increase their ability to adapt their practice and accommodate individuals with different learning styles who may have the potential for additional educational needs. It will also encourage the apprentices to excel as effective autonomous learners and promote role-modelling of professional behaviour. Upon completion of the course, the apprentices are expected to progress their leadership skills to fulfil their unique position of bridging the gap between registered nurses and healthcare assistants. Inviting apprentices to engage in teaching activities and supporting junior peers provides an opportunity to gain an educational perspective and narrow the theory-practice gap. In addition, this project will meet the professional regulators' expectations for professionals to continuously demonstrate and develop evidence-based practice, critical thinking, and expert clinical judgement for quality patient care.

As an educator, this project is an innovative and alternative way of meeting the quality improvement initiative adapted from the university BSc programme to meet the placement needs of foundation degree apprentices. This is also an opportunity to display some variations of teaching techniques and a creative learning approach to enhance the active engagement of apprentices in clinical and classroom teaching. By working collaboratively with university lecturers, this teaching method aims to enhance mutual respect, effective working relationships, and the value of professional development.

### 3 learning outcomes

This teaching project aims to:

1. Identify innovative teaching strategies for peer-teaching for Foundation Degree apprentices.
2. Demonstrate high-quality knowledge and understanding of clinical skills.
3. Explain the role of the educator in leading effective teaching opportunities.

### Recommended reading titles (please enter up to 3)

Health Education England. (2022), *Guide to Practice-Based Learning for Allied Health Professional (AHP) Students in Education*. Available at:  
[https://www.hee.nhs.uk/sites/default/files/documents/PracticeLearningv1\\_0.pdf](https://www.hee.nhs.uk/sites/default/files/documents/PracticeLearningv1_0.pdf)

Jaye, Peter; Libby Thomas and Gabriel Reedy. (2015). "The Diamond"; a structure for simulation debrief. *The Clinical Teacher*. 12: 171-175.

Ramm, Dianne; Anna Thompson and Andrew Jackson. (2015). Learning clinical skills in the simulation suite: the lived experiences of student nurses involved in peer teaching and peer assessment. *Nurse Education Today*. 35(6). Available at:  
<https://doi-org.ezproxy.brighton.ac.uk/10.1016/j.nedt.2015.01.023>

### Biography - Ferdinand Bravo

Registered Adult Nurse who worked in critical care, intensive care and ITU nursing. Currently a senior lecturer at the University of Brighton for the School of Sports and Health and Sciences. Module leader for work-based learning for first-year, semester 1 and 2, Foundation Degree apprentices and skills practice. Cohort leader for September 22 and an academic assessor and personal tutor for a second-year foundation degree. Member of skills simulation team and lead

for simulation practice for the Foundation Degree. Active participants of the medicine management group and practice module lead for the pre-registration programme and Foundation Degree. Member of the School Equality and Diversity Inclusivity Committee.

## **#69 What happens when Practice Supervisors shift their approach from telling to asking?**

### **Authors**

Mrs. Lesley Alexander - NHS Grampian

Mrs. Vicky Burnett - NHS Grampian

### **Aim of paper**

The purpose of this pilot was to understand if a coaching approach to student nurse supervision and assessment leads to improvements in the culture of learning; competence and confidence of students in practice. We also wanted to assess whether an increase in student capacity would negatively affecting quality of learning or patient experience. This presentation will share our experiences of implementing a coaching approach to supervision and assessment.

The aim of this submission is to update delegates of the outcome of our coaching pilot and to influence and inform other teams who may be considering this approach.

### **Abstract**

NHS Grampian is the first health board in Scotland to trial a coaching model of supervision and assessment for pre-registration student nurses in practice. NHS Grampian student capacity had declined over the last 5 years from 922 placements down to 460 at the height of the Covid-19 pandemic in 2020; an innovative approach was required to reverse the historical

decline in placements while maintaining quality learning environments.

Coaching models of supervision and assessment have been implemented in healthcare trusts in England; evidence shows that coaching allows “students to identify solutions to practice based problems in a safe environment” (RCN.,2019). NMC Standards for Student supervision and assessment (2019) empowers students to take responsibility for their learning, a coaching approach supports this. Facilitating students to have an opportunity for deeper learning; allowing them to develop and build on their knowledge, skills, confidence and competence through working in a collaborative learning practice area (Clark et al 2018, Hill et al 2020) while supporting in an increase in student numbers seemed the ideal solution.

The pilot was delivered over 10 weeks in two diverse clinical areas and included all stages of student nurses in practice; areas almost doubled their usual student allocation. Evaluation of staff, student and patient experience was undertaken using a person-centred approach and reviewed through creative hermeneutic data analysis.

By the end of placement 100% of students felt more confident, many were able to provide examples of where they had developed new knowledge and skills and discussed how they valued the support and peer learning that coaching approaches offered. Practice colleagues found students were proactive, organised and more confident in their own abilities. Patients observed that students were ‘learning from each other’.

### **3 learning outcomes**

1. To demonstrate knowledge of the main drivers for the utilisation of a coaching approach to student supervision and assessment



2. To draw conclusions about the success of this coaching pilot from the data analysis

3. To understand what the next steps are for the implementation of coaching methods to student supervision and assessment in NHS Grampian

### **Recommended reading titles (please enter up to 3)**

The Royal College of Nursing (RCN). (2022) *Using a Coaching Model in Practice Supervision*. Available at: <https://www.rcn.org.uk/Professional-Development/Practice-based-learning/Innovations-from-around-the-UK/Using-a-Coaching-Model-in-Practice-Supervision> (Accessed 27 September 2022).

D, Clarke., Williamson, E R and Kane, A. (2018). Could students' experiences of clinical placements be enhanced by implementing a Collaborative Learning in Practice (CLiP) model? *Nurse Education in Practice*, Volume 33, pp. A3-A5.

Hill, R., Woodward, M and Arthur, A. (2020) Collaborative Learning in Practice (CLIP): Evaluation of a new approach to clinical learning. *Nurse Education Today*, Volume 85.

### **Biography - Lesley Alexander**

Lesley Alexander is Lead Practice Educator for health and social care partnerships within NHS Grampian. Lesley qualified as an Adult Registered General Nurse in 1991 at the Glasgow College of Nursing and Midwifery (East) and has held a variety of clinical roles in both primary and secondary care, with a focus on cardiology and telehealth. Practice Education has been her career focus since 2003, holding posts within NHS 24 and NHS Grampian. Lesley completed her Pg Cert Higher Education and Teaching and MSc in Professional Nursing Studies at Robert Gordon University.

Lesley is passionate about exploring new and innovative ways to improve student

learning in practice and supporting individuals and teams to develop person-centred ways of working.

## **#71 The Impact of Cancelling Training for Staff**

### **Authors**

Ms. Tegan Rees - Northampton General Hospital

### **Aim of paper**

An evidence-based practice poster project designed to explore the impact that cancelling training has on nurses, midwives and healthcare assistants, with focus on their mental wellness and wellbeing, recruitment and retention, and patient safety.

### **Abstract**

#### **The Impact of Cancelling Training for Staff**

How would you like to shape the future of staff wellness and wellbeing through professional development?

This evidence-based poster project looks at the impact that cancelling training has, focussing on the retention of nurses, midwives and healthcare assistants, their mental wellbeing and these both impact on patient safety.

Literature searches around the topic of 'cancelling training for healthcare professionals' were conducted on the CINAHL database, this brought up a limited amount of research papers. Therefore, data from the Trust's most recent NHS Staff Survey and Pathway to Excellence mock survey were also used. As well as data and research around the role of the Professional Nurse/Midwifery Advocate. I recognise that the low number of findings in the literature search is a limitation of this project, as is only using survey data from the Hospital I work in.

Common themes from all of the findings were that cancelling training has a negative impact on staff wellbeing, retention and patient safety. It was also recognised that doctors have protected time for education, as part of their ongoing development, whereas nurses, midwives and HCAs do not, which can lead to them feeling undervalued and under skilled. One potential way of overcoming this is to give these staff groups protected time for their training and development, showing them that they are valued.

In order to shape the future of staff development, it is vital that the Trust buy into their staff to show them how they can be supported and empowered through continuous professional development, while building on personal and professional leadership. This all leads to a happier, more valued and driven workforce, as well as staff taking a genuine interest into improving services for patients. Ultimately leading to better patient safety outcomes and improved staff wellness.

### 3 learning outcomes

Using research and existing hospital survey data:

1. Explore the impact of cancelling training on nurses' wellbeing.
2. Explore themes around nurse and HCA retention.
3. Look at how both of these affect patient safety.

### Recommended reading titles (please enter up to 3)

1. Wallbank, S. (2016) The Restorative Resilience Model of Supervision A reader exploring resilience to workplace stress in health and social care professional. Pavilion Publishing and Media.
2. Kirby, J. (2021) Royal College of nursing poll finds members want to quit NHS. The Royal College of Nursing. [Accessed May 2022].

3. Pettit, A., and Stephen, R., (2015) Supporting Health Visitors and Fostering Resilience Supporting Health Visitors and Fostering Resilience. London, Institute of Health Visiting.

### Biography - Tegan Rees

I qualified with BSC Hons in Adult Nursing from De Montfort University, Leicester, in 2016. I have worked within the Emergency Department at Northampton General Hospital as a Staff Nurse, Junior Sister and Junior Practice Development Nurse until October 2021 when I began a secondment opportunity within the Professional and Practice Development team. I have since worked as an Associate Clinical Skills Facilitator within this team teaching a range of clinical skills to Nurses, Midwives, Nursing Associates and Healthcare Assistants. I am also an Advanced Life Support instructor and have recently completed the Professional Nurse Advocate Training Programme through the University of Wolverhampton.

### #73 A Values-based competency framework for Health Care Assistants (HCA's) working in Paediatric Outpatients

#### Authors

Mrs. Andrea Williams - Alder Hey Children's NHS Foundation Trust

#### Aim of paper

Present findings from service improvement project that was completed for MSc dissertation (Clinical Leadership). Following a literature review, an evidence-based, peer reviewed competency framework based on values, personal responsibility, care and compassion for Health Care Assistants (HCA's) working in Paediatric Outpatients was developed and feasibility tested. A Pilot study ran over three months that captured pre and post intervention findings.



This innovative approach to align care delivery by HCA's with departmental and strategic aims, seeks to draw out and challenge values, attitudes and behaviours in relation to patient safety and patient/family experience in a Paediatric Outpatient setting.

## **Abstract**

Evidence has shown that the numbers of unregistered Care Support Workers, who deliver a high proportion of 'hands-on' care, has increased significantly by 31% from 2009 -2021 (The Nuffield Trust, 2021), yet there remains limited guidance on how their training/ development and approach to care should be delivered and monitored. Both The Cavendish Review (2013) and The Willis Commission (2012) framed a national picture of varied skill, knowledge, and approach to care amongst the unregistered workforce, with a call for Regulation and standardisation of development pathways. Recommendations saw the introduction of the Universal 'Certificate of Fundamental Care' and the importance of values-driven recruitment and leadership, however translation into practice has seen challenges and delays Nationally and falls to Organisations to pave the way.

The current COVID-19 pandemic has put the NHS workforce under unprecedented pressure (The Kings Fund, 2020) with unpredictable times and as such, has seen challenges beyond the day-to-day operational scope of Organisations, this has brought unique workforce challenges. It is only now that we have seen a national response to workforce strategy, with the introduction of the NHS People Plan (2021) and a focus back on kindness and core values, as promoted by the NHS Constitution (2015).

With the ever- increasing demands on health care and the on-going vacancy shortfall of Registered nurses, it is evident that HCA's/Care Support Workers will remain pivotal to the future of the NHS and as such

need nurturing and developing.

The purpose of this framework was to link up training and competence of clinical skills with a compassionate, kind, and respectful approach to delivery of safe care in Paediatric Outpatients.

Following completion of project, the framework has been further developed into a band 2 - 3 development pathway and adopted into practice for all new unregistered staff recruited to the department.

## **3 learning outcomes**

1. Improve patient safety, clinical effectiveness and patient/family and staff experience in Paediatric Outpatients.
2. Align care with Departmental vision, Trust values & Trust preliminary work on values- based recruitment.
3. To increase HCA knowledge and skills, promoting a more flexible and efficient workforce, building capability within teams.

## **Recommended reading titles (please enter up to 3)**

CAVENDISH, C. 2013. Cavendish Review: an independent review into healthcare assistants and support workers in the NHS and social care setting.

This report considers what can be done to ensure that all people using services are treated with care and compassion by healthcare and care assistants in NHS and social care settings. It makes recommendations about the recruitment, training, management, development and support of the unregistered workforce.

COLFAR, S, DEY, A, FOULKES, D & DOUGLAS, M. 2013. A Skills Development Pathway for HCA's. *Nursing Times*. Vol 109 (21), pp20-21.

Impact of a skills and development pathway at a single site centre.

DHANDRA, J, RICHARDS, S, WELLS, J, & WOODARD, F. 2014. HCA's transform patients experience of care through MacMillan Cancer Support's Value-based Standard. *British Journal of Health care Assistants*. Vol 8 (7), pp 334-340

Standard identifies link between patient and staff experience and the importance of co-design and improvement.

### **Biography - Andrea Williams**

I came into nursing back in 1989 and completed a 4-year joint adult and paediatric nursing course. Although I enjoyed both, I opted to work in the field of paediatrics and have continued my career at Alder Hey Children's NHS Foundation Trust, ever since. I have worked as a staff nurse on neurology, general medicine and the cardiology unit, being a band 6 shift-leader/educator, since 2000. A few years back I had a career change to focus on my leadership skills - gaining the post of Outpatients Nurse Manager, where I currently work. I love learning and have a strong commitment to learning and professional development, both on a personal level and for my wider team. I have completed numerous Open University courses, obtained my BA in Child Nursing Studies in 2011 and completed my MSc in Clinical Leadership in August 2022. My own role has expanded over the years, and I feel proud that I have been able to develop many new initiatives and advancements throughout my career.

I am committed to delivery of outstanding care and going the extra mile to make a difference to our children, young people, and families.

## **#74 The impact of transition programmes for students and new graduate nurses on workplace bullying, violence, stress and resilience: A scoping Review**

### **Authors**

Ms. Khadijah Alshawush - University of Birmingham

Dr. Caroline Bradbury-jones - University of Birmingham

Dr. Nutmeg Hallett - University of Birmingham

### **Aim of paper**

Implications of the findings of this scoping review were discussed in relation to education for nursing colleges' deans, clinical practice for healthcare administrators, managers, new graduate nurses and nurse preceptors. The results were published in academic journals JCN. For the non-specialist (new graduate nurses and student nurses), I will disseminate the findings through this symposium.

### **Abstract**

#### **Background**

Some hospitals and universities have developed transition programmes (TPs) to attract new graduate nurses (NGNs) and ease their transition from education to practice. Although TPs have been successful in increasing the retention rate for NGNs, their impact on supporting NGNs in dealing with workplace violence, bullying and stress, and in enhancing their resilience, is unknown.

#### **Aim**

To identify whether TPs support NGNs in terms of dealing with workplace violence, bullying and stress and enhance NGNs'

resilience during the transition from education to practice.

## Method

A scoping review was undertaken following the framework of Arksey and O'Malley. A broad search without time limitation was performed in the databases CINAHL, SCOPUS, Medline, Web of Science, ASSIA, PsycINFO, EMBASE, PROSPERO and ProQuest Dissertation databases.

## Results

Among 779 studies, 19 met the inclusion criteria and were analysed. Most NGNs experienced violence and bullying (by different predators) and stress in the workplace whether they enrolled in the TPs or not. However, some TPs which provide support to NGNs who experience violence, bullying, and stress were more likely to positively impact these NGNs, although they did not reduce violence or bullying. Preceptors support, educational sessions and safe work environments are the most beneficial elements of TPs for supporting NGNs. No studies have been conducted on nursing students.

## Conclusion

Universities and hospitals should collaborate to re-developed TPs in a structured manner that supports NGNs experiencing violence, bullying, and stress, according to this review. The revised TPs should aim to meet the needs of both NGNs (to improve NGNs' education on how to handle violence, bullying, and stress), and organisations (to reduce turnover in hospitals). Also, this review, emphasises the challenges confronting the development of TPs.

## 3 learning outcomes

A) To identify newly graduated nurses' experiences of workplace violence, bullying and stress.

B) To determine if transition programmes support newly graduated nurses who experience violence, bullying and stress and improve their resilience.

C) To understand the strategies that could help universities and hospitals develop structured transition programmes.

## Recommended reading titles (please enter up to 3)

Bakon, S., Craft, J., Wirihana, L., Christensen, M., Barr, J., & Tsai, L. (2018). An integrative review of graduate transition programmes: Developmental considerations for nursing management. *Nurse Education in Practice Journal*, 28, 80-85.  
doi:10.1016/j.nepr.2017.10.009.

Duchscher, J. B. (2008). A process of becoming: The stages of new nursing graduate professional role transition. *The Journal of Continuing Education in Nursing*, 39(10), 441-450.

Pizzingrilli, B., & Christensen, D. (2015). Implementation and evaluation of a mental health nursing residency program. *Journal of Nursing Education and Practice*, 5(1), 76.

## Biography - Khadijah Alshawush

Khadijah is a lecturer in nursing teaching and nursing leadership. Khadijah has eight years of clinical experience in surgical ward and operation room units and previously worked as a charge nurse and cover nurse for ward managers. She is a certified sedation nurse and is AORN certified. She completed her master's at Cardiff University, undertaking a systematic review on the impact of a nurse residency programme in reducing violence, bullying and stress among new graduate nurses. Her research interests are violence and bullying among students and new graduate nurses. She is now undertaking a PhD on the impact of transition programmes on workplace violence among Saudi new graduate and student nurses.

## #75 Improving undergraduate nursing students' drug calculation skills – A multi-modal approach

### Authors

Mr. Nelson Selvaraj - Cardiff University

### Aim of paper

To evaluate the impact of a multi-modal educational approach on undergraduate nursing students' drug calculation skills.

### Abstract

Drug calculation skills are fundamental to medication safety. Despite the importance of this skill, evidence suggests that more than half of nursing students around the world fail drug calculation assessment (van de Mortel et al, 2014). It is therefore important to strengthen nursing students' drug calculation skills during their education (Stake-Nilsson, 2022). A multi-modal educational (MME) approach has been implemented in the final year nursing curriculum to improve students' drug calculation skills. Quality improvement principles were used to guide the MME approach. Initial data from previous numeracy assessments were reviewed by the Numeracy lead to identify common types of errors made by students. Following the review of the initial findings, several strategies have been planned and implemented in collaboration with the school of mathematics. In this MME approach, students were given daily online mock drug calculation exams and offered one-to-one or group math tutorials by the Numeracy lead or by the School of Mathematics prior to their summative assessment. During the summative assessment, students were allowed to use calculators to double-check their answers. User-friendly guidelines and learning materials have also been developed and made available for students to access. Data from daily mock assessments were used to

monitor students' performance and design appropriate teaching strategies. An evaluation of this MME approach revealed that the new initiative had a positive impact on students' drug calculation abilities and improved the overall first attempt pass rate from 64% to 84%. The teaching strategy of one-to-one math tutorials, which provide more opportunities for students to ask questions about drug calculations, was clearly identified by students as a benefit. These encouraging findings are congruent with previous evidence (Mackie and Bruce, 2016), suggesting that with a MME approach, students' abilities to calculate accurate dosages can be improved.

### 3 learning outcomes

- To explore the role of the multi-modal educational approach in improving undergraduate nursing students' drug calculation skills.
- To evaluate the benefits of one-to-one math support.
- To explore the importance and benefits of cross-discipline collaborations between the School of Nursing and the School of Mathematics.

### Recommended reading titles (please enter up to 3)

- Mackie, JE and Bruce, CD (2016) Increasing nursing students' understanding and accuracy with medical dose calculations: A collaborative approach. *Nurse Education Today*. 40: 146 – 153
- Stake-Nilsson, K et al (2022) Medication dosage calculation among nursing students: does digital technology make a difference? A literature review. *BMC Nursing*. 21: 123.
- van de Mortel, TF et al (2014), A whole-of-curriculum approach to improving nursing students' applied numeracy skills. *Nurse Education Today*. 34: 462 – 467.

## Biography - Nelson Selvaraj

After a 17 years clinical career in critical care, I joined Cardiff University in 2015 as a lecturer in adult nursing. My special interests are sedation management, simulation and drug safety. I am the Numeracy lead for nursing which is integral to ensuring that students meet undergraduate nursing programme requirements for drug calculation standards.

## #78 Paediatric Student Nurses Peer to Peer Simulation- Based Education

### Authors

Mrs. Amanda Wilford - The Open University, Staffordshire University

### Aim of paper

Second-year paediatric student nurse students in an English University need to undertake a teaching activity lasting 10 minutes as part of their undergraduate curriculum as a formative assessment. A novel approach was tried with second years facilitating each other through simulation-based education (SBE).

### Abstract

#### *Background*

Second-year student nurses were offered a new approach to their formative teaching assessment. These students began their training at the beginning of the Covid-19 Pandemic.

The student nurses were offered the opportunity to create and lead a simulation activity based on their practice instead of the 10-minute activity as part of a pilot project. The TALK tool was chosen as the mode of debriefing, and this can help with building up confidence as it came from practice.

#### *Method*

Twenty-two students supported by a simulation and a paediatric lecturer over a day were introduced to experiential learning and simulation education approaches, including design, facilitation and debriefing. In small groups, the students created designs and were taught to use the Talk Framework. They undertook the activities with each other on a separate day

#### *Results*

The students completed an online evaluation tool about their experience as educators. The students reported feeling more confident with the difference between teaching and facilitating. The students felt they understood the stages of writing for education and enjoyed the session on learning outcomes. The students stated that using simulation was more useful than randomly teaching any skill as this links to their practice.

Through a discussion at the end of the sessions, the students felt that in practice, they saw aspects of patient care that they do not understand or were unable to seek clarification and TALK would help. The students also felt that the TALK tool should be introduced in year one

#### *Conclusion*

The students' feedback about the TALK tool being used as a strategy to learn how to speak to practice supervisors or other members of the healthcare team has brought about an immediate change, with this being written into all undergraduate nursing, midwifery and allied health sessions from year one.

## 3 learning outcomes

*By the end of the presentation, all participants will*

1. Understand how learners can construct meaningful simulation-based activities
2. Discuss the Talk Tool as a debrief framework in academic and clinical settings

3. Explore how simulation-based education can be used for student-centred learning

**Recommended reading titles (please enter up to 3)**

Persico, L., Belle, A., DiGregorio, H., Wilson-Keates, B. and Shelton, C. (2021) "Healthcare Simulation Standards of Best Practice™ Facilitation," *Clinical Simulation in Nursing*, Elsevier Inc., vol. 58, pp. 22–26 [Online]. DOI: 10.1016/j.ecns.2021.08.010.

Diaz-Navarro, C., Leon-Castelao, E., Hadfield, A., Pierce, S. and Szold, D. (2021)

"Clinical debriefing: TALK© to learn and improve together in healthcare environments",

*Trends in Anaesthesia and Critical Care*, vol.40, pp 4-8. ISSN 2210-8440, <https://doi.org/10.1016/j.tacc.2021.07.004>.

**Biography - Amanda Wilford**

Amanda (Mandy) Wilford is currently a Senior Lecturer in Patient Safety and Simulation at The School of Health, Science and Wellbeing, Staffordshire University. Mandy has worked in healthcare simulation in commercial and NHS settings. As a Registered Nurse, her specialism is Cardiac Nursing. Mandy is currently a part-time postgraduate research student as part of the Professional Doctorate in Education at The Open University. Her research is centred around unfolding healthcare simulations and how learning is supported from both the learner's and facilitator's perspectives. Mandy volunteers for SESAM and is the Secretary of the Special Interest Group for Nursing. As a volunteer for INACSL she contributed to the 2021 Update of the Professional Integrity Standard and is faculty for their ISEP programme.

**#79 Exploring healthcare students' experiences of virtual Time for Dementia visits: Impact of listening to the lived experiences of people living with dementia and their carers**

**Authors**

Dr. Wendy Grosvenor - University of Surrey

Mrs. Lisa Blazhevski - University of Surrey

Mr. Simon Downs - University of Surrey

Mr. Laurence Drew - University of Surrey

**Aim of paper**

Traditional healthcare education with its acute care focus may fail to build the understanding, compassion and person-centred empathy needed to help those with long-term conditions, such as dementia.

Time for Dementia virtual visits involving experts by experience was developed to address this. The aim of the study was to explore the experiences of health care students' engaging with virtual visits with people living with dementia and their carers.

Findings will help to inform educational strategies involving experts by experience in response to current suboptimal dementia care and the increasing numbers of people with dementia.

**Abstract**

**Background:** There is a need to ensure the future healthcare workforce has the knowledge and skills to deliver high quality and compassionate care to people living with dementia. There is no research on pre-registration healthcare students' (paramedic, adult and mental health nurses) experiences of virtual visits with people living with dementia and their carers. Understanding will help to inform educational strategies that need to be developed to address the increasing



numbers of people living with dementia and evidence of suboptimal dementia care.

**Objective:** to explore health care students' experiences of engaging with virtual visits with people living with dementia and their carers. Specifically, to understand how this educational initiative may inform the development of virtual visits to support the universities values of supporting innovation and service user engagement.

**Methods:** qualitative focus groups ( $n=5$ ) were conducted with (adult nurses  $n=13$ , mental health nurses  $n=5$ , paramedic students  $n=6$ ). Thematic analysis was used to analyse focus group transcripts.

**Results:** study offers new insights into the impact of developing dementia education that focuses on relational learning through virtual visits. Findings suggest virtual visits resulted in students' broadening views of dementia to encompass the person's life and relationships. This resulted in a person-centred shift in their understanding of dementia and seeing the person behind the diagnosis. Students discussed their roles as future health care practitioners and considered how they could make a difference to improving the care they provided.

**Discussion:** this is the first study to explore virtual visits with people with dementia with their carers and pre-registration healthcare students as an educational initiative. Results will be useful data to inform curriculum to stimulate interest in the involvement of experts by experience in education to drive improved quality of dementia care. There is potential transferability of this educational approach to other long-term conditions.

### 3 learning outcomes

Absence of literature into service user involvement in healthcare education, research needs to explore ways to encourage experts by experience in education curriculums

New education approaches are needed to improve understanding of the challenges faced by those living with long term conditions such as dementia

Explore virtual visits to overcome the current barriers to service user involvement in education

### Recommended reading titles (please enter up to 3)

Hebditch, M; Daley, S; Grosvenor, W; Sherlock, G; Wright, J; Banerjee, S. (2022) Student nurses' career preferences for working with people with dementia; a longitudinal cohort study. *Nurse Education Today*  
<https://doi.org/10.1016/j.nedt.2022.105303>

Grosvenor, W., et al. (2021). Reframing dementia: Nursing students' relational learning with rather than about people with dementia. A constructivist grounded theory study. *Internal Journal of Geriatric Psychiatry* 36(4): 558-565.

Banerjee, S., Farina, N., Daley, S., Grosvenor, W., Hughes, L., Hebditch, M., . . . Wright, J. (2017). How do we enhance undergraduate healthcare education in dementia? A review of the role of innovative approaches and development of the Time for Dementia Programme. *International Journal of Geriatric Psychiatry* January, 32(1), 68-75

### Biography - Wendy Grosvenor

#### Dr Wendy Grosvenor

Senior Teaching Fellow, Programme Director of Studies (Nursing)

*RN, BSc (Hons) Clinical Practice (Older Person), PhD, PG Cert, PG Dip.*

I started my nursing journey in 1991. My background has included working in Acute Medicine, Practice Development and Dementia Specialist Nurse. I started working

at the University of Surrey in 2013 to lead the integration of dementia into the undergraduate curriculum and proactively prepare nursing students to meet the current and future needs of people with dementia.

I am Surrey lead for a collaborative project called Time for Dementia; supporting the advancement of addressing pedagogical and practice issues related to dementia and care of older adults. My PhD explored the longitudinal impact of this innovative dementia education program on adult nurses learning and practice. It won the Rosemary Pope award 2020 - an annual prize within the School of Health Sciences at the University of Surrey which recognises a PhD thesis that makes a significant and outstanding contribution to the study of healthcare education and practice.

## **#80 Developing professional development and leadership in nursing through a student / lecturer partnership**

### **Authors**

Dr. Julia Petty - University of Hertfordshire

Ms. Emmie Hopkinson - Kingston University

### **Aim of paper**

-To present an overview of the reflections and experiences of a student-lecturer partnership as part of the Council of Deans (CoD) Student Leadership Programme 2022, from both perspectives.

-To discuss how the partnership took place using some of the principles of reverse mentorship and coaching combined.

-To highlight the mutual benefits of the student- lecturer partnership within nurse education for the enhancement of leadership skills and professional development, for future nursing practice.

-To illustrate the programme success with examples of co-authored publications.

-To encourage an increase in student publications.

### **Abstract**

This presentation will provide an overview of a student-lecturer partnership developed through a Student Leadership programme. Both perspectives will be presented, based on experiences of a mutual partnership including the benefits for leadership and professional development, drawing on examples of positive outputs.

Nursing is an ever-changing environment requiring nurse registrants to be able to lead others from the point of qualification. Education must therefore equip students with leadership skills to take forward to their developing professional role. Ensuring nurses graduate with a clear, shared understanding of how they can be excellent leaders will help drive positive change in healthcare services and empower them from the start of their professional careers (Health Education England, 2018).

One strategy for nurse educators to instil leadership in students is to work in partnership with them (Healey, 2019). Such a partnership was set up for the CoD Student Leadership programme, managed using combined principles from coaching and reverse mentorship, in relation to unlocking student potential to maximise their own performance and helping them learn (Hirdle and Humphries, 2020) including a commitment to mutual learning and collaboration (Raza and Onyesoh, 2020). Both authors saw innovation as the mutual collaboration between each other, for developing the student's journey to leadership within healthcare.

Benefits of the programme and partnership will be discussed as well as examples of outputs, offering key tips and useful information relating to co-authoring journal

and book publications, responding to peer review and navigating the publishing process to educate others. From the student perspective, key messages will be presented for other students who want to further develop their leadership skills; for example, how collaborative learning can be used for career development, to encourage students to have influence within their workplace, and having started publication through this relationship, to encourage other students to do the same.

### 3 learning outcomes

By listening to this oral presentation, the delegate will...

- Understand the benefits of student-lecturer partnership in nurse education.
- Be aware of how the principles of reverse mentorship and coaching can be integrated into a mutual partnership.
- Gain tips and useful information on how a student- lecturer partnership can lead to positive outcomes for professional development- for example, publishing outputs.

### Recommended reading titles (please enter up to 3)

Health Education England (2018). *Maximising Leadership Learning in the Pre-Registration Healthcare Curricula*. NHS Constitution

Healey, M. (2019) *Students as partners and change agents in learning and teaching in higher education*. Howden: Healey HE Consultants.  
[www.mickhealey.co.uk/resources](http://www.mickhealey.co.uk/resources)

Hirdle, J., & Humphries, B. (2020). Training in coaching to help qualified staff support student nurses. *Nursing Times*, 116(11), 37-39.

### Biography - Julia Petty

Julia is Associate Professor (learning and teaching) at University of Hertfordshire. She

also works clinically for the UK National Vaccination Programme. Julia is a newborn life support instructor for the UK Resuscitation Council, Vice-Chair of the UK Neonatal Nurses Association, Board member for the Council of International Neonatal Nurses and a coach on the Council of Deans Student Leadership programme. She is also a mentor for neonatal educators in Africa, through the Project Hope organisation. Her research interests focus on parents' premature birth experiences and she has a particular passion in the educational value of digital storytelling.

Emmie Hopkinson is a third year BSc children's nursing student at Kingston University. She has successfully completed her first two years of the programme and is over half way through her final year to qualification. In her second year of study, she was successful in gaining a place on the Council of Deans Student Leadership programme which she has now completed. Her elective placement was spent in the Philippines. She has had an article, on the topic of eating disorders in children and young people, accepted for publication in a peer-reviewed journal, plus some chapters for a key children's nursing textbook.

### #81 Innovation in the delivery of interprofessional learning in distance education: It can be done!

#### Authors

Dr. Bonny Kehm - Excelsior University

Dr. Stephanie Yackel - Excelsior University

Prof. Gretchen Schmidt - Excelsior University

#### Aim of paper

There is limited research examining the integration of interprofessional educational experience (IPE) into distance education. In 2020, 1 in 4 students completed some part

of their learning via distance education. The future of care is built on a team based care approach. The tenets of team based care are learned through IPE. The purpose of this study was to contribute to the best practices for integrating IPE in education. This research was to highlight how a distance education school of nursing, without affiliation of a medical center, implemented an IPE experience that measured increase student self-efficacy in the IPEC constructs.

## Abstract

Integrating IPE in distance education programs is challenged by the very benefits that distance education brings to the learning environment: flexibility and asynchronous approach, geographically dispersed learners, and requisite technology skills. A pre-post survey design was used to measure change in student self-efficacy, which also correlated with the IPEC constructs of: values/ethics; roles/responsibilities; interprofessional communication; and teams/teamwork. Self-efficacy was specifically chosen as this is a strong measure of future behavior (Bandura, 1986). The population consisted of students from four different, 100% online, asynchronous distance education programs (nursing, health sciences, nutrition, and pharmacy) at 3 different universities. The convergence of these four schools (school of nursing, the school of health science, the dietetic program, and the school of pharmacy), represented 243 students, broken down as follows. The nursing course had 144 students, the nutrition interns numbered 30, the health sciences had 16 students, and the pharmacy course had 53 students. An open access learning management system, Moodle, was used to facilitate asynchronous interprofessional (IP) groups of student learners in a discussion on the public broadcast system (PBS) video *Poor Kids*, a documentary that follows three families struggling with financial challenges. Students were equally

distributed among the small IP groups, based on discipline. Discussion questions directed the student responses. Faculty from each program facilitated the discussions. Statistically significant changes in student self-efficacy, measured on a Likert scale, were measured across all constructs. Qualitative data revealed themes reflective of rich and deep learning about, with, and from each discipline. Positive results included increased student self-efficacy in relation to the core IPEC competencies, student, and faculty satisfaction. This study builds on the conference overarching theme of *Investing in the health and social care workforce for the future*, by introducing evidence-based approach that leads to effective care and IPE efficiency gained through high-quality innovative education.

## 3 learning outcomes

1. Describe how to implement an interprofessional educational experience (IPE) in distance education that measures increase student self-efficacy in the interprofessional collaborative practice (IPEC) constructs.
2. Explain how the interprofessional collaborative practice (IPEC) constructs serve to foster safe, high-quality, patient-centered care.
3. Examine opportunities and lessons learned related to achieving desired interprofessional educational experience (IPE) goals that enhances positive outcomes for nursing education.

## Recommended reading titles (please enter up to 3)

1. Bandura, A. (1986). *Social foundations of thought & action: A social cognitive theory*. Englewood Cliffs, NJ: Prentice-Hall.
2. Congdon, H.B. (2016). Interprofessional education (IPE) practices at uni-versities across the United States with an established

IPE infrastructure in place. *Journal of Interprofessional Education & Practice*, 5, 53-58. <https://doi.org/10.1016/j.xjep.2016.10.001>

3. Rector, R. (2015). *Poverty and the social welfare state in the United States and other nations*. Retrieved from <https://www.heritage.org/welfare/report/poverty-and-the-social-welfare-state-the-united-states-and-other-nations>

### Biography - Bonny Kehm

Bonny Kehm is the program director for the School of Nursing at Excelsior University, where she designs curriculum and conducts research. In 2017, Kehm was appointed by the governor of Missouri to the Missouri State Board of Nursing. The board governs and regulates the profession of more than 150,000 licensed nurses. She is board's president. Kehm has received several honors and awards throughout her nursing career. She was a speaker at the Royal College of Nursing Centennial International Conference in 2016 and a speaker at the Nursing Educational Institute in New York in 2017. She received the Rising Nurse Leader Award from the Missouri Organization of Nurse Leaders in 2016; the International Quality Research Paper Award from The United States Distance Learning Association in 2018, the Arthur J. Gregg Leadership in Promoting Diversity, Equity, and Inclusion award in 2022, and was selected as one of the winners in the inaugural Nabisco 100 Calorie Packs "Celebrating 100 Extraordinary Women" contest for her community service in 2009, to name a few. Kehm earned her bachelor's and master's degrees in nursing from Webster University, her doctorate in nursing education from Capella University, and her graduate certificate in Health Care Informatics from Excelsior University.

## #88 Reflective café; the evaluation of a supportive educational wellbeing strategy

### Authors

Mrs. Caroline Boyle - Liverpool John Moores University

Mrs. Joanna lavery - Liverpool John Moores University

Mrs. Sarah Logan - Liverpool John Moores University

### Aim of paper

This aim of the paper is to highlight the use of reflective practice to support the health and wellbeing of specialist community practitioner (SCP) and specialist community public health nurse (SCPHN) students. The current teaching strategy is via a trilogy of reflective café sessions and a student evaluation of the sessions was undertaken to develop these further. Current provision aims to fulfil the needs of student practitioners in challenging academic and practice roles to achieve the NMC proficiencies. The education team propose to develop these innovative strategies moving forward to enhance this pedagogy.

### Abstract

Reflective practice is an integral part of nursing and can be used as a strategy for self-care to enhance mental health and wellbeing. There are calls to establish 'reflection hygiene habits' for nurses to ensure that they are better prepared to understand their own strengths and weaknesses and become more self-aware, (Robinson, 2020, Patel and Metersky, 2021). Specialist Community Practitioner (SCP) and Specialist Community Public Health Nurse (SCPHN) students evidence competencies using reflective practice to achieve NMC proficiencies. A university in Northwest England developed a reflective café trilogy for the SCP/SCPHN programme, to support



and encourage alternative methods for deeper reflection. The café provides a contemporary focus for supporting resilience and student wellbeing whilst acknowledging the pressures of academic and clinical practice. The academic team evaluated reflective café to establish if this met the student's needs. The evaluation aimed to understand the usefulness of 'reflective café' as a technique to support the process of reflecting on practice.

The evaluation employed an online questionnaire with a Likert scale. Questions aimed to determine if students had enjoyed the sessions, improved their aptitude to reflect in line with the level of study and prepared students to support junior staff to reflect in practice. A well-being session with the participation of practice partners was included in the trilogy, this was a collaborative and reciprocal approach between the university and a local college. Holistic treatments were provided which promoted the ethos of reflective café and further enhanced supportive self-care strategies. Students overwhelmingly evaluated reflective café as valuable, the number of sessions met their needs and it improved reflective competence. The potential to develop and use alternative methods, such as digital technology and storytelling to reflect is recognised. The team plan to develop the implementation of other reflective formats to support student innovation moving forward.

### 3 learning outcomes

To understand the link between reflective practice and the health and wellbeing of nurses.

Consider different strategies to support reflective practice.

To associate holistic strategies as beneficial when incorporated into reflective practice to enhance wellbeing and self care.

### Recommended reading titles (please enter up to 3)

#### References

Paliadelis P. & Wood P. (2016). Learning from clinical placement experience: Analysing nursing students' final reflections in a digital storytelling activity. *Nurse Education in Practice*. Vol. 20, 39-44

Patel, K.M. and Metersky, K., 2021. Reflective practice in nursing: A concept analysis. *International Journal of Nursing Knowledge*.

Robinson, P. "Reflective Practice in Community Nursing." *British journal of community nursing* 25.1 (2020): 5-5.

Web.Sandars J. & Murray C. (2009). Digital storytelling for reflection in undergraduate medical education: a pilot study. *Education for Primary Care*. Vol. 20, 441-444.

#### Biography - Caroline Boyle

Caroline Boyle qualified as a RN in 1991 and as a RCN in 1994. After working 24 years in acute paediatric care she transitioned to the community and established a new complex community children's nursing team. In 2007 she qualified as a specialist practitioner in community children's nursing and in 2012 as advanced practitioner and non-medical prescriber. Since 2016, Caroline has worked in higher education teaching pre and post registration nursing students at both undergraduate and postgraduate level. She is a Fellow of the Higher Education Academy.

Senior Lecturer Child Nursing, Programme Lead SPCCN. Liverpool John Moores University

MSc Advanced Practice, PgDip, PGCert, BSc(Hons) SPCCN, RCN, RN, FHEA



## **#91 An innovative approach to expanding student nurse placement capacity**

### **Authors**

Dr. Linda Sanderson - University of Huddersfield

### **Aim of paper**

To report on an innovative pilot project supporting nursing students in learning environments, where there was no registered nurse practice supervisor or practice assessor, using an indirect (long arm) supervision and assessment model.

### **Abstract**

‘Clinical learning environments’ for student nurses have historically been associated with healthcare services e.g. Hospitals and community nursing services. Valuable learning opportunities, relevant to nursing proficiencies, can be obtained in many other care arenas e.g. social care, independent organisations, private organisations (Knight et al, 2022).

Learning environments supporting student nurses must meet the standards required by the NMC through quality assurance processes e.g. educational audit (NMC, 2018). Many social care environments can meet the requirements of educational audit; to demonstrate that they are able to support learners, ensure safety of learners, staff and clients and promote learning opportunities, but they may not be able to meet the NMC requirement for a practice supervisor and/or a practice assessor.

A successful funding bid from Health Education England (HEE) enabled piloting of an innovative approach to developing beneficial learning environments, with support from indirect (long arm) practice supervisors (ILAPS) and indirect (long arm) practice assessors (ILAPA).

- 4 experienced nurses were appointed to the University’s part time hourly paid ‘pool’ and acted as ILAPS or ILAPA depending on the placement requirements.
- 6 new learning environments were established during the project i.e. a private social care organisation and 5 residential homes for people with learning disabilities.
- 7 student nurses, adult, learning disability and mental health fields of nursing, were placed for a total of 50 weeks in the period January 2022-September 2022.

Evaluative research ran concurrently with the indirect (long arm) supervision and assessment pilot project; exploring this model of student nurse support from the perspective of the student, ILAPS/ILAPA and placement provider.

In this presentation the operational process of the pilot project will be discussed and the results of the research summarised to encourage attendees to consider this approach to expand student nurse placement capacity into previously unused, but valuable, learning environments.

### **3 learning outcomes**

1. Explain the pilot project and development of new learning environments
2. Discuss the operational process of supporting student nurses with indirect (long arm) practice supervisors and assessors
3. Summarise evaluative research in which the experience of indirect (long arm) supervision and assessment was explored from the perspective of
  - placement provider student nurses
  - practice supervisor and practice assessor

## Recommended reading titles (please enter up to 3)

Knight, K.H, Whaley, V., Bailey-McHale, B., Simpson, A. & Hay, J. The long-arm approach to placement supervision and assessment. *British Journal of Nursing*, 31(4), 247

Nursing and Midwifery Council (NMC) (2018) *Standards for student supervision and assessment (Part 2 of Realising professionalism: Standards for education and training)*  
<https://www.nmc.org.uk/globalassets/sitedocuments/standards-of-proficiency/standards-for-student-supervision-and-assessment/student-supervision-assessment.pdf>

## Biography - Linda Sanderson

Linda trained as a nurse at Leeds Polytechnic 1981-85. Initially an 'Adult' Nurse working in Medicine, Renal and General Surgery. 1988-1989 Linda trained as a Children's Nurse and worked in the speciality of cancer care for children and young people at the Yorkshire specialist unit 1989-2004; as a Staff Nurse, Sister and finally as a Lecturer Practitioner in conjunction with Leeds University. Linda had a brief spell as Sister of a busy Children's unit at Airedale hospital before starting a full time career in education at University of Central Lancashire (UCLan), 2006-2017.

At UCLan Linda was a Senior Lecturer, Course Leader and eventually Principal Lecturer with a lead for Children's Nursing, International placements, Admissions and Business Development.

2017-2020 Linda moved into the charity sector, working with a leading children's cancer charity, Cliv Sargent, as their first Nurse Educator. She worked in the North of England teaching health professionals about the care of children with cancer, promoting safe, confident, care so the children and their families could be cared for as close to home as possible. Following redundancy, due to the Covid 19 Pandemic,

Linda moved to her current post at University of Huddersfield; Head of Practice Education (Blended Learning).

## #95 Developing the future mental health nursing workforce

### Authors

Mrs. Jo Hirdle - Bournemouth University

Mrs. Donna Griffin - Bournemouth University

Mrs. Amanda Watson - Bournemouth University

### Aim of paper

#### Aim

To develop, implement and evaluate speciality placements for mental health nursing students in areas outside traditional mental health National Health Service (NHS) and private sector services.

### Objectives

- To Identify third sector organisations as placement providers.
- To provide preparation for placement providers and upskill the nominated practice area link
- To introduce the long arm assessor and supervisor model
- To map students learning opportunities to student proficiency requirements
- To evaluate and identify the impact on nurse education and practice including student and service provider experiences
- To make recommendations for future placements

### Abstract

The national shortfall of mental health nurses (Jones 2021) has prompted Health Education England to increase student numbers undertaking mental health programmes. This has subsequently led to Higher Education Institutes requiring an

increase in clinical placements. The Nursing Midwifery Council (NMC) Standards for Student Supervision and Assessment (2018) enabled the introduction of the long arm approach to supervision in placements where an NMC registrant was not readily accessible.

This project was a year's pilot to develop new partnerships within third sector organisations, building a sustainable placement capacity that positively impacts on nurse education and contributes to the future mental health nursing workforce. These included a variety of non-statutory agencies, charities, voluntary and social enterprises that support clients living with mental health issues. Working in these diverse settings is aimed at broadening and enhancing the student nurse's repertoire of skills, knowledge and professional development.

A key aspect of the project was to ensure that practice areas were compliant with the NMC standards framework for Nursing and Midwifery Education (NMC 2018). Training for placement providers included preparing for the role of the nominated practice area link, understanding the NMC standards, identifying relevant placement learning opportunities and linking with the student's assessment documentation. This training ensured that providers were cognisant with the standards and programme requirements. Collaboration between the nominated practice area link, practice supervisor and assessor were key in the success of the students' learning experiences and achievement of proficiencies. Integral to the project was ongoing comprehensive evaluation of the challenges and opportunities.

### **3 learning outcomes**

1. Introduce an alternative placement learning experience for pre-qualifying mental health nursing students.
2. Demonstrate how the placement provision reflects requirements of the

Nursing and Midwifery Council for student supervision and effective learning.

3. Explore implications for future placement provision.

### **Recommended reading titles (please enter up to 3)**

Jones, S., 2021. Mental health numbers have plummeted, but care is vital. Available from:

-  
<https://www.nursingtimes.net/opinion/mental-health-nurse-numbers-have-plummeted-but-care-is-vital-29-03-2021>

NMC 2018. Standards for student supervision and assessment. Available from:  
-<https://www.nmc.org.uk/standards-for-education-and-training/standards-for-student-supervision-and-assessment/>

### **Biography - Jo Hirdle**

**Jo Hirdle, RMN, D.P.S.N., MA Nursing, PG Cert in Education.**

Jo is a Registered Mental Health Nurse who has many years clinical experience in specialist addiction services. Her role in education commenced at Bournemouth University initially as lecturer practitioner and latterly became part of the University's Practice Learning Adviser team. This role involves linking with a variety of clinical areas for health and social care, providing education and support for assessors and supervisors in practice. Jo enjoys the diversity of her role which involves much liaison, collaboration and working with practice partners. She is always keen to research and implement new ideas and innovations that can assist the delivery of practice education.

## **#96 Palliative Care Education and Inequality groups: Addressing the knowledge gap**

### **Authors**

Mrs. Jude Holt - St Ann's Hospice

Ms. Heidi McIntyre - St Ann's Hospice

Ms. Siobhan Kenyon - St Ann's Hospice

### **Aim of paper**

The poster looks to explain how St Ann's Hospice outreach team have disseminate their bespoke knowledge and skills in order to upskill community staff and volunteers to support people from the homeless, Learning Disability and LGBT communities who have advancing disease or palliative care needs.

### **Abstract**

#### **Background**

St Ann's Hospice have 3 posts to reach into 3 distinct communities: The Homeless, The LGBT the Learning Disability communities. The posts work in collaboration with many external organisations, and as a result our expertise in these areas is growing.

The team have been approached with requests to answer specific questions to help with individual patients. It has highlighted both a gap in their knowledge but also staff wanting to know how best to address these patients complex needs and support them in the best way possible. Requests included starting difficult conversations, especially around drug usage, and concerns around pain control for patients who have problems communicating their needs or who maybe a known drug user. It was therefore decided to pull together an education program to disseminate this specific knowledge.

#### **Method**

In order to reach a many staff and volunteers various delivery methods were used including:

1. 2 days face to face training addressing all 3 inequalities
2. 8 session of a face to face program for the Salford complex needs program looking specifically at the needs of homeless patients
3. Presentations at regional and national conferences
4. Weekly question and answer sessions on a virtual platform

### **Outcomes**

More than 250 people have attended the sessions

Following training, especially in hostels referrals to the hospice have increased

Increase requests for Advanced Care Planning training from local LD organisations

Increased collaboration between teams, this was seen in the Salford complex needs program which now continues as a monthly meeting

This bespoke training of staff and volunteers empowers them with the skills and confidence to talk to people, allowing them the space to voice their concerns and worries, to open up conversations and that are hard at the best of time, but to do so with a level of empathy and compassion.

### **3 learning outcomes**

1. Appreciate the value of dissemination of bespoke knowledge for improving patient experiences
2. Recognise the value of a wide range of training methods to reach wider audiences
3. Understand the complex needs of Inequality groups and the need for specialised education and training

## Recommended reading titles (please enter up to 3)

A different ending: End of life care review - Care Quality Commission (cqc.org.uk)

LGBT+ end of life care booklet | Marie Curie

Learning Disabilities Mortality: Review (LeDeR) Programme, Stockport Annual Report 2020/2021  
mgConvert2PDF.aspx (stockport.gov.uk)

ambitions-for-palliative-and-end-of-life-care-2nd-edition.pdf (england.nhs.uk)

HospiceUK\_Equality\_Hospice\_Endoflife\_Care.pdf

## Biography - Jude Holt

Jude has worked for 6 years at St Ann's Hospice as Head of the Practice Development Team, after spending 10 years in Diabetes Care and 12 years in Education.

Her role oversees clinical training - both internally and externally, quality and governance and expanding hospice services into all communities, Jude is passionate about reaching out to communities who historically have found it difficult to access palliative and end of life care services, by trying to understand where the barriers lie and how they can be lifted to ensure equity of care for all.

**#98 Enhancing inclusion: understanding the experiences of health care professional academic staff in higher education who have caring commitments outside of the workplace**

## Authors

Dr. Collette Straughair - Northumbria University

Prof. Amanda Clarke - Northumbria University

Mrs. Lucy Grimshaw - Northumbria University

Dr. Sue Jackson - Northumbria University

Dr. Amy Johnson - Northumbria University

Mrs. Isabel Quinn - Northumbria University

Mrs. Sue Tiplady - Northumbria University

Ms. Anna Walsh - Northumbria University

Dr. Gemma Wilson-Menzfeld - Northumbria University

## Aim of paper

- Discuss the findings of a study exploring the experiences of healthcare professional academic staff in higher education who have ongoing caring commitments outside of the workplace
- Identify implications for practice that have relevance and transferability to other similar individuals and contexts
- Propose a range of innovations to facilitate and enhance inclusion practices

## Abstract

Significant numbers of people across the United Kingdom are in an unpaid caring role, with numbers increasing steadily as an ageing population lives longer. Many carers are of working age, needing to balance the requirements of their employment with the demands of their caring commitments. During the COVID-19 pandemic alone, an estimated 2.8 million people in paid employment unexpectedly became a carer. As part of equality, diversity and inclusion enhancement activity within the context of supporting older workers, a mixed methods study was conducted to explore the experiences of healthcare professional academics in a university in the North of England who had ongoing caring

commitments outside of the workplace. Following ethical approval, an electronic survey was disseminated to staff inviting them to read the participant information, provide informed consent and complete the survey if they self-identified as a carer. During the period May-June 2022 thirty eight respondents completed the survey, which captured a range of demographic data and qualitative comments. Emerging themes identified from the survey were used to inform a semi-structured interview guide, which underpinned a focus group discussion with participants who had volunteered to contribute further. Demographic data from the survey were analysed using descriptive statistics and qualitative data from the survey and focus group were analysed using thematic analysis. Findings highlighted a range of emerging issues which included staff experiencing negative impacts on: individual wellbeing; perceived sense of inclusion; opportunities to advance career development; workload and working patterns; awareness of, and access to, appropriate workplace support. The findings highlighted implications informing proposed innovations to enhance future equality, diversity and inclusion practices, which ultimately seek to support healthcare professional academic staff in higher education who are balancing the demands of their employment with ongoing caring commitments outside of the workplace.

### 3 learning outcomes

- Understand the research methods implemented to explore the experiences of healthcare professional academics in higher education with ongoing caring commitments outside of the workplace
- Understand key emerging findings and appreciate participant perspectives
- Gain insight into the implications for practice and proposed innovations to enhance future practice, particularly in relation to facilitating the principles of equality, diversity and inclusion

### Recommended reading titles (please enter up to 3)

Department of Health and Social Care (2018) *Carers Action Plan 2018 -2020: Supporting carers today*. London: DHSC

Carers UK (2021) *State of Caring 2021: A snapshot of unpaid care in the UK*. London: Carers UK.

Carers UK (2021) *Supporting carers at work: opportunity and imperative*. London: Carers UK

### Biography - Collette Straughair

Dr Collette Straughair is an Associate Professor in Nursing within the Department of Nursing, Midwifery and Health at Northumbria University where she has worked since 2005. She qualified as a Registered Nurse in 1990 and a Registered Midwife in 2001, gaining extensive professional experience across a diverse variety of clinical specialities before moving into education. She has extensive experience in the higher education sector as a nurse educator, with expertise in curriculum development, programme management, transnational education, student support and the implementation of evidence based teaching, learning and assessment strategies. She was awarded a PhD in 2017 following completion of her doctoral research into compassion in nursing and gained professional recognition as a Senior Fellow (SFHEA) in 2021. Her current research interests are focused on compassion in nursing, carers, transnational education and older people's care. She has presented at numerous conferences and published in a range of peer reviewed journals, gaining professional recognition as an emerging expert in her field of practice.



## **#99 Developing a collaborative national blood transfusion training package for student nurses in Wales**

### **Authors**

Ms. Joanne Gregory - Welsh Blood Service

Mr. Paul Howell - Cwm Taff Morgannwg University Health Board

### **Aim of paper**

The aim of this submission is to share practice and highlight how subject matter experts in Transfusion and the Accredited Education Institutions (AEIs) for BSc nursing programmes in Wales have worked together to provide a standardised programme for delivery of transfusion training to student nurses in Wales which helps meets the Nursing & Midwifery Councils (NMCs) standards of proficiency for registered nursing specifically the annexe B clinical procedure: manage & monitor blood component transfusions. We would also like to highlight and promote the work that blood transfusion professionals undertake in Wales specifically through the Blood Health National Oversight Group (BHNOC).

### **Abstract**

The Nursing & Midwifery Council (NMC) Future nurse: standards of proficiency for registered nurses were published in May 2018. The aim of these standards is to set out expectations of both nurses and midwives at the point of registration and to provide them with the knowledge and skills they need to deliver excellent patient care across a range of different clinical settings.

To support the implementation of these standards, specifically in relation to the clinical procedure of blood component transfusion identified in annexe B, the All Wales Transfusion Practitioner Group (AWTPG), Subject Matter Experts (SMEs) in transfusion, and NMC Approved Education Institutions (AEIs) in Wales have worked

collaboratively to design a standardised education package for delivery to Student Nurses in Wales. The development of the package was led by members of the AWTPG and is aimed at year 2 and year 3 student nurses, with basic key information delivered in year 2 building on this in year 3 with the delivery of more advanced information and clinical scenarios. In addition, the package has been ratified for use by the Blood Health National Oversight Group (BHNOC) which is the national governance group for blood health in Wales.

This education programme is also assumed to benefit the AWTPG as Transfusion Practitioners (TPs) are primarily responsible for transfusion education and incident management in relation to blood transfusion in their own local areas. Hopefully the advanced training and exposure of student nurses to transfusion processes will give them the knowledge and skills to assist them in future in the administration of blood components and monitoring of patients and reduce the number of incidents attributed to registered nurses in the clinical setting.

Delivery of this programme commenced in September 2022, ongoing evaluation will be undertaken with a review planned following the 1st year of implementation.

### **3 learning outcomes**

1. Promote the work being undertaken by transfusion professionals in Wales to maximise patient safety via education initiatives
2. Provide an example of collaborative working which enhances the education of student nurses & prepares them to meet the requirements set out in the NMC proficiencies
3. Promote the work of the Blood Health National Oversight Group (BHNOC)

### Recommended reading titles (please enter up to 3)

NMC (2018). *Future nurse: Standards of Proficiency for Registered Nurses*. [online] Nursing and Midwifery Council. Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/standards-of-proficiency/nurses/future-nurse-proficiencies.pdf>.

Realising professionalism: Standards for education and training. Standards framework for nursing and midwifery education. (2018). [online] Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/education-standards/print-friendly-education-framework.pdf>.

*Blood Health National Oversight Group* [Online]. BHNOG. Available at: <https://bhnog.wales.nhs.uk/> (Accessed: October 2022).

### Biography - Joanne Gregory

Joanne Gregory is a Blood Health Advisor at the Welsh Blood Service, she qualified as an RGN in 2004 working for Cardiff & Vale University Health Board as a surgical nurse, following this she worked for Cardiff University as a clinical skills facilitator delivering clinical education programmes to pre-registration student nurses and midwives. Joanne joined the Welsh Blood Service as Education & Practice Development Nurse in 2009 progressing to the role of Blood Health Advisor in 2019. Joanne is now the lead for education within the Blood Health Team. Her current role involves working with local health boards in Wales to deliver on the objectives of the NHS Wales Blood Health Plan.

## #101 THE SECRET OF KEEPING CAMERAS ON. An innovative method that turned online education, from boring sessions into an enjoyable experience

### Authors

Mr. Laszlo Penzes - University Hospital Southampton

### Aim of paper

The aim of paper is to provide an innovative model and techniques, to increase the efficiency of online education delivery, support staff and educator retention by upskilling them, and develop an engaging environment for teaching, which is inclusive, diverse and offers equal opportunities for participants.

### Abstract

The Covid-19 pandemic has shaken the foundations of how we deliver education in a healthcare setting, virtual education becoming the norm. Educators and healthcare professionals are facing a lack of confidence in how to perform in the virtual environment, and how to engage with their students. As a response, an innovative set of training courses have been developed to provide tools for those presenting or teaching online.

The **BASIC** is a 2.5 hour long, workshop style course, that teaches and demonstrates a 5-step model:

**Background** – planning and preparing an online session

**Appearance** – the importance of camera positioning, lights, and background

**Swing** – changing activities during a session maintains attention

**Interactive** – incorporating interactive elements improves participant engagement

Change – planning for unexpected events supports a smooth delivery

The **MASTERCLASS** is a whole day long, workshop style course, including team collaboration and practicing the methods learnt. The course includes the following sessions:

- The 7 deadly sins of PowerPoint
- Turn boring data into infographics
- Pecha Kucha – Japanese presentation style
- Storytelling – better engaged audience
- The hidden secrets of Microsoft Teams

The training courses have been developed and piloted at University Hospital Southampton in 2022. Over 10 months, nearly 200 staff, working in more than 30 job roles graduated. Following surveys done at 30-60-90 days interval attendees reported major improvements in presentation confidence and audience engagement. Due to the positive feedback and high demand for the course, a ‘train the trainer’ initiative was developed, to form a team of educators, qualified to lead these workshops. Offering training on such additional skills, supports educator retention. The courses are inclusive as are open to all staff, working in clinical or non-clinical roles, at any career stage. Offers equal opportunities to anyone, being easily accessible, even from the comfort of the home.

### 3 learning outcomes

1. Innovate delivery of virtual/online education to maximize impact and improve information retention
2. Improve engagement and collaboration of students, and help overcome lack of confidence and fear of technology, when delivering education virtually/online
3. Develop an environment that offers equal opportunities for various professions and job roles to deliver education

### Recommended reading titles (please enter up to 3)

1. Blake, H (2009). Staff perceptions of e-learning for teaching delivery in healthcare. Learning in Health and Social Care. Vol.8 Issue.3
2. Kotera et.al. (2021): Teaching Healthcare Professional Students in Online Learning during COVID-19: Reflection of University Lecturers. Journal of Concurrent Disorders, 2021.
3. Hege et.al. (2020). Blended learning: ten tips on how to implement it into a curriculum in healthcare education. GMS J Med Educ. 2020; 37(5): Doc45

### Biography - Laszlo Penzes

Healthcare professional with a nursing background in Emergency Medicine and Endoscopy, working part-time as Senior Clinical Practice Educator at University Hospital Southampton and undertaking PhD studies as a Clinical Doctoral Research Fellow with the University of Southampton, researching the impact of sudden death upon staff in Emergency Department. Passionate about innovation in education, an ambassador for coaching and mentoring others, supporting them to achieve their best potential. Research, communication, public speaking, and emotional intelligence enthusiast, with a previous career in IT and business development, who lived and worked in three European countries. A Covid-19 survivor and motivational speaker.

### #113 Innovation in Nurse Education: Blended Learning

#### Authors

Mrs. Karen Pudge - Health Education England

#### Aim of paper

- To introduce the blended learning programme, including what blended learning is, background and aims of the Health Education England programme

- To provide overview of the blended learning nursing degree, including the pathway for first destination employment in community, primary and social care.
- To showcase examples of the innovation and digital technologies being used within blended learning programmes
- To share the early outcomes of the programme, including lessons learnt, student experience and future blended learning programmes

## Abstract

Traditionally, the theoretical elements of nursing degrees have been delivered in a face-to-face manner and complemented with simulation with a 50% practice element through clinical placements. There is now a real need to consider new approaches to educating future nurses in relation to the impact of new and emerging technologies. Ensuring that the future nursing workforce is flexible, adaptable, has a growth mindset that is innovative and enthusiastic about change.

Technology has provided us with different and innovative ways of educating our health workforce with opportunities to widen access and participation. The NHS Long Term plan (2019) outlined the requirement to establish a new online nursing degree with the aim of widening participation and while pre-registration programmes rapidly moved to online delivery in response to the COVID-19 pandemic, this does not afford the student the full benefits of the pedagogic experience that blended learning provides.

In response, Health Education England has partnered with several universities to create an innovative, accessible pre-registration nursing degree programmes, with the aim of:

- Creating an innovative, accessible high quality healthcare degree programme using innovative means in digital and

other technologies i.e. simulation, immersive and extended reality

- Attracting and retaining greater numbers, and a more diverse student nurse population
- Creating a significantly different offer in healthcare education that will support the growth of a qualitatively different, expert and professional workforce suited to the demands of services now and in the future
- Developing strong digitally capable and confident graduates

The first blended learning adult nursing degrees have now commenced, along with a Midwifery degree and Critical Care Nursing modules. Medical and Anaesthesia Associate degrees, along with a new nursing degree aimed at first destination employment in community, primary and social care are due to commence in 2023. All blended learning programmes will be subject to independent evaluation.

## 3 learning outcomes

- Increased the awareness and understanding of blended learning programmes
- Demonstrate the need for different strategies and approaches in nurse education to attract, train and retain the future workforce
- Promote the use of innovation and digital technologies in nurse education, to increased student experience and participation

## Recommended reading titles (please enter up to 3)

Health Education England (2022) Blended learning for pre-registration and undergraduate healthcare professional education

[https://www.hee.nhs.uk/sites/default/files/documents/220405\\_Blended%20Learning%20Guidance%20Report\\_FINAL.pdf](https://www.hee.nhs.uk/sites/default/files/documents/220405_Blended%20Learning%20Guidance%20Report_FINAL.pdf)

Hrastinski, S (2019) What Do We Mean by Blended Learning?. TechTrends 63, 564–569. <https://doi.org/10.1007/s11528-019-00375-5>

Bowyer, J and Chambers, L. (2017) Evaluating blended learning: Bringing the elements together. Research Matters: A Cambridge Assessment publication. Issue 23 p17-26.

### Biography - Karen Pudge

Karen joined the Health Education England in February 2021 and is a Senior Programme Manager for Blended Learning team. She is a Registered Nurse and still works regularly in clinical practice in Critical Care.

She has previously worked in acute services, community, diabetes and end of life. She is passionate about developing others to provide the best patient care and has extensive experience of education and workforce development. She has led on several workforce initiatives including the introduction of Nursing Associate role, apprenticeships, non-medical placement expansion, 50K nurses and innovation in nurse education.

She has a keen interest in how workplace culture, incivility and professional behaviours & values impacts the nursing workforce. She has recently completed a MSc Healthcare Management and is a Florence Nightingale Foundation leadership scholar.

### #116 Developing systematic assessment skills and decision-making in patient deterioration using virtual reality

#### Authors

Mr. Andy Parry - Cardiff University

Mr. Peter Smith - Cardiff University

Mrs. Joanne Owen - Cardiff University

Mr. Wayne Cole - Cardiff University

#### Aim of paper

The aim of this presentation is to outline the development of a virtual reality (VR) education package which focuses on best practice in a deteriorating patient scenario. The package allows the user to select from a number of options at key points in the scenario, allowing the user to practice decision making and situational awareness. By sharing our development and postproduction work, we aim to inspire others to explore the possibility of using this technology in other scenarios within nurse education.

#### Abstract

Our ageing population live with multiple comorbidities which increases their risk of physical deterioration. It is vitally important that nurses can rapidly identify physical deterioration in a systematic manner, in order to deliver prompt care which improves overall outcome (Goodwin et al 2015).

Best practice states that we should undertake a systematic ABCDE patient assessment and then escalate concerns to the appropriate practitioner using a structured method of handover. Despite these elements being available online and regularly taught on undergraduate programmes, identification and escalation continues to be a concern (Gillan et al 2022).

VR is an emerging technology in nurse education and can enhance post event learning through reflection and identifying learning needs (Kyaw et al 2019), which can complement other teaching methods (Chen et al 2020).

To see VR could be effective in addressing these practice issues, we developed a simulated deteriorating patient scenario. Using 360° cameras we filmed three versions of the scenario, *firstly* where best practice was used, *secondly* where best practice was partially followed, and *thirdly*



where best practice was not followed. In postproduction these scenarios were weaved together to form an interactive immersive package where the user can ‘choose their own adventure’. Achieved by the video pausing at key moments and allowing the user to choose a decision and then view the result of that decision. There is also an option to return and change their decision so they can refine their decision-making skills.

This education package has provided students opportunity to virtually experience the demands of decision-making. The immersive package meant students could suspend reality in a high-fidelity environment, where they experience emotional responses to their decisions. It provides them an opportunity to address the issue of poor situational awareness (Walshe et al 2021), which is paramount in time critical situations.

### 3 learning outcomes

1. Demonstrate an understanding of using interactive immersive media to explore deteriorating patient scenarios in nurse education.
2. Identify the key aspects of idea development and planning to ensure effective filming time and enable postproduction requirements.
3. Discuss the postproduction requirements to produce a user friendly and effective educational package.

### Recommended reading titles (please enter up to 3)

Chen F., Leng Y., Ge J., Wang D., Li C., Chen B., Sun Z. (2020) Effectiveness of Virtual Reality in Nursing Education: Meta-Analysis. Journal of Medical Internet Research. 22 (9): e18290.

Gillan PC., Delaney LJ., Tutticci N., Johnston S. (2022) Factors influencing nursing students’ ability to recognise and respond to simulated patient deterioration: A scoping review. Nurse Education in Practice. 62.

Kyaw BM., Saxena N., Posadzki P., Vseteckova J., Nikolaou CK., George PP., Divakar U., Masiello I., Kononowicz AA., Zary N., Tudor Car L. (2019) Virtual Reality for Health Professions Education: Systematic Review and Meta-Analysis by the Digital Health Education Collaboration. Journal of Medical Internet Research. 21 (1): e12959.

### Biography - Andy Parry

I undertook the clinical elements of my nursing career in critical care units and in anaesthetics within a large tertiary referral centre. From this role and through personal experience I developed a very strong interest in assessment of acute deterioration and escalation of care. I carried this interest through into my academic career, and I have now been working in nurse education for the last 13 years, teaching across both undergraduate and post-graduate programmes. I have a particular interest in the use of simulation in order to develop competence in student nurses to identify and escalate care in cases of acute patient deterioration. Further to this I have published multiple papers surrounding patient assessment and understanding of deterioration due to chronic conditions. I have also authored a number of clinical decision charts for the RCNi platform. My aims are to educate and inform student nurses of the importance of detailed and systematic assessments in order to reduce and avoid patient harm.

### #117 “Enhancing student knowledge through a community approach”

#### Authors

Mr. Dean Mcshane - Liverpool John Moores University

Ms. Sheree Desson - Liverpool John Moores University

Ms. Leanne Johnson - Liverpool John Moores University



Ms. Sarah Jenkins - Liverpool John Moores University

### **Aim of paper**

The aim of the submission is to demonstrate a best practice approach that can be utilized by other Nurse and social care education providers. The presentation aims to demonstrate the effectiveness of a collaborative community approach that enhances student experience, increases social engagement and effective educational practice within the community. This presentation will discuss how through the creation of a Mental Health Society and collaborative work within the community this can enhance career development, knowledge and an overall increased student experience.

### **Abstract**

This presentation will discuss through a case study approach the benefits of a University Mental Health Society to students and the local community. University Societies have proven to help students gain skills in teamwork, time management, event planning, and problem-solving, to leadership, organisation, public speaking and interacting with various professional bodies and organisations (Razavi, 2014).

In 2020 a group of nursing students created a Mental Health Society for fellow students to be able to join for extra-curricular learning on mental health subjects along with forming links in the local community for co-production, collaborative working and fund raising. Within this time frame the society with the help from local professionals and academics have delivered workshops on various mental health subjects, offered peer-support to fellow students by promoting well-being and offering social support, created a "dementia ambassador" subgroup for those wanting to learn more about dementia, raised money for two local mental health charities, raised

awareness both locally and nationally about mental health and wellbeing and offered signposting for further support and training.

It has recently been highlighted that some academics are increasingly concerned that the generic aspects of the nursing curriculum have become overly adult nursing centric (Glasper and Fallon, 2021). The Mental Health Society is proving to be a valuable resource that all fields of nursing can utilise to enhance the underpinning specialist knowledge required to work with patients with ill mental health. Through this case study students will describe their own personal accounts of how this society and community approach has helped their overall student experience, increased social involvement and networking, improved self-confidence, enhanced areas of mental health knowledge, helped develop leadership skills, enhance CV and career development, increased knowledge of research processes and feeling a part of a collective community.

### **3 learning outcomes**

- 1) Demonstrate and discuss the process of a collaborative student based mental health society.
- 2) Explore the various benefits to the local community.
- 3) Demonstrate personal accounts of growth and development through being a student nurse mental health society member.

### **Recommended reading titles (please enter up to 3)**

Razavi, L. (2014). Students: your university society could help you get a job. <https://www.theguardian.com/education/2014/jan/20/university-societies-employability-students>

McLennan, T. (2021). University societies – what are they, how can you join them and why should you get involved?. <https://www.theuniguide.co.uk/ad>

vice/preparing-for-university/university-societies-what-are-they-how-can-you-join-them-and-why-should-you-get-involved

Glasper, A & Fallon, D. (2021). Have the NMC educational standards become overly adult-centric? <https://www.britishjournalofnursing.com/content/healthcare-policy/have-the-nmc-educational-standards-become-overly-adult-centric/>

### **Biography - Dean Mcshane**

I have worked in the field of mental health for approximately 21 years, in an array of different roles. As a Mental Health Nurse I have worked in the NHS as a Child and Adolescent Mental Health Practitioner, in the specialisms of acute care and eating disorder and as a Community Practitioner with the Early Intervention Team which specialised in the treatment of young adults experiencing a first episode of Psychosis. This is also the point at which my career in the further education sector began as it was through this role that I delivered a programme of mental health promotion and awareness sessions to local schools and colleges

In 2015 I became a Lecturer Practitioner at the University of Chester and helped to gain a “Dementia Friendly Campus” status at the University which involved creating various dementia education-based projects. In 2019 I was shortlisted for the Nursing Times Educator of the year award and was also presented with the Chief Nursing Officer’s medal for Nursing Excellence.

I am currently a Senior Lecturer in mental health at Liverpool John Moore’s University in which I am also completing a PhD on the use of immersive technology in dementia care.

## **#118 Co-creation of an educational event to support an integrated field approach, student collaboration and ongoing student growth within health care education.**

### **Authors**

Mrs. Katherine Combe - University of Hull

Mrs. Lisa Jennison - University of Hull

Ms. Tracy Morris - university of hull

Ms. Gemma Holder - University of Hull

Ms. Carolyn Maile - University of Hull

Ms. Karen Pattrick - University of Hull

### **Aim of paper**

To raise awareness of the important of an integrated approach to field nursing training.

### **Abstract**

The NMC Code and educational guidelines recommend nursing students work co-operatively and maintain communication with all fields of practice. Education programs should be designed to deliver learning that supports students and provides exposure across all four fields of nursing practice: adult, mental health, learning disabilities and children’s (NMC 2018). However, when asked, students feel that the approach taken in their theoretical training is often not as conducive to integrated learning as previously thought. A set of theoretically informed workshops to support healthcare students from all fields to understand integrated healthcare learning was designed. In this paper, we report on the experiences of healthcare students and facilitators, in regard to the initial workshop (planning, preparation and undertaking).

An iterative co-design approach rooted in participatory research methods was used.

Five workshops were delivered on the university campus between 8-16 of September 2022. These included a specific focus on; Public Health, Adult, Mental Health, Learning Disability and Child Nursing. Participants included students from all 4 fields of nursing. (24); Adult (17), Child (3), Mental Health (2) and Learning Disabilities (2), all undertaking BSc nursing programs within the university. Data gathered were post-workshop questionnaires and feedback for facilitators of each group session.

This integrated learning approach develops positive inter-professional relationships whilst supporting the theory that students' education should be a collective experience, with regard for all nursing fields. Students and workshop facilitators had positive experiences across all domains of the co-creation framework: equality, inclusivity, holistic, resource, positivity, and sustainability.

The process was rewarding and productive with some unintended positive consequences, particularly for the students from all fields of study. Promotion, development and expansion of the workshops is needed to encourage other fields of health care students and nursing students to attend this valuable resource.

### **3 learning outcomes**

1 - Importance of the co-creation framework: equality, inclusivity, holistic, resource, positivity, and sustainability.

2- How to utilize an integrated field-based workshop, to support the student experience.

3. Student value of a range of inter- field experiences, to enhance their learning and support their ongoing learning development.

### **Recommended reading titles (please enter up to 3)**

Köse Tosunöz İ, Karaçay Yıkar S, Çerçer Z, Kara P, Arslan S, Nazik E (2021). Perceptions of interdisciplinary education and readiness for inter-professional education of nursing students: A sample of three different cities in Turkey. *Nurse Educ Today*. 2021

Ganotice FA Jr, Chan SSC, Chow AYM, Fan KKH, Khoo US, King RB, Lam MPS, Luk P, Ng AYM, Wang MN, Yeung SS, Tipoe GL (2022). What factors facilitate interprofessional collaboration outcomes in interprofessional education? A multi-level perspective. *Nurse Educ Today*.

### **Biography - Katherine Combe**

Katherine Combe is lecturer in Adult nursing at the University of Hull

She received her MSc from the University of Edinburgh, where she studied the mental health and wellbeing of Children, young people and their families (Psychology). She studied at the University of Hull where she received her BSc in Specialist Community Nursing (Health visiting), PGC Practice teaching and community prescribing.

Katherine's main research areas include Maternal, Family and Child mental health and wellbeing, psychology and Adult Nursing. Katherine joined the University of Hull as a lecturer in 2019. She was gained her Fellowship in Higher education in 2020 and was promoted to Program Director 2022

### **#125 The Community Internship Pathway: A partnership innovation to support the professional development of adult undergraduate nurses**

#### **Authors**

Mrs. Joanna Lavery - Liverpool John Moores University

Dr. NICOLA MORRELL-SCOTT - Liverpool  
John Moores University

Mrs. Claire McEntegart - Merseycare NHS  
Foundation Trust

Mrs. Karen Deane - Merseycare NHS  
Foundation Trust

Mr. Lee Carruthers - Merseycare Community  
NHS Foundation Trust

## **Aim of paper**

The aims of the submission are to demonstrate the gaps within workforce provision within the community setting and consider new ways of collaborative working to promote community career pathways. To highlight alternative teaching and learning opportunities for enhanced student experience which support professional development and undergraduate students career prospects.

## **Abstract**

The BSc (Hons) undergraduate nursing programme is a 50/50 split across theory and practice, with the intention of preparing students to meet the health needs of populations across primary, secondary, and tertiary care, (NMC, 2018). A persistent shortfall in community nurses poses a challenge for the recruitment and retention of newly qualified nurses into these roles and has the potential to threaten the safe delivery and sustenance of primary care, (Drennan et al, 2018, QNI, 2016a).

A collaborative enterprise by Liverpool John Moores University and Merseycare NHS Foundation Trust, has created a third-year internship programme, to promote the role of the district nurse and direct the focus onto community nursing. Student nurses with an interest in employment outside of ward-based settings are given the opportunity to complete an internship. This approach scaffolds the current nursing curricula and facilitates all final year practice placements within a primary care

environment. Placement exposures encompass long term conditions management, first contact care and a rotation across specialist community nursing roles, to promote a wide breadth of student experience. The approach is underpinned by the Queens Nursing Institute (QNI) (2016), 'Transition to district nursing document' to direct practice assessors and further inform the community evidence base of the current educational programme. The internship intends to provide a platform to progress community nursing pathways, whilst supporting proficiencies required for NMC qualification, (NMC, 2018). This initiative aims to prepare undergraduate nurses to embark upon a career in the community directly upon qualification with the introduction of a preceptorship model of support in the final three months. In the current ever-changing environment, the difficulties experienced by health and social care are evident. A community internship programme collaborative between educational and NHS providers has the potential to strengthen the current workforce and promote community and public health nursing careers.

## **3 learning outcomes**

- To recognise the challenges faced due to a shortfall in the community nursing workforce.
- To understand the importance of partnership working between universities and NHS trusts in advancing innovative strategies.
- To reflect upon strategies that may be able to improve the recruitment of newly qualified nurses to the community workforce

## **Recommended reading titles (please enter up to 3)**

Drennan, V.M., Calestani, M., Ross, F., Saunders, M. and West, P., 2018. Tackling the workforce crisis in district nursing: can the Dutch Buurtzorg model offer a solution and a better patient experience? A mixed

methods case study. *BMJ open*, 8(6), p.e021931.

Queens Nursing Institute (2016) Transition to district nursing toolkit. Transition to District Nursing – The Queen's Nursing Institute (qni.org.uk)

Queen's Nursing Institute. Understanding safe caseloads in the district nursing service. 2016a. <https://tinyurl.com/y5llmk93>

## Biography - Joanna Lavery

Joanna Lavery qualified as a registered nurse in 1999. She worked in the fields of neurology, neurosurgery, and critical care, before embarking upon a role in the community as a district nurse. She achieved the specialist practitioner qualification and V300, holding posts as district nurse care manager and community matron. Joanna returned to secondary care to work as an Advanced Nurse Practitioner in acute medicine and ambulatory emergency care. She has worked in Higher education since 2019 teaching both undergraduate and postgraduate students and is now programme lead for Specialist community practitioner district nursing. She is a Fellow of the Higher Education Academy.

Senior Lecturer Adult Nursing, Programme Lead SCPDN, Liverpool John Moores University

MSc Advanced Practice ,PgDip SCPDN, PGCert, BSc(Hons) ,DipHE, RN, FHEA

**#127 Becoming a nurse – an interim report of findings from a longitudinal study exploring students' experiences of the undergraduate 'future nurse' curriculum.**

## Authors

Mrs. Heather Scripps - Birmingham City University, West Midlands, Birmingham, United Kingdom

## Aim of paper

The aim of this submission is to present and promote discussion about the factors which affect students' 'becoming a nurse' on the future nurse curriculum. This also includes the impact on students' completing their nurse education during a global pandemic.

## Abstract

This paper presents the interim findings of a longitudinal study of adult field students' experiences on the undergraduate 'future nurse' curriculum in one university.

Data has been gathered using semi-structured interviews and constructivist grounded theory methodology. These adult field student participants started their course amidst the COVID-19 pandemic in January 2021. The resultant online learning and unprecedented placement constraints and limitations at that time, lead this to being a unique opportunity to gain an in-depth understanding of not only the impact of COVID-19 on nurse education, but also the experience of becoming a nurse within the new future nurse curriculum.

With the second year of data collection completed, emerging data highlights aspects such as the impact of the COVID-19 pandemic, the use of social media groups, and thoughts around online learning. Other emerging findings at this stage suggest that preplacement preparation and expectation is crucial to student satisfaction and course continuation, as well as needing in-depth and formal support to adapt to the HEI and clinical environments. Equally, another emerging theme is that students tend to see the HEI and clinical environment as separate entities which can be problematic in terms of belongingness and in relation to how students approach their learning. These will be of immediate interest to nurse educators both within the HEI and practice settings to promote support services leading to improved retention and reduced attrition.



The presentation of this new emerging data will promote discussion and thought about what it is like to become a nurse on the new 'future nurse' curriculum and the factors contributing to progression. Equally it will provide the opportunity to focus on the impact of the COVID-19 pandemic on a group of students about to become first time NMC registrants.

### 3 learning outcomes

1. Appreciate the impact of COVID-19 on nursing students.
2. Gain an insight into some of the challenging influences of completing the future nurse curriculum.
3. Consider the impact of the practice learning environment on student satisfaction and retention.

### Recommended reading titles (please enter up to 3)

Bolan, C, and Grainger, P. (2009) 'Students in the BN program – Do their perceptions change'? *Nurse Education Today*, 29 (2009) 775 – 779.

Smith, P. (1992) *The emotional labour of nursing. How nurses care*, London and Basingstoke: Macmillan Press Limited.

Swift, A., Banks, L., Baleswaran, A., Cooke, N., Little, C., McGrath, L., Meechan-Rogers, R., Neve, A., Rees, H., Tomlinson, A., and Williams, G. (2020) 'COVID-19 and student nurses: A view from England', *Journal of Clinical Nursing*, 2020 (29), 3111 – 3114.

### Biography - Heather Scripps

Heather qualified as a Registered Nurse in Adult Nursing in 1996 in South Wales. Working initially in the NHS within orthopaedics and then cardiac surgery, in 1998 Heather commissioned into the British Army as a Nursing Officer. Roles within the Army were many and varied but Heather's clinical practice has always been within the surgical sphere. Whilst in the Army Heather

deployed on exercises and military operations including Bosnia and Afghanistan. Whilst in the Army Heather developed a passion for teaching others and was fortunate enough to be sponsored to qualify in nurse education and develop her role in this field. As such, Heather has been working within, or closely aligned to, nurse education since 2003. Leaving the Army in 2017, as the Nurse Education Advisor for the Army, her education role has developed. Having worked in placement development and support from 2018 - 2021, Heather now leads the Return to Practice course at Birmingham City University.

### #130 Nursing with ADHD: facing challenges with creativity

#### Authors

Dr. Rachael Major - The Guernsey Institute

#### Aim of paper

To raise awareness of the lived experiences of nurses, nursing students, nursing associates and trainee nursing associates with ADHD

#### Abstract

Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental condition experienced by up to 5% of children, with more boys being diagnosed than girls. However, in adulthood, the ratio of males to females with the condition is much closer to 1:1 (Steer 2021). ADHD is a condition that is associated with problems with attention, concentration, and impulsivity, although each person is affected differently, and this may change over time. In adulthood, ADHD is more often associated with a feeling of being constantly driven, procrastination, difficulty with time management, and poor focus, although conversely, hyperfocus on an area of interest is also a characteristic, as is creativity (Smith and Kirby 2021).



A wider mixed methods study on neurodiversity in nursing was conducted with participants from across Great Britain and Northern Ireland and this presentation will report the results found on nursing with ADHD. Within this study, 64 participants responded to an online questionnaire confirming that they had ADHD, and 6 in-depth interviews were also conducted with nurses, students, and nursing associates with ADHD.

The results of the questionnaire will be presented along with the themes identified within the interviews. Areas to be addressed within the presentation will be the effect of diagnosis, as often this was later in life; the stigma often felt with having ADHD and how this affects disclosure, and reasonable adjustments. The lived experiences of nursing and ADHD will also be discussed including difficulties but also the positive benefits that having ADHD can bring.

Recommendations will be made to support members of the nursing family living with ADHD and to increase the knowledge and understanding of those working alongside them.

### **3 learning outcomes**

To discuss the perceived challenges of nursing with ADHD along with compensatory strategies

To consider reasonable adjustments in theory and practice

To discuss support and resources available to support members of the nursing family with ADHD

### **Recommended reading titles (please enter up to 3)**

Steer, J. (2021) Understanding ADHD in Girls and Women London: Jessica Kingsley Publishers

Smith, T. and Kirby, A (2021) Neurodiversity at Work London: Kogan Page

Royal College of Nursing (2022) Neurodiversity Guidance for employers, managers, staff and students Available at <https://www.rcn.org.uk/Professional-Development/publications/neurodiversity-guidance-uk-pub-010-156>

### **Biography - Rachael Major**

Rachael has been a lecturer/senior lecturer for the past 21 years leading on both pre and post-registration programmes and is a Senior Fellow of the Higher Education Academy. She is passionate about supporting inclusion within nursing and completed a Doctorate in Education investigating the experiences of Registered Nurses with dyslexia in 2017. Since then she has been involved in the support of students with a range of disabilities and has conducted further research into the experiences of neurodiverse nurses. She is currently leading the development of new guidance and resources for the RCN to support neurodiversity in nursing.

### **#133 A plan to grow our own specialist nurse future workforce**

#### **Authors**

Ms. Siobhan Shallow - University Hospitals of Leicester

Ms. Susan Cordiner - University Hospitals of Leicester

#### **Aim of paper**

With Cancer now affecting 1 in 2 people (NHS 2019) and Macmillan highlighting a workforce gap in cancer nurse specialists (Macmillan 2021). A Fundamentals of Cancer programme was created to enhance the knowledge of nurses and AHP of adult patients with cancer. With an aim of the programme to grow our own cancer nurse specialists of the future.

## Abstract

### How we delivered the programme

The 10 day programme was designed by the Nursing Education Team in conjunction with our Lead Macmillan Cancer Nurse aims to inspire and grow our own specialist nurse future workforce. The programme follows the cancer strategy and the patient's pathway. It is a 10 day programme delivered face to face teaching over 5 months. A scoping exercise was completed prior to ensure we delivered an innovate and exciting programme.

A range of teaching methods were used to maximize engagement including lectures from specialist nurses and AHPs and asking them to discuss their role and career pathway. We included a visit to the clinical laboratory, quizzes, tutorials, case studies; confidence scales all enhancing experimental learning. Patients were at the forefront of the programme design and delivery, shared their cancer story which proved to be very powerful learning.

To encourage networking and shared learning the learners are placed in learning sets from varying clinical areas. Learners engaged in structured debate, preparing their given argument and researching their opponent's argument. Presentations were delivered in front of a panel.

Students considered initiatives that would enhance the cancer patients experience within their clinical areas. With line manager's support, they created action plans, and then formed pledges to see through the initiative on completion of the course. Showcasing their pledges to their peers on the final day of the course.

Feedback from learners and speakers has been very encouraging, with confidence scales demonstrating the knowledge impact achieved. This unique course offers investment in the future NHS cancer nurse specialist workforce.

## 3 learning outcomes

Learning outcomes for the participants included-

- Identify, review and utilise underpinning evidence relating to caring holistically for the adult patient with cancer.
- Draw on and evaluate recent developments from cancer related arenas both locally and nationally to develop safe and responsive practice.
- Analyse attitudes, values and behaviours that influence cancer care, including ethical dilemmas

### Recommended reading titles (please enter up to 3)

<https://www.england.nhs.uk/wp-content/uploads/2016/05/cancer-strategy.pdf>

<https://www.nhs.uk/conditions/cancer/#:~:text=The%20cancerous%20cells%20can%20invade,of%20cancer%20during%20their%20lifetime.>

<https://www.macmillan.org.uk/dfsmedia/1a6f23537f7f4519bb0cf14c45b2a629/4323-10061/cancer-nursing-on-the-line-why-we-need-urgent-investment-in-the-uk>

### Biography - Siobhan Shallow

I have been a nurse for over 20 years. I have looked after different specialities but always had an interest in looking after cancer patients and education. I have worked within surgery, Endoscopy and as a nurse specialist. I came into post within the corporate Education team to set up and deliver this programme working closely with the Lead Macmillan Cancer Nurse.

## **#134 Online simulated placement symposium-Making online simulated placements happen; from initial concept to operationalisation in one year**

### **Paper 1**

#### **Authors**

Dr. Linda Sanderson - University of  
Huddersfield

Ms. Lisa Choma - University of Huddersfield

#### **Aim of paper**

To provide an overview of the development  
of online simulated placements in Part1, 2  
and 3 of BSc and MSc pre-registration  
nursing courses

#### **Abstract**

Simulated practice is recognised by the  
NMC as a valuable way for students to  
develop nursing attitudes and skills  
providing it is clinically focussed, involves  
'real people', and is used 'proportionately' in  
the curriculum (pg. 10, Part 3, NMC, 2018b).

The decision to include simulated  
placements in the pre-registration nursing  
curriculum at University of Huddersfield was  
made in early 2021. Constraints of the  
programme demanded simulated  
placements were delivered wholly online.  
Simulated placements are embedded on the  
BSc and MSc routes, in all fields; they have  
been experienced by approximately 1000  
students in all Parts of the programme. The  
placements provide a structured, innovative,  
virtual learning experience that support the  
development of skills and knowledge  
relevant to nursing, such as communication  
and decision making, and allow students to  
apply theory of clinical practice.

Developing these placements has been an  
opportunity to work collaboratively with  
clinical colleagues, service users and carers,

academics, and learning technologists. This  
presentation introduces that work,  
addressing challenges, operational issues,  
and a brief insight into the activities that the  
students engage with. This presentation  
whets the appetite for more in depth  
discussion of collaborating with clinical  
colleagues (Paper 2), service users and  
carers (Paper 3) and the approach taken to  
engage student nurses in an online  
placement (Paper 4). The evaluations from  
the student nurses have been central to the  
development of these dynamic placements.  
The student 'voice' via their evaluations will  
be alluded to in this presentation, further  
examples will be shared in Paper 4 of the  
symposium.

#### **3 learning outcomes**

- Appreciate the scope of the online  
simulated placements offered at  
University of Huddersfield
- Recognise challenges of creating  
online simulated placements and  
possible solutions
- Discuss the value of involving clinical  
colleagues, service users and carers  
and student evaluations to create  
relevant and engaging online simulated  
placements

#### **Recommended reading titles (please enter up to 3)**

Akselbo, I., Olufsen, V., Ingebrigtsen, O.,  
Aune, I. (2019) Simulation as a learning  
method in public health nurse education.  
*Public Health Nursing*. 36(2), 226–232.

Williams, J., Murphy, M. & Garrow, A. (2022)  
Development of a simulation placement  
in a pre-registration nursing programme.  
*British Journal of Nursing*, 31 (10), 549-554.

#### **Biography - Linda Sanderson**

Linda trained as a nurse at Leeds  
Polytechnic 1981-85. Initially an 'Adult'  
Nurse working in Medicine, Renal and  
General Surgery. 1988-1989 Linda trained as

a Children's Nurse and worked in the speciality of cancer care for children and young people at the Yorkshire specialist unit 1989-2004; as a Staff Nurse, Sister and finally as a Lecturer Practitioner in conjunction with Leeds University. Linda had a brief spell as Sister of a busy Children's unit at Airedale hospital before starting a full time career in education at University of Central Lancashire (UCLan), 2006-2017.

At UCLan Linda was a Senior Lecturer, Course Leader and eventually Principal Lecturer with a lead for Children's Nursing, International placements, Admissions and Business Development.

2017-2020 Linda moved into the charity sector, working with a leading children's cancer charity, Clic Sargent, as their first Nurse Educator. She worked in the North of England teaching health professionals about the care of children with cancer, promoting safe, confident, care so the children and their families could be cared for as close to home as possible. Following redundancy, due to the Covid 19 Pandemic, Linda moved to her current post at University of Huddersfield; Head of Practice Education (Blended Learning).

## **Paper 2**

### **Authors**

Dr. Linda Sanderson - University of Huddersfield

Ms. Gill Davis - Calderdale and Huddersfield NHS Trust

### **Aim of paper**

To showcase innovation and achievements whilst collaborating with clinical colleagues in the delivery of online simulated placements.

### **Abstract**

At the University of Huddersfield 300 hours of online simulated placements have been

included in the 3-year programme (BSc); 200 hours in the 2 year programme (MSc). (See Paper 1 of the symposium).

Clinical colleagues have been involved in these developments in a variety of ways e.g. helping to create scenarios, delivering online teaching sessions. Examples will be demonstrated in the presentation.

The Part 3 simulated placement focusses on transition to registered nurse and the working group collaborated with NHS partner, Calderdale and Huddersfield NHS Foundation Trust, to develop activities relevant for becoming a registered nurse. The Trust provided expert input relating to incident reporting and rostering to provide a current overview of how these issues are managed at an individual and organisational level to benefit the care of clients and support of staff.

The incident reporting input was enhanced by 'real people' sharing their stories. This helped the students to gain insight into the impact of an incident and the value of addressing concerns at the earliest opportunity, reporting accurately using the processes in place.

The rostering activity led to the student nurses creating a 2 week roster for a fictional ward in groups. Facilitated discussion after this group work enabled clarification of issues such as skill mix, dealing with 'requests', consideration of fairness, equity and the skills required by service co-ordinators to balance the needs of the individual and the organisation to promote optimal client care.

Student evaluation of these sessions was positive.

In this session an overview will be given of the various ways in which collaboration has taken place with clinical colleagues. The focus will be on the Part 3 activities and a Trust representative will present alongside

University staff to explain the value they place on this collaboration.

### 3 learning outcomes

- Discuss different approaches to working with clinical colleagues in the delivery of online simulated placements
- View the online rostering activity.
- Recognise the value of collaboration from the perspective of the student and clinical colleagues

### Recommended reading titles (please enter up to 3)

NHS Improvement (2019) *E-rostering the clinical workforce: levels of attainment and meaningful use standards*  
[https://www.england.nhs.uk/wp-content/uploads/2020/09/Erostering\\_meaningful\\_use\\_standards.pdf](https://www.england.nhs.uk/wp-content/uploads/2020/09/Erostering_meaningful_use_standards.pdf)

The Shelford Group (2020) *Safer Nursing Care Tool: Adult Inpatient Wards in Acute Hospitals and Adult Acute Assessment Units. Implementation Resource Pack* Imperial College Innovations Ltd

### Biography - Linda Sanderson

Linda trained as a nurse at Leeds Polytechnic 1981-85. Initially an 'Adult' Nurse working in Medicine, Renal and General Surgery. 1988-1989 Linda trained as a Children's Nurse and worked in the speciality of cancer care for children and young people at the Yorkshire specialist unit 1989-2004; as a Staff Nurse, Sister and finally as a Lecturer Practitioner in conjunction with Leeds University. Linda had a brief spell as Sister of a busy Children's unit at Airedale hospital before starting a full time career in education at University of Central Lancashire (UCLan), 2006-2017.

At UCLan Linda was a Senior Lecturer, Course Leader and eventually Principal Lecturer with a lead for Children's Nursing, International placements, Admissions and Business Development.

2017-2020 Linda moved into the charity sector, working with a leading children's cancer charity, Clic Sargent, as their first Nurse Educator. She worked in the North of England teaching health professionals about the care of children with cancer, promoting safe, confident, care so the children and their families could be cared for as close to home as possible. Following redundancy, due to the Covid 19 Pandemic, Linda moved to her current post at University of Huddersfield; Head of Practice Education (Blended Learning).

### Paper 3

#### Authors

Mr. Chris Essen - University of Huddersfield

Dr. Linda Sanderson - University of Huddersfield

#### Aim of paper

To showcase the various approaches involving service users and carers in the development and delivery of online simulated placements.

#### Abstract

Simulated practice is recognised by the Nursing and Midwifery Council (NMC) as a valuable way for students to develop nursing attitudes and skills providing it involves 'real people', and is used 'proportionately' (pg. 10, Part 3, NMC, 2018).

The simulated placements developed at the University of Huddersfield stemmed from a working group that met weekly initially. 300 hours of simulated clinical hours had been incorporated into the BSc Nursing programme, 200 hours into the MSc programme. A key aim of the working group was to ensure the simulated placements were relevant to student nurses; involving the Public Partnership Group (PPG) from the first working group was essential to achieving this aim.

The School's involvement development lead, responsible for the PPG, provided valuable insights, ideas, resources, and connections to a wide range of service users and carers. These have influenced and shaped the simulated placements experienced in Parts 1, 2 and 3 of the nursing curricula.

In this presentation examples of activities students are involved in with service users and carers, directly and indirectly, will be demonstrated and discussed. For example, synchronous sessions with service users to discuss their experience of health services, being involved in an 'incident' relating to their healthcare, contributing to a task and finish activity where the students produce a 'Promoting health and wellbeing' poster.

Alongside the synchronous sessions, service users and carers have contributed their expertise in written format and videos which will be demonstrated. 'Virtual' service users are also included in Part 1 simulated placement via the Laerdal Medical platform.

Involving service users and carers in an authentic and meaningful way is not without challenges which will also be discussed in this presentation. However positive student evaluations reassure that service user and carer voices are central to inspiring student learning during the placements.

### 3 learning outcomes

1. Appreciate the variety of ways in which 'real' people can be involved in an online simulated placement
2. View examples of the online materials used during the simulated placements in Parts 1,2, and 3 of the programmes.
3. Discuss the challenges of supporting service users and carers involved in an online placement

### Recommended reading titles (please enter up to 3)

Laerdal Medical (2022) *vSim® for Nursing*  
Available at

<https://laerdal.com/gb/products/courses-learning/virtual-simulation/vsim-for-nursing/>

Nursing and Midwifery Council (2018b). *Future nurse: Standards of proficiency for registered nurses*. Available at [www.nmc.org.uk](http://www.nmc.org.uk)

Scammell, J., Heaslip, V. & Crowley, E. (2016), Service user involvement in preregistration general nurse education: a systematic review. *Journal of Clinical Nursing*, 25: 53-69.

### Biography - Chris Essen

Chris has worked over several years to support meaningful patient, service user and carer involvement in professional education. He is particularly interested in how personal narrative, emotional resonance, reflection and dialogue can be harnessed to improve professional practice and public services.

## Paper 4

### Authors

Mr. Tim Cappelli - University of Huddersfield

Ms. Lisa Choma - University of Huddersfield

### Aim of paper

To showcase technology supported creative teaching which engages student nurses during their simulated placement.

### Abstract

University of Huddersfield sought, and achieved, NMC approval to incorporate simulated learning into clinical practice hours in 2021. Despite working closely with practise partners to maximise clinical placement capacity and develop new placements, detailed modelling warned of an ongoing shortfall which would impact on the student nurse learning experience if not addressed.

The simulated placements offer opportunities of clinically relevant learning to student nurses in an online environment. The focus of Part 1 simulated placement is



‘developing as an accountable professional’, the focus of Part 2 ‘Working in teams and leadership’ and part 3 ‘Transition to registered nurse’.

The objective of each simulated placement is to encourage students to develop their nursing knowledge, skills, and attitudes relative to the focus of the simulated placements. Simultaneously, being online presents an opportunity to build students’ confidence in using technology. The ability to use technology is another key skill in modern nursing and although most nursing students use technology in their daily lives, many have problems translating that into using technology for studying or work (Terkes et al 2019). As educators we wanted to find creative ways to expose students to technology and develop their confidence. (Gonan et al, 2014).

To achieve these objectives, the team at Huddersfield developed a series of interlinked, virtual learning activities. Through smart design and careful use of technology, students are taken through a carefully scaffolded series of online activities designed to develop nursing skills and knowledge and build their confidence with technology.

Innovative activities have been designed to be fun, engaging and motivating to encourage students to engage during the full two or three weeks of simulated placement, whilst also achieving their learning outcomes. In this presentation examples of the various activities will be demonstrated, and the student evaluations of their experiences summarised.

### 3 learning outcomes

- Appreciate the way in which technologies have been developed to provide structured, innovative, virtual learning experiences.
- View examples of technology supported materials used to support student engagement and learning

during the simulated placements in Parts 1,2, and 3 of the nursing programmes.

- Discuss student contributions to, and evaluations of, the simulated placements.

### Recommended reading titles (please enter up to 3)

Gonen, A., Sharon, D., Offir, A. and Lev-Ari, L., 2014. How to enhance nursing students’ intention to use information technology: the first step before integrating it in nursing curriculum. *CIN: Computers, Informatics, Nursing*, 32(6), pp.286-293.

Terkes, N., Celik, F., & Bektas, H. (2019). Determination of nursing students’ attitudes towards the use of technology. *Japan Journal of Nursing Science*, 16(1), 17-24.

### Biography - Tim Cappelli

#### Lead for Technology Enhanced Learning Nursing and Midwifery, University of Huddersfield

Tim Cappelli has worked with learning technology for over 20 years, from setting up work-based learning centres to introducing blended learning initiatives to HE. He managed the first large-scale deployment of iPads in HE, the development of a learning platform in WordPress and the creation of a digital Curriculum Mapping Tool.

### #137 Resilience-based Clinical Supervision: Supporting the health and wellbeing of student and newly registered nurses

#### Authors

Ms. Grace Cook - Foundation of Nursing Studies

Ms. Sue Hill - Foundation of Nursing Studies

## Aim of paper

To enable student and newly registered nurses to experience resilience-based clinical supervision (RBCS) (<https://www.fons.org/learning-zone/clinical-supervision-resources>) and develop the necessary knowledge, skills, and confidence to become peer facilitators in the future.

To support the future development of a flourishing workforce who are able to protect themselves from the emotional and physiological impacts of their roles and 'develop cognitive transformation practices, education and environment support' (Stacey, 2018, p.5).

To increase awareness of compassionate flow within the workplace and the impact of context, environment, and culture.

For participants to be introduced to and partake in a participatory evaluation.

## Abstract

In 2021 the Foundation of Nursing Studies (FoNS) were funded by Health Education England to offer RBCS to four cohorts of mental health and learning disability student nurses. RBCS is a restorative form of clinical supervision which is a supportive forum that focuses on self-awareness, self-development and wellbeing. Subsequently, in 2022, a further four cohorts of RBCS were offered, this time to newly registered nurses. The programme consisted of a virtual masterclass which introduced the programme and theory of RBCS followed by engaging in virtual clinical supervision sessions. This was the first time that FoNS had facilitated with student and newly registered nurses.

The programmes were both evaluated utilising a participatory approach (Odell, 2018) whereby participants reflected and answered a series of questions independently. Reflections were then shared, and the collective responses themed

providing opportunity for participants to share and appreciate responses

A predominant theme for both groups of individuals was the importance of connection with each other. This safe, non-judgmental space enabled individuals to openly share resulting in individuals feeling that they were not alone. Engaging virtually also enabled individuals in very different areas to connect, both geographically and organisationally. Key learning also included awareness of the emotional regulation systems, use of mindfulness, positive reframing, check ins and challenging the inner critic. Participants identified feeling calmer and more confident. An improvement in mental wellbeing was also noted, which enabled individuals to remain within their current role.

A key message from both programmes was how important clinical supervision is and that it should be more readily available in practice, both for student nurses as part of their curriculum and for newly registered nurses. It was evident that those that were able to attend noted the benefits and thus were able to prioritise attendance despite the pressures.

## 3 learning outcomes

Exposure to good quality restorative clinical supervision in the early stages of a nurse's career is vital.

RBCS has the potential to increase confidence and improve mental wellbeing for students and newly registered nurses.

Psychologically safe spaces can be facilitated virtually.

## Recommended reading titles (please enter up to 3)

Cope, G., Cook, G., Bosanquet, J. and Gordon, E. (2021). Resilience-based Clinical Supervision: A FoNS facilitated programme which aims to support the health and wellbeing of learning disability and mental

health student nurses. [online]. Available at: <https://www.fons.org/resources/documents/RBCS/RBCS-for-Student-Nurses---Final-Report.pdf>

Odell, O. (2018). Reflections on developing a participatory evaluation as part of the Patients First programme. *International Practice Development Journal*. 8 (2), article 7. DOI: <https://doi.org/10.19043/ipdj.82.007>

Stacey, G., Cook, G., Aubeeluck, A., Stranks, B., Long, L., Krepa, M. and Lucre, K. (2020). The implementation of resilience based clinical supervision to support transition to practice in newly qualified healthcare professionals. *Nurse Education Today*. 94. DOI: <https://doi.org/10.1016/j.nedt.2020.104564>

## **#141 Placement Opportunities Tool (POT) – development, implementation and results of a survey tool describing educational practice placements accessible to undergraduate Nursing (Intellectual Disability) students in Ireland.**

### **Authors**

Dr. Eileen Carey - University of Limerick, Department of Nursing and Midwifery

Dr. Sinead Foran - Waterford Institute of Technology

Ms. Geraldine Burke - SouthEast Community Healthcare Waterford,

Ms. Judy Ryan - Nursing and Midwifery Planning and Development South East and Office of the Nursing and Midwifery Service Directorate (ONMSD).

### **Aim of paper**

This research study aimed to develop and implement a survey tool to establish the

current landscape of placement types and areas accessed and potential placements as reported by HEIs facilitating BSc Nursing (Intellectual Disability) programmes across Ireland.

### **Abstract**

Similar to Learning Disability Nurses (LDNs) in the UK, Registered Nurses in Intellectual Disability (RNIDs) in Ireland is a professional discipline which ensures graduate nurses are equipped with knowledge, skills, attitudes and values for supporting people with intellectual disability across the lifespan. Regulated by the Nursing and Midwifery Board of Ireland (NMBI) and eight Higher Education Institutions (HEIs) across Ireland, undergraduate education is a four-year Bachelor of Science honours degree in Nursing (Intellectual Disability) comprising of theoretical and practice placement components. Crucially important to experiential learning of undergraduates is support of Associated Health Care Providers (AHCPs) and associated placement opportunities. It is vitally important that students access placements which are most representative of current services provided to people with intellectual disabilities.

### **Method**

This study enlisted a quantitative design to develop an 83 item Qualtrics XM survey instrument titled Placement Opportunity Tool (POT) which was distributed to eight HEIs. Descriptive statistics were utilised to establish practice placement types and areas accessed and to identify placements with potential for development. Ethical approval was obtained from the Education and Health Sciences Research Ethics Committee, University of Limerick.

### **Findings**

POT survey responses were received from six HEIs and included in the data analysis. Findings demonstrated majority of placements were based in traditional

Intellectual Disability services with students having less access to placements either in mainstream services or with RNID specialist, liaison, clinical nurse specialists or advanced nurse practitioners.

### Conclusion

A range of traditional and community practice placement types and areas were identified however, gaps remain in terms of placement opportunities in mainstream community-based services and settings.

### 3 learning outcomes

- 1) To understand the landscape of current practice placement types and areas for students on BSc Nursing (Intellectual Disability) programmes in Ireland.
- 2) To understand how researchers developed and implemented a survey tool to identify practice placements accessed by undergraduates.
- 3) To understand placement types and areas which need to be developed to support experiential learning of undergraduate nursing students.

### Recommended reading titles (please enter up to 3)

Carey *et al.* (2022) The Irish perspective on placement opportunities accessed by students on undergraduate Nursing (Intellectual Disability) programmes: A quantitative descriptive study.

### Biography - Eileen Carey

Eileen is a lecturer in the Department of Nursing and Midwifery, Faculty of Education and Health Sciences at the University of Limerick. Prior to entering academia, Eileen worked as a Registered Nurse (Intellectual Disability), with people with intellectual disabilities and their families in a variety of contexts and settings. Eileen is a BSc. (Nursing Studies) graduate of the University of Limerick, a PG Dip. (Nurse Education) and MSc. (Advanced Nursing Studies) graduate

of the University of Ulster and a Doctor in Philosophy (PhD) graduate of Trinity College, Dublin. Eileen's research interests focus on intellectual disability nurse education and on developing quality practices to implement evidence-based approaches and initiatives facilitating health and wellbeing of older adults especially those growing older with intellectual disabilities.

## #145 Levelling Up Programme

### Authors

Ms. Jane Sanjeevi - Northampton General Hospital

### Aim of paper

This programme is aimed to support Internationally Educated Nurses (IENs);

- In gaining awareness and choosing a personal career path in nursing.
- To help identify career ambitions, and strengths and explore career opportunities.
- To help gain a clear understanding of educational opportunities to help in career progression.
- To assist nurses in building confidence, taking senior positions within NHS.
- To ensure equality, diversity and inclusion within the health and social care workforce
- To bring innovation in delivery of professional development.
- To help achieve their fullest potential using their international learning and experience for practice within UK.

### Abstract

#### Background:

Northampton General Hospital (NGH) has been recruiting Internationally Educated Nurses (IENs) at the level of band 5 but has not seen a desirable level of progression into senior positions. To address this disparity,

promote inclusivity, and support their progression, evidence was gathered through surveys and pull-back sessions regarding enablers and barriers in career progression, and a career workshop was structured to provide tools to address their development needs.

#### **Method:**

The Levelling Up Programme was designed exclusively for IENS working in NGH for more than 12 months following their registration and the first July cohort had 12 participants. It was tailored to prepare IENS to explore their career opportunities to match previous experiences to that of the UK.

The participants had the opportunity to hear success stories from IENS who have progressed, to draw inspiration and positive reinforcement. Alongside, they also had interactive sessions to identify and express barriers to career progression within a safe space and draw solutions. Practical sessions for job application, interview preparation, accessing funded courses, and introduction to Advanced Clinical Practice were also covered.

#### **Outcome:**

Since attending the workshop, participants have expressed that there was a clear understanding and greater confidence to apply for senior positions. Out of 12 participants, 1 has been successful in securing a place for evidenced based course, 2- Professional Nurse advocate course, 4-applied for specialist and senior positions and 1 participant has been successful in securing a band 6 position.

The Programme was well received with positive feedback and had requests for further sessions. The second cohort was conducted in October and plans are in progress to extend the programme across the collaborative.

#### **Conclusion:**

The Levelling Up has been instrumental in instilling confidence, providing resources and practical support for IENS in accelerating their development by identifying progression pathways.

#### **3 learning outcomes**

- IENS will gain clear understanding of career and educational opportunities to help in progression.
- IENS will develop confidence to take up senior positions and gain tools for development bringing inclusivity at all levels of nursing.
- IENS will understand how to best match their international experience to that of UK nursing model and prevent de-skilling within NHS.

#### **Recommended reading titles (please enter up to 3)**

The Messenger Review and The McGregor-Smith Review

NHS Workforce Race Equality Standard (WRES)

The "Snowy White Peaks" of the NHS

The Ten Point Race Equality Plan

NHS Long term Plan

NHS People Plan

#### **Biography - Jane Sanjeevi**

Jane is a Registered Nurse in the UK and is a graduate of Apollo College of Nursing, (MSc Nursing) and MAC College of Nursing (BSc Nursing) Chennai, India. Jane works as Senior International Support Liaison Nurse at Northampton General Hospital and has been involved in supporting Internationally Educated Nurses in their transition and progression within the Trust.

Jane has a career background in Infection Prevention & Control and has been

passionate about working with people, empowering staff groups, and understanding diverse cultural backgrounds and their impact on patient care.

She is the Lead for the International Shared Decision-Making Council (ISDMC) for Nurses which aims at empowering international nurses within the Trust and is also the Co-Chair of the NGH Race Ethnicity & Cultural Heritage (REACH) Network.

As 'people' are the heart of a diverse NHS, she aspires to be a leader who ensures there is equity for staff in their career growth and development and promote safety in health care for our patients.

Jane is also a Professional Nurse Advocate (PNA) and the Cultural Ambassador at NGH. She is a proud recipient of the NGH Pathway Proud Award and is currently on the competitive Midlands Developing Aspirant Leader programme.

## **#147 Using a capacity assessment framework to develop practice learning opportunities**

### **Authors**

Mrs. Juliet Borwell - Health Education England

### **Aim of paper**

To share the learning and outcomes from piloting a practice learning capacity assessment framework. The framework has been developed and trialled in the South East region of England across nursing, physiotherapy and occupational therapy.

Feedback from organisations who have piloted the framework is positive, with strong examples of changes in practice that have occurred as a direct result.

### **Abstract**

Availability of high-quality practice learning placements is a pervasive issue.

To help address this challenge a capacity assessment framework has been developed to assist with the exploration of issues, and areas for development, within a placement provider.

Following pilots across multiple secondary and community settings in the South-East region of England, the capacity assessment framework is providing new insights and highlighting opportunities for future development and quality improvements.

The framework is based on the principle that potential capacity exists wherever and whenever health and care services are being delivered. Within the context of creating innovative practice learning models, Borwell and Leigh (2021) suggest that three interdependent conditions are needed. They propose that the function, size, and ability of a service should be considered when exploring placement capacity.

The capacity assessment framework uses objective data to gauge the function and size of a service. It models what capacity may look like if there was one learner present during daily working hours and uses Whole Time Equivalent Registered Practitioners to give an objective indication of size. The framework then considers the interdependencies that determine ability. This triangulated view helps to inform decisions about growth in capacity that maintains quality.

By providing objective data, exploration about supporting learners in practice can start from a position that is not zero. The conversation can then focus on exploring enabling factors, identifying quality improvements, and planning that considers the model of placement, of supervision, and of assessment, to influence change.



The assessment framework seeks to optimise the utilisation of existing resources and demonstrate where there is scope for further exploration. Use of the framework has supported individual organisations to change policies, develop business cases for further clinical education resources, and achieve an increase in placements by identifying the factors that influence ability.

### **3 learning outcomes**

1. Discuss the three inter-dependant factors needed to achieve practice learning capacity.
2. Identify the extrinsic influences on the ability of an area to support practice learning
3. Describe the outcomes from the pilot of the capacity assessment framework

### **Recommended reading titles (please enter up to 3)**

Borwell & Leigh (2021) Addressing the practice learning and placement capacity conundrum. British Journal of Nursing. Vol 30, No 18. P1093

### **Biography - Juliet Borwell**

Juliet is a Registered Nurse (Adult), a qualified coach and psychometric facilitator with over 20 years of experience in practice learning and workforce development. She has worked with a variety of universities as a guest lecturer for the Supporting Learners in Practice course and PG Cert Ed (Practice Education) she has also worked with The Open University as a Practice Tutor.

Juliet first worked with Health Education England in a Fellowship role that focused on scoping alternative models of Mentorship before taking up a substantive post in 2018 as Quality Lead for Practice Learning. Juliet moved into the HEE (SE) Nursing Team in June 2022, taking up the new post of Programme Lead for Practice Learning.

Juliet has supported the implementation of alternative models of supervision and the Future Nurse Standards. She has worked with a range of Higher Education Institutions in the establishment of new programmes and has developed regional approaches to improve placement demand forecasting, management of practice learning capacity and to embed the HEE Quality Framework in practice.

Juliet is passionate about supporting the development of learning environments that nurture and nourish individuals at every stage of their career.

## **#148 Dying to talk? Getting end of life education right for child nursing students**

### **Authors**

Mrs. Deb McNee - Swansea University

Mrs. Helen Beckett - Swansea University

### **Aim of paper**

To offer an insight into the development and implementation of an innovative end-of-life education workshop for pre-registration child nursing students.

The session will include the importance of facilitating the student to confront their own perceptions and experiences of death, in order for them to support children and families in the future and to reduce death anxiety, a very real issue for many students.

It is hoped that this successful and well evaluated approach will be beneficial to not only child nursing educators, but also other areas of nursing and health education.

### **Abstract**

Caring for a child at the end of life is a privilege and a responsibility. Future children's nurses need to be equipped with both coping strategies and caring skills when supporting families at this very

difficult stage in their lives. The delivery of this essential but emotive aspect of nurse education was explored at Swansea University. The topic had been taught in many different ways previously, with mixed feedback from students evoking ongoing anxiety in relation to the topic. Therefore, the priority was to attempt to break the taboo of talking about death, whilst balancing the level of sensitivity, emotion and humour.

Death cafes were first introduced as a social concept in the UK to encourage discussion around general awareness of death. The idea of celebrating life by talking about death helped to alleviate the issue of death anxiety. Whilst they have been used in universities before, it was recognised that the premise needed adapting for student nurses and the delivery demanded a compassionate leadership style to encourage participation. Once the safe, supportive and non-threatening environment was right, the hope was to build their death self-efficacy; their skills and capabilities around dealing with death, through exploration of their previous perceptions, beliefs and experiences.

The workshop was delivered over two days and included the death café concept, end-of-life simulations, advanced care planning, personal experiences within practice, preparing a child for death, supporting the family around the child, and supporting each other through debriefing methods. In recognition of the difficult discussion expected, resilience-based tasks were included throughout along with signposting to self-care platforms and well-being support.

This presentation aims to describe this innovative approach, by exploring the challenges and opportunities addressed when delivering education around emotive topics like End of Life care.

### 3 learning outcomes

1. To highlight the difficulties and opportunities when delivering end of life education to child nursing students.
2. To outline the development and implementation of the educational workshop.
3. To emphasise the importance of compassionate leadership when delivering End of Life education.

### Recommended reading titles (please enter up to 3)

Chambers, L. (2018). A Guide to the Development of Children's Palliative Care Services (4th edition). Together for Short Lives: Bristol. Available online: <https://www.togetherforshortlives.org.uk/resource/a-guide-to-childrens-palliative-care/>

Shorey, S., & Chua, C. (2022). Nurses and nursing students' experiences on paediatric end-of-life care and death: a qualitative systematic review. *Nurse Education Today*, 112, 105332. <https://doi.org/10.1016/j.nedt.2022.105332>.

Nelson, K. E., Wright, R., Abshire, M., & Davidson, P. M. (2018). All things death and dying: Health professional students participating in the death café model. *Journal of palliative medicine*, 21(6), 850-852. <https://doi.org/10.1089/jpm.2017.0440>

### Biography - Deb McNee

*Deb McNee is a Child Nursing Lecturer at Swansea University predominantly teaching undergraduate nursing students. She has held this position for 4 years and teaches across many other disciplines including public health, paramedics, and osteopathy. Her background is in child health with over 30+ years' experience. The majority of this experience was within primary care, as both a community children's nurse and a Health Visitor. She holds an MSc in Specialist Community Public Health Nursing and has a specialist interest in vulnerable groups,*

*health promotion, paediatric palliative care and end of life care.*

## **#149 Project SSTART: Successful Student Transition and Retention in Theatres**

### **Authors**

Ms. Vanessa Da Silva Amaral - University College London Hospitals

Mr. Alvaro Tabora - University College London Hospitals

Ms. Carolina Britton - University College London Hospitals

Ms. Angela Tiu - University College London Hospitals

### **Aim of paper**

This presentation aims to share a project, local to University College London Hospitals (UCLH) designed at the start of 2022. The objective behind project SSTART (Successful Student Transition and Retention in Theatres) is to support nursing students undertaking their final placement in the operating theatres, to facilitate their transition to their role as newly-qualified nurses and to, thus, retain a well-prepared, highly motivated nursing workforce.

### **Abstract**

Perioperative Care is an exciting area of nursing. Perioperative nurses care for patients preparing for, undergoing, and recovering from surgery. It is key that student nurses are provided with meaningful, supportive, and timely experiential knowledge of the Operating Theatres (OT).

As an employer and placement provider, the Theatres department at UCLH developed a project with the following features:

1) Supervised and mentored clinical placement (also known as the 'senior practicum') of 12 weeks offered to final-year

nursing students, on rotation between the roles of 'scrub', 'anaesthetics' and 'recovery'.

2) Tailored learning opportunities, including formal 'Meet & Greet', 'Open Morning', 'Local Induction' programme, and the 'Patient Pathway Experience'.

3) Offer of additional training, designed to facilitate transition and onboarding of those who go on to be recruited as newly qualified nurses, such as in surgical Aseptic Non-Touch Technique (ANTT), medical devices, blood transfusion, patient's admission and discharge and IV passport.

4) 'Insight learning' through exposure to specialist areas such as 'pain team' and 'pre-assessment', shadowing of coordinators, and involvement in clinical governance and audits.

5) Robust framework of support, mentoring and coaching from colleagues and an engaged education team, including while waiting for NMC registration and during a period to consolidate learning; but also with allocated preceptor and practice assessor/supervisor and weekly learning protected time.

After SSTART's first iteration, 11 of 16 students successfully took on Theatres & Anaesthesia roles. Students are appreciative of the SSTART project as reflected in the feedback:

"The support I am getting so far is excellent. This was the first placement I had a designated local induction programme."

"I wasn't originally going to apply to Theatres but after being here for 2 weeks I must apply. The level of care provided in this department is outstanding and I want to be a part of it."

### **3 learning outcomes**

1. An exploration of a well-planned, engaging and supportive placement for student nurses in the OT.

2. A discussion of the main features of such a programme, combining positive learning experiences and fast-tracked onboarding of new nurses.
3. Understanding its benefits for students, staff, and organisation, namely around the influence of transition experiences in retention in the workplace and profession.

### **Recommended reading titles (please enter up to 3)**

- Health Education England (2018) Reducing Pre-registration Attrition and Improving Retention Report. Available at: [hee.nhs.uk](http://hee.nhs.uk)
- Hallaran AJ, Edge DS, Almost J, Tregunno D. (2022) New Nurses' Perceptions on Transition to Practice: A Thematic Analysis *Canadian Journal of Nursing Research*. 0(0).

### **Biography - Vanessa Da Silva Amaral**

Vanessa Amaral is an experienced perioperative nurse and clinical practice facilitator and has worked in several areas of the perioperative nursing arena. She has an interest in nurse and allied health professions' education, particularly around specialist practice in recovery and around cross-boundary learning. Vanessa is keen to develop as a leader in education and is currently undertaking her NHS Leadership Academy development programme.

## **#151 Care with Kindness**

### **Authors**

Mrs. Linda Purdy - The Queen Elizabeth Hospital King's Lynn

Mrs. Alice Webster - The Queen Elizabeth Hospital King's Lynn

### **Aim of paper**

Care with Kindness is a programme offered to all staff at the Queen Elizabeth Kings

Lynn to enhance their understanding of the impact of them on care.

The facilitators of Care with Kindness supported and worked with an ever-changing environment which embedded, practice centred delivery of the programme ensured that the pace of change was kept up to date.

The design and delivery of the programme has required clear leadership from ward to board and is underpinned by patient feedback and participation.

### **Abstract**

Care with Kindness was developed as a result of a number of different data sets such as complaints, inpatient survey, FFT etc where staff were, it was being reported care was 'rushed', or not 'kind' with little emphasis on an individualised, person-centred approaches. As a result, a programme was developed exploring the fundamentals of care delivery using learning approaches that encouraged staff to reflect on their practice and to encourage a safe psychological space for individuals to talk through care experiences that did not meet the Trust values of 'Fairness, Wellness' and 'Kindness'.

The design and delivery of the programme has required clear leadership from ward to board and is underpinned by patient feedback and participation. Whilst the 'topics' may not change working with people who have accessed and experienced our services does, which enhances positive outcomes for participants and develops understanding and learning from and in practice. We use multimedia approaches to enable patient participation along with practical sessions with service users and voluntary groups, using interactive approaches to support learning in order that we can share and support some of the emotional 'turmoil' explored through reflection from practice.

150 participants (registered and unregistered staff) have attended and report the programme as 'enlightening' and 'breaking down barriers' enabling individuals to develop the courage to challenge practice and the status quo. Many participants have remarked on the feeling of being in a group of like-minded staff who are able to 'carry on' - on a number of occasions we have had reported that staff had felt they would leave their roles before the programme but now having completed the Care with Kindness programme are not looking to do so because they feel both enabled and empowered to question and deliver care that has kindness and compassion at its core.

### 3 learning outcomes

1. To demonstrate how learning in and from practice can support and enable care that has kindness and compassion at its core.
2. Empower participants to change practice
3. Develop a social moment across the organisation in which care and compassion was at its core and linked to trust values.

### Recommended reading titles (please enter up to 3)

Michael West, Suzie Bailey, Ethan Williams  
2020 *The courage of compassion: Supporting nurses and midwives to deliver high-quality care* - The kings Fund

The courage of compassion | The King's Fund [Kingsfund.org.uk](https://www.kingsfund.org.uk) (last accessed 16th October 2022)

Cardiff S, Sanders K, Webster J, Manly K,  
2020 *Guiding Lights Effective Workplace Cultures*, IPDJ\_1002\_002.pdf, (last accessed 16th October 2022)

### Biography – Linda Purdy

I have worked in the NHS for 37 years and had a varied and rewarding career

promoting professionalism and always advocating for good patient experience.

I have two NMC registrations. I qualified in 1989 as a Registered General Nurse, starting my career as a staff nurse in general surgery. I knew that I wanted to work in Emergency Care, I loved the ability to look after the spectrum of life, patients' and their families and carers. I started in the Emergency Department (ED) in 1991. I was seconded to complete my preregistration as an RN Child in 2002, undertaking various post registration courses to support patients in ED including developing autonomous practice. I enjoyed the diversity and multiprofessional working. Teaching was a vital part of my role and career. In 2003 I took up a Nursing Lecturers post at the University of East Anglia teaching pre and post registration students and completed my teaching degree. However, I missed being a practising RN and returned to Emergency Care in 2007 combining the role of Practice Development and Advanced Practice until 2016 when I took up a post of a Consultant Nurse in Acute Medicine – I enjoyed very much working to the pillars of advanced practice and to the development of new roles and patient pathways to support Acute Medical Patients pathways. In 2021 I was asked by the then Chief Nurse to undertake a post in Corporate Nursing as an Associate Director of Patient Experience – this was an exciting challenge.

### #152 SPECiAL: Skills for PEroperative Care in Accelerated Learning

#### Authors

Ms. Nicola Stroud - Cambridge University Hospitals (CUH)

Ms. Carolina Britton - University College London Hospitals

Mr. Oscar Fernandez-Saborit - University College London Hospitals



Ms. Angela Tiu - University College London Hospitals

### **Aim of paper**

This presentation will explain what the Health Services Academy is and how it developed SPECiAL (Skills for PERioperative Care in Accelerated Learning) courses, as part of its portfolio of education for a multi-skilled workforce in healthcare. It shares the story behind an innovative partnership between university and hospital. It will highlight and explore two SPECiAL courses: the 'Advanced Recovery Room Care' and the 'Professional Assistant in Anaesthesia' courses. Expert review for RCN accreditation commended on the comprehensiveness, expertise of developers and 'inherent collegiality' of the courses, going 'a long way to set educational gold standards for other providers to emulate'.

### **Abstract**

A collaboration between the University College London - Faculty of Medical Sciences and UCLH Theatres and Anaesthesia initiated the development of a new Health Services Academy to support the recruitment, retention, and professional development of NHS staff with an emphasis on cross-skilling to better enable workforce resilience.

Through this innovative partnership with UCL, a world-leading university, a dedicated team of educators both at University College London Hospitals and Cambridge University Hospitals collaborated to craft credit-bearing modules for accelerated learning in the professional areas of Perioperative Care - the SPECiAL courses.

44 perioperative nurses have already completed one or more 15-credit bearing SPECiAL courses at masters level. Two courses started in 2021 and are on their third iteration: the 'Advanced Recovery Room Care (30 CPD hours RCN accredited) and the 'Professional Assistant in Anaesthesia' (60

CPD hours RCN accredited).

Through a classic ADDIE instructional design model (Analyze, Design, Develop, Implement, and Evaluate), the Health Services Academy develops courses underpinned by principles of flexible accelerated learning, to achieve learning outcomes more efficiently:

- high-quality interactive online materials stimulate learning from experience, reflection and double loop learning
- a portfolio of clinical activity supports work-based learning and meaningful supervision encounters
- students control the speed at which they learn, and courses can therefore be shorter than the traditional semester
- learning is enhanced through the opportunity for peer and mediated discussions and reflection
- a strong focus on evidence-based practice, critical thinking and academic skills enables students to develop as leaders and introduces scholarly activity
- learning is supported by supervised practice, weekly clinical teaching sessions, education and faculty support

The evaluation of the SPECiAL courses is inserted in a bigger piece of research focusing on evaluating a raft of educational interventions to support sustained delivery of efficient high-quality care.

### **3 learning outcomes**

1. To outline the development of a partnership initiative between university and hospital as a proactive approach to recruitment, retention and professional development
2. A discussion of the main features of accelerated learning for healthcare professionals in general, and perioperative practitioners in particular



3. Understanding the benefits of SPECiAL courses for students, staff, and organisations

### Recommended reading titles (please enter up to 3)

- Carol S Dweck (2007) ' Mindset: The New Psychology of Success', Ballantine Books
- Smith, A, Lovatt, M and Wise,D (2003) Accelerated Learning, a User's Guide. Network Educational Press: Stafford.

### Biography - Nicola Stroud

Nicola has always enjoyed learning and so she explored various academic interests before eventually completing her DipHE in Operating Department Practice in 2011. She then joined a busy Orthopaedic department doing Anaesthetics and Scrub, specialising in Anaesthetics in 2016 when she moved to a major trauma centre. Nicola's current role is a Practice Educator in the Theatres Practice Education Team at Cambridge University Hospitals and as Honorary Clinical teaching Fellow at University College London. She oversees the induction of new starters and help provide CPD for the staff in theatre. Nicola is completing her MA in Digital Education and her interests include technology enhanced learning, Human Factors, Resus and pharmacology.

### #154 Linking Nurses' Clinical Leadership to Patient Care Quality: The Role of Transformational Leadership and Structural Empowerment as Perceived by Registered Nurses

#### Authors

Mr. Abdulaziz Alanazi - School of Nursing and Midwifery, Queen's University Belfast

Dr. Clare McKeaveney - Queen's University Belfast

Dr. Marian Traynor - Queen's University Belfast

Dr. Susan A Clarke - Queen's University Belfast

### Aim of paper

To examine the relationships between transformational leadership, structural empowerment, registered nurses' clinical leadership, and patients care outcomes as perceived by registered nurses.

### Abstract

**Background:** Effective leadership is critical in driving and motivating registered nurses to provide high quality of patient care. Various researchers have established the link of effective transformational leadership in nursing to improved patient care outcomes, but there is still a gap related to the how of this association. Therefore, further research is needed to elucidate the mechanism of action. **Aim/Objective:** To examine the relationships between transformational leadership, structural empowerment, registered nurses' clinical leadership, and patients care outcomes as perceived by registered nurses. **Methods:** This study used a cross-sectional, correlational design. It was conducted in a tertiary hospital in, Saudi Arabia. A total 1,038 registered nurses were invited to participate. The study variables were assessed using the following instruments: MLQ (Scale range=0–4),CWEQ II (Scale range=1–5), CLS (Scale range=1–5), and quality of patient care using the occurrence of patient adverse events (Scale range=1–4) and 4-item quality of nursing. The study obtained ethical approval from Queen's University Belfast and King Saud Medical City. **Results:** Registered nurses reported higher degree of transformational leadership (Mean=3.01, SD=0.82), increased structural empowerment (Mean=3.70/5, SD=0.73), higher level of clinical leadership skills (Mean=4.07, SD=0.63), decreased patient adverse events (Mean=1.47,

SD=0.52), and high quality of nursing care (Mean=3.12/5, SD=0.51). Transformational leadership was significantly and positively correlated with structural empowerment ( $r=.51$ ;  $p=0.01$ ). Structural empowerment was significantly and positively correlated with registered nurses' clinical leadership ( $r=.50$ ;  $p=0.01$ ). Registered nurses' clinical leadership was significantly and positively correlated with the overall quality of patient care revealing decreased patient adverse events ( $r=-.17$ ;  $p=0.01$ ) and high quality of nursing care ( $r=-.35$ ;  $p=0.01$ ). **Conclusion:** The study findings provide evidence for head nurses' use of transformational leadership in creating an empowered nursing work structure and developing clinical leadership in registered nurses that promotes overall quality of patient care by decreasing patient adverse events and delivering high quality nursing care.

### 3 learning outcomes

To understand how Transformational Leadership is essential to improve the quality of care.

Registered nurses' clinical leadership plays a vital role in improving the quality of care.

Creating an empowered nursing work structure promotes the quality of patient care

### Recommended reading titles (please enter up to 3)

Asif, M., Jameel, A., Hussain, A., Hwang, J., & Sahito, N. (2019). Linking transformational leadership with nurse-assessed adverse patient outcomes and the quality of care: Assessing the role of job satisfaction and structural empowerment. *International Journal of Environmental Research and Public Health*, 16(13).

Patrick, A., Laschinger, H. K. S., Wong, C., & Finegan, J. (2011). Developing and testing a new measure of staff nurse clinical leadership: The clinical leadership survey.

*Journal of Nursing Management*, 19(4), 449–460

Laschinger, H. K., Finegan, J., Shamian, J., & Casier, S. (2000). Organizational trust and empowerment in restructured healthcare settings: Effects on staff nurse commitment. *The Journal of Nursing Administration*, 30(9), 413–425.

Avolio, B. J., & Bass, B. M. (2004). *Multifactor Leadership Questionnaire. Manual and Sampler Set* (3rd ed.). Redwood City, CA: Mindgarden.

Healthcare Leadership

Model <https://www.leadershipacademy.nhs.uk/>

### Biography - Abdulaziz Alanazi

I am interested in creating inclusive cultures of transformational leadership & improving the quality of care. Nurse leader with a Master of Science (MSc) in Nursing Science from The University of Salford. Now I am doing my PhD in nursing leadership and quality of care at Queen's University Belfast .

### #157 'We are all in this together': Building the #WeNurseAcademic community:

#### Authors

Mrs. Helen Davis-Miles - Birmingham City University, West Midlands, Birmingham, United Kingdom

Ms. Melanie Hayward - Buckinghamshire New University

Ms. Katie Anderson - Robert Gordon University

#### Aim of paper

To present the journey and achievements of the #WeNurseAcademic community following the launch on Twitter in May 2021.

## Abstract

Digital technology is becoming congruously ubiquitous in both Nursing and Higher Education policy and practice; consequently, both academics and students need digital capability; the requisite competencies to work and learn in a digital culture.

Social media is a tool used via digital technology enabling users to develop digital capability through collaboratively accessing, creating and sharing information. As a result, it supports educator, professional and student users to stay abreast of current practice and policy, and provides direct connection to each other, key experts and high-level field contributors.

Twitter is the most used social media platform in both Nursing and Higher Education which nurse educators utilise to form a network and connect with others to enhance nurse education. #WeNurseAcademics was established in May 2021 and hosted via @wenurses. The aim of this hashtag and group is to acknowledge and bring together the extensive group of nurse academics and educators nationally and internationally to build a supportive community of practice.

Tweetchats are a regular feature of the community and have covered several important and high agenda topics such as the use of simulation in education, online learning, digital technology in teaching and learning and wellbeing of learners and academics.

The community seeks to engage all fields of nursing academics and educators, a unique supportive network facilitating sharing of practice, support and learning and in turn enhancing the educator voice.

Nurse academics and educators have a responsibility to become conversant with the digital milieu of Higher Education and Nursing practice and are accountable for their own professional development. Social

media exists as a modern example of synergetic digital technology, increasingly integrated as an educative and connective tool that can, and is, resulting in a transformative online culture for nurse educators. We would love you to join us on the journey!

## 3 learning outcomes

### Learning Outcome 1-

To understand a rationale behind the #WeNurseAcademic community

### Learning Outcome 2-

To explore the engagement and impact of #WeNurseAcademic community

### Learning Outcome 3-

To collaboratively consider and discuss the future of #WeNurseAcademics community

## Recommended reading titles (please enter up to 3)

Goodchild (2018), Does Technology really enhance nurse education, *Nurse Education Today*, 66, 69-72

Lupton. D (2014) Feeling better connected: Academics' Use of Social Media, Canberra, News Media Research, University of Canberra

Moorley. C and Chinn. T (2019), Social Media Participatory CPD for revalidation, professional development and beyond. *British Journal of Nursing*, 28 (13) 870-877

## Biography - Helen Davis-Miles

Helen is a Senior Lecturer and Deputy Course Lead for the Registered Nurse Degree Apprenticeship course at Birmingham City University. Having qualified as a children's nurse from the University of Birmingham, Helen worked within Haematology/Oncology at Great Ormond Street Hospital NHS Foundation Trust and Birmingham Women's and Children's NHS Foundation Trust. Helen has a keen agenda

for the use of Social Media in nursing (pre-registration and post registration) and is part of a number of key social media communities. As Education lead for the Global award winning Children and Young Peoples Student Nurse Network (CYPStNN) working closely with CYP students across the UK. Helen is also part of the @WeCYPnurses account and is founder and lead of the #WeNurseAcademic community offering peer support for nursing academics. Helen is also a passionate champion for individuals with hidden disabilities and equal opportunities, particularly in relation to Stoma's, Endometriosis and Spina Bifida.

Twitter profile: @Helenski17

Associated twitter profiles: @WeCYPNurses @CYPStNN @WeNurses- #WeNurseAcademics @BCUCYPNursing @BCURNApprentice

## **#165 Co Creating Culturally Responsive Placement Support: Black African Mental Health Nursing Students Experiences**

### **Authors**

Ms. Danielle Chavrimootoo - Kingston University

Mrs. Louise Howard - Kingston University

### **Aim of paper**

This paper provides participants with an overview of the findings of a research project utilising focus groups which explored clinical placement support for Black African Mental Health students. The session aims to raise awareness of the racialised experiences of students on placement. We invite participants to discuss how to move towards developing antiracist culturally responsive supervision support.

### **Abstract**

Kingston University successfully attracts a high proportion of Black African students. However, there are continuous differential attainment gaps between Black and white students in The School of Nursing. The awarding gap is complex however, literature identifies a lack of culturally responsive support for Black students to successfully complete their studies. (Watson 2017). Notwithstanding, experiences of Black African students in clinical placement areas have rarely been explored (Inyama et al 2016).

Participants were recruited via email using an opportunity sampling strategy. Focus groups were conducted online co facilitated by a MSc student. The findings suggest students experienced significant oppressive racist practices on placement.

The findings suggest students experienced significant oppressive racist practices on placement. Themes identified included interethnic racism, differential treatment from supervisors which had a negative impact on students. Multiple participants experienced being ignored and dismissed speaking to staff. Participants observed marked differences between work allocated for Black and white staff and witnessed Black staff were often given jobs no one wanted to do. Participants reported feelings of marginalization, low self-esteem, three participants felt like they wanted to leave the profession.

Our findings suggest students should be offered culturally responsive and antiracist pre, mid and post placement support.

### **References**

Inyama, D., Williams, A., and McCauley, K. 2015. Experience of undergraduate African health sciences students: A hermeneutic inquiry. *Nursing and Health Sciences*, 17, pp.181-187.

Watson, N. A. (2017). Support and its Impact on the Lived Experiences of African Caribbean Nurses as Students and Practitioners in the British National Health Service (NHS). *Journal of Healthcare Communications*, 2(4), 39.

### 3 learning outcomes

1. Explore the experiences of Black African Mental Health Students on Clinical Placement
2. Gain a deeper understanding of the impact of racism on students i.e. racial trauma and racial battle fatigue
3. Discuss suggestions on how to support students before, during and, after placement.

### Recommended reading titles (please enter up to 3)

Ramamurthy, A. Bhanbhro, S. Bruce, F. Gumber, A. Fero, K. (2022) Nursing Narratives: Racism in the Pandemic.

Thongpriwan, V., Leuck, S. E., Powell, R. L., Young, S., Schuler, S. G., and Hughes, R. G. 2015. Undergraduate nursing students' attitudes toward mental health nursing. *Nurse Education Today*, 35, pp.948-95

Tuffour, I. 2021. It is like 'judging a book by its cover': An exploration of the lived experiences of Black African mental health nurses in England. *Nursing Inquiry* Accessed 15/02/202

### Biography - Danielle Chavrimootoo

With over twenty years' experience in a variety of roles both academic and professional services in Further and Higher Education. Danielle's background is teaching Health and Social Care in Further Education. Danielle joined Kingston University in 2019 and leads the Inclusive Teaching and Learning Projects Workstream. Her role involves supporting academics in developing the skills, competencies, and knowledge to develop antiracist pedagogy, decolonial

curriculum praxis and culturally responsive pedagogy. Danielle leads several projects to support reducing the awarding gap between Black and white students. In addition, she is the Equality and Diversity Lead for the Doctorate in Clinical Psychology at Lancaster University. Lead a programme of change to improve equity and inclusion for Clinical Psychology trainees. She co leads the Anti Racism Action Group and is a member of the university Equality and Diversity Committee. Danielle is currently a Doctorate Candidate at Lancaster University my thesis examines "Developing Decolonial Curriculum Praxis with Academic Developers". In addition, Danielle is Director and founder of Dorcas Inclusive Education Consultancy [www.dorcasinclusiveeducation.co.uk](http://www.dorcasinclusiveeducation.co.uk)

### #166 Getting Ahead of Harm Clinical Educators - an innovative approach to education

#### Authors

Mrs. Sue Rothwell - Tameside and Glossop Integrated Care NHS Foundation Trust

Ms. Louise Sumner - Tameside and Glossop Integrated Care NHS Foundation Trust

Ms. Aimee Butler - Tameside and Glossop Integrated Care NHS Foundation Trust

Ms. Gemma Hall - Tameside and Glossop Integrated Care NHS Foundation Trust

#### Aim of paper

The aim of this submission is to share an innovative approach to education which has been developed and implemented, to transform learning utilising a combination of traditional and digital methods to ensure staff development is maintained despite ongoing pressures within the healthcare setting.



## Abstract

The environment in which health and social care is delivered is ever-changing and fast paced. Increasing operational and staffing pressures, plus restrictions to staff movement in recent years, have presented difficulties in delivering education. In order to ensure practitioners continue to be appropriately skilled, and learning from incidents, inquests and complaints can be shared, the Trust recognised an innovative approach must be identified.

In March 2022, three Getting Ahead of Harm Clinical Educators were appointed with the aim of delivering education despite known challenges. The Educators are experienced, credible practitioners who understand the pressures operational staff face on a daily basis and who have developed bespoke approaches to acknowledge this and deliver inclusive training with competencies maintained.

The team have developed a series of toolbox talks covering a range of areas, which can be delivered using a concise approach. To support delivery of these, the team have adopted an approach of attending areas in pairs. This ensures that one member of the team assumes responsibility for clinical duties, enabling staff to listen to the session without impact on patient care. This simple approach has enabled staff to receive and engage in training without preoccupation of patient safety or experience being affected.

The sessions are supported by a virtual learning platform which the team have developed. This digital resource has enabled information, resources and tools to be available for staff to access flexibly at any time, from any location. The learning platform consists of core sections linked to key harms, areas of practice and themes identified through learning. Links to videos, teaching sessions and presentations are uploaded to the platform which both support and enhance the tool box talks delivered physically.

This combined approach enables the team to drive, shape and transform learning and development within our healthcare setting.

## 3 learning outcomes

- Colleagues will be able to develop approaches to delivering education within the clinical environment whilst ensuring patient safety and patient experience are not affected.
- Colleagues will be able to understand how digitalisation can be utilised to enhance training and education
- Colleagues will be empowered to use innovative practice to facilitate education

## Biography - Sue Rothwell

Sue is an experienced dual qualified adult and paediatric nurse who is committed to supporting the delivery of high quality, patient centred care. She has a long-standing passion for quality assurance work and provides a strong link between corporate and operational care. She uses innovative approaches to engage and motivate people to work as a team in order to challenge and change practice. Sue is a highly motivated, caring and experienced leader who is committed to facilitating the delivery of high-quality patient care to all. By creating a positive culture and utilising an innovative leadership style, she has a proven record of achieving this.

## #169 Identifying how health professional educators address cognitive and implicit bias in clinical decision making: Implications for educators

### Authors

Mr. John Thompson - University of Melbourne

Dr. Helena Bujalkah - University of Melbourne



Dr. Stephen McKeever - University of Melbourne

Ms. Adrienne Lipscomb - University of Melbourne

Dr. Sonya Moore - University of Melbourne

Dr. Nicole Hill - University of Melbourne

Dr. Sharon Kinney - Royal Children's Hospital

Dr. Kwang Cham - University of Melbourne

Ms. Jo Martin - University of Melbourne

Mr. Patrick Bowers - University of Melbourne

Prof. Marie Gertz - University of Melbourne

### Aim of paper

The aim of this submission is to present the findings of a scoping review undertaken to explore how health professional educators address cognitive and implicit bias in clinical decision making for entry to practice healthcare students; and present the findings of a descriptive exploratory exercise identifying if health care educators within the University of Melbourne, Melbourne School of Health Sciences teach cognitive and implicit bias according to the best practice.

### Abstract

**Background:** Cognitive and implicit biases negatively impact clinicians' decision-making capacity and can have devastating consequences for the provision of safe, effective, equitable healthcare internationally. Nurses have a critical role in identifying and overcoming these issues. To be workforce ready, it is important that educators proactively prepare pre-registration healthcare students by incorporating effective strategies to mitigate cognitive and implicit biases into curriculum.

**Aim:** To explore how health professional educators address cognitive and implicit

bias in clinical decision making for entry to practice healthcare students

**Methods:** This scoping review was guided by the Joanna Briggs Institute methodology. Data bases searched included CINAHL, Cochrane; JBI; Medline; ERIC, Embase and PsycINFO. Grey literature was identified by searching Open Dissertations, Google Scholar, followed by manual searching of any included reviews. Of the 732 papers identified, 13 met the aim of this study.

**Results:** Most publications originated from the United States (n=9). Educational practice in medicine accounted for most studies (n=8), followed by nursing and midwifery (n=2). Most papers did not indicate a guiding philosophy or conceptual framework for content development. Many papers delivered content face to face (n=12). Reflection was commonly used for assessment of learning. Cognitive biases were taught in a single session and implicit biases teaching occurred via a mix of single and multiple sessions.

**Discussion:** Improving the identification and awareness of cognitive and implicit bias through targeted education, reinforced throughout the curriculum, can only improve students' clinical practice and patient outcomes once they become practicing clinicians. Findings from this review can be used by nurse educators when teaching decision making to students to mitigate the influence of cognitive and implicit biases.

**Conclusions:** This scoping review collates knowledge around cognitive and implicit bias implications for healthcare education. In addition, it emphasizes areas for future research.

### 3 learning outcomes

1: Compare and contrast cognitive bias and implicit bias and discuss how bias leads to inequity in health care access and delivery. 2: Identify techniques used to

improve students awareness of cognitive and implicit bias.

3: Recommend approaches to educating students on how to mitigate cognitive and implicit bias in decision making.

### **Recommended reading titles (please enter up to 3)**

FitzGerald C, Hurst S. Implicit bias in healthcare professionals: a systematic review. *BMC Med Ethics*. 2017;18(1):19

Narayan MC. CE: Addressing Implicit Bias in Nursing: A Review. *Am J Nurs*. 2019;119(7):36-43.

Balakrishnan K, Arjmand EM. The Impact of Cognitive and Implicit Bias on Patient Safety and Quality. *Otolaryngol Clin North Am*. 2019;52(1):35-46

### **Biography - John Thompson**

John is an Emergency Nurse Practitioner with more than 20 years emergency nursing experience in Australia and internationally. A fellow of the College of Emergency Nursing Australasia (CENA), John was awarded the CENA Emergency Nurse of the Year in 2019 for his outstanding contributions to emergency care.

John is passionate about Advanced Practice Nursing (APN) and firmly believes in order to address many of the barriers people face to access healthcare it is vital to invest in APN roles and allow all nurses to work to their full scope of practice. John developed and implemented the emergency nurse practitioner role at the Royal Melbourne Hospital and assisted with the development of the NP model's of care at two private hospital emergency departments in Melbourne. John has recently commenced his PhD exploring nurse practitioner sensitive outcomes.

## **#171 Developing a global, on-line, module in multiple sclerosis (MS) nursing: Report on the pilot.**

### **Authors**

Ms. Megan Roberts - European MS Platform

Ms. Amanda Andrews - Birmingham City University, West Midlands, Birmingham, United Kingdom

### **Aim of paper**

To disseminate learnings derived from tutors and students of the pilot cohort of the global, on-line, module in multiple sclerosis (MS) nursing developed in partnership between MS NursePRO and Birmingham City University.

The module is novel in its delivery and ambitious in terms of its concept and reach. Although the module is disease specific, our learnings from developing and delivering the pilot module are transferable across a broad range of other conditions which are likely also facing similar issues as we those identified in MS Nursing.

### **Abstract**

MS nurses are central to the care of people with MS, improving the standard and quality-of-care received (Punshon et al, 2021). However, a survey of MS nurses across Europe (Ward-Abel et al, 2008) showed wide discrepancies in provision of care and standards of education between MS nurses in different countries. 1/3<sup>rd</sup> of respondents (N=208) felt standards of care were poorly maintained and 21% reported lack of MS specific training.

To address this, the European MS Platform, a pan-European Patient Organisation, developed MS NursePRO – a free, on-line, accredited, global, educational resource available to nurses working with people with MS (Antonovici, 2018).

To further enhance MS nurses' professional development, MS NursePRO has linked with a UK university, enabling MS nurses to gain 20 academic credits towards an award at Level 6 or 7, equivalent to 6 to 8 credits within the European Higher Education Area.

### Developing the module

MS Nurse PRO accredited a module with Birmingham City University. The flexible work-based module is available to students who have undertaken the MS Nurse PRO Foundation Programme.

In accordance with the philosophy of MS Nurse PRO, the module is available to MS health professionals globally, in their native language, and delivered virtually.

Self-directed learning and tutor support enabled students to scope out service improvements to implement into practice, addressing needs identified.

### Outcome of the pilot

10 students enrolled: 7 students were able to submit on their first attempt. Of these, 4 students gained a pass at Level 7 and 2 at Level 6.

### Lessons learned

An evaluation of the course has been sent to all students and results will be used to inform changes to delivery for the 2023 cohort and included in the Conference presentation.

### 3 learning outcomes

1. To gain an appreciation of the disparities in standards of care and access to training and education for MS Specialist nurses around the world
2. To understand how MS NursePRO is working to address these disparities
3. To gain an insight into the challenges and opportunities created by delivering a global university module at Levels 6 and 7.

### Recommended reading titles (please enter up to 3)

1. Antonovici A, (2018). *MS Nurse PROfessional*. Accessed at: [https://www.ema.europa.eu/en/documents/presentation/presentation-european-multiple-sclerosis-platform-emas-pcwp-hcpwp-joint-meeting-andreea\\_en.pdf](https://www.ema.europa.eu/en/documents/presentation/presentation-european-multiple-sclerosis-platform-emas-pcwp-hcpwp-joint-meeting-andreea_en.pdf)

2. Punshon G, Sopala J, Roberts M et al, (2021). *Modelling the Multiple Sclerosis Nurse Workforce by determination of Optimum Caseloads in the United Kingdom*.

Int J of MS Care, 23: 1-7.

3. Ward-Abel N, Kohler W, Matthews V et al, (2014). *Moving towards the pan-European unification of Multiple Sclerosis Nurses: a consensus paper*.

Multiple Sclerosis Journal, Vol 24 (4): 403-405.

### Biography - Megan Roberts

Megan was one of the first Multiple Sclerosis (MS) Specialist Nurses in the UK and the first MS Nurse Consultant. Megan worked in the NHS for many years, developing the MS Nursing service which now serves the whole of Greater Manchester and helping to shape MS nursing across the UK.

Since leaving the NHS, Megan worked for a short while as MS Nurse Manager in the Medical Team for a Global Pharma Company before leaving to work as a self-employed MS Nurse Consultant.

Subsequently, Megan joined the MS Trust, where she worked until recently as Head of Health Professionals Programmes, delivering on funding and training of MS Specialist nurses around the UK; leading and running the 3 year pilot evaluating the value of the role of Advanced MS Champion and delivering the MS Trust Foundation in MS Care Module and supporting the Annual Conference.

Megan now works part-time for the EMSP, developing and running the MS NursePRO FWBL module in conjunction with Birmingham City University.

Megan has authored two MS specialist text books and published many MS related articles and papers in a variety of Journals. She is an internationally recognised speaker and chair.

## #172 Shaping the workforce of the future: Bringing clinical and digital education together in social care

### Authors

Ms. Maria Luengas - The Haringey GP Federation

Mrs. Christina Mannion - The Haringey GP Federation

### Aim of paper

To develop an inclusive training programme on the use of a remote monitoring technology that would allow staff in social care to (i) use a common language based on the NEWS2 (National Early Warning Score 2) and SBAR (Situation, Background, Assessment, Recommendation) tool; (ii) safe the patient data into a platform that can be accessed by all the relevant clinicians within the system; (iii) learn the use of a digital tool step by step; (iiii) acquire the teaching skills necessary to implement the remote monitoring technology in their work place.

### Abstract

**Background:** Nurses and carers working in social care have less access to training opportunities and technology compared to their peers in health care. The Covid-19 pandemic and the fast transition to remote consultation and monitoring has highlighted the lack of a common communication system and a common language between care home staff and other professionals with essential information on the

deteriorating patient being missed. Moreover, there has been an increased feeling of isolation especially amongst those that were not technologically ready.

**Methodology:** A team of nurse educators developed and delivered a 6- week training programme to 146 care homes in North Central London. The training combined theoretical and practical sessions delivered in person and videoconference. The programme covered the identification of soft signs of deterioration, the use of the remote monitoring technology to monitor vital signs reflecting on normal and abnormal results, the escalation of concerns using the NEWS2 pathway and the SBAR tool and the development of strategies to teach others effectively. Feedback was collected upon completion of the training and a month later.

**Results:** 86.6% of participants strongly agreed that the training provided them with the required knowledge and skills to identify deterioration, take the vital signs and NEWS2 scores using the remote monitoring technology and report concerns to the clinician. 76.6 % strongly agreed that the training suited their learning style. 80% had been able to teach their new skills and knowledge to other staff. Other feedback collected highlighted a quicker response from emergency services when communicating using the NEWS2 score and an easier communication with the GP as the data was available on the platform.

**Conclusions:** The combination of clinical and digital education using a variety of approaches to suit different learning styles supports professional development for care home staff and improves communication between clinicians.

### 3 learning outcomes

1. More research and resources are needed so equal education opportunities are available to staff in social care.

2. The use of a common language between professionals and the access to the same electronic systems is key to patient safety and quality care.
3. Flexible teaching programmes are more likely to satisfy different learning styles resulting in the successful acquisition of new skills.

### **Recommended reading titles (please enter up to 3)**

West of England Academic Health Science Network, Safer Care Through NEWS2 (National Early Warning Score), West of England Academic Health Science Network, last viewed 8th October 2022, <<https://www.weahsn.net/our-work/improving-patient-safety/the-deteriorating-patient/news/>>

Daniel Stow, Robert O Baker, Fiona E Mathews, Barbara Hanratty, National Early Warning Scores and COVID-19 deaths in care homes: an ecological time-series study, BMJ 2021, last viewed 8th October 2022, <https://bmjopen.bmj.com/content/11/9/e045579.info>

### **Biography - Maria Luengas**

Maria Luengas is a Clinical Nurse Educator in North Central London (NCL). In her 12 years as a nurse, she has worked in 4 different countries and various departments from psychiatry and oncology to A&E and Intensive Care. She works in the NCL Nurse Educator team rolling out remote monitoring technology in the community and providing clinical education and support to the staff working in care homes. Maria is passionate about teaching and believes education is the key to staff satisfaction and retention and excellent patient care.

## **#176 Achieving accreditation for Systemic Anti-cancer Therapy (SACT) training in Wales**

### **Authors**

Mrs. Claire Lawson - Cardiff and Vale UHB

Mrs. Lisa James - Cardiff and Vale UHB

### **Aim of paper**

To describe the process of achieving accreditation for SACT training in Wales and identify how this will ensure high quality education for nurses providing cancer care in Wales.

### **Abstract**

Cancer remains a major priority for health care services throughout the United Kingdom (UK). Nurses providing cancer care therefore require advanced level knowledge and skills, especially in the safe administration of Systemic Anti-Cancer Therapies (SACT).

Access to SACT training in Wales was historically limited in some health boards, with no accredited SACT qualification available. In 2022, SACT educators in Cardiff and Vale University Health Board, collaborated with Agored Cymru to produce a level 6 accredited module funded by Health Education and Improvement Wales (HEIW). The module is underpinned by the UK Oncology Nursing Society (UKONS) SACT Competency Passport Learning Outcomes Framework.

The global pandemic prompted SACT training in Cardiff to adopt a blended learning approach, allowing learners from other health boards in South Wales to attend. Blended learning has proved cost-effective and met the learning needs of health boards who were previously unable to access the theoretical component of SACT training. Accreditation ensures all learners will receive standardised and validated



training, benchmarked against the UKONS SACT competency framework.

Achieving accreditation was a complex and time-consuming process, involving collaboration between multiple parties. An Internal Quality Assurer (IQA) was trained to protect learners from discrimination and bias. Currently, only adult nurses are able to achieve the level 6 award. Once the Paediatric UKONS SACT Competency Passport is available, an accredited paediatric course will also be developed.

The first accredited course commenced in June 2022. Once completed, the course will be audited and feedback from learners obtained. The central aim of achieving accreditation was to develop a training package that could be used throughout Wales. The initial work to achieve accreditation means an accredited course can be replicated in other health boards with relative ease. This ensures SACT education in Wales is standardised and of high quality.

### **3 learning outcomes**

- Provide a background for why accreditation of SACT training was a key priority for educators in Wales
- Describe the process of achieving accreditation including the highs and lows and the importance of collaborative working
- Identify future plans including audit and development of a Paediatric accredited course

### **Recommended reading titles (please enter up to 3)**

United Kingdom Oncology Nursing Society (2018) *Systemic Anti-Cancer Therapy (SACT) Competency Passport*. Available at [http://www.ukons.org/site/assets/files/1138/ukons\\_sact\\_passport.pdf](http://www.ukons.org/site/assets/files/1138/ukons_sact_passport.pdf) Accessed October 2022

Royal College of Nursing (2022) *Career pathway and education framework for cancer nursing*. RCN (London)

### **Biography - Claire Lawson**

I am the paediatric chemotherapy nurse specialist based in the Noah's Ark Children's Hospital for Wales in Cardiff. This the principle treatment centre for children with Cancer in south and mid Wales. I work closely with the adult haematology chemotherapy clinical nurse specialist to provide training for chemotherapy administration for staff from a number of health boards and specialities.

### **#178 NHS & Higher Education Institution (HEI) collaboration in a crisis: Clinical leader's experience of becoming a graduate during the Covid 19 pandemic, the journey from apprehension to enthusiasm.**

#### **Authors**

Dr. Katrina Whittingham - Robert Gordon University

Mrs. Jane Ewen - NHS Grampian

Mrs. Bunmi Okhuoya - NHS Grampian

#### **Aim of paper**

To share the experiences of an HEI, Chief NHS Nurses and nurse leader students of completing a 'top up' degree during the covid19 pandemic.

#### **Abstract**

The School of Nursing, Midwifery and Paramedic Practice (SNMPP) has strong collaborative partnerships with local healthcare partners, which fostered the development of a bespoke BSc Professional Nursing Practice degree programme (RGU 2020a, Nursing and Midwifery Council 2018). This programme was designed to meet the needs of highly experienced NHS clinical leaders in gaining a degree qualification. The rationale around jointly developing the bespoke programme to support staff development in academia was to further



nurture critical thinking within clinical leaders, with the intention of enabling potential positive impact on patient outcomes. Nursing and midwifery became an all degree profession in 2010, but many experienced clinicians are not formally educated to this level. Despite recognition that being degree qualified can improve health care related outcomes, many experienced practitioners can be apprehensive about engaging in academic learning (Holle et al. 2019).

However, working collaboratively, using authentic learning and teaching strategies that flexibly moulded around the learners' extensive knowledge and experience contributed to a marked cultural shift in these learners' perceptions of academic endeavours (RGU 2020b). Using creative assessment strategies, Patchwork Text Analysis, with multiple formative assessments, facilitated learning academic writing skills and built confidence (Leigh et al. 2012). This resulted in a more enthusiastic culture within the learners as a whole.

The intention is to share initial experiences collaboratively from HEI and NHS strategic leads, alongside student perspectives. Formal evaluation is planned.

### 3 learning outcomes

1. *Critique experiences of developing a collaborative commercial topping up to a degree course from prior clinical experience' which supports Nursing and Midwifery clinical leaders to become graduates during Covid 19.*
2. *To develop a platform for discussion on collaborative educational partnerships within times of crisis.*
3. *Appraise the joint success of creativity during the covid19 pandemic.*

### Recommended reading titles (please enter up to 3)

HOLLE, C. L. et al. 2019. 'Examining the Beliefs of Skilled Nursing Facility Directors

of Nursing Regarding BSN Completion and the Impact of Nurse Leader Education on Patient Outcomes', *Journal of Nursing Administration*, 49(2), pp. 57–60. doi: 10.1097/NNA.0000000000000710.

LEIGH, J. A. et al. 2012. 'Using the patchwork text assessment as a vehicle for evaluating students' perceptions of their clinical leadership development', *Nurse Education in Practice*, 12(1), pp. 46–51. doi: 10.1016/j.nepr.2011.05.006.

NMC. 2018. Future Nurse: Standards of proficiency for registered nurses [online] available from: Standards of proficiency for registered nurses - The Nursing and Midwifery Council (nmc.org.uk) last accessed on October 19th 2022.

### Biography - Katrina Whittingham

I qualified as a Registered Nurse in 1991. My clinical career was in acute care, where I held a variety of roles across predominantly medical areas. Prior to moving into academia in 2010, I worked in NHS practice education, where I gained my teaching qualification, a Florence Nightingale Travel Scholarship and MSc in Nursing. My academic practice has been focused in undergraduate education, with some experience gained in post-graduate and MSc level studies. More recently, I have become course leader for the 'top up' degree for nurses and allied health professionals qualified to diploma level. My doctoral journey grew from personal experience as a close family member when my brother was diagnosed with aggressive cancer. This inspired my doctorate exploration of person-centred care in acute older person care, looking at the experiences of patients, families and staff. Giving voice to members of the public has always been at the heart of my clinical and academic career. The latter and former experiences led to me taking on the lead role for involving people and communities (IPC) in 2019.

## #179 FILAMENT: Filipino Active Mentorship Programme

### Authors

Mrs. Louie Horne - Workforce Race Equality Standard

Mrs. Mary Tanay - King's College London

Mr. Francis Fernando - North East London Foundation Trust

Mrs. Susie Lagrata - University College London Hospitals

Prof. Anton Emmanuel - University College London Hospitals

### Aim of paper

To scope the mentorship experiences of internationally educated nurses (IEN's) starting from the largest group of IEN's in UK (Filipino nurses)

To understand the barriers and facilitate mentorship support to our international nurses in the UK

To explore contributory factors and perceptions of mentorship by international nurses

To promote and support a mentorship process for IEN's based on the lessons learned from this evaluation

### Abstract

The COVID-19 pandemic exerted disproportionate effects among ethnic minority healthcare staff, exposing long-standing inequalities. One possible contributory factor is the perception of many ethnic minority healthcare workers, including Filipino nurses, that the depth of their clinical experience before coming to England is undervalued. An informal online scoping exercise suggested that many Filipino nurses lack awareness of both mentorship and support for accessing mentors. An informal mapping exercise

showed that out of approximately 40,000 Filipino nurses working for NHS and private sectors, less than fifty are agenda for change (AFC) banding 8b or above. These facts led to the creation of an informal mentorship-mentee pairing called the Filipino Active Mentorship Program (FilAMent).

The Workforce Race Equality Standards (WRES) was developed and mandated in 2015 to ensure that employees from Black and Minority Ethnic backgrounds have equal access to career opportunities and receive fair treatment in the NHS.

The WRES team conducted an early-phase evaluation of the FilAMent.

Of the 158 mentor-mentee pairings, 40 mentees (38 NHS and 2 private sector) agreed to participate in this study. The evaluation was undertaken six months after programme initiation.

A key finding was that while 60% of the group did not have a work mentor before enrolling on FilAMent, only 18% had a very good understanding of the benefits of mentorship. This increased to 50% after the completion of FilAMent. A key finding was that at the time of this evaluation, 47% of the cohort had started on a new role on a higher band.

This study suggests that a bespoke mentorship program, even with informal structure, positively impacts professional and career development for Filipino nurses. The results also illustrate the areas for development in the programme, in order to improve the scope and influence to a wider group of nurses in the NHS.

### 3 learning outcomes

1) Results can be used to inform future directions in designing mentorship for internationally educated nurses.

2) Demonstrate the lack of formal mentorship structure for internationally educated nurses.

3) Develop a bespoke mentorship strategy for internationally educated nurses to support their career development.

### **Recommended reading titles (please enter up to 3)**

1) Galam R (2020) Care and Solidarity in the Time of Covid-19 -The Pandemic Experiences of Filipinos in the UK. Philippine Studies Historical and Ethnographic Viewpoints 68:3-4:441-64

2) Royal College of Nursing (2020) COVID-19: how can we protect BAME nurses during the crisis? Available online <https://rcni.com/nursing-standard/newsroom/analysis/covid-19-how-can-we-protect-bame-nurses-during-crisis-160956>

3) Weaver S (2021) The effective mentor and supervisor. Available online:

<https://www.nursinginpractice.com/professional/effective-mentor-and-supervisor/#:~:text=The%20skills%20of%20a%20good,path%20from%20learning%20to%20practice.&text=Effective%20mentoring%20and%20compassionate%20leadership,nurses%20and%20allied%20health%20professional>

### **Biography - Louie Horne**

Louie developed a deep interest in the plight of international nurses after joining the NHS in 2001. She is the first Filipino to join the NHS England & Improvement team as the Work Race Equality Standard Clinical Research Fellow. Louie leads on specific pieces of research, programme and projects focused on internationally educated nurses that are a part of joint working programmes with national and local partners.

Prior to joining the NHSE, Louie has been the MSK Matron at ESNEFT and in March 2020

took the role of Deputy Associate Director of Nursing (ADON) for MSKSS. She completed her nursing degree with honours in the Philippines.

During her tenure, her MSK team won the 2018 ESNEFT Team of the Year Award. She won the ESNEFT Commendation Award for her exceptional contribution to Covid 19 and services to the international nursing community in Sept 2021. Louie received the CNO Silver Award from Dame Ruth May for her major contributions to patients and the nursing profession in Oct 2021. She is also a qualified Mental Health First Aider.

Louie is the chair of the Ethnic Minority Group staff network at ESNEFT called EMBRACE. Louie is an officer of Filipino Nurses Association UK.

### **#183 The development of an innovative student nurse elective clinical research placement within a community and mental health NHS trust**

#### **Authors**

Ms. Claire Armitage - Leicestershire Partnership NHS Trust

Ms. Bethan Jones - University of Leicester

#### **Aim of paper**

This session will describe the development of an innovative student nurse placement within a community and mental health NHS trust; within Leicestershire Partnership NHS Trust, clinical academics identified the aspiration to provide an elective clinical research placement for student nurses from a local university. A small working group, incorporating a current student nurse, worked together to develop the placement and undertake a pilot. The aim of the pilot was to develop a placement that would offer a wide experience of research in the NHS, how students can get involved and how they

could develop a clinical academic career post-qualification.

## Abstract

This session will describe the development of an innovative elective clinical research placement for student nurses within a community and mental health trust; within Leicestershire Partnership NHS Trust, a small working group developed the placement and undertook a pilot. The aim of the pilot was to develop a placement that would offer students a wide experience of research in the NHS, and the objectives were to understand:

- what research is and why it is important in the NHS
- how research is governed and delivered in the NHS
- the different ways nurses can get involved with research in the NHS
- how research informs practice and how it can be used to develop and improve practice, and;
- how to develop a clinical academic career

The experience covered more than the exposure to research nurses and research delivery that has traditionally been typical of the offer for student nurse placements. The placement enabled the student to connect with senior leaders and managers within the trust, consider preparation necessary for a clinical academic career, develop a mock research proposal and receive support for a self-selected project. The placement was piloted in July 2021 by a third year child and mental health student and a thorough evaluation took place. The feedback from the evaluation will be shared during the concurrent session, along with future plans for development of the placement. From 2023, the placement will be offered to local students (both nursing and allied health professionals) on an ongoing basis and the results of the pilot and evaluation will be submitted for publication. Elective research

placements have traditionally been offered in acute trusts along a research delivery model, however, the innovative delivery of this placement has shown that the learning outcomes can be broader and a stimulating placement can be offered within a non-acute trust.

## 3 learning outcomes

Attendance at this session will support the participant to:

- explore an innovative model for an elective student nurse research placement
- hear feedback from the evaluation and reflect on how this could be incorporated into practice
- consider how broad and stimulating research placements can be offered in non-acute trusts

## Recommended reading titles (please enter up to 3)

Brand S et al (2022) Engaging student nurses in research 1: research-delivery placements. Nursing Times [online]; 118: 9.

Council of Deans for Health (2021) Becoming research confident: research placements in pre-registration nursing, midwifery and allied health programmes in the UK. Available at:

<https://www.councilofdeans.org.uk/wp-content/uploads/2021/07/010621-research-placement-report-FINAL-updated-220621.pdf>

NHS England and NHS improvement (2021) Making research matter: Chief Nursing Officer for England's strategic plan for research. Available at:

<https://www.england.nhs.uk/wp-content/uploads/2021/11/B0880-cno-for-englands-strategic-plan-for-research.pdf>

## Biography - Claire Armitage

Claire is Senior Nursing Research Leader at Leicestershire Partnership NHS Trust. She

completed her mental health nursing training in 1988 and her clinical work has ranged from inpatient mental health to psychological therapies in primary care. Claire completed a Master's in Quality Improvement in 2000 and qualified as a Cognitive Analytical Therapy practitioner in 2009. For much of her career, she has worked in roles with a focus on professional standards and leadership, quality improvement, clinical governance and practice development.

Claire is passionate about delivering services that are high quality, evidence based and service user focussed. Her interests include recovery in mental health, suicide prevention, new roles and ways of working for nurses and nursing career pathways. She has had a long-standing interest in nursing research and has published in a range of peer-reviewed journals.

In 2019, Claire gained a place on the National Institute for Health and Care Research 70@70 senior nursing and midwifery research leaders programme which enabled her to work with others on a range of projects within her own organisation, regionally and nationally. A particular highlight was to work with other 70@70 nurses to complete a James Lind Alliance Priority Setting Partnership on community nursing.

### **Biography - Bethan Jones**

Bethan Jones is fourth year student nurse currently studying MSci Dual Registration Nursing with Leadership (Child & Mental Health) at the University of Leicester. Bethan is a current core member of the University Hospitals of Leicester Children's Student Nurse Forum, former Student Editor of the Nursing Times and former Leader of WeStudentNurses. Bethan has a passion for research which stemmed from her previous degree of BSc in Medical Physiology and Therapeutics and she believes that student nurses should be able to have opportunities

to experience and take part in research from the start of their student journey beyond. Bethan believes that student nurses' interest in research should be nurtured from day one and research placement programmes are one of the many ways to support that.

## **#184 Provision of Bespoke Education and Support to Internationally Educated Nurses in their Transition as Registered Professionals in the UK**

### **Authors**

Ms. Kathleen Bolivar - Royal Brompton and Harefield Hospital

Ms. Grace Nieves - Royal Brompton and Harefield Hospital

### **Aim of paper**

To critically explore the innovation in the delivery of education and professional development being given to internationally educated newly qualified UK nurses of the Royal Brompton and Harefield Hospitals through the implementation of the Accelerated Preceptorship Programme and its effect on staff experience.

### **Abstract**

The continuous heavy reliance on international recruitment due to challenges in the training, recruitment and retention of domestic nurses (Buchan et al., 2019) highlights the vital contributions of non-UK-trained nurses to the country's healthcare services. From 2017-2020, there has been a steady increase in the total number of nurses in the NMC register who were internationally trained (NMC, 2022).

The significant growth of international nurses joining the workforce meant a large pool of nurses needed to be trained and educated to acclimatise successfully to UK healthcare.



The World Health Organization's Code of Practice on the International Recruitment of Health Personnel emphasises that an appropriate health workforce should be educated, retained and sustained for the specific conditions of each country (WHO, 2010). Having more than half of the newly qualified nurses joining the Royal Brompton and Harefield Hospitals being trained outside the UK since 2019, the need to provide innovative approaches for their education and training has been a critical ingredient to their integration into the Hospitals.

Royal Brompton and Harefield Hospitals (part of Guy's and St Thomas' NHS Foundation Trust) launched the Accelerated Preceptorship Programme in June 2021 to provide structured guidance to international nurses through study days, peer-to-peer support from local preceptors, and individualised pastoral care to the nurses. Since then, the programme has undergone continuous assessment and evaluation following the Trust values, Nursing and Midwifery Strategy, Capital Nurse Framework, NMC Code of Conduct and international nurses' dynamic and unique needs. The changes implemented were ultimately geared towards improving nurses' experience and delivering high standards of care.

This paper will cover the methodology for developing the Programme, nurses' evaluation of the programme structure and the relevance of the topics to their clinical needs, contributing to how they transition as confident and competent new UK professionals.

### **3 learning outcomes**

1. Develop a shared understanding of the contribution of internationally educated nurses to the healthcare workforce.
2. Introduce the innovation of a bespoke Preceptorship Programme that is adaptive

and responsive to the learning and pastoral needs of the nurses.

3. Understand how the programme has contributed to the experience of the nurses and their transition to being UK registered nurses.

### **Recommended reading titles (please enter up to 3)**

1. Falling Short: The NHS Workforce Challenge, Workforce Profile and Trend in the NHS in England.
2. Accelerated Preceptorship Guide V.3
3. Supporting newly qualified nurse transition: A case study in a UK hospital

### **Biography - Kathleen Bolivar**

Kathleen is an internationally educated nurse from the Philippines. She came to the UK in 2013 and had completed the Adaptation Programme at City University London.

Kathleen's background is Adult ICU and have been since she graduated in 2008 with BSc in Nursing in the Philippines. Following her dream of new career opportunities and professional growth, she applied to be a nurse in the UK and in 2015, she started working at Royal Brompton and Harefield Hospitals (Part of Guy's and St Thomas' NHS Foundation Trust) to continue to provide safe and quality nursing care to critically ill patients. After completing her ICU Course, Kathleen applied to be a practice facilitator on AICU as it has always been her passion to support students and new nurses. In 2020, Kathleen became the Lead for Preceptorship in the hospital and have been continuing to seek improvement in the delivery of her role by attending Leadership courses and collaborating with other Preceptorship Leads in her profession to provide up to date learning and education, developmental opportunities and pastoral care to the new nurses.



## Biography - Grace Nieves

Grace Armonio Nieves is a Sister for Nursing Development and Education of Royal Brompton and Harefield Hospitals (Part of Guy's and St Thomas NHS Foundation Trust). She currently is leading the Preceptorship Programme for newly qualified Adult, Paediatric and Internationally-trained Nurses joining the Hospitals. She facilitates and delivers teaching sessions for the Preceptorship Programme, including workshops for Preceptors and Practice Supervisors. She also leads the development, coordination, and implementation of Nasogastric, Nasojejunal and Gastrostomy Policies for the clinical areas. She strives to improve patient care and staff development through positive engagement, education and training. Grace is an Adult Intensive Care Unit nurse by background but shares an equal passion for innovation and digital healthcare, being a fellow of the Shuri Digital Nurse Fellowship.

## Submission ID

184

## #189 Cross organisation collaboration to develop a virtual healthy leadership course for the clinical setting: a regional approach.

## Authors

Mrs. Sara Davis - East of England Neonatal Operational Delivery Network

Mrs. Francesca Wright - East of England Paediatric Critical Care Operational Delivery Network

Mr. Steve Andrews - East & North Hertfordshire NHS Trust

## Aim of paper

During the Covid-19 pandemic, author three used compassionate leadership to build

staff wellbeing and resilience within his trust. A collaboration with the East of England paediatric and neonatal ODN's has adopted these concepts and expanded it to a regional level. The authors came together to build a course, designed to introduce leadership as an act rather than a rank or theory. Aspiring leaders looked at incorporating compassionate leadership in their daily clinical practice. They explored concepts delegates could readily employ in the clinical area and empowered them to make small changes with potential for big impact on staff and patients.

## Abstract

The authors curated a pilot course incorporating 15 key topics. This was delivered over 8 sessions using MSTeams, to 20 delegates from within East of England with little or no previous leadership training. This free pilot programme was restricted to band 7 nurses.

Each week, topics were introduced in a pre-recorded presentation; delegates were then placed randomly into breakout rooms for guided discussion. Interactive white boards (google jam-boards) supported the discussion around a series of related questions. The jam-boards facilitated the whole group discourse ensuring a broad perspective. Delegates were supported to use a learning journal, provided, to record their thoughts and consider their implementation of the concepts.

Additional resources to enable self-directed study were released each week on our e-learning platform.

It culminated in a final 800 word formative submission. Delegates had to reflect on a topic of their choice with a firm focus on action and implementation.

In keeping with healthy leadership, support was available – 'check in's' by 'phone and email for those who missed sessions or

required support with submission. Several of these supportive relationships continue.

Evaluation using a 20 question survey regarding organisation and content of the course was circulated. We attempted to triangulate the experiences of both the delegates and line managers who authorised their attendance.

Evaluations strongly demonstrated a desire to explore leadership beyond the traditional models and courses available. Our course provided a framework for this and demonstrated that healthy leadership can be incorporated into daily clinical practice.

A second cohort is scheduled with minor content and delivery tweaks. The eligibility has been expanded to include band 6 and multi disciplinary team. A second module is planned with input from a focus group to build meaningful content, applicable to the changing NHS landscape

### 3 learning outcomes

1. To create confidence and curiosity in leadership as a continuous doing activity.
2. To share our leadership model, that translates theoretical concepts into small learning sets that work in real life leadership roles.
3. To exhibit successful cross organisational collaboration in leadership.

### Recommended reading titles (please enter up to 3)

1. Bailey, S. and West, M. (2020) *Covid-19: Why compassionate leadership matters in a crisis*, The King's Fund. Available at: <https://www.kingsfund.org.uk/blog/2020/03/covid-19-crisis-compassionate-leadership> (Accessed: October 20, 2022).
2. BPS COVID19 STAFF WELLBEING GROUP (2020) "The psychological needs of healthcare staff as a result of the covid-19 pandemic," *The British Psychological Society* [Preprint]. Available at:

<https://cms.bps.org.uk/sites/default/files/2022-05/Psychological%20needs%20of%20healthcare%20staff.pdf> (Accessed: October 20, 2022).

### Biography - Sara Davis

Sara is the Practice Development Lead for the East of England Neonatal ODN (hosted by CHU NHS hospitals trust). Having worked in neonates since qualifying as a children's nurse in 2001, she has worn several 'hats' having been a ward sister, research nurse and clinical educator, but the common theme has been a desire to share knowledge and skills to improve care.

As regional Lead, Sara covers 17 neonatal units across the East of England. Her aim is to ensure equity of access to high quality education for neonatal staff throughout the region, which in turn will help standardise care and improve equity for babies and their families. Ensuring that neonatal nurses across the region are delivering the same high quality standardized care supports the aims of the BLISS charter, which puts families at the heart of everything we do. Access to specialised education for all nurses in the region will have a direct impact on the quality of care provided and patient outcomes.

Sara has a Masters degree in Health Research from the University of Stirling and a PGCert in Education for Health Professionals at the Hull York Medical School.

### #190 Grief, Loss and Bereavement for Admiral Nurses - an interactive online course

#### Authors

Dr. Rachel Daly - Dementia UK

Mrs. Diane Drain - Dementia UK

Ms. Louisa Stone - London Borough of Sutton

### **Aim of paper**

To equip Admiral Nurses with the knowledge and skills to deal with complexities of loss, grief and bereavement experienced in dementia.

To enable Admiral Nurses to come together and reflect on the impact of legal and ethical decision-making associated with advance care planning and other important palliative care decisions in dementia care.

### **Abstract**

Dementia is a palliative condition and can have physical, psychological and emotional impacts on the person, and their family, from diagnosis to death. The number of people diagnosed with dementia is projected to reach 1.6 million in 2040 (Dementia Research UK) [accessed 04/01/2022].

Admiral Nurses are dementia specialist nurses who work with, and support families affected by dementia. They are based in a variety of settings, including community, hospital, care homes and hospices and offer support for complex needs from pre-diagnosis through bereavement.

Families experiencing dementia experience multiple losses which can have a profound impact on them (Gibson et al., 2019). These losses, and the associated grief, can oscillate in intensity throughout the dementia trajectory. Admiral Nurses are often required to support families and other health and care professionals to recognise and understand these losses, and to help families to process the loss and grief.

As a result, Admiral Nurses requested education and practice development on how best to support families and work through some of the practical, legal and ethical dilemmas associated with loss, grief and bereavement in dementia care.

An interactive online module was developed through the new Admiral Nurse Academy. The module included online content and four synchronous sessions, giving Admiral Nurses the opportunity to explore their own feelings about loss, grief and bereavement and reflect on their practice and learning. This interactive approach reflects the move towards online learning, using contemporary research to identify appropriate methods for the content (Sulimen et al., 2022).

Feedback from the first cohort was positive, with 100% of attendees agreeing that they learned something new and that their learning was applicable to their practice.

### **3 learning outcomes**

The interactive online module is an acceptable mode of delivery to deliver complex content for specialist dementia nurses.

The synchronous sessions create an online space for Admiral Nurses to share thoughts, feelings and reflections on their practice.

Admiral Nurses feel able to implement new learning gained through an interactive module in the practice.

### **Recommended reading titles (please enter up to 3)**

Alzheimer's Research UK. Statistics about dementia - Dementia Statistics Hub online [www.dementiastatistics.org/statistics-about-dementia/](http://www.dementiastatistics.org/statistics-about-dementia/)

Gibson K, Peacock S, Bayly M., 2019. Qualitative exploration of emotional and social changes from diagnosis to bereavement for spousal caregivers of persons with dementia. *BMJ Open* 2019;9:e031423. doi:10.1136/

Suliman, M., et al., 2022. The impact of online synchronous versus asynchronous classes on nursing students' knowledge and ability to make legal and ethical decisions. *Nurse Education Today*, 109, p.105245.

## **Biography - Rachel Daly**

I am a qualified District Nurse and Advanced Nurse Practitioner with a long history of practice education and a passion for enhancing the lives of people living with dementia and their families – especially issues related to equality, inclusion and disproportionality. My PhD focused on shared everyday decision-making with people living with dementia and communication difficulties in care homes.

In my current role I enjoy designing, developing and delivering high quality dementia focused evidence-based professional and practice development opportunities for Admiral Nurses. The learning opportunities encompass a level of flexibility to meet the needs of individuals with diverse learning needs and styles and a breadth of baseline knowledge.

I am a proud Queens Nurse, a qualified coach and a counsellor.

## **#191 Development of a Multidisciplinary Preceptorship Programme Across an Integrated Care System**

### **Authors**

Ms. Alison Lester - Shropshire, Telford and Wrekin ICS

Mrs. Sarah Yewbrey - Shropshire Community Health NHS Trust

### **Aim of paper**

To provide a project overview including the development and implementation of an innovative preceptorship programme spanning multiple organisations across an Integrated Care System (ICS).

We will highlight the complexities of working in a collaborative manner to deliver a preceptorship programme that is identifiable with its own logo and branding

(Springboard) and where its content is generic to support nurses, midwives and Allied Health Professionals as they embark on their career as newly qualified practitioners.

This project also sets out to measure the impact that this preceptorship programme has upon future workforce recruitment and retention for the professions involved.

### **Abstract**

#### **Background**

Preceptorship is a structured period for newly qualified practitioners. The importance of this support is recognised as a strategic measure to enhance recruitment and retention but also critical to enable the practitioner to realise their potential to deliver the highest quality care (Scholes et al 2017).

To address this national requirement in Shropshire, Telford and Wrekin (STW) development of an Integrated Care System (ICS) preceptorship programme was commenced, with representation across multiple organisations and disciplines.

#### **Purpose**

To develop a programme to enhance and standardise preceptorship for newly qualified practitioners from nursing, midwifery and the Allied Health Professions, building upon existing programmes.

In addition, with recent implementation of the National preceptorship framework for nursing (2022) this provided an opportunity to review and benchmark the new ICS programme against the recommended National standards.

#### **Methods**

In January 2022 a multidisciplinary working group assembled, consisting of preceptorship leads from across the ICS, to begin development of the following components of the project:

- Preceptorship definition and aim
- Preceptor preparation workshops
- A formal generic structured programme (5 days) over 12 months
- Preceptorship Passport – developed on a digital Learning Management System allowing data extraction
- Memorandum of Understanding to be agreed and signed by all parties
- Development of our *Springboard* logo and branding to provide an identity for resources
- Evaluation forms for preceptees and preceptors

## Discussion

Implementation of the programme commenced with the first cohort in October 2022 representing three organisations. Inclusion of all members in the delivery phase posed the greatest challenge due to logistics and timelines. Development and planning is ongoing with adherence to the recommended National framework.

This project is continuing with phased member involvement and a process of evaluation. Effects on future workforce trends and the preceptees' experience of preceptorship will be measured.

The *Springboard* brand is central to our preceptorship vision.

## 3 learning outcomes

Collaboration across multiple organisations and disciplines demonstrating innovation and enhancement of current available programmes, highlighting flexibility and teamwork.

This innovative approach was challenging as multiple stakeholders were involved, but a consensus on content was reached following workshop style discussions.

The delivery of a generic branded programme with accessibility across

disciplines and organisations is focused on supporting workforce stability and retention.

## Recommended reading titles (please enter up to 3)

Scholes, J, et al. *Managing Support for Newly Qualified Practitioners; Lessons Learnt from One Health Care Region in the UK*. Journal of Nursing Management 25(2), 2017, doi:10.1111/jonm.12446.

<https://www.england.nhs.uk/Publication/National-Preceptorship-Framework-for-Nursing/>, NHS England, 10 Oct. 2022, <https://www.england.nhs.uk/publication/national-preceptorship-framework-for-nursing/>.

## Biography - Alison Lester

I qualified as an RGN in 1988 and worked predominantly in General Medicine and Oncology, developing into Macmillan Specialist Nurse roles in both primary and secondary care. In 1995 I took the opportunity to develop my knowledge and skills into nurse manager and project manager roles in the pharmaceutical industry. Later I diversified into more commercial roles. In 2020 I decided to complete a Return to Practice Nursing qualification with Wolverhampton University. It was such a great feeling to get my PIN back!! In 2021 I commenced in my current role within a Project Manager position in an Integrated Care System. This role truly combines my skills and experience over the last 34 years, working collaboratively and with the patient at the centre of all we do!! I am proud to have helped facilitate and co-chair an ICS preceptorship collaborative.

## #193 Lived Experience Connectors®: Excellence in Person-Centred Care

### Authors

Mrs. Catherine de Zwaan - Cheshire and Wirral Partnership NHS Foundation Trust

Mrs. Laura Clews - University of Chester

## Aim of paper

Positive Experience of Care is one of the three pillars of quality healthcare, and has a huge impact on patient outcomes. It's essential that people working in health and social care know what it looks like and how to deliver it.

The Lived Experience Connector® programme has been effective in giving students an opportunity to hear first-hand what good person-centred care looks and feels like, through speaking to real people and hearing their experiences.

We want to share our key areas of learning with others, and support others to establish this programme within their own settings for further impact.

## Abstract

The University of Chester and Cheshire and Wirral Partnership NHS Foundation Trust have been partnering together on an ambitious project, ensuring person-centred care is at the heart of students' learning.

We believe it's impossible to deliver person-centred care if we don't know what matters to people, or what the best support looks like. Lived Experience Connectors® meet together with Trainee Nursing Associates throughout their training, to help answer the question "what does patient-centred care look and feel like?"

Lived Experience Connectors® are volunteers who have lived experience of accessing services. They're trained to share their experiences with students in small groups, within a safe classroom environment.

Together, they help the students to answer the following questions:

- How does it feel when you're a patient accessing services?
- What is important when you're in that situation?

- Why person-centredness makes a huge difference to people's care

Within each taught session, we have a theme to base our questions on and the students can ask the Lived Experience Connectors® questions around their experiences. We talk about approaches to person-centred care, the vulnerabilities people may face, the importance of planning care and what aspects of the Lived Experience Connectors® care they feel we need to take on board - emotional, physical and psychological support is all within the discussions.

Our aim is to support students to view patients holistically, taking into consideration all points of person-centred care for that individual.

By working so closely with the Lived Experience Connectors®, the students have gained valuable understanding of what it feels like to be a patient accessing health care services, and why practitioners who display person-centred care are so vital.

Our programme evaluation and monitoring also demonstrates that this programme has impacted on the student's awareness of person-centred care in practice.

## 3 learning outcomes

The Lived Experience Connectors® give the students a vital opportunity to hear first-hand what person-centred care looks and feels like.

Our monitoring and evaluation of the programme demonstrates that the students' understanding of person-centred care improved.

Our data also shows the programme is rewarding for the Lived Experience Connector® volunteers themselves, as they share about their experiences with the students.



## **Biography - Catherine de Zwaan**

### **Patient and Carer Experience Team Manager / Voluntary Services Lead**

Catherine joined the NHS five years ago, and she currently manages the Patient and Carer Experience Team. Her role has a broad remit, which includes championing person-centred care and co-production, making sure the voice of people with lived experience is heard, and that their views are embedded as we deliver services to meet people's needs.

Catherine is actively involved with the national Heads of Patient Experience Network, and she is passionate about making sure that people have a positive experience of care.

In her previous role, Catherine worked for a humanitarian organisation in Hong Kong for several years, as the Head of Environment and Sustainability. This organisation worked to support the most vulnerable members of society in practical ways: meeting people's most pressing needs in a caring way, whilst still retaining their dignity and giving them hope for the future.

In her spare time, Catherine is Trustee for a charity called Reemi ([reemi.org](http://reemi.org)) which helps vulnerable women in developing countries gain access to environmentally sustainable menstrual products, and also delivers education initiatives with a focus on menstrual health. Catherine lives in Chester with her Canadian husband Joel, and their daughter.

## **#194 Enhancement of Military Medical Ethics Knowledge and Understanding for Military Nurses through Digital Technology**

### **Authors**

Dr. Janet Kelly - University of Hull

Dr. Charles Beardmore - Kings College  
London

## **Aim of paper**

Using a smart phone app as an educational tool, to enhance military nurses' military medical and nursing ethics knowledge and understanding in a variety of military healthcare environments as applied to professional practice.

### **Abstract**

There are ethical challenges in all areas of healthcare practice. It is not primary prescribed to the medical profession as the term 'military medical ethics (MME)' suggests. There are some distinct aspects of military ethics that apply to military nurses and to nursing in a variety of military environments that expand the term MME to military nursing ethics (MNE). To prepare military nurses for the military nursing environment it is necessary to assess the learning needs for this group and plan, develop and implement an educational tool to increase their knowledge and understanding of MNE.

The digital era generates opportunities to increase knowledge and understanding for all healthcare professionals. In 2020, the King's Centre for Military Ethics launched a smartphone App that matched physical playing cards that have been widely used to provide vignettes for teaching MME. Using this digital technology, a second MME pack with one suit covering military nursing has been developed for inclusion in the new pack. This presentation will describe our journey from its embryonic stage to the unveiling of this new suit.

The first phase was to create an initial bank of vignettes using individual military nurses who contributed anonymized ethical challenges or dilemmas that they had personally experienced. The second phase was in two parts that included peer review by a small group of experienced military nurses of different military ranks and then by a larger group of military nurses within an educational setting. The third phase was by

individual feedback following a workshop on MNE using the vignette for small group discussion.

This three-phase process provided assurance of the educational validity and reliability of vignettes to users of the new suit of cards for teaching MNE to military nurses.

### 3 learning outcomes

1. To give background information on the necessity of military nurses having knowledge and understanding of military ethics in a military nursing environment
2. To explain the process for development of new military nursing scenarios/suite of cards
3. To describe the consultation and engagement process to ensure validity and reliability of the new military nursing scenarios/suite of cards

### Recommended reading titles (please enter up to 3)

Allied Joint Doctrine for Medical Support (2020) , , Allied Joint Publication-4.10, Ministry of Defence [accessed 20 Oct at <https://www.gov.uk/government/publications/allied-joint-medical-support-doctrine-ajp-410>].

Miron M, Bricknell M. Innovation in education: the military medical ethics 'playing cards' and smartphone application. BMJ Mil Health Published Online First: 28 October 2021. doi: 10.1136/bmj-military-2021-001959

Ethical Principles of Health Care In Times Of Armed Conflict and Other Emergencies [accessed 20 Oct [https://www.icrc.org/en/download/file/21341/icrc\\_ethical\\_principles.pdf](https://www.icrc.org/en/download/file/21341/icrc_ethical_principles.pdf)]

### Biography - Janet Kelly

Janet is a nurse, midwife and is also qualified in law. She is a Senior Lecturer in Midwifery and Healthcare Law and Ethics at the

University of Hull, an Honorary Senior Lecturer at Kings College, Centre for Military Ethics and a British Army reservist at the rank of Lieutenant Colonel in Queen Alexandra's Royal Army Nursing Corps. She has over 33 years' experience as a British Army Nursing Officer.

In 2012, she gained a Doctor of Philosophy in Health Studies from the University of Hull titled, '*Professional, Ethical, and Legal Issues in British Military Healthcare practice*'.

Janet has many published national and international academic papers on healthcare and military ethics including a book titled, 'Is Medical Ethics in Armed Conflict Identical to Medical Ethics in Peace?' that was nominated for the Medical Book Award of the Year 2013 and more recently a book chapter in 2019 'on 'Legal Issues in Midwifery Care: In Empowering Decision-Making in Midwifery, A Global Perspective'. Her research interests are military medical ethics, neonatal ethics and women's health in the military.

### #195 Learning from the introduction of a Director of Nursing Fellowship; reflections from an evaluation

#### Authors

Ms. Claire Armitage - Leicestershire Partnership NHS Trust

Dr. Lizelle Bernhardt - Leicestershire Partnership NHS Trust

Ms. Kelly Barber - Leicestershire Partnership NHS Trust

#### Aim of paper

This session will focus on the learning from the implementation of a first cohort of a Director of Nursing Fellows (DoNFs) programme within a community, mental health and learning disability trust. The programme was delivered over the course of one year and a thorough evaluation took

place. The evaluation has highlighted a number of areas of learning and has informed the development of a second cohort. This session will be of interest to anyone who currently has, or is considering developing, a similar programme; the learning from the evaluation could equally be applied to other programmes.

## **Abstract**

The development of clinical academic skills in frontline staff has multiple benefits for patients, services and individual clinicians, however, as a community, mental health and learning disability trust, ongoing challenges with supporting clinicians who were aspiring to, or considering, clinical academic roles were identified; the need for an in-house, foundation level scheme to support staff became clear.

A Director of Nursing Fellows (DoNFs) programme was developed and initiated within Leicestershire Partnership NHS Trust, building on the learning from the Chief Nurse Excellence in Care Junior Fellowships in Nottingham (see Bramley et al, 2018). The programme was delivered over the course of one year and fellows benefited from a bespoke individual development programme, including clinical, academic and transformational leadership, patient and public involvement and evidence-based practice. The programme also included robust provision of mentorship and participation in action learning sets. Participants undertook an improvement project focused on an area pertinent to their nursing practice and aligned to nursing, organisational and strategic objectives, underpinned by practice development frameworks and 'plan, do, study, act' cycles. Quarterly meetings with the Director of Nursing and invited health-system leaders enabled established senior professionals to share their career journeys. The programme finished with a formal presentation and celebration event and fellows were also offered support for dissemination and

writing for publication. After the programme, follow up support and mentorship with career next steps and continuing professional development was offered.

A thorough evaluation took place and this has highlighted a number of areas of learning and has informed the development of a second cohort. During this session, the course leadership team will present the learning from the development and implementation of the programme, the findings from the evaluation and recommendations for future delivery.

## **3 learning outcomes**

Attendance at this session will support the participant to:

- Explore factors to consider when setting up a director of nursing fellowship programme
- Reflect on the outcome of an evaluation and the learning from this initiative
- Gain practical tips to support the development of similar educational and developmental programmes

## **Recommended reading titles (please enter up to 3)**

Association of UK University Hospitals (2016) Transforming Healthcare through Clinical Academic Roles in Nursing, Midwifery and Allied Health Professions. London: AUKUH.

Bramley, L., Manning, J. and Cooper, J. (2018) Engaging and developing frontline clinical nurses to drive care excellence: Evaluating the Chief Nurse Excellence in Care Junior Fellowship initiative, Journal of Research in Nursing, Vol. 23(8) 678–689

DOI: 10.1177/1744987118808843

## **Biography - Lizelle Bernhardt**

Lizelle is currently the Clinical Academic Careers Pathway Project Lead at

Leicestershire Partnership NHS Trust (LPT). She completed her training in midwifery, general-, mental health- and community health nursing in 1994 in South Africa. Post qualification she gained extensive clinical experience in intensive care and completed her ITU training and a Master's degree before relocating to the UK. Over the past 20 years Lizelle worked in various cardiovascular nursing roles and she gained her PhD at the University of Leicester in 2022. Her next ambition is to undertake a post-doctoral fellowship and to develop as an independent cardiovascular nurse researcher.

Lizelle is currently the co-chair of the Leicester Clinical Academic Practitioner Network and the chair for the research forum of the British Association for Nursing in Cardiovascular Care. In addition to her personal research interests, Lizelle is passionate about the development of research capacity and capability, and clinical academic career opportunities for nurses and AHPs in LPT.

### **Biography - Kelly Barber**

Kelly currently works as a mental health practitioner within the Crisis Resolution and Home Treatment team within Leicestershire Partnership NHS Trust. She is also the coordinator for the organisation's Director of Nursing/AHP Fellowship. Kelly completed her nurse training in 2021, obtaining a MSc in Mental Health nursing from The University of Nottingham. Prior to this, Kelly completed a BSc in Psychology with The Open University which is where her interest in research stems from.

Following the completion of her nurse training, Kelly was among the first cohort to graduate from the Director of Nursing fellowship at Leicestershire Partnership NHS Trust. Through the fellowship, Kelly was able to pursue her passions of using evidence-based practice to deliver high quality care for service users by undertaking a quality improvement project.

Kelly is keen to develop personally and professionally and hopes to become a leading clinical academic within the field of Mental Health. She is an active member in various clinical academic networks and continues to develop her leadership skills.

## **#196 Relationships and Sexuality Education for young adults with Intellectual Disabilities: A Step too Far?**

### **Authors**

Prof. Michael Brown - Queen's University Belfast

Dr. Lynne Marsh - Queen's University Belfast

Dr. Mark Linden - Queen's University Belfast

Dr. Maria Truesdale - University of Glasgow

Dr. Edward McCann - London City University

### **Aim of paper**

People with intellectual disabilities have aspirations and expectations regarding relationships and the expression of their sexuality. Evidence highlights that for some there is an absence of friendship and barriers to the expression of their sexuality. The aim of this submission is to provide an overview of the research evidence regarding the design, content and delivery of relationship and sexuality education programmes specific to the needs of young adults with intellectual disabilities and programme content and the role of nurses and other professionals in the delivery.

### **Abstract**

There is a growing attention on the need for evidence-based relationship and sexuality education (RSE) programmes specific to the needs of children, young people and adults with intellectual disabilities. A systematic review was undertaken with twelve papers identified regarding RSE programmes

specific to the needs of people with intellectual disabilities. Data analysis identified four themes (i) principles informing RSE programme development, design (ii) content of RSE programmes, (iii) delivery of RSE programmes and (iv) evaluation of RSE programmes. There is a need for people with intellectual disabilities, their families, carers and professionals to be fully involved in the development and design of RSE programmes. Nurses and other professionals have key and important roles in the development, content and delivery of RSE programmes. Further research is required to identify core elements of RSE programmes and effective delivery approaches and the outcomes and long-term impact and benefits of programmes.

### 3 learning outcomes

1. To develop an understanding of the relationship and sexuality needs and concerns of people with intellectual disabilities
2. To appreciate the scope and extent of the research evidence regarding RSE programme development, content and evaluation
3. To increase the knowledge of the contributions required from nurse and others regarding RSE programmes

### Recommended reading titles (please enter up to 3)

Paulauskaite, L., Rivas, C., Paris, A., & Totsika, V. (2022). A systematic review of relationships and sex education outcomes for students with intellectual disability reported in the international literature. *Journal of Intellectual Disability Research*, 66(7), 577-616.

Azzopardi-Lane, C. (2022). "It's not easy to change the mentality": Challenges to sex education delivery for persons with intellectual disability. *Journal of Applied Research in Intellectual Disabilities*, 35(4), 1001-1008.

McCann, E., Marsh, L., & Brown, M. (2019). People with intellectual disabilities, relationship and sex education programmes: A systematic review. *Health Education Journal*, 78(8), 885-900.

### Biography - Michael Brown

Professor Brown is Professor of Nursing and Director of Graduate Studies in the School of Nursing and Midwifery, Queen's University, Belfast. An educator and researcher, he has published over 100 papers in the academic literature. His research focuses includes, healthcare access and delivery, LGBTQ+ health and relationships and sexuality education. He is a Principal Fellow of the Higher Education Academy and a Fellow of the Royal College of Nursing

### #200 Exploring fairness in online selection; preliminary findings from an evaluation study in admissions to Nursing and Midwifery programmes at one UK University

#### Authors

Dr. Alison Callwood - University of Surrey

Mrs. Sarah Roberts - University of Surrey

#### Aim of paper

To evaluate the reliability, acceptability and identify fairness issues in online interviews (Multiple Mini Interviews) for admissions to Nursing and Midwifery programmes at one UK university.

#### Abstract

**Background:** Global, Covid-driven restrictions around face-to-face interviews for healthcare student selection forced admissions staff to rapidly adopt adapted online systems before supporting evidence was available. This has resulted in largely unknown impact on equity, diversity and inclusion. In response, we built and



evaluated SAMMI®, the first known (asynchronous) videoconference facilitated interview and assessment system grounded in the Multiple Mini-Interview (MMI) method.

**Aim:** To evaluate the reliability, acceptability and identify fairness issues in online interviews (Multiple Mini Interviews) for admissions to Nursing and Midwifery programmes at one UK university.

**Sample:** 917 Applicants to Nursing (Adult, Child and Mental Health) and Midwifery under-graduate programmes and interview staff.

**Methodology:** Applicants underwent an asynchronous MMI facilitated on the SAMMI® platform (November 2021-May 2022). Applicants and interview staff completed online evaluations.

**Results:** Reliability coefficients (internal consistency) were good to excellent, mean 0.72 (range 0.64-0.89). Sub-group analyses on 210 randomly selected applicants showed SAMMI® performs similarly across sub-groups: reliability coefficients for gender F/M: 0.77/0.82; age: <20years/ >21 years 0.78/0.86, disability/non-disability: 0.8/0.89 and UK/non-UK 0.8/0.8 (respectively).

Applicant response rate of 20%.

Over 60% of applicants were accepting/very accepting of the online asynchronous MMI in the context of additional applicant days enabling direct engagement with the University. Advantages included reduced costs for applicants. Wi-Fi poverty/technical issues did not transpire. The pre-recording interviews incorporating inclusive language by diverse staff, representative of the University community were positively evaluated by applicants. Additional time met the needs of neurodiverse applicants.

Admissions staff reported reduced stress due to flexibility and 70%-time savings.

**Conclusion:** The majority of applicants were accepting of online interviews. SAMMI® appears to be fair, reliable, cost-effective, and feasible provided human touch points remain in a hybrid approach and the technological interface is softened with inclusive language and by design.

### 3 learning outcomes

1. Elicit views on online selection using Multiple Mini Interviews (MMIs)
2. Identify how fairness can be facilitated and unfairness issues ameliorated
3. Better understand how online MMIs can be effectively adopted

### Recommended reading titles (please enter up to 3)

1. Callwood, A. et al (2022) Feasibility of an automated interview grounded in multiple mini interview (MMI) methodology for selection into the health professions: an international multimethod evaluation. BMJopen: <https://bmjopen.bmj.com/content/12/2/e050394>
2. Cleland et al (2020) COVID 19: Designing and conducting an online mini-multiple interview (MMI) in a dynamic landscape. Medical Teacher  
<https://www.tandfonline.com/doi/full/10.1080/0142159X.2020.1762851>

### Biography - Alison Callwood

Dr Alison Callwood gained her Doctor of Philosophy in 2015 at the University of Surrey. She has a background in midwifery, nursing practice and education for health professions spanning 30 years.

Alison is actively engaged in post-doctoral research exploring admissions to health professions education programmes particularly fairness issues. She is a Fellow of the Institute of People-Centred AI at the University of Surrey, a member of the Medical Schools Council Selection Alliance MMI Expert Group and INResH (International



Network for Researchers in Selection into Health). Alison was awarded Senior Fellowship of the Higher Education Academy and Innovator of the Year in 2018. She holds multiple grants from UKRI and founded a university spinout company to provide online Multiple Mini-Interviews (MMIs).

Her recent work includes exploring the impact AI can bring to recruitment/admissions and how the interface between technology and humans can be softened to facilitate equity, inclusivity, and diversity.

## **#201 Exploring provision and experiences of an innovative pre-Registration community education placement and provision and experience of adult nursing: a qualitative study.**

### **Authors**

Mrs. Jackie McBride - The university of Surrey

Dr. Wendy Grosvenor - Lecturer

Ms. Emma Budd - Procure Community Services

Ms. Emily Winter - Procure Community Services

### **Aim of paper**

The aim of this study was to explore the experiences of pre-registration adult nursing students and a community nursing team of an innovative community-education placement.

### **Abstract**

Healthcare service delivery is increasingly complex due to growing demand on services, ageing populations, longer life expectancy and global fiscal challenges. The current model, which relies heavily on

secondary care over burdens hospitals, contributes to extensive waiting times and creates barriers to accessing health services (World Health Organisation 2016). In response to this undergraduate nursing programmes and clinical placement sites must ensure nursing students have high quality community nursing exposure during their training to facilitate the acquisition of knowledge and skills necessary to work a healthcare system that is moving towards a community focus. Students' experiences of community placements will not only influence their perceptions of this working environment but will affect their motivation to learn and achieve their learning outcomes (Dickson et al., 2015). Therefore, high quality practice placements are in the interest of academic staff, community practitioners and students alike as good learning environments promote optimal learning and skills acquisition (Doyle et al., 2017). To promote optimal learning for students in their community placement, a local community trust developed an innovative community rotation for adult nursing students. The aim of the rotation programme was to support student nurses to develop a good understanding of different areas of community practice and gain a holistic picture of a patient's journey. To achieve this, students were allocated to spend time with different nurse specialists and allied health care professionals. Rotation also supported exposure to a broad range of clinical and leadership styles together with different ways of working. Students were involved in the co-design of the rotation programme. A qualitative study using focus groups was undertaken, themes were generated deductively from the research questions, and iteratively from transcripts. An inductive approach using thematic analysis using Braun and Clarke's (2006) six steps was used to analyse data.

### **3 learning outcomes**

- Explore potential influences on, and changes in, pre-registration student

nurses' understanding of community care

- Explore ways that nursing practice placement can adapt learning opportunities to present positive community experiences to the student nurses placed with them
- Explore scope for development of further such projects within the local area.

### **Recommended reading titles (please enter up to 3)**

Doyle, K., Sainsbury, K., Cleary, S., Parkinson, L., Vindigni, D., McGrath, I., Cruickshank, M., 2017. Happy to help/happy to be here: identifying components of successful clinical placements for undergraduate nursing students. *Nurse Educ. Today* 49, 27–32.

Lewis, R., Ibbotson, and Kelly, S. (2019). Student nurses' career intentions following placement in general practice through the advanced training practices scheme (ATPS): findings from an online survey. *BMC Medical Education*, 19, 448.

Secret M. et al (2011) The Promise and Challenge of Practice-Research Collaborations: Guiding Principles and Strategies for Initiating, Designing and Implementing Program Evaluation Research. *Social Work* 56:1, 9-20.

### **Biography - Jackie McBride**

As an adult nurse spanning over 25 years, my background has included acute medicine, critical care, outreach, practice development and oncology. I have been involved in several strategic initiatives locally and nationally in support of improvements in the delivery of patient care. There are two common themes in relation to my career developing innovative ways of working in support of quality patient care and influencing practice through research and learning and teaching. I moved into

higher education in 2012 as a cancer tutor before moving into undergraduate pre-registration provision. In 2016 I moved into a leadership role as Head of Professional Preparatory Programmes, this includes Nursing, Paramedic Science and Midwifery. I am responsible for the quality assurance of the programmes, curriculum development and programme design. My focus is on enabling and supporting the next generation of healthcare professionals for the workforce. I have a keen interest in interprofessional working and learning which is central to our learning and teaching strategy at the school. I am currently part way through my educational doctorate focusing on teacher reflection within the context of simulation.

## **#202 The General Practice Nurse Foundation Programme – An all Wales approach to workforce sustainability and development**

### **Authors**

Ms. Stella Wright - Betsi Cadwaladr University Health Board

Dr. Angela Roberts - Betsi Cadwaladr University Health Board

### **Aim of paper**

This submission details the experience of establishing an all Wales General Practice Nurse (GPN) Foundation Programme, and its implementation at Betsi Cadwaladr University Health Board.

The GPN role has evolved significantly in recent years. This programme is one of a number of initiatives being developed to ensure the primary care nursing workforce is equipped with the necessary skills and support to deliver high quality patient care.

In the longer-term, investing in GPN training is anticipated to improve staff retention and develop a local supply of nurses for a

sustainable workforce fit for the future challenges of primary care.

## Abstract

### Background

The General Practice Nurse (GPN) role has evolved in recent years, to deliver first contact and continuing care as part of the inter-disciplinary primary care team. There is an urgent need to recruit and train Registered Nurses to become GPNs as current workforce data indicates that over 50% of current GPNs are approaching retirement age, and many already work on a part-time basis.

Betsi Cadwaladr University Health Board (BCUHB), together with the other health boards in Wales seek to deliver an innovative GPN programme which accelerates the process of embedding new nurses into primary care. The programme will support the development of new skills, expand and sustain the GPN workforce, and ensure GPNs deliver high quality patient care.

### Methods

The GPN programme has been designed and developed over a period of six months by an all Wales task and finish Group represented by seven Health Boards and facilitated by Health Education and Improvement Wales (HEIW). It provides a standardised curriculum, with a blend of national and local training alongside work-based learning and skills development over a nine-month period. GPNs retain their substantive contract with their employing GP Practice, whilst completing the formal training and competencies, and are provided with protected time for learning and development. In addition, the GPN programme offers access to a dedicated educational supervisor and network of GPN trainees locally, and across Wales.

### Results

This GPN Foundation Programme is based on one originally developed in BCUHB, which achieved a retention rate of over 90%. It is anticipated that the success will be replicated with the current programme when ten trainees join locally in the coming year. This poster will report on the experience to date.

### Conclusion

Developing an engaged, well-trained GPN workforce, will ensure a high quality patient experience, and care closer to home.

### 3 learning outcomes

For nurses- Focused career development leading to more rewarding clinical practice and new career opportunities.

For GP Practices- An accelerated process to embed new nurses into General Practice, improve recruitment and future-proof a sustainable workforce.

HEIW- Recognition of the vital role of GPNs, champion a programme to develop and inspire future GPNs, supporting patient care for years to come.

### Recommended reading titles (please enter up to 3)

Health Education and Improvement Wales (nd) *An NHS Wales Competence Framework for Nurses working in General Practice*. Available at:

<https://heiw.nhs.wales/files/nhs-wales-competence-framework-for-nurses-working-in-general-practice/>

The Queen's Nursing Institute (2015) *General Practice Nursing in the 21<sup>st</sup> century: A time of opportunity*. Available at: [https://qni.org.uk/wp-content/uploads/2016/09/gpn\\_c21\\_report.pdf](https://qni.org.uk/wp-content/uploads/2016/09/gpn_c21_report.pdf).

### Biography - Stella Wright

Stella has spent her whole career in the NHS, and been in research and evaluation

roles for the last twelve years. She has extensive experience working on clinical trials as both Clinical Research Officer, and as Trial Manager on an NIHR funded palliative care trial.

Stella has been with the BCUHB Primary and Community Care Academy since 2019 working on the Advanced Paramedic Practitioner Pacesetter, and undertaking a Masters by Research alongside the project. She has now moved on to deliver the evaluation for other projects taking place in the Academy.

## **#203 How to support nursing students to have a contemporary learning experience in a national board (NHS Education for Scotland); the creation of an organisational-wide, virtual practice learning environment for pre-registration nursing students**

### **Authors**

Mrs. Christine Strange - NHS Education for Scotland

Mrs. Lynne Paterson - NHS Education for Scotland

Mrs. Michelle Scott - NHS Education for Scotland

Mrs. Claire Findlay - NHS Education for Scotland

### **Aim of paper**

Our aim is to demonstrate how we applied an organisational-wide approach to designing practice learning experiences, with an educational leadership focus aligned to the NMC Standards of Proficiencies for registered nurses (NMC 2018). We will share our experience of designing, implementing, and evaluating a new and innovative

Practice Learning Environment (PLE). We will promote the use of a virtual PLE which supports contemporary learning experiences through remote ways of working and technology enhanced learning. We will also facilitate discussion on how others might consider, design, lead and implement a similar model, in the context of their own working environments.

### **Abstract**

NHS Education for Scotland (NES) is an education and training body and a national health board within NHS Scotland. As Practice Educators, we are responsible for developing and delivering healthcare education and training for the NHS, the health and social care sector and partner public bodies.

Our presentation will outline the scoping, development and implementation that led to the successful delivery of a new virtual non-clinical practice learning experience for student nurses. This was in response to recommendations from the Scottish Government commissioned report into practice placement capacity (NES 2020).

Education and leadership skills can support future registered nurses to develop a strong professional identity and take on leadership responsibility (Council of Deans of Health Shape of Caring Advisory Group 2016). The PLE was designed to offer students from different fields of nursing a contemporary learning experience to develop their knowledge and skills through a cross-directorate working approach.

Experiences included learning opportunities that students may not otherwise be exposed to such as practice education, project management, quality improvement, evaluation, policy, and continual professional development. A student focus enabled this innovative approach to contribute meaningfully to their learning. Students and NES educators emphasised,

through evaluation, the beneficial and productive learning achieved.

We will discuss how we used collaborative working with NES colleagues, students, our partner higher education institutions and NHS Boards to support the students to achieve their Nursing and Midwifery Council proficiencies (NMC 2018). We were also able to support the development of knowledge and understanding of the management structure and leadership across the organisation.

Delegates attending our session are encouraged to consider elements from our learning that would support them to develop their own non-clinical PLEs. We hope to inspire others by sharing our learning and emphasising the benefits of expanding learning experiences across a national organisation.

### **3 learning outcomes**

1. Explore the design, delivery, and evaluation of an alternative model for practice learning within a national board
2. Reflect on the use of technology enhanced learning to support nurse education and professional development
3. Discuss the benefits of expanding learning experiences across a national organisation and apply your learning within your own context

### **Recommended reading titles (please enter up to 3)**

COUNCIL OF DEANS OF HEALTH SHAPE OF CARING ADVISORY GROUP, 01/08/2016, 2016-last update, Educating the Future Nurse – a paper for discussion Our initial views on the key outcomes of future registered nurse education, across all four fields [Homepage of Council of Deans of Health], [Online]. Available: <https://councilofdeans.org.uk/wp-content/uploads/2016/08/Educating-the-Future-Nurse-FINAL-1.pdf> [01/10, 2023].

NHS EDUCATION FOR SCOTLAND, 17/07/2020, 2020-last update, Provision of NMAHP Placements in the 2020-2021 Academic Session [Homepage of NHS Education for Scotland], [Online]. Available: <https://www.nes.scot.nhs.uk/media/x4wihwna/provision-of-nmahp-placements-in-2020-21-academic-session.pdf> [01/10, 2022].

NURSING AND MIDWIFERY COUNCIL, 21/07/2022, 2022-last update, Standards of Proficiency for Registered Nurses [Homepage of Nursing and Midwifery Council], [Online]. Available: <https://www.nmc.org.uk/standards/standards-for-nurses/standards-of-proficiency-for-registered-nurses/> [07/10, 2022].

### **Biography - Christine Strange**

Christine qualified as a registered general nurse in 1993. She worked predominantly within acute medical services where she developed an interest in education and professional development. She had the opportunity to join the team of Practice Education Facilitators in NHS Lothian in 2004. She was able to combine this work with working clinically until 2016 when she transferred over to working as a Practice Education Facilitator full time. Christine now works as a Practice Educator within NHS Education for Scotland. Christine has completed a BSc In Nursing and has a Post Graduate Certificate in Professional Education. She is committed to practice learning, personal and professional development and supporting learners to have the best experience they can through. She is passionate about person- centred ways of working and fair and equal access to education.



## **#204 Designing and implementing inter-disciplinary primary care training hubs in North Wales to enhance nurse education and professional development**

### **Authors**

Ms. Stella Wright - Betsi Cadwaladr University Health Board

Mrs. Nia Boughton - Betsi Cadwaladr University Health Board

Ms. Clare Hughes - Betsi Cadwaladr University Health Board

Dr. Jess Deacon - Betsi Cadwaladr University Health Board

Mrs. Gemma Nosworthy - Betsi Cadwaladr University Health Board

### **Aim of paper**

This poster will outline the experience establishing four inter-disciplinary Skills, Education and Training Hubs (SETH) in Health Board Managed practices in North Wales. The model will offer high quality training, education and learning opportunities to a range of undergraduate and postgraduate clinicians in an inter-disciplinary environment. The added value of the inter-disciplinary model will adequately prepare the future generation of primary care practitioners for the shift in strategy, towards that of prevention, wellbeing and co-production with our patients.

### **Abstract**

#### **Background**

Primary care is under greater pressure than ever, due to increasing demand, patient complexity, and recruitment and retention challenges across the workforce. Skills, Education and Training Hubs (SETH) are being established in Health Board managed practices in Betsi Cadwaladr University

Health Board to support the training and development of the next generation of nurses and clinical practitioners.

#### **Methods**

Each SETH Hub will be led by a dedicated Clinical Practice Development Lead GP, and Multi-disciplinary Clinical Practice Development Lead. The Hub model is structured around student/training placements, and the recruitment of supernumerary trainees and rotational posts to add capacity in practice and ensure neither service need nor training is compromised.

The inter-disciplinary design will accommodate undergraduate and postgraduate trainees including Nurses, Physician Associates, Pharmacists, Paramedics, Medical Students and GP Trainees. Training different professional groups together adds value to the learning experience, and ensures clinicians are supported to develop their practice across the Leadership, Education and Research pillars of Advanced Clinical Practice.

It will also strengthen holistic assessment, and the ability to look at patients as a whole, whilst defining the skills and unique traits specific to each professional group.

#### **Results**

The first four Hubs anticipated to open in early 2023, and 'spoke' sites in 2024. The poster will detail the experience establishing the hubs, lessons learned, and early outcomes which may be of interest to other organisations considering a similar setup.

#### **Conclusion**

This innovative approach is anticipated to strengthen the skills and capability of the primary and community care workforce. It allows nurses to be more involved in training nurses of the future, but also contributes to the learning of other professionals by



employing an inter-disciplinary model. Consequently, clinicians, both current and future, will be adequately equipped to manage the shift in primary care towards prevention, wellbeing and co-production.

### 3 learning outcomes

Have a plan B, C and D! A flexible approach has been required in some areas following recruitment challenges.

The four SETH hubs are located in diverse areas of north Wales include a mix of rural and urban. Local population and environmental needs must be considered when planning the staffing and structure of the hub.

Early stakeholder engagement is essential.

### Recommended reading titles (please enter up to 3)

Brown J, Sandars J, Nwolise C, Silverio S, Agius S, Patel M and Mamelok J (2019) Multi-disciplinary training hubs in North West England: the training hub lead perspective, *Education for Primary Care*, 30:5, 289-294, DOI: 10.1080/14739879.2019.1639553

Health Education and Improvement Wales (2020) *A Healthier Wales: Our workforce strategy for health and social care*. Available at: <https://heiw.nhs.wales/files/workforce-strategy/>

Welsh Government (2021) *A Healthier Wales: our Plan for Health and Social Care*. Available at: <https://gov.wales/sites/default/files/publications/2021-09/a-healthier-wales-our-plan-for-health-and-social-care.pdf>

### Biography - Stella Wright

Stella has spent her whole career in the NHS, and been in research and evaluation roles for the last twelve years. She has extensive experience working on clinical trials as both Clinical Research Officer, and as Trial Manager on an NIHR funded palliative care trial.

Stella has been with the BCUHB Primary and Community Care Academy since 2019 working on the Advanced Paramedic Practitioner Pacesetter, and undertaking a Masters by Research alongside the project. She has now moved on to deliver the evaluation for other projects taking place in the Academy.

### #206 'Building-in' fairness to online selection

#### Authors

Dr. Alison Callwood - University of Surrey

Mrs. Sarah Roberts - University of Surrey

#### Aim of paper

To explore the effectiveness of building fairness-in to online selection

#### Abstract

##### Background

We do not fully understand the impact on fairness of conducting selection interviews to health professions online. These problems urgently need addressing because of the continued post-Covid use of remote interviews at a time when facilitating equity, diversity and inclusion is a pressing priority.

##### What was tried and evaluated

An online (asynchronous) multiple mini-interview (MMI) was configured with principles of fairness elicited from multiple sources built in <sup>1,2</sup>

Strategies included to:

- Recognise potential issues with stereotype threats and belonging uncertainty that may impact on candidates' performance and use language that supports the affirmation of values at each station (e.g., "well done for getting this far").

- Incorporate encouraging words/phrases into the interview dialogue, as well as any communications circulated to applicants (e.g., “good luck”).
- Soften the language of technical instructions e.g., “when you are ready ...” or “when you have familiarised yourself with...”.
- Reduce the verbal loading of interview content particularly for neurodiverse applicants.
- Accommodate neurodiverse applicant needs with extra time, adjusted fonts and a tailored user-interface (UI).
- Provide opportunities for candidates to familiarise themselves with the UI and format prior to their interview.
- Recommend generic, blank backgrounds for video or videoconference facilitated interviews to avoid unconscious bias.
- Ensure diversity of interviewers to include gender, age and ethnicity mix, experts-by-experience, and other stakeholders.
- Avoid culturally sensitive subject areas in interview content.
- Use inclusive, gender-neutral language with appropriate pronouns.

## Results

An interim evaluation of the online MMI was conducted at one UK university in February 2022 following ~700 interviews. 89% of respondents found the instructions helpful/very helpful; 61% found the process intuitive/very intuitive: *‘It felt a safe environment which put me at ease’*.

## Conclusions

These preliminary findings have substantial implications as building fairness into the design of online interviews is relatively low cost to implement but impactful.

## 3 learning outcomes

1. To identify how online interviews can facilitate fairness
2. To consider the logistical challenges of conducting online interviews ensuring fairness
3. To share lessons learnt for low-cost high impact

## Recommended reading titles (please enter up to 3)

### References

1. Linos E, Reinhard J, Ruda S. Levelling the playing field in police recruitment: Evidence from a field experiment on test performance. *Public Administration*. 2017;95(4):943-956.
2. <https://www.linkedin.com/business/talent/blog/future-of-recruiting>

## Biography - Alison Callwood

Dr Alison Callwood gained her Doctor of Philosophy in 2015 at the University of Surrey. She has a background in midwifery, nursing practice and education for health professions spanning 30 years.

Alison is actively engaged in post-doctoral research exploring admissions to health professions education programmes particularly fairness issues. She is a Fellow of the Institute of People-Centred AI at the University of Surrey, a member of the Medical Schools Council Selection Alliance MMI Expert Group and INResH (International Network for Researchers in Selection into Health). Alison was awarded Senior Fellowship of the Higher Education Academy and Innovator of the Year in 2018. She holds multiple grants from UKRI and founded a university spinout company to provide online Multiple Mini-Interviews (MMIs).

Her recent work includes exploring the impact AI can bring to recruitment/admissions and how the

interface between technology and humans can be softened to facilitate equity, inclusivity, and diversity.

## **#207 Building nursing leadership capacity in providing compassionate care**

### **Authors**

Dr. Paula Walls - Clinical Education Centre

Mrs. Sharon Maginn - Clinical Education Centre

Mrs. Rea Doherty - Clinical Education Centre

Mrs. Brenda Murphy - Clinical Education Centre

Mrs. Lynda Cole - Clinical Education Consultant

### **Aim of paper**

To present a *Leadership: Building Capacity* programme for nurses, who are new to, or aspiring to become leaders.

### **Abstract**

The health and care system in the United Kingdom faced a huge challenge during the COVID-19 pandemic, placing enormous pressure on health and care staff and unprecedented demands on leaders. To manage the crisis, effective leadership was essential, and frontline staff were encouraged to respond locally to manage the pandemic.

The health and care system must build on the distributed leadership that emerged and invest in developing front line leadership, to enable staff to act with kindness, prioritise collaboration, and foster creativity in the people they work with, so teams can continue to flourish (NHS England 2014).

In response to this need, the Clinical Education Centre (CEC), which designs and delivers education to Nurses, Midwives and Allied Health Professionals across Northern

Ireland, developed a leadership programme targeted at front line nurses, to build their leadership capacity.

The aim of the *Leadership - Building capacity* programme, is to facilitate nurses to explore how they manage themselves as a central part of being an effective leader.

The programme objectives seek to increase awareness of personal qualities like: self-awareness, self-confidence, self-control, self-knowledge, personal reflection, resilience and determination, as aspects of behaviour that can impact how they interact with others and others with them (Leadership Academy 2016).

The programme provides a safe space for nurses aspiring toward, or new to leadership, to explore personal strengths and limitations in these areas. In addition, the impact of collective (DoH 2017) and compassionate leadership (NHS England 2014) on culture, the care experience and team performance, are explored.

Using storytelling and reflection, nurses are facilitated to explore how they can influence and support others, to remove obstacles and overcome barriers to facilitate collective and compassionate leadership in their workplace. The programme provides the opportunity for nurses to create an action plan to progress their leadership journey.

### **3 learning outcomes**

1. Attendees will identify the significance of managing self as a central part of being an effective leader.
2. Attendees will be able to recognise the value of storytelling and reflection to enhance learning and improve practice.
3. Attendees will be enthused about the role of the nurse in making compassionate and collective leadership a reality.

### **Recommended reading titles (please enter up to 3)**

Department of Health (DoH) (2011) Quality 2020 - a ten-year strategy to protect and improve quality in health and social care in Northern Ireland. November 2011. Belfast, Department of Health. <https://www.health-ni.gov.uk/publications/quality-2020-ten-year-strategy-protect-and-improve-quality-health-and-social-care> (Accessed 21/10/2022)

Department of Health (DoH) (2017) HSC Collective Leadership Strategy. October 2017. Belfast Northern Ireland <https://www.health-ni.gov.uk/publications/hsc-collective-leadership-strategy> (Accessed 21/10/2022)

NHS England (2014) Compassionate and inclusive leadership. <https://www.england.nhs.uk/ourpeople/online-version/belonging-in-the-nhs/compassionate-and-inclusive-leadership/> (Accessed 21/10/2022)

NHS Leadership Academy (2016) The nine leadership dimensions. NHS Leadership Academy. <https://www.leadershipacademy.nhs.uk/resources/healthcare-leadership-model/nine-leadership-dimensions/> (Accessed 21/10/2022)

### **Biography - Paula Walls**

Dr Paula Walls, works in the Clinical Education Centre, which designs and delivers education for Nurses, Midwives and Allied Health Professionals across Northern Ireland. Paula works in the adult programme of care and has over 35 years' experience in adult nursing. Her career ranges from nursing in adult critical care, health promotion and community development, to public health and primary care. She spent 10 years as a lecturer and link tutor, at the University of Ulster in Northern Ireland, on pre and post registration programmes, and supervising research students up to MSc level.

Paula has an MSc in Health Promotion and a BSc (Hons) and PhD in Nursing. She has a particular interest in qualitative research and in addition to the adult nursing programmes she leads on, Paula enjoys delivering leadership, quality improvement and legal and Professional education to Nurses, Midwives and Allied Health Professionals in Northern Ireland. Paula is a reviewer for the RCN Nurse Researcher journal and has published articles on health promotion, community development, grounded theory and sexual health.

**#210 Learners who are neurodivergent in clinical practice, what are their requirements and what resources are available to them? A scoping exercise.**

### **Authors**

Mr. Mark Arnold - Liverpool John Moores University

Ms. Eleanor Hill - Liverpool John Moores University

### **Aim of paper**

The project aimed to identify what resources are available to support healthcare learners who identify as neurodivergent in Cheshire and Merseyside National Health Services (NHS). A scoping exercise and subsequent gap analysis were conducted to inform future resource development. The aim of this poster is to share the findings from this project, raise awareness of this issue and signpost neurodiversity resources to nurses.

### **Abstract**

A Health Education England funded RePAIR (Reducing Pre-registration Attrition and Improving Retention) leadership project was completed at Liverpool John Moores University. Four nursing students with an interest in neurodiversity were recruited to a

four-week leadership placement. The project aimed to identify what resources are available to support healthcare learners who identify as neurodivergent in Cheshire and Merseyside National Health Services (NHS). Neurodiversity is an umbrella term for neurological conditions including Autism, Dyslexia, and Attention Deficit Hyperactive Disorder.

A scoping exercise and subsequent gap analysis were conducted to inform future resource development. The information from the scoping exercise provided by the healthcare learners was based on various electronic resources, from charities and large organisations to specific Facebook groups. Focus groups were conducted to discuss the resources that the nursing students found and their own experience in their placement in leadership and neurodiversity. To date, the key findings are:

- The results indicate that there is awareness of online neurodiversity resources and how to seek support via organisations such as, Autistic UK and Disability Confident.
- There are examples of much needed resources that aid healthcare learners within the workplace. For example, a neurodiversity toolbox that contains colour overlays and coloured paper for learners to help them process information.
- An NHS trust based neurodiversity lead signposts where individuals can reach out for support and promotes an inclusive culture.

- Support groups for individuals who are neurodiverse or curious promotes

engagement with staff and learners in addition to signposting support

The project is ongoing with interviews scheduled with healthcare workers to explore the support available to neurodiverse individuals and what improvements can be made to help

healthcare learners transition to employment.

### 3 learning outcomes

Develop understanding of the needs of neurodivergent learners.

Demonstrate understanding of the resources available to support neurodivergent healthcare students in practice.

Demonstrate understanding of how to support neurodivergent learners

### Recommended reading titles (please enter up to 3)

Neil, T., & Policy, A. C. A. S. Neurodiversity in the shadow of COVID-19: flexibility and trust. *Good Practice in the Workplace in a time of Covid*, 3.

Bernstein, A. (2020). On the question of diversity. *Nursing And Residential Care*, 22(11), 1-4.

### Biography - Mark Arnold

I have been a registered nurse since 2012. My clinical background is Accident and Emergency nursing. I have worked in education for the last 10 years in various roles and am now the Head of Practice Placements at Liverpool John Moores University. I am currently studying my PhD part time looking at the transition of care home residents to and from A&E.

### #212 Evaluating final year nursing and midwifery students' understanding and capability of addressing lateral violence in healthcare

### Authors

Ms. Joanne Outteridge - Anglia Ruskin University



Mrs. Claudia Morton - Anglia Ruskin University

### **Aim of paper**

This presentation will share results from an ongoing Action Learning Project aimed at developing a Lateral Violence learning package for final year nursing, midwifery, and allied health students. The current iteration of the learning package will be discussed, and the results will be presented from the latest evaluation. This will add to the small existing evidence base that conference attendees can cite for using this approach to teaching LV in their own professional arena.

### **Abstract**

Lateral violence (LV) in healthcare is described as nurse-to-nurse aggression, bullying or workplace incivility. It is expressed through verbal, nonverbal, overt, and covert behaviours (Griffin, 2014). A rapid review of existing multinational evidence has highlighted the significant impact LV has on staff wellbeing, attrition, and consequently safe patient care, with the Ockenden Review (DHSC 2022) highlighting a lack of staff confidence in escalating concerns due to perceived barriers in team-working. LV has not yet been explored sufficiently in the UK but with an increase in nurses leaving the profession (HEE nd) this needs to be addressed not only for the individual's mental health, but to address the challenges facing the NHS with recruitment, retention, and patient safety. Griffin (2014) suggests that existing culture is difficult to change and therefore targeted intervention should be with final year health students about to enter the workforce.

The authors will present the findings of a mixed methods questionnaire of 18 questions comprising Likert scales and open responses to assess final year health students' knowledge, confidence, and competence in identifying LV in healthcare settings and awareness of potential impact

of LV on staff and patient outcomes. A pre- and post-method will be used to survey approximately 200 final year nursing and midwifery students attending one interprofessional learning conference in either December 2022 or January 2023 (two cohorts). Students will be attending didactic education on LV (amended from the previous action learning cycle), followed by an interactive workshop practising skills of cognitive rehearsal (new addition following the previous evaluation cycle). Ethical approval has been granted to present findings from consenting participants, adding to the existing evidence base for using didactic instruction followed by cognitive rehearsal to increase awareness of, and confidence in challenging, Lateral Violence in healthcare settings.

### **3 learning outcomes**

To understand the importance of including lateral violence in healthcare education in order for students to be able to recognise and challenge this.

To critically discuss didactic instruction coupled with cognitive rehearsal as a delivery method to teach about lateral violence.

To evaluate the importance of interprofessional learning spaces when delivering lateral violence teaching.

### **Recommended reading titles (please enter up to 3)**

Department of Health and Social care, 2022. *Ockenden review: summary of findings, conclusions and essential actions*. Available at: <https://www.gov.uk/government/publications/final-report-of-the-ockenden-review/ockenden-review-summary-of-findings-conclusions-and-essential-actions>

Eka N,G,A., Chambers D (2019) Incivility in nursing education: A systematic literature review *Nurse Education in Practice* 39 pp45-



Griffin, M. and Clark, C.M., 2014. Revisiting Cognitive Rehearsal as an Intervention Against Incivility and Lateral Violence in Nursing: 10 Years Later. *The Journal of continuing education in nursing; J Contin Educ Nurs, [e-journal]* 45 (12), pp.535-542. 10.3928/00220124-20141122-02

### **Biography - Joanne Outteridge**

Joanne Outteridge RN (Child), ENB 415, BN (Hons), PgDip Healthcare Ethics, PgDip HE, MSc

Director of Interprofessional Learning, Faculty of Health, Education, Medicine and Social Care, Anglia Ruskin University, UK

Joanne began her nursing career as a children's nurse in 1994 at the Evelina Children's Hospital, London, working in paediatric cardiology and then paediatric intensive care. She then moved to teaching children's pre-registration and respiratory nursing at City University, London, becoming a lecturer practitioner on the children's medical wards at the Royal London Hospital. She then moved to Homerton School of Health Studies, now Anglia Ruskin University as a child nurse lecturer for pre-registration nursing and CPD activities related to children's high dependency care for children's nurses from NHS Trusts in Norfolk, Suffolk, Cambridgeshire and Essex. Now, as Director of Interprofessional Learning at ARU she is responsible for co-ordinating learning opportunities for students from the Faculty of Health, Education, Medicine and Social Care to learn together on topics of shared interest by managing curricular, co-curricular and extra-curricular events for the Faculty.

## **#213 Non-Specialized Nurses Roles in Diabetes Inpatient Care: An Interpretive Phenomenological Analysis**

### **Authors**

Dr. Monica Nikitara - University of Nicosia

Prof. Costas Constantinou - University of Nicosia

### **Aim of paper**

The aim of the study was to understand how non-specialized nurses and people with diabetes understand nurses' roles in diabetes inpatient care.

### **Abstract**

Diabetes mellitus is a major public health issue that places a significant burden on patients and healthcare systems and world leaders have targeted it for priority action. Numerous changes have been made in the treatment and care for diabetes through the years in order to respond to the increasing numbers of diabetes morbidity. However, non specialized nurses roles are not available universally and the extent of their authority is limited to a range of countries. Design: An interpretative phenomenology approach (IPA). Methods: A total of 24 non-specialized nurses working in medical, surgical and nephrology wards and 24 people with type 1 diabetes who use the services of the state hospitals in Cyprus. The data were collected in two phases: firstly, focus groups with nurses (n = 1) and people with diabetes (n = 2) were conducted and analysed and then individual semi-structured interviews with nurses (n = 18) and with people with diabetes (n = 12) were conducted. Findings: It is evident from the study findings that nurses experience several roles in diabetes inpatient care. Most of these roles have been identified by people with diabetes as well. These roles are summarized as follows: medication

administration, patient education, screening of complications, diet and psychological support. However, most of the participants raised concerns about nurses' ability to conduct such roles. Conclusion: Participants suggest that nurses experience several roles in caring for diabetes inpatients and this view was also shared by people with diabetes. However, it was obvious that these roles differ between specialities. The findings showed that even though participants recognized a number of roles in diabetes inpatient care, their description of how they perform these roles was vague, and they raised concerns about their readiness to take on some of these roles.

### 3 learning outcomes

1) To describe people with diabetes views about how they see nurses' roles and what they request to change.

2) ) To describe non-specialized nurses' views about how they see their roles

1) To understand that non-specialized nurses' roles in inpatient care for people with diabetes type 1 are not clearly defined.

### Recommended reading titles (please enter up to 3)

Comino EJ, Harris MF, Islam MD, Tran DT, Jalaludin B, Jorm L, Flack J, Haas M. Impact of diabetes on hospital admission and length of stay among a general population aged 45 year or more: a record linkage study. *BMC Health Serv Res*. 2015 Jan 22;15:12. doi: 10.1186/s12913-014-0666-2. PMID: 25609196; PMCID: PMC4310177.

Chew, B. H., A. Fernandez, and S. Shariff-Ghazali. 2018. Psychological interventions for behavioural adjustments in diabetes care — A value-based approach to disease control. *Psychology Research and Behavior Management* 11: 145–55. <https://doi.org/10.2147/PRBM.S117224>

Cuschieri, S., E. Pallari, and N. Terzic. 2021. Mapping the burden of diabetes in five small

countries in Europe and setting the agenda for health policy and strategic action. *Health Research Policy and Systems* 19: 43. <https://doi.org/10.1186/s12961-020-00665-y>

### Biography - Monica Nikitara

Monica Nikitara has been working as a lecturer in the nursing programme of the University of Nicosia since 2010. In 2022 has been appointed as the coordinator of the Nursing Program at the University of Nicosia. The main research interest is diabetes self-care management. This includes nurses' knowledge and preparation for educating diabetic patients on self-care management and other stakeholders' views on this issue. Additionally, she is interested in the care of patients with other chronic diseases related to diabetes and now she is exploring the possibilities for research activity nursing leadership.

Monica graduated from the Nursing School of Cyprus in 2003 and in 2007, she acquired a Bachelor of Sciences in Health studies from the University of Wolverhampton. In 2009 she completed her MSc in Health Care Policy and Management from the University of Birmingham. In 2012, she acquired a Post-Graduate Certificate in Learning and Teaching in Higher Education from the University of Hertfordshire. In 2019 she completed her PhD at the University of Nicosia.

### #218 Clinical Academic Careers; development of an employer framework to enable nurse and midwives to establish and sustain a clinical academic career

#### Authors

Prof. Debbie Porteous - Northumbria University

Ms. Vicky Petersen - Northumbria University

Prof. Annette Hand - Newcastle upon Tyne  
NHS Foundation trust

### **Aim of paper**

Health Education England have produced a clinical academic framework (NHS HEE 2018, Clinical Academic Careers Framework: A framework for optimising clinical academic careers across healthcare professions). This framework provides an inclusive and comprehensive approach for securing clinical academic careers across all healthcare professions. The aim of this presentation is to give insight into how in collaboration with The Newcastle upon Tyne Hospitals and Cumbria, Northumberland, Tyne and Wear NHS Foundation Trusts, Northumbria University has created an employment framework to make flagship clinical academic joint appointments. Clinical academic roles are rare and this is required to be addressed.

### **Abstract**

This collaborative work between the University and local NHS Trusts is enabling all three organisations to meet current and future challenges.

In collaboration with our partners, we have developed an employment framework, enabling culture and supporting structure to allow nurses, midwives and the allied healthcare professionals to have a clinical academic career which helps to achieve partnering organisations goals and ultimately benefits patients and clinical practice. The establishment of the research focused clinical academic framework will lead to improved patient care, leadership development and greater impact of research. Without a supportive infrastructure the sustainability and impact of clinical academics is likely to be low.

The development of clinical academic joint appointments will:

- Enhance and improve both the University's and Trusts' national and

international reputation for nursing education, research and practice.

- Leverage strength to build research, education and teaching offer, and remain at the forefront of clinical excellence, underpinned by innovation.
- Contribute to and strengthen nursing, midwifery and allied health professional (NMAHP) research and leadership across the North East and Cumbria and support our efforts to stimulate and maximise economic activity in the city and beyond, with the relevant impact on health and wellbeing.
- Create a sustainable alternative career pathway for academics and clinical staff in the areas of Nursing, Midwifery and Allied Health Professions.
- Contribute to the development of high-quality patient care and positively impacts on patient outcomes, as well as attracting and retaining high-calibre staff.
- Staff development: working across partnership organisations for mutual benefit to broaden and enhance staff experience and develop capacity and capability, as well as leadership in research and clinical practice.

### **3 learning outcomes**

1. To develop insight into the challenges of development of clinical academic careers
2. To demonstrate the development of an employer framework and how it has been implemented to support joint appointments
3. To provide insights from clinical academics, listen to their experiences and impact of joint appointments

### **Recommended reading titles (please enter up to 3)**

NHS HEE 2018, Clinical Academic Careers Framework: A framework for optimising clinical academic careers across healthcare professions

Pattison, N., Deaton, C., McCabe, C., Coates, V., Johnston, B., Nolan, F., Whiting, L. and Briggs, M., 2022. Florence Nightingale's legacy for clinical academics: A framework analysis of a clinical professorial network and a model for clinical academia. *Journal of clinical nursing*, 31(3-4), pp.353-361.

Avery, M., Westwood, G. and Richardson, A., 2022. Enablers and barriers to progressing a clinical academic career in nursing, midwifery and allied health professions: a cross-sectional survey. *Journal of Clinical Nursing*, 31(3-4), pp.406-416.

### **Biography - Debbie Porteous**

Debra has 38 years teaching experience with students and colleagues in a professional nursing/ healthcare practice setting (1986-1995) and in a Higher Education setting (1995 – present), at undergraduate, postgraduate and doctoral academic levels. Clinical practice has focused on children's nursing where Debra has led teams of nurses/doctors to be nationally recognised for the care given to children and families.

Debra has achieved a Professional Doctorate and is interested in the student experience within Higher Education relating to nurse education. She is an active researcher, holding a portfolio of supervision of doctorate students and mentoring others in their academic development. Debra is a significant contributor to knowledge in her discipline, advancing theory and practice, through research and presentations/engagement in regional and national bodies.

## **#219 Narrowing the gap: A Nursing Simulated Placement Week to Supplement Practice Placement Hours**

### **Authors**

Mr. Sebastian Meighan-Davies - Keele University

Mrs. Nicola Grocott - Keele University

Ms. Harley Smith - Keele University

Mr. Chris Scullion - Keele University

### **Aim of paper**

To reduce the burden on clinical placements by piloting a simulated practice placement to year three undergraduate nursing students at Keele University'.

### **Abstract**

#### **Background**

The recruitment and retention of nurses is an important issue facing healthcare. Despite HEI's increasing student nurse numbers, placement areas struggle to accommodate this. Staff have limited opportunity to educate, which may compromise standards of student nurse supervision and assessment. Consequently, a simulated placement week to supplement practice was developed.

#### **Methodology**

The simulated placement was developed with practice partners using an innovative range of pedagogical approaches e.g. "Navigate the Nurse", medium-fidelity simulation, video-aided debrief, and podcasts.

Learning experiences were mapped against the university curriculum and NMC Future Nurse proficiencies, ensuring alignment to learning outcomes and professional standards.

With NMC and HEE approval, we piloted our one-week simulated practice placement to third-year BSc pre-registration nursing students. Students undertook a series of medium-fidelity scenarios of situations commonly encountered by all fields, to augment and enhance practice learning during a period when clinical placements were at capacity.

We used a pre-post-test (questionnaire) design to survey students at scheduled intervals, with the intention of evaluating and embedding simulation within the program.

### Results /Conclusions

N=163 students undertook the simulation. Results suggested paradigm shifts from negative to positive preconceptions about the value of simulated practice; students' self-reported confidence in leadership skills and challenging poor practice increased by 51% and 40% respectively; suggesting the simulated placement may have provided parity of opportunity for all to practice knowledge, skills, and behaviours prior to qualifying.

### Practice implications

This approach provides students opportunity to engage with practice situations in a structured, controlled, and safe environment. Not only can this approach relieve the burden upon placements, it has the potential to improve confidence in challenging poor practice and leadership skills in preparation for the transition to practice.

### 3 learning outcomes

Learning Outcomes:

- 1.) Increase student confidence in challenging poor practice.
- 2.) To develop positive attitudes towards the learning opportunities created within simulated environments.

3.) Apply and analyse leadership skills in preparation for transition to professional practice.

### Recommended reading titles (please enter up to 3)

Bryant, K. *et al.* (2020) "Innovations in simulation: Nursing leaders' exchange of best practices," *Clinical Simulation in Nursing*, 41. Available at: <https://doi.org/10.1016/j.ecns.2019.09.002>.

*Current recovery programme standards - Nursing and Midwifery council* (2022). Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/education-standards/current-recovery-programme-standards.pdf> (Accessed: October 21, 2022).

*Royal College of Nursing position on the use of simulation-based learning in pre and post registration education* (2022) *The Royal College of Nursing*. Available at: <https://www.rcn.org.uk/about-us/our-influencing-work/position-statements/rcn-position-on-use-of-simulation-based-learning-in-pre-and-post-registration-education> (Accessed: October 21, 2022).

### Biography - Sebastian Meighan-Davies

Sebastian Meighan-Davies, Nicola Grocott, Harley Smith and Chris Scullion have recently transitioned from clinical practice within the NHS into Higher education at Keele University. The authors have a plethora of nursing experience comprising of intensive care, healthcare education, health promotion, research and service transformation and innovation. Alongside this clinical pedigree, the team possess an unrivalled passion for simulation in education. The team have recently completed a successful Simulated Placement Pilot on behalf of Health Education England and Keele University. The teams innovative approach to simulation has been extremely well evaluated by student



nurses and the team are excited to share our innovations with you.

## **#221 The Nuffield Health Preceptorship Programme: Understanding the learning experience through a multicultural lens.**

### **Authors**

Ms. Rachel Berridge - Nuffield Health

Mr. Chris Davis - Nuffield Health

### **Aim of paper**

The Nuffield Health Preceptorship Programme (NHPP) was originally designed to support UK-based newly qualified nurses joining the charity. Newly registered nurses (i.e. those who are internationally recruited) are also enrolled onto Preceptorship as per NMC, Department of Health and HEE best-practice standards. With recent growth in international recruitment activity to support nursing workforce planning, preceptorship has naturally become more diverse, with a wider mix of cultures existing within cohorts. Due to this significant increase in cultural programme diversity, the aim of this qualitative programme evaluation was to explore and better understand the learning experience of nurses on the NHPP.

### **Abstract**

#### **Purpose**

This programme evaluation aimed to explore the learning experience of Preceptees from various cultures and try to understand if or how learning alongside peers from different cultures influences their educational experience.

#### **Design**

A qualitative approach using 'new' phenomenological investigation

(interpretivist) took place. Data collection involved three 1:1, semi-structured interviews with past and present Preceptees. Purposive and convenience sampling was used to identify a diverse heterogeneous group of Preceptees, representative of newly qualified and newly registered nurses from different cultural backgrounds. Nurses were asked to share their experience of learning alongside peers from different cultures, and if this influenced, changed or transformed their learning experience. Data analysis involved thematic analysis and interpretation from the programme evaluation lead (a nurse with experience of preceptorship and working in a multicultural nursing environment).

### **Outcomes**

3 main themes emerged; multicultural Preceptorship is essential for development, increasing confidence and improving inclusive patient care.

Nurses recruited from overseas valued the multicultural aspect of NHPP as it provided pastoral care and supported their transition into living and working within the UK. This sense of belonging allowed them to feel at ease and focus on learning in a safe environment. Nurses also recognised applicability to clinical practice, as nursing teams comprise a diverse variety of cultures and backgrounds. Learning in a multicultural group mirrors the reality of clinical practice.

Multicultural learning improved confidence with nurses from cultures with less autonomy "seeing the [UK-based] nurses in the group being more communicative, and them speaking up, gives me more confidence and to speak up".

Finally, Preceptees feel NHPP is essential for development. By experiencing opinions from different cultures, they could challenge biases and think more inclusively, positively impacting their interactions with patients and colleagues from a variety of cultures.



## Conclusion

This Programme evaluation suggests multicultural learning enhances the learning experience.

## 3 learning outcomes

1. Examine the experience of learning alongside peers from different cultures
2. Outline how learning alongside different cultures influences the learning experience
3. Illustrate the impact of a multicultural nursing environment on patient care.

## Recommended reading titles (please enter up to 3)

Mee, C. 2021. Insights from Dr. Kenya Beard on health inequalities and multicultural nursing education. Teaching and learning in nursing. **16**(3), pp.A1-A2.

## Biography - Rachel Berridge

Rachel Berridge is a learning and development (L&D) trainer and Registered Nurse working within the clinical education branch of the professional education team at Nuffield Health. Since qualifying from the University of Leeds in 2017, she worked within Nuffield as a Registered Nurse. She went on to become a Preceptor for newly qualified Nurses, also a practice supervisor and assessor for student nurses. She developed a passion for teaching and went on to pursue her career in clinical education.

Rachel joined the L&D team on the International Recruitment project, supporting with NMC OSCE preparation. Supporting newly qualified and registered practitioners remained her passion, and shortly after, Rachel stepped into the clinical education branch of the team to support with reforming the Preceptorship Programme. A key element of the programme Rachel especially champions is staff wellbeing, and has launched wellbeing sessions as part of the Preceptorship Programme. Rachel is currently undertaking

her PGCert in Clinical Education at the University of Leeds.

## #223 The Nuffield Health Preceptorship Programme: Understanding the learning experience through a multidisciplinary lens.

## Authors

Ms. Rachel Berridge - Nuffield Health

Mr. Chris Davis - Nuffield Health

## Aim of paper

The Nuffield Health Preceptorship Programme (NHPP) was historically delivered to newly qualified nurses and operating department practitioners (ODPs) joining the charity. Following the introduction of the nursing associate role, newly qualified nursing associates began joining the charity in 2021 and were placed on the NHPP. In 2022, newly qualified radiographers and physiotherapists were enrolled onto the NHPP, as per Nursing and Midwifery Council and Health Education England standards. The aim of this qualitative programme evaluation was to understand the learning experiences of Preceptees on the reformed multidisciplinary NHPP.

## Abstract

### Purpose

Since the reformed multidisciplinary NHPP, it was important to explore the experience of Preceptees and be inquisitive to if and how this influences their learning.

### Design

A qualitative new phenomenological investigation (interpretivist) took place using four 1:1 semi-structured interviews with past and present Preceptees. Purposive and convenience sampling was used to identify a

diverse heterogeneous group of Preceptees from a variety of professions. Each was asked to share their experience of learning alongside peers from different professions, and if this influenced, changed or transformed their learning experience. The data was analysed, and key themes emerged.

### Outcomes

This process identified 2 main themes; multidisciplinary Preceptorship is a valuable learning experience and offers the opportunity to understand other professions.

The Preceptees expressed a multidisciplinary programme has been extremely valuable, stating “having that experience of other professions coming together and having their say on matters that nurses potentially didn’t consider, or seeing something from a different point of view has been really beneficial”. By learning how other professions operate, this impacted on their decision making. On reflection, they had situations with patients which triggered something they learnt from a colleague of a different profession during Preceptorship, enabling them to provide “better patient care”, have a better understanding of how the hospital dynamic works and improved their communication.

Preceptees identified equality is reinforced through NHPP. By learning about what each profession does, this reinforced their own practice, for example always checking patient identity. In addition, each profession is seen as equally important, there is no “dominant profession”. They recognised each profession has an important role to play within patient care and felt it was a very accepting environment.

### Conclusion

This Programme evaluation suggest multidisciplinary learning enhances the learning experience and encourages team inclusion within the healthcare workforce.

### 3 learning outcomes

1. Examine the experience of learning alongside peers from different professions
2. Outline how learning alongside different professions influences the learning experience
3. Illustrate the impact of a multi-disciplinary healthcare environment on patient care.

### Recommended reading titles (please enter up to 3)

Laverentz, D., Young, E. and Cramer, E. 2021. Effect of a Longitudinal Interprofessional Education Passport Program on Nursing Students' Attitudes Toward Interprofessional Practice. *Nursing education perspectives*. **42**(3), pp.168-170.

### Biography - Rachel Berridge

Rachel Berridge is a learning and development (L&D) trainer and Registered Nurse working within the clinical education branch of the professional education team at Nuffield Health. Since qualifying from the University of Leeds in 2017, she worked within Nuffield as a Registered Nurse. She went on to become a Preceptor for newly qualified Nurses, also a practice supervisor and assessor for student nurses. She developed a passion for teaching and went on to pursue her career in clinical education.

Rachel joined the L&D team on the International Recruitment project, supporting with NMC OSCE preparation. Supporting newly qualified and registered practitioners remained her passion, and shortly after, Rachel stepped into the clinical education branch of the team to support with reforming the Preceptorship Programme. A key element of the programme Rachel especially champions is staff wellbeing, and has launched wellbeing sessions as part of the Preceptorship Programme. Rachel is currently undertaking her PGCert in Clinical Education at the University of Leeds.

## #224 Time to transform: Digital Readiness in Education

### Authors

Mr. Matt McCamphill - Business Services Organisation

Mrs. Elaine Marie McNally - HSC Clinical Education Centre

Mx. Remi Teal - HSC Clinical Education Centre

### Aim of paper

The COVID pandemic has increased the need for online learning programmes to be developed. The Clinical Education Centre (CEC) Northern Ireland was tasked with designing and developing an e-learning programme to deliver the theoretical component of Paediatric Basic Life Support. Designing E-learning appears simple but requires significant transformation in mindset and a collective approach. The concepts and skills that have been developed, have been transferable and have positively impacted upon the design and delivery of other educational programmes across the CEC. This knowledge can also be disseminated across nurse educators throughout the UK.

### Abstract

Workforce capacity and capability remain an important priority for healthcare. The need to provide high quality education and training remains critical. Adapting educational delivery to meet the ever changing needs of a diverse workforce can be challenging. Nurse educators may traditionally not have been involved or experienced in the design or production of E-learning products. The strategic aim and long-term development of nurse education is to incorporate Technology Enhanced Learning (TEL) and simulation-based education.

E-learning is one platform that can provide flexibility, quality and accessibility for learners if designed effectively. To create a successful E-learning programme, the team had to anticipate the accessibility needs of the learner. To support this process, we utilised the Web Content Access Guidelines (WCAG 2008) to create an inclusive programme whilst considering the needs of a diverse workforce.

Some of the challenges encountered during the design process, were that E-learning takes five times longer to develop compared to traditional face to face programmes (Chapman 2010). Finding the time to innovate, design and develop an e-learning package which was engaging and inclusive was very demanding (HEA 2011). The key was to ensure that the E-learning package was learner centric and incorporated teaching and learning activities that are participatory, immersive, realistic and challenging (HEA 2011). We established that our IT equipment and applications required upgrading to support creation of this e-learning package.

There were multiple positive outcomes identified following completion the E-learning programme. This vastly increased nurse educator confidence and competence in using new technology. The nurse educators have developed transferable skills which have positively impacted upon the design and delivery of a wide range of educational programmes across the CEC. The team have also created a CEC competency process and peer support to aid educators transitioning to delivery of future e-learning programmes.

### 3 learning outcomes

Increase nurse educator confidence and competence in using new technology.

Develop transferable skills that can positively impact upon the design and delivery of programmes.

Formulate a competency process and peer support to aid educators transitioning to delivery of e-learning programmes.

### **Recommended reading titles (please enter up to 3)**

Higher Education Academy. (2011) The United Kingdom Professional Standards Framework for teaching and supporting learning in higher education. York, HEA.

Chapman, B. (2010). How Long Does it Take to Create Learning? [Research Study]. Published by Chapman Alliance LLC.

World Wide Web Consortium (2008). Web Content Accessibility Guidelines (WCAG) 2.0. Available at: <https://www.w3.org/TR/2008/REC-WCAG20-20081211/> [Accessed 21 Oct. 2022].

### **Biography - Matt McCamphill**

Nurse educator at the CEC Northern Ireland. Dip/HE, BSC, PGCE HP.

Registered children's nurse.

14 years experience with a background of working in accident and emergency, general medical and surgical units, tropical nursing, community nursing and complex care. Currently working as a nurse education consultant with the Clinical Education Centre (CEC) Northern Ireland.

I am passionate about education, keen to implement a digital approach, including Technology Enhanced Learning and Simulation-Based Education to positively effect the learning experience for participants in post graduate education. Overall I am supporting the organisation regarding this transformative shift striving for innovation and change.

## **#231 Evaluating an online resource supporting resilience of first year nursing and midwifery students**

### **Authors**

Dr. Ciara Close - School of Nursing and Midwifery, Queen's University Belfast

Mrs. Clare Hughes - School of Nursing and Midwifery, Queen's University Belfast

Prof. Christine Brown Wilson - School of Nursing and Midwifery, Queen's University Belfast

Dr. Gary Mitchell - School of Nursing and Midwifery, Queen's University Belfast

Mrs. Deirdre O'Neill - School of Nursing and Midwifery, Queen's University Belfast

Dr. Anita Mallon - School of Nursing and Midwifery, Queen's University Belfast

Dr. Patrick Stark - School of Nursing and Midwifery, Queen's University Belfast

### **Aim of paper**

This study evaluates an online resource with first year undergraduate Nursing and Midwifery students that develops their capacity to recover and adapt from adverse situations whilst promoting their well-being.

### **Abstract**

#### **Background**

Coping with the challenges of a busy workplace environment has become increasingly recognised as a source of stress for nursing and midwifery students. Research suggests that students struggle to apply theory to clinical practice for example in their first exposure to death and dying which can often lead to students re-evaluating their own values. There is an abundance of research supporting high levels of mental ill health in third level education, and there is a growing need to find additional support

mechanisms to those affected. Nursing and Midwifery students seem particularly affected with the combined stress of their academic work and exposure to challenging situations in clinical practice.

## Methods

An online resilience resource (The Well-Being Shelf) was co-designed by student nurses and midwives and academics.

The evaluation of the resource is ongoing and is due completion in March 2023. It will undertake an exploratory sequential mixed methods approach, conducted in two phases.

Phase 1: A quantitative study using validated scales the Connor Davison Resilience Scale and the Warwick Edinburgh Well-Being scale is being completed at three time points to assess if the use of the resource influences student resilience. Additional open ended questions were included on student views of the resource.

Phase 2: Online focus groups are being completed to explore the experience of using the resource from first year nursing and midwifery students perspectives.

## Results

To date, over 200 1st year nursing and midwifery students participated in the evaluation and early data suggests that students found the resource helpful with feedback such as “The Well-Being Shelf is very beneficial for students and gives insight on how to get help if needed, “and “I found the wellbeing shelf well laid out and easy to navigate. There are some helpful tips,”

## 3 learning outcomes

The paper will cover the following learning outcomes

- increase knowledge on the importance of resilience and mental well-being of student nurses and midwives

- provide data on an online e-resource for increasing student nurses and midwives resilience and mental well-being

- provide insight into student nurses and midwives experience of using an e-resource to improve resilience and mental well-being

## Recommended reading titles (please enter up to 3)

Oates J, Topping A, Arias T, Charles P, Hunter C, Watts K. The mental health and wellbeing of midwifery students: An integrative review. *Midwifery*. 2019 May;72:80-89. doi: 10.1016/j.midw.2019.02.007. Epub 2019 Feb 14. PMID: 30826662.

Eaves JL, Payne N. Resilience, stress and burnout in student midwives. *Nurse Educ Today*. 2019 Aug;79:188-193. doi: 10.1016/j.nedt.2019.05.012. Epub 2019 May 14. PMID: 31153089.

## Biography - Ciara Close

Ciara is a midwifery lecturer at Queen's University, Belfast part of her role is Academic Lead for Practice with a responsibility to co-ordinate student midwifery placements and enhance student experience in clinical practice. Ciara is a practising midwife, and works part-time as a midwife in one of the local Health Trusts in Northern Ireland. She has a vested interest in health and well-being with 4 years experience working in health improvement in the NHS and a Masters in Health Promotion and Population Health.

## **#233 Innovation in the undergraduate nursing curriculum: Introduction of LGBTQ+ awareness and application to inclusive nursing practice**

### **Authors**

Dr. Luke Simonds - Worcestershire Acute Hospitals NHS Trust

Mrs. Pegeen Fisher - University of Worcester

### **Aim of paper**

To ensure tomorrow's nurses are culturally competent and have an awareness of the health needs of the LGBTQ+ community

### **Abstract**

The Stonewall 'Unhealthy Attitudes' survey found that 57% of health care workers didn't consider sexual orientation to be relevant to a patient's health needs whilst 10% were not confident in their ability to understand and meet the specific needs of LGBT+ patients. The consequences are seen in the LGBT in Britain Health Report which found that 1 in 7 LGBT patients avoided healthcare for fear of discrimination. Consequently, the LGBT Action plan from the Government Equality Office recommended an improvement in healthcare workers awareness of LGBT issues.

An in person 'Inclusive Nursing' morning for final year nursing students was created, which focused on strengthening the knowledge and skills required to ensure practice is inclusive, accessible and meets the diverse needs of those who identify as LGBTQ+. Faculty included university staff, volunteers from a local LGBTQ+ support group and an NHS LGBTQ+ staff network lead. Sessions included terminology, historical context, barriers to healthcare for LGBTQ+ people, how nurses can address these health inequalities and a 'Question

and Answer' session with a panel made up of people with lived experiences.

Pre- and post-confidence and awareness levels of students were taken at the beginning and end of the session. Data showed that students were more confident using appropriate terminology to describe sexual orientation and gender identity. Awareness of barriers to healthcare and the specific health needs of LGBTQ+ people had also increased, whilst students now felt more confident in communicating with LGBTQ+ patients.

This session shows the clear benefits of delivering inclusive nursing training, which the authors believe should be a mandatory inclusion in the curriculum to ensure the development of culturally competent nurses.

### **3 learning outcomes**

- 1) To increase confidence in using appropriate terminology to describe sexual orientation and gender identity
- 2) To increase awareness of barriers to healthcare and the specific health needs of LGBTQ+ people
- 3) To increase confidence in communication with LGBTQ+ patients

### **Recommended reading titles (please enter up to 3)**

Unhealthy Attitudes: The treatment of LGBT people within health and social care services by Stonewall

LGBT in Britain: Health Report by Stonewall

LGBT Action Plan 2018: Improving the lives of Lesbian, Gay, Bisexual and Transgender people - Government Equalities Office

### **Biography - Pegeen Fisher**

Pegeen is a senior lecturer in adult nursing at the University of Worcester and is passionate about inclusive nursing.



## #235 Innovations in the Delivery of Postgraduate Nurse Education for Workforce Development Through a Portfolio of Bespoke National Accelerated Learning Programmes.

### Authors

Mr. Darren Middleton - NHS Scotland Academy

Dr. Lauren-Grace Kirtley - NHS Scotland Academy

Dr. Clair Graham - NHS Scotland Academy

Mr. Ben Harvey - NHS Scotland Academy

### Aim of paper

#### Aim:

To discuss a portfolio of innovative nurse educational programmes aimed at addressing essential workforce development and nurse professional development, utilizing an accelerated delivery pattern.

### Abstract

#### Description:

The NHS Scotland Recovery Plan highlights key actions to address the ongoing healthcare needs of people across Scotland. In response, the NHS Scotland Academy (NHSSA) was established in partnership with NHS Education for Scotland and NHS Golden Jubilee with the aim of designing and delivering bespoke accelerated training programmes for the nursing workforce, addressing current and projected gaps in capability and capacity.

In line with a "Once for Scotland" approach, innovative models of accelerated nurse professional development are being applied to the delivery and outcome of these aims. These utilise andragogical principles, recognising the specific needs of adult professional learners.

### Methodology:

A suite of bespoke programmes was designed by the NHS Scotland Academy to focus on specific areas for workforce development:

- *Accelerated Anaesthetic Assistant*
- *Foundations of Perioperative Practice*
- *Surgical First Assistant*

Originally developed to support National Treatment Centres, programmes have been extended to all eligible nursing staff throughout Scotland.

Curricular are designed to enable accelerated delivery, significant reduction in training time and enhance overall workforce skill level and resilience.

Innovations include:

- Accelerated delivery without compromising educational or competency outcomes.
- Utilisation of andragogical principles recognising unique needs of adult learners, prior knowledge and constructivist use of transferable skills and experience.
- Curricular focused on essential knowledge and competencies, enhanced mentor support and educational surveillance.
- Hybrid, online, asynchronous, and workshop-based delivery with emphasis on simulation/skills training, and case-based learning.
- Delivery patterns enhancing early integration into the workforce by prioritising competencies essential for service provision.
- Reduced completion-time through focus on high-risk, low-exposure clinical experience.
- Development in partnership with stakeholders from NHS boards across Scotland.

- Mapped to national competency frameworks promoting opportunities for widening access, interprofessional learning and collaboration.

### 3 learning outcomes

#### Learning Outcomes:

- Accelerated programmes are an effective model for nurse professional and workforce development.
- Competency completion time can be reduced without compromising educational or clinical outcomes.
- Learner-centred adult learning theory can be applied to allow focus on clinical and practical skills acquisition.

#### Recommended reading titles (please enter up to 3)

- Scottish Government (2021), *NHS Scotland, NHS Recovery Plan 2021-2026*, Available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/strategy-plan/2021/08/nhs-recovery-plan/documents/nhs-recovery-plan-2021-2026/nhs-recovery-plan-2021-2026/govscot%3Adocument/nhs-recovery-plan-2021-2026.pdf> (Accessed on: 20/10/2022)
- Marques, J. (2012), The Dynamics of Accelerated Learning. *Business Education and Accreditation*. 4 (1) 101-112
- McLean, S. (2016), Case-based Learning and Its Application in Medical and Health-care Fields: A Review of Worldwide Literature. *Journal of Medical Education and Curricular Development* 3 39-49  
doi:10.4137/JMECD.S20377

#### Biography - Lauren-Grace Kirtley

##### Dr Lauren-Grace Kirtley Senior Educator NHS Scotland Academy

Lauren-Grace is a registered medical doctor who trained in anaesthetics before

becoming a medical educator and has a wealth of clinical and educational experience gained from a career in acute medical and theatre environments. Lauren-Grace moved into a full-time educational role as a Lecturer in higher education on a range of medical and associated healthcare courses.

Lauren-Grace has developed and delivered across a wide range of programmes in both medical and allied professional training at both undergraduate and postgraduate level including Undergraduate and Postgraduate Medical training, Operating Department Practice, Paramedic Science, Nursing, Midwifery, Physicians Associate and Advanced Nurse Practitioner training. Lauren-Grace has educational experience with a range of Higher Educational Institutions and her role immediately prior to joining the NHS Scotland Academy was as a Senior Lecturer in Medical Education.

Within the NHS Scotland Academy Lauren-Grace is a Senior Educator with specific focus on the Accelerated Anaesthetic Assistant programme providing accelerated training for the National Treatment Centres workforce.

**#236 "I think the rose-tinted glasses do just sort of slowly come off": a grounded theory study on the development of empathy towards people with dementia in healthcare student education.**

#### Authors

Ms. Yvonne Feeney - Brighton and Sussex Medical School

Dr. Stephanie Daley - Brighton and Sussex Medical School

Dr. Nicolas Farina - Brighton and Sussex Medical School

Prof. Sube Banerjee - University of Plymouth

## Aim of paper

This study aimed to understand the factors that impacted the development of empathy in undergraduate healthcare students toward people with dementia during their educational years.

## Abstract

**Background:** Dementia prevalence is rising; by 2050, over a million people in the UK will be affected. One in four hospital beds are occupied by a person with dementia, and it is inevitable that healthcare professionals will work with people with dementia across a variety of settings. To deliver effective person-centered care, future healthcare professionals need to have the capacity and skills to practice with empathy. Especially synonymous with nursing professions, empathy is a core characteristic expected from all healthcare workers. Greater empathy can lead to better patient relationships, reduced burnout, and enhanced recognition of personhood. However, people with dementia frequently report episodes of care that lack empathetic approaches. To inform the design and delivery of educational resources, there is a need to understand the major factors that impact the development of empathy towards people with dementia during undergraduate education.

**Methods:** A constructivist, longitudinal grounded theory study (Charmaz, 2014) was conducted. Data were collected in 2019 using semi-structured interviews with undergraduate nursing, physiotherapy, and medical students (n=30). A second interview was completed with students (n=26) eighteen months later. Emergent findings were informed by simultaneous data collection and analysis using constant comparison techniques, and the use of theoretical memo writing.

**Results:** Preliminary findings suggested that the development of empathy towards people with dementia was impacted by social and

emotional exposure during undergraduate years. Data centered on four sub-categories. While there were **barriers connecting and understanding** people with dementia, students experienced conflicting expectations about empathy more widely. Positive and negative **cultural experiences during placement** led to **emotional changes** and a **shift in ideals**.

**Conclusion:** Environments that promote empathetic practice during clinical placement could impact the development of empathy in undergraduate healthcare education more widely. This study highlights a need for educational design that focuses on both the patient and the environment.

## 3 learning outcomes

An understanding of the concept of empathy in clinical practice

An understanding of the factors that impact empathy towards people with dementia

An understanding of longitudinal grounded theory methods

## Recommended reading titles (please enter up to 3)

Charmaz, K., 2014. *Constructing grounded theory*. sage.

Digby, Robin, Allison Williams, and Susan Lee. "Nurse empathy and the care of people with dementia." *Australian Journal of Advanced Nursing, The* 34, no. 1 (2016): 52-59.

Hojat, M., 2007. *Empathy in patient care: antecedents, development, measurement, and outcomes* (Vol. 77). New York: springer.

## Biography - Yvonne Feeney

Yvonne qualified as an Adult Nurse from University College Cork in Ireland in 2004. Starting out in the acute care setting, Yvonne gained an interest in working with older adults and people with dementia and

managed care services for older adults in Scotland until 2015. In 2019 she completed her MSc in Dementia Studies at Brighton and Sussex Medical School. Yvonne is currently based at the Centre for Dementia Studies at Brighton and Sussex Medical School and is working to complete a Ph.D. that aims to understand the development of empathy towards people with dementia in healthcare education. Yvonne also works as a project manager for a longitudinal dementia educational programme (Time for Dementia). Her research interests include improving the quality of life for people with dementia, and the role education plays in improving understanding and attitudes toward dementia.

## **#240 An Accelerated Learning Programme for Postgraduate Nurse Workforce Development in Perioperative Practice.**

### **Authors**

Mr. Andy Ross - NHS Scotland Academy

Ms. Danielle McIsaac - NHS Scotland Academy

Mr. Ben Harvey - NHS Scotland Academy

Mr. Darren Middleton - NHS Scotland Academy

### **Aim of paper**

To describe and discuss the development of an innovative accelerated nurse training programme to facilitate workforce and professional development in the peri-operative environment.

### **Abstract**

#### **Description:**

The NHS Scotland Academy (NHSSA) has developed and delivered an innovative *Foundations of Peri-operative Practice* programme to facilitate professional development of nurses in the pre, peri and

post-operative environment. In line with the NHS Scotland Recovery Plan and supporting the National Treatment Centres' workstream, it aims to advance individual knowledge and skills through accelerated workforce development.

#### **Methodology:**

An accelerated programme developed with robust NHSSA governance processes to ensure quality. Delivered in 3 x blocks of 3-day intensive skills workshops utilising focused student-led learning via the Turas digital platform and online, case-based sessions combining the application of clinically acquired and theoretical knowledge.

#### **Key innovations:**

- Accelerated delivery without compromising educational or competency outcomes.
- Utilises andragogical principles to capitalise on the knowledge/skills of graduate nurses as adult learners to compress course content.
- Focus on experiential, constructivist learning through intensive practical skills sessions and facilitated case-based/ problem-based applied learning days.
- Bespoke national competency framework developed with extensive stakeholder involvement.
- Opportunities for widening access, interprofessional learning and collaboration,
- Enhancement of postgraduate nurse training and integration into the workforce.
- Focused educational content using asynchronous delivery and on-line learning.
- Educators monitor learner progress and control progression through digital sign-off, tasks completion and workshop attendance

### Qualitative feedback:

#### Learners:

- Safe and nurturing learning community supporting transition into new professional role in reduced timeframe
- Increased knowledge/skills acquisition accelerating nurse professional development
- Increased learner confidence

#### NHS Boards:

- Faster competency completion
- Improved peer-peer interaction
- Establishment of safe learning environment not always achievable in clinical settings
- Enhanced technical-skills acquisition

#### Outcomes:

- Reduced completion in 30 weeks compared with previous completion time of > 1 year (52% reduction)
- Clear pathway for achievement and career progression.
- Early workforce integration and increased learner confidence.

### 3 learning outcomes

#### Learning outcomes:

- Training completion time can be reduced by 52% without compromising educational or clinical outcomes.
- Both learners and employers report improved personal and professional outcomes through use of an accelerated learning model.
- Use of adult learning principles allow focus on intensive practical skills acquisition and early workforce integration.

### Recommended reading titles (please enter up to 3)

- Hara, K., Kuroki, T., Fukuda, M., Onita, T., & Sawai, T. (2022). Effects of Simulation-based Scrub Nurse Education for Novice Nurses in the Operating Room: A Longitudinal Study. *Clinical Simulation in Nursing*, 62, 12-19
- Marques, J. (2012), The Dynamics of Accelerated Learning. *Business Education and Accreditation*. 4 (1) 101-112
- Scottish Government (2021), *NHS Scotland, NHS Recovery Plan 2021-2026*, Available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/strategy-plan/2021/08/nhs-recovery-plan/documents/nhs-recovery-plan-2021-2026/nhs-recovery-plan-2021-2026/govscot%3Adocument/nhs-recovery-plan-2021-2026.pdf> (Accessed on: 20/10/2022)

### Biography - Andy Ross

#### Andy Ross, Educator, NHS Scotland Academy

I am an Operating Department Practitioner (ODP) undertaking the role as Clinical Educator within NHS Scotland Academy. My background is predominantly anaesthetics based but have undertaken the role as a scrub practitioner throughout my career. I have keen interest in education and emergency anaesthetics and surgery.

I have previously worked in both roles as a scrub practitioner and anaesthetic assistant whilst I was team lead within the emergency theatres at Glasgow Royal Infirmary. This role allowed me to showcase my leadership skills and be involved in high pressure and complex emergency surgery.

I also undertook the role as an Anaesthetic Assistant team lead within the Institute of Neurological Science and Maxillofacial Surgery at the Queen Elizabeth University Hospital. Within this role I was involved in complex airway management and caring for critically ill patients.

I have also gained experience as an anaesthetic assistant working within obstetrics, general surgery, vascular, urology, elective orthopaedics, and orthopaedic trauma.

## **#241 An Accelerated Learning Programme for Postgraduate Nurse Workforce Development in Anaesthetic Assistant Training.**

### **Authors**

Dr. Lauren-Grace Kirtley - NHS Scotland Academy

Mr. Darren Middleton - NHS Scotland Academy

Mr. Tim Johnson - NHS Scotland Academy

Mr. Andy Ross - NHS Scotland Academy

### **Aim of paper**

To describe and discuss the development of an innovative accelerated nurse training programme to facilitate workforce and professional development for anaesthetic assistants.

### **Abstract**

#### **Description:**

The NHS Scotland Academy (NHSSA) has developed and delivered an innovative *Accelerated Anaesthetic Assistant* programme to facilitate the professional development of graduate nurses in the peri-operative environment. In line with the NHS Scotland Recovery Plan and supporting the National Treatment Centres' workstream, it aims to advance individual nurse knowledge and skills through accelerated workforce development and competency completion.

#### **Methodology:**

The curriculum is designed for accelerated delivery and enhancement of workforce skill and resilience through 8 x 1-day workshops

supported by student-led learning via the Turas digital platform. It is based on the NHS Education for Scotland (NES) Core Competency Framework for Anaesthetic Assistants; with a reduction in completion time from 12-18 months to 26 weeks. This is achieved through simulated experience of 'high-risk, low-exposure' clinical scenarios and a hybrid, remote and dispersed delivery model which enhances widening participation in the postgraduate professional development for nurses across Scotland.

#### **Key innovations:**

- Accelerated delivery without compromising educational or competency outcomes.
- Utilises andragogical principles to capitalise on the knowledge/skills of graduate nurses as adult learners
- Innovative use of simulation to provide experience of 'high-risk, low-exposure' clinical scenarios that are labour and time-intensive to achieve in practice.
- Utilises intensive 1-day workshops to consolidate clinically acquired, graduate nursing knowledge, skills and experience.
- Accelerates use of a pre-existing national competency framework with significant reduction in completion time.
- Delivery pattern enhances availability, widens participation and facilitates early integration into the workforce by prioritising competencies essential for service provision.
- Curriculum is focused on essential knowledge, enhanced mentor support and increased educational surveillance.
- Offers opportunities for widening access, interprofessional learning and collaboration
- Enhances postgraduate nurse training and integration into the workforce.



## Outcomes:

- Significantly reduced completion from 12-18 months to 26 weeks
- Clear pathway for achievement and career progression.
- Early workforce integration

## 3 learning outcomes

### Learning outcomes:

- Training completion time can be reduced without compromising educational or clinical outcomes.
- Accelerated model allows faster competency completion by focusing on simulated experience of high-risk, low-exposure clinical scenarios.
- Use of adult learning principles allow focus on intensive practical skills acquisition and early workforce integration.

### Recommended reading titles (please enter up to 3)

- Scottish Government (2021), *NHS Scotland, NHS Recovery Plan 2021-2026*, Available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/strategy-plan/2021/08/nhs-recovery-plan/documents/nhs-recovery-plan-2021-2026/nhs-recovery-plan-2021-2026/govscot%3Adocument/nhs-recovery-plan-2021-2026.pdf> (Accessed on: 20/10/2022)
- Green, M., Tariq, R., & Green, P. (2016). Improving Patient Safety through Simulation Training in Anesthesiology: Where Are We?. *Anesthesiology research and practice*. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4753320/pdf/ARP2016-4237523.pdf> (Accessed on: 22/10/2022)
- Ayaz, O., Faisal I., (2021) Healthcare Simulation: A key to the future of Medical Education- A Review. *Advances in Medical Education and Practice* 13

301-308 Available at:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8994530/pdf/amep-13-301.pdf>  
(Accessed on 22/10/2022)

## Biography - Lauren-Grace Kirtley

### Dr Lauren-Grace Kirtley Senior Educator NHS Scotland Academy

Lauren-Grace is a registered medical doctor who trained in anaesthetics before becoming a medical educator and has a wealth of clinical and educational experience gained from a career in acute medical and theatre environments. Lauren-Grace moved into a full-time educational role as a Lecturer in higher education on a range of medical and associated healthcare courses.

Lauren-Grace has developed and delivered across a wide range of programmes in both medical and allied professional training at both undergraduate and postgraduate level including Undergraduate and Postgraduate Medical training, Operating Department Practice, Paramedic Science, Nursing, Midwifery, Physicians Associate and Advanced Nurse Practitioner training. Lauren-Grace has educational experience with a range of Higher Educational Institutions and her role immediately prior to joining the NHS Scotland Academy was as a Senior Lecturer in Medical Education.

Within the NHS Scotland Academy Lauren-Grace is a Senior Educator with specific focus on the Accelerated Anaesthetic Assistant programme providing accelerated training for the National Treatment Centres workforce.

## **#242 Innovative use of Turas Digital Platform to Facilitate Delivery of Accelerated Postgraduate Nurse Training Programmes by NHS Scotland Academy (NHSSA).**

### **Authors**

Mr. Ben Harvey - NHS Scotland Academy

Mr. Tim Johnson - NHS Scotland Academy

Dr. Clair Graham - NHS Scotland Academy

Dr. Lauren-Grace Kirtley - NHS Scotland Academy

### **Aim of paper**

To discuss the innovative use of a digital platform in the delivery and management of accelerated postgraduate nurse training programmes.

### **Abstract**

#### **Background:**

The NHS Scotland Academy (NHSSA) was established in partnership with NHS Education for Scotland and NHS Golden Jubilee with the aim of designing and delivering bespoke accelerated training programmes for the nursing workforce, addressing current and projected gaps in capability and capacity. In-line with the NHS Scotland Recovery Plan and supporting the National Treatment Centres' workstream, it aims to advance skill through accelerated professional development and competency completion.

#### **Description:**

Accelerated postgraduate learning differs from traditional academic models, utilising andragogical principles to capitalise on the experiential knowledge and skills of adult learners. This enables compression of didactic content and focuses on skills acquisition, consolidation and applied knowledge via intensive practical

workshops. Learner preparedness for face-to-face sessions is facilitated through on-line pre-reading, self-assessment, reflective practice, and post-workshop online activities.

#### **Methodology:**

Turas, NHS Scotland's single, unified digital platform is instrumental in the delivery, management, and evaluation of accelerated programmes via bespoke learner/course interfaces and learning modules.

#### **Key innovations:**

- Blended approach: online pre-learning and review tasks prepare learners for face-to-face workshops and help consolidate knowledge
- Use of 'learning programme' on Turas Learn, sets out a series of tasks that:
- Allow understanding of programme structure and progress
- Allow educators to monitor learner progress
- Allow NHSSA an oversight of progress via digital supervisor sign-off, task completion, attendance at face-to-face workshops
- Sign-off points prompted by work-based learning, improving communication between learners, supervisors and NHSSA
- Completion of reflective activities directly into online portfolio
- Light-touch online portfolio design minimises administrative burden and can be accessed by learners, supervisors, or educators at any time
- Simple and effective data capture allows monitoring of progress and engagement, collection of feedback and data analytics to ensure quality assurance, monitoring and governance.

#### **3 learning outcomes**

- Use of an online platform facilitates accelerated learning models by

enabling compression of didactic content.

- Blended application of digital platform allows capitalization on adult learning principles for learner preparation allowing focus on skills acquisition, consolidation, and applied knowledge via intensive practical workshops.
- Online portfolio design improves access for learners and educators and facilitates quality assurance and governance activities.

### Recommended reading titles (please enter up to 3)

- Scottish Government (2021), *NHS Scotland, NHS Recovery Plan 2021-2026*, Available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/strategy-plan/2021/08/nhs-recovery-plan/documents/nhs-recovery-plan-2021-2026/nhs-recovery-plan-2021-2026/govscot%3Adocument/nhs-recovery-plan-2021-2026.pdf> (Accessed on: 20/10/2022)
- Marques, J. (2012), The Dynamics of Accelerated Learning. *Business Education and Accreditation*. 4 (1) 101-112
- Loureiro, F.; Sousa, L.; Antunes, V. (2021) Use of Digital Educational Technologies among Nursing Students and Teachers: An Exploratory Study. *Journal of Personalized Medicine*. 11, 1010. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8541222/pdf/jpm-11-01010.pdf> (Accessed on 22/10/2022)

### Biography - Ben Harvey

Ben Harvey: Learning Resources Manager at NHS Scotland Academy

## #244 Integrated Community Services Placement

### Authors

Ms. Lisa Fewkes - University Hospitals of Leicester

Mrs. Julie Bowen - Leicestershire Partnership NHS Trust

### Aim of paper

To explore the benefits of an integrated community services placement opportunity for student nurses, requiring close collaborative partnerships across organisations and settings.

### Abstract

Since the introduction of Standards for Student Supervision and Assessment (NMC 2018), opportunities have developed to implement creative placement experiences, given the greater flexibility available for student supervision and assessment. Previous NMC standards required students to work alongside mentors for 40% of the time, often requiring students to remain in one placement. Whilst this had and continues to offer advantages, having opportunities for students to rotate and explore a range of environments, encountering different experts, offers a wealth of experiences they might not otherwise have.

A unique collaborative placement model has been developed between an acute hospital trust, social care and a community trust to develop an Integrated Community Services Placement (ICSP). This structured placement offers students opportunities to experience settings including community wards, vaccination centres, day surgery and care homes ; within one locality.

Students have unique opportunities to compare and contrast organisational policies and consider how collaboration and communication is key for effective patient

journeys across community services, guided by clinical experts in their field.

Students meet with Practice Assessors (PA) throughout and have reflective opportunities with facilitators. Reflective workshops encourage peer support, reducing feelings of isolation.

Students report feeling more confident when offering advice to patients and families following engagement with the ICSP practitioners. Some have reconsidered future career pathways and an overwhelming majority found the experience supported their knowledge and understanding of community services and interorganisational collaboration.

Practitioners contribute to timetable planning, ensuring a team approach. Comprehensive documentation is produced offering further guidance and information.

Whilst offering a creative placement opportunity, the ICSP has increased placement capacity, which is vital when scaling up numbers of people in learning (NHS Long Term Plan 2019).

There are plans to incorporate GP practices into the ICSP, which will expand the students' knowledge and understanding of locality based services further.

### **3 learning outcomes**

To demonstrate the benefits of an integrated community services placement for pre-registration student nurses.

To consider the logistical challenges of cross-organisational placements and how they can be effectively managed.

To recognise the value of a rotational placement across organisations, to the student, to practitioners and to the service user.

### **Recommended reading titles (please enter up to 3)**

Standards to support learning and assessment in practice (NMC 2008)

Standards for Student Supervision and Assessment (NMC 2018)

Long Term Plan (NHS 2019)

### **Biography - Lisa Fewkes**

I am a registered adult nurse, with over 22 years experience. My background is renal nursing, but have spent the past 8 years working in the Practice Learning Team. Much of that time was spend working as a Clinical Placement Facilitator; supporting student nurses and practice staff in the clinical setting.

I have been a Practice Learning Lead for 2 years now. I lead on supporting placement expansion across health and social care settings. I am passionate about students experiencing a whole range of placement opportunities through their training, to enable them to make informed choices about future career pathways.

I work closely with 2 local HEI's to identify appropriate placement opportunities for all student nurses and identify placement opportunities for trainee Nursing Associates and other external students requiring elective placements.

I am passionate about health and wellbeing of staff and students and am an active Health and Wellbeing Champion. I am also a Traumatic Risk Management Practitioner (TRiM), Mental Health first aider and Clinical Supervisor.

I have created and supported a range of learning initiatives for students including Interprofessional Education, coaching workshops and a third year management program.

I am currently undertaking a Postgraduate Certificate in Education.

## **#245 Evaluating the pedagogical impact of an immersive virtual reality and 3D mobile application called 'The Road to Birth' with healthcare students and teaching staff at a UK university: a mixed methods, longitudinal, cohort feasibility study.**

### **Authors**

Mrs. Yvonne Smyth - University of Surrey

Dr. Alison Callwood - University of Surrey

Dr. Jenny Harris - University of Surrey

Prof. Naomi Winstone - University of Surrey

Dr. Donovan Jones - University of Newcastle

### **Aim of paper**

The aim is to assess the feasibility and acceptability of a pregnancy progression and fetal growth immersive virtual reality (IVR) and 3D mobile learning application known as 'The Road to Birth' to healthcare students who provide care to women and people in pregnancy. It will gather evidence on the impact of the combined use of both the IVR and 3D mobile app compared with the 3D mobile app only as an educational aid, on knowledge retention, motivation and preparation for practice, and to inform the potential of a full cohort study.

### **Abstract**

During pregnancy, internal physiological and anatomical changes occur making it conceptually challenging for students to comprehend and visualise. IVR and 3D mobile applications can complement traditional learning approaches and have the potential to enhance the understanding of complex components in healthcare training. However, there are few studies that have assessed the integration, adoption, and usage of such technology within healthcare education (Fealy 2019).

To assist healthcare student learning, the University of Newcastle, Australia (UoN) has designed the 'Road to Birth' application both as a fully immersive VR program (via head mounted display) and a complementary 3D mobile version for use on phones and tablets. The application has been devised to provide students with a 3D visualisation of pregnancy anatomy, pregnancy progression and fetal growth. The UoN and the University of Surrey have collaborated to undertake a two-phase study of healthcare students to evaluate the platform's technical acceptance, feasibility as a complimentary learning tool and to understand how the technology can aid knowledge and understanding.

Phase 1 is a technical feasibility study to evaluate the acceptance and usability of the 3D mobile application with UoN and UoS healthcare students.

Phase 2 is a mixed method, feasibility study involving UoS healthcare students. It will gather evidence from two groups on the impact on learning, knowledge retention and preparation for practice of using the IVR and 3D mobile versions when provided together, compared with the use of the 3D mobile version only. This is to establish if tutor-led, scaffolded learning via classroom IVR can engage and motivate students, and if this can be built on by students undertaking self-directed learning using the 3D mobile app, compared to students that only use the 3D mobile version.

Healthcare teaching staff will also evaluate the app as a learning aid to complement existing teaching methods.

### **3 learning outcomes**

To understand the technical system usability and acceptability of the app.

To establish the benefits of the use of a VR application for use in the classroom with a complimentary 3D mobile program for students to use on their own devices.

The study will include pre/post measurement (through knowledge tests and online surveys), self-reflective diaries and focus groups.

### **Recommended reading titles (please enter up to 3)**

Fealy, S., Jones, D., Hutton, A., Graham, K., McNeill, L., Sweet, L., & Hazelton, M. (2019). The integration of immersive virtual reality in tertiary nursing and midwifery education: A scoping review. *Nurse Education Today*, 79(5), 14–19.

### **Biography - Yvonne Smyth**

I am a PhD candidate at the University of Surrey. I have also spent 10 years in the NHS as a registered midwife and a registered health visitor.

Professional qualifications: Registered Midwife (Current registration RM)

(I was a Health Visitor (SCPHN) from 2013 until Sept 2022)

Academic qualifications:

PhD Student July 2019-Date University of Surrey

MSc Public Health (SCPHN) 2014-2016  
University of Surrey

MA Strategic Marketing 2002-2004  
University of Greenwich

BSc (Hons) Midwifery 2010- 2013  
Bournemouth University

## **#246 The impact of interventions on undergraduate healthcare student empathy towards older adults and people with dementia; a systematic review and meta-analysis.**

### **Authors**

Ms. Yvonne Feeney - Brighton and Sussex Medical School

Dr. Stephanie Daley - Brighton and Sussex Medical School

Dr. Nicolas Farina - Brighton and Sussex Medical School

Prof. Sube Banerjee - University of Plymouth

### **Aim of paper**

A review was completed to identify what educational interventions were used to enhance empathy in healthcare students towards people with dementia and older adults, to determine the efficacy of interventions on empathy, and to assess how empathy change was measured.

### **Abstract**

#### **Background**

Empathy is a core characteristic expected from all healthcare professionals. Higher empathy is associated with reduced burnout, greater job satisfaction, and better patient outcomes. However, there are inequalities in care provided to older adults and people with dementia. Several reports have highlighted that, too often, care lacking in empathy is provided to older populations. The healthcare workforce needs to have the skills and attitudes to provide high-quality care that incorporates empathy. Therefore, appropriate education needs to be provided at undergraduate level to enhance empathy. To understand how empathy can be enhanced towards older adults and people with dementia, a systematic review and meta-analysis was completed.

#### **Methods**

A systematic literature search was completed in March 2021 using five electronic databases, grey literature, and snowball approaches. Studies were assessed by two independent reviewers using a pre-determined set of criteria. A narrative synthesis was completed, data was grouped and tabulated, and a random-



effects meta-analysis was completed on eligible studies.

## Results

Of 1,937 studies, 25 studies of moderate quality evaluated interventions that targeted empathy towards aging (n=20) and dementia (n=5). Three types of interventions were used: simulation, intergenerational contact, and mixed approaches, and most (84%) reported positive empathy change post-intervention. Empathy was measured most frequently using generic, self-administered instruments. Meta-analysis of studies (n=9) showed a small, but significant effect on empathy change; however, heterogeneity was high.

## Conclusion

The evidence suggests that interventions can enhance empathy in undergraduate healthcare students towards older adults. However, few studies reviewed empathy towards dementia and the impact of interventions, therefore further research is needed.

## 3 learning outcomes

An understanding of the importance empathy in clinical practice

An overview of interventions used to enhance empathy towards people with dementia and older adults

An understanding of the methods used to measure empathy in healthcare education

## Recommended reading titles (please enter up to 3)

1.Moudatsou M, Stavropoulou A, Philalithis A, Koukouli S. The role of empathy in health and social care professionals. InHealthcare 2020 Jan 30 (Vol. 8, No. 1, p. 26). MDPI.

2.Hojat M. Empathy in patient care: antecedents, development, measurement, and outcomes. New York: springer; 2007 Nov 12.

3.Cowdell F. The care of older people with dementia in acute hospitals. Int J Older People Nurs. 2010 Jun 5;5(2):83–92.

## Biography - Yvonne Feeney

Yvonne qualified as an Adult Nurse from University College Cork in Ireland in 2004. Starting out in the acute care setting, Yvonne gained an interest in working with older adults and people with dementia and managed care services for older adults in Scotland until 2015. In 2019 she completed her MSc in Dementia Studies at Brighton and Sussex Medical School. Yvonne is currently based at the Centre for Dementia Studies at Brighton and Sussex Medical School and is working to complete a Ph.D. that aims to understand the development of empathy towards people with dementia in healthcare education. Yvonne also works as a project manager for a longitudinal dementia educational programme (Time for Dementia). Her research interests include improving the quality of life for people with dementia, and the role education plays in improving understanding and attitudes toward dementia.

## #247 Working in collaboration to demystify Larvae therapy in Undergraduate nursing education

## Authors

Ms. Bethan Bridges - Cardiff University

Mrs. Hannah Arnold - Cardiff University

## Aim of paper

To change attitudes towards the use of larvae therapy through collaboration with experts in the field of larvae therapy and Biomonde UK.

## Abstract

## Background

Undergraduate nurses are expected to use an evidence-based approach to complex

wound care to promote healing and prevent risk of infection. Complex wounds often require management of devitalised tissue which can be performed through several different methods of debridement. Larvae therapy has been proven to be effective in not only the removal of necrotic tissue but Larvae enzymes have been found to be antimicrobial and promote the healing process. However, one of the main barriers to this treatment is patient and practitioner perception and lack of willingness to try this form therapy.

### Aims

To change attitudes towards the use of larvae therapy through collaboration with experts in the field of larvae therapy and Biomonde UK.

### Intervention

Undergraduate nursing students were delivered a session on all forms of debridement including Larvae therapy. Using education resources provided by Professor Yamni Nigam as well as a variety of case studies from Biomonde. Students were given the opportunity to handle live loose larvae and larvae supplied in their biobag. Education was provided to demystify the process and mechanism of debridement in Larvae therapy. Students were polled on their willingness to receive larvae therapy as well as promoting the use of Larvae therapy to patients who could benefit. At the beginning of the session 66% of students reported that they did not like the thought of Larvae therapy and would find this difficult to encourage their patients to accept. After the session 90% of the students reported they would feel confident to recommend this form of treatment.

### Conclusion

Through working in Partnership students have been offered the opportunity to increase their knowledge and change their

attitudes about Larvae therapy. By changing minds through nurse education, we can allow nurses to promote effective, low risk, natural wound management options with confidence.

### 3 learning outcomes

1. Understand the benefits of Larvae therapy and the mechanism of action
1. Recognise the importance of collaboration in providing nurse education that allows experts to pass on knowledge and skills.
1. Create an environment that create experts through experience allowing students to promote practices that they are educated in.

### Recommended reading titles (please enter up to 3)

Nigam, Y., Bexfield, A., Thomas, S. and Ratcliffe, N.A., 2006. Maggot therapy: the science and implication for CAM Part I – history and bacterial resistance. *Evidence-based complementary and Alternative Medicine*, 3(2), pp.223-227.

Nigam, Y., Bexfield, A., Thomas, S. and Ratcliffe, N.A., 2006. Maggot therapy: the science and implication for CAM part II – maggots combat infection. *Evidence-Based Complementary and Alternative Medicine*, 3(3), pp.303-308.

King, C., 2020. Changing attitudes toward maggot debridement therapy in wound treatment: a review and discussion. *Journal of Wound Care*, 29(Sup2c), pp.S28-S34.

### Biography - Bethan Bridges

Qualified in 2003 from Cardiff University and obtained 3 years' experience as a Trauma and Orthopaedics nurse. In 2006 became a community nurse and obtained Specialist Practitioner Qualification- District nursing including becoming a community practitioner nurse prescriber. In 2012 I took up a secondment as a Practice Facilitator covering mental health areas and

Community services for Cardiff and Vale as part of this, I obtained my PGCE Health and Social Care (USW). In 2014 I returned to Practice as a District nurse team leader, leading a team of 24 nurses providing chronic disease management, end of life care and complex wound care. In 2018 I completed my MSC Professional Practice. Since Coming to Cardiff university, I have developed and delivered the wound care programme to Undergraduate nurses championing pressure ulcer identification and Larvae therapy.

## **#252 Cracking Time Critical Medication in Hospital**

### **Authors**

Ms. Patsy Cotton - Northern Care Alliance, NHS

Ms. Clare Addison - Surrey and Sussex Healthcare Trust

### **Aim of paper**

Ambition for Change- Nurses are key.

Apply an understanding of the value of patient and service user partnerships to professional practice.

Title: Cracking Time Critical Medication in Hospital.

Users of Time Critical Medication form a significant proportion of our inpatient population.

### **Abstract**

Time critical medications are medicines where early or delayed administration by more than 30 minutes from the actual prescribed time may cause harm to the patient or compromise its therapeutic effect.

Many of the Medications used to manage the devastating effects of Parkinson's with its complexity of progressive motor and non motor symptoms are time critical.

78% of People with Parkinson's say their

health deteriorates if they don't get their medication on time. (Get It on Time -The case for improving medication management for Parkinson's 2019 page 9) It is therefore of huge concern that only 47% of People with Parkinson's say they receive their medication on time, every time when in hospital. (UK Parkinson's Audit 2019,page 53)

A group of health care professionals living with Parkinson's are using their personal experiences to influence focus on this important aspect of care. They are now driving change through education at all levels from board to the ward, with an aim to embed this agenda into healthcare policy, education and clinical practice for lasting effect.

Delayed or Missed doses cause harm and impact significantly on a person's ability to move, speak, swallow and function cognitively. In turn these results often in an increased length of stay. In 2019 it was reported by Parkinson's UK that, in England alone, this amounted to 28,500 extra bed days at a cost of £10 million.

Upskilling nurses, giving them the tools and knowledge to deliver this essential component of care, will support their ambition and capability to drive change and to get it right for their patients.

For Time critical medication think **SPACED**

**Sugar**-Diabetic medications

**Parkinson's**

**Antibiotics** (especially 1st dose)

**Corticosteroids**

**Epilepsy**

**Direct Oral Anti-coagulants** (DOAC's)

### **3 learning outcomes**

1)The value of the expert patient in supporting nursing ambition and capability for the delivery of excellence in care.

2)Upskilling nurses offering the tools and education to deliver;

Time Critical Medication on time every time.

3)Introducing the concept of SPACED (Sugar,Parkinson's,Antibiotics,Corticosteroids, Epilepsy, Direct Oral Anti-coagulants. Know your Time Critical Medication's

### **Recommended reading titles (please enter up to 3)**

Get It on Time- the case for improving medication management for Parkinson's 2019( p9)

UK Parkinson's Audit 2019 (p53)

Inappropriate Medication Use in Hospitalized Patients diagnosed with Parkinson's. Disease;CoxN:LouieJM;Sederholm BH Pharmacy(Basel,Switzerland)Sept2018:vol6 (no.3)

Delayed Administration and Contraindicated Drugs Place Hospitalized Parkinson's patients at Risk. Grissinger,Matthew P&T:peer reviewed journal for formulary management;Jan 2018;vol43(no 1);p10-39

Healthcare burden of parkinson's disease. Tagliati M;Connolly A.T. Movement Disorders;Jun2016:vol.31

Medication errors prolong length of stay in hospitalized Parkinson's disease,Litt patients.Martinez-Ramirez D;Giugni JC; Little C;ChapmanJP; Ahmed b; Monari E;Okun M S

Movement Disorders: Jun 2015 vol 30

### **Biography - Patsy Cotton**

Parkinson's Specialist Nurse Greater Manchester 24 years experience in this role.

passionate about ensuring people with Parkinson's get their medication on time every time, while in hospitaltion . Currently chairs Excellence Network (Get It On time) national priority programme. This involves working closely with people living with

parkinson's to share their stories and experiences of medication management in hospital and also engaging with key NHS workers across England. Research study with Manchester Metropolitan University looking at, Self medication in hospital.

## **#253 Whose knowledge counts? An exploration of the status and power of knowledge in the transition from healthcare assistant to registered nurse.**

### **Authors**

Dr. Kevin Bryant - Anglia Ruskin University

### **Aim of paper**

The aims of this paper are to:

- illustrate to participants how former healthcare assistants (HCAs) articulate their knowledge acquired in the role and how this is valued within the higher education and healthcare sectors.
- show how HCA knowledge contributes to research on social inclusion in nursing higher education and the embodied practice of caring work.
- demonstrate how a novel analytical tool (Legitimation Code Theory) illuminates the status and power of knowledge in qualitative research data.

### **Abstract**

This presentation explores tensions between the representation of 'sacred' and 'profane' forms of knowledge in nursing higher education (HE) and in healthcare practice. The context is the transition experience of healthcare assistants (HCAs) becoming graduate registered nurses. Given the implicit and yet fundamental role of the status of knowledge in the relationship between social actors in the healthcare field, this study contributes to our understanding of the interaction between

knowledge and social class issues associated with career progression.

Twenty former HCAs were interviewed during their transition to graduate registered nurse. Data analysis drew on Maton's legitimisation code theory (LCT) (Maton, 2014) which illuminates the differences between forms of knowledge that are in play within HE and differentially identified by participants as forms of capital in the university and clinical environment.

Findings show how different forms of knowledge affect the whole social, cognitive and statutory transition from HCA to registered nurse. The status and power of knowledge was a core component of the decision-making process in first joining the health care sector as HCA, to engaging in the project of becoming a nurse. Perceptions of knowledge were central to the expressions and attitudes of recognition or condescension received by HCAs in daily practice from patients, nurses and other health care professionals. It formed the backdrop to various challenges when returning as a student to clinical placements. Knowledge is also an element of power used by nurses in particular to maintain occupational separation from HCAs.

Findings suggest that nursing higher education frames HCA knowledge as the 'wrong kind of knowledge' and HCAs as the 'wrong kind of knower'. This imposes a form of relegation to the embodied knowledge arising from their experience as HCA in the process of changing role and status during transition to graduate nurse.

### 3 learning outcomes

Participants will be able to

- describe the role of sacred and profane forms of knowledge in healthcare assistants' transition experience to graduate nurse.

- explain how perceptions of the status of knowledge inform the learning environment within higher education and healthcare practice
- summarise how legitimisation code theory may be employed to illuminate the power dynamics of knowledge within qualitative data

### Recommended reading titles (please enter up to 3)

Bryant, K. (2019) The wrong kind of knowledge and the wrong kind of knower? An exploration of the status of knowledge in the experience of vocational students' transition through higher education' in S. Broadhead, J. Butcher, M. Hill, S. McKendry, N. Raven, R. Renton, B. Sanderson, T. Ward and S. Wynn Williams (Eds) *Transformative Higher Education – Access, Inclusion & Lifelong Learning*, London: Forum for Access and Continuing Education.

Maton, K. (2014) *Knowledge and knowers: towards a realist sociology of education*. Routledge: London and New York.

McNamara, M. and Fealy, G. (2014) *Knowledge matters in nursing* in Young M and Muller J (Eds) *Knowledge, expertise and the professions*. London: Routledge.

### Biography - Kevin Bryant

Kevin has been an active member of the social inclusion and widening participation to higher education community since 1985. He was in the vanguard of developments in Access to Higher Education for nursing and other health professions in south London community colleges. He instigated and directed Uni4U at King's College London, a pan-London social inclusion project, where he was awarded a fellowship for innovations in nursing education. Kevin is currently a visiting lecturer at Anglia Ruskin University, contributing to degree apprenticeships, foundation courses and research mentorship. Although Kevin has been a fully signed up social constructionist for many

years, his background is in physiology research and nursing bioscience education. The research presented here formed part of his Education Doctorate at the University of East Anglia.

## **#254 How might the Academic Advising (AA)/Personal Tutor role purposefully help student nurses develop the required professional values and associated behaviours in preparation for future employment?**

### **Authors**

Ms. Susan Chilton - Oxford Brookes University

### **Aim of paper**

As 'today's students are tomorrow's colleagues, conversations regarding how to address incivility and bullying should include specific aspects of nursing academia and the preparation of new nurses' (Luparell, 2011:92).

The aim of this presentation is to share details of the first phase of a project, which was undertaken between September - December 2021 in the Oxford School of Nursing & Midwifery at Oxford Brookes University (OBU) as part of a university-wide 'Academic Advising Scholarship Group' initiative.

The project focuses on ways in which the Academic Advising process might become the vehicle for developing key professional qualities throughout pre-registration education.

### **Abstract**

#### **Context**

This project focuses on the development of professional values/attributes as research/inquiries/reports continue to show that the recruitment, experiences and retention of nurses are often influenced

negatively by unhealthy working cultures (RePAIR, 2018 ; CQC, 2022). The project links to the NMC Code (2018) and one of OBU's graduate attributes - Personal Literacy and Critical Self-awareness.

### **Methodology**

An online questionnaire was used to gather ideas/suggestions/recommendations from key stakeholders (student nurses/academic staff/managers).

### **Key Findings**

The AA process should:

- be universal, supporting students academically, pastorally, and professionally across the years
- be 'emancipatory and transformational' enabling critical self-reflection on experiences in theory & practice & promoting professionalism, which is pivotal in creating more humanistic working cultures.
- allow AAs to role model professional values
- offer students strategies/frameworks for independent learning, signposting to support whilst guiding students to develop emotional intelligence.
- have clear, pre-set goals, sets of questions, discussion points and outcomes at different progression points.
- be available in a group format to deliver common information/advice & promote collaborative reflection and debate and in a 1:1 format to address specific/sensitive issues in a safe, non-judgmental space.
- be valued, have a higher profile and mandatory (similar to PDR process in employment).

### **Next Steps**

These findings will now inform questions/themes to be explored in more detail using focus groups (Phase 2 of the



project) with key stakeholders (including service users/ student nurses/nursing academics & practitioners/managers) leading to recommendations regarding required changes to the AA process.

McCalman and Potter (2015) stress the need to develop more humanistic working cultures. The importance of developing therapeutic/civil relationships with service users and colleagues, based on essential professional values and attributes, is pivotal but not exclusive to nursing and so these findings are not only of interest to national nursing organisations, such as the NMC and RCN, but also to other disciplines.

### **3 learning outcomes**

1. To critically explore those factors influencing unhealthy working cultures within nursing which impact recruitment/retention of nurses and patient outcomes and job satisfaction.
2. To identify the key qualities required for developing therapeutic/civil relationships with service users/colleagues
3. To consider, using initial project findings, ways in which the Academic Advising/Personal Tutoring process might purposefully help develop these required professional values/attributes.

### **Recommended reading titles (please enter up to 3)**

Health Education England (2018) RePAIR: Reducing Pre-registration Attrition and Improving Retention report, London: HEE

Luparell, S. (2011) Incivility in Nursing: The Connection Between Academia and Clinical Settings, Critical Care Nurse, vol 31, No 2, pp. 92-95

McCalman, J. and Potter, D. (2015) Leading Cultural Change. London: Kogan Page

### **Biography - Susan Chilton**

I qualified with Distinction in 1981, having undertaken a Bachelor of Nursing degree at the University of Manchester . Professional qualifications include MSC (Applications of Psychology), PGCHE, HEA – Senior Fellow, BNurs, DN, HV, DNT

During my career to date, I have had wide ranging experience and have worked in a variety of settings – including acute, community and specialist nursing practice. Key roles include Ward Sister; Specialist Palliative Care Nurse and Lecturer/Practitioner (District Nursing).

In addition, I have held substantive posts in Higher Education since 1991. I have worked as an academic in several different Universities and I am also an experienced External Examiner. I am currently employed as a Senior Lecturer in the Oxford School of Nursing & Midwifery at Oxford Brookes University.

I have published widely, including articles and book chapters, and have edited a number of core nursing textbooks. I am currently a lead editor working on the third edition of 'A Textbook of Community Nursing' (Routledge), to be published in 2024.

Academic roles have included course and programme leadership and current interests include pursuing National Teaching Fellow status and raising the profile of community and older adult nursing in the pre-registration nursing programme.

### **#255 The Development of a New General Practice Nurse (GPN) Education Pathway in Scotland**

#### **Authors**

Mrs. Vicki Waqa - NHS Education for Scotland

Mrs. Moira Dowden - NHS Education for Scotland

### **Aim of paper**

To share the development of a new and innovative Education Pathway for General Practice Nurses (GPN) in Scotland, focusing on accessibility and sustainability while addressing the current and future educational needs of the GPN workforce.

### **Abstract**

The healthcare landscape was changing yet our education provision was standing still.

It is no secret that the GPN workforce is under unprecedented levels of strain. It is also facing the reality of an ageing workforce for whom the Covid 19 pandemic has driven significant changes in roles and models of care. NHS Education for Scotland (NES) is an education body and national health board within NHS Scotland. The NES GPN faculty identified that the current GPN Education Programme no longer met changing learning needs or demand, and designed and implemented a fully funded, nationally consistent, quality assured and financially and environmentally sustainable Education Pathway for GPNs.

The pathway aligns with the strategic vision for the future role of GPNs in Scotland, it includes a blend of directed learning and facilitated online small learning groups promoting communities of learning, peer support and problem-solving skills while providing GPNs with the skills to develop caring, compassionate and professional relationships. Leadership promoting a culture of honesty, transparency and curiosity to facilitate quality improvement is central to the philosophy of the curriculum and the faculty. A variety of innovative, authentic approaches to assessment such as critically reflecting on consultation skills, analysis of population health and the development of a quality improvement project are included. The pathway embraces

the opportunities offered by digital technology to include learners from across the whole of Scotland including remote island communities. Learners' supporting GP practices commit to protected learning time on a weekly basis, while practice-based learning is supported by experienced GPNs in Clinical Facilitator and Academic Assessor roles.

The development of the GPN Education Pathway and its accreditation by Queen Margaret University is an exciting step into the future for General Practice Nursing in Scotland.

### **3 learning outcomes**

1. Understand the challenges facing the GPN workforce in Scotland and how these determine development of education provision for this group
2. Evaluate the development of the GPN Education Pathway and its use of technology to promote accessibility and sustainability
3. Analyse how this non-traditional model can be scaled up and rolled out across integrated community teams.

### **Recommended reading titles (please enter up to 3)**

Chief Nursing Officer Directorate (2017) *Nursing 2030 Vision: Promoting Confident, Competent and Collaborative Nursing for Scotland's Future*. Scottish Government. Edinburgh.

Chief Nursing Officer Directorate (2018) *Developing the General Practice Nursing Role in Integrated Community Nursing Teams*. Scottish Government. Edinburgh.

Chief Nursing Officer Directorate (2018) *Transforming nursing, midwifery and health professions roles: education and career development*. Scottish Government. Edinburgh.

## Biography - Vicki Waqa

I began my career in Law hospital-a small district general hospital which no longer exists-and you will likely never have heard of. I quickly followed the bright lights and travelled to London. I progressed to an Emergency Nurse Practitioner role then moved again to experience primary care in the Australian outback. The challenges were endless! But I loved getting to know families. Being able to form trusting, valuable relationships with people was so important to me and primary care enabled that. I remained in primary care for 14 years, before joining NES as a Specialist Lead for CPD. During my time in primary care, I learned about primary prevention, health inequalities, children's health, women's health, leadership, multi-agency working, long term condition management, mental health, substance misuse -to name a few. I have travelled extensively and witnessed countries where primary care or indeed general practice is not available. My husband and my extended family are from Fiji, which is a prime example of one of those countries. As a result, morbidity rates are high, and sadly so are mortality. I am extremely passionate about my role in education and believe that education is the bedrock of high-quality person-centred care.

**#257 Maximising the potential of using an electronic practice assessment document to monitor and enhance the student experience in practice and develop digital literacy for all users: A collaborative pan London approach.**

## Authors

Dr. Katherine Wilson - Middlesex University

Ms. Nicki Fowler - University of Greenwich

Mr. Justin McDermott - Middlesex University

## Aim of paper

To discuss the experience of students and staff in using the pan London electronic practice assessment document and explore its value in monitoring student engagement, real time communication with all stakeholders and enhancing the overall student experience of practice learning and assessment.

## Abstract

A Consortium of London HEIs was formed in June 2018 with the Consortium Agreement signed in July 2019 by the 14 HEIs to enable the London HEIs to work collaboratively to procure one supplier for the electronic Practice Assessment Document (ePAD). The Consortium successfully undertook this joint procurement process, and appointed My Knowledge Map as the preferred single system. The ePAD was first introduced in 2019 by 5 London HEIs and by a further 4 HEIs in September 2022. An initial mixed methods research approach involving all HEIs in the first wave, and their partners identified many strengths to using the ePAD. One senior NHS colleague stated 'Implementing the ePAD has proven to be transformational for all users. By promoting ease of access through innovative and intuitive technology, the ePAD has improved transparency, accountability and processes in supporting learners through their journey to qualification'.

By July 2022 we recorded 11,000 students using the ePAD, approximately 600 academics, 400 administrative staff (HEI and Practice), over 20,000 accounts set up by Practice Assessors and Practice Supervisors across 8000 Health and Social Care practice areas, demonstrating the excellent potential of the ePAD to gather a wide range of helpful data, supported by an effective range of analytics and reporting functions.

Within this presentation representatives from the project group will share their experience of effective monitoring of students' progress in real time which is invaluable in the early identification of struggling students and preventing attrition. In addition to this the direct lines of communication between all stakeholders, the improved engagement of students with placement evaluations and the increase in digital literacy across the whole workforce are significant benefits that will be explored. An ePAD for Nursing Associates and Midwifery students is currently being implemented, building on the positive experiences of pre-registration nursing programmes.

### 3 learning outcomes

Discuss the findings from the initial research to evaluate the experience of all stakeholders in the implementation of the ePAD.

Explore how the use of this technology can support the identification of students not engaging in practice to enable prompt action and avoid unnecessary attrition.

Consider the benefits of using the ePAD to develop digital capabilities of students and staff.

### Recommended reading titles (please enter up to 3)

Nursing Midwifery Council (2018), Future Nurse: Standards of proficiency for registered nurses. London: NMC.

HEE (2018), RePAIR: Reducing Pre-registration Attrition and Improving Retention. <https://www.hee.nhs.uk/our-work/reducing-pre-registration-attrition-improving-retention>. Accessed 12.10.22.

HEE (2019) The Topol Review, Preparing the Healthcare workforce to deliver the digital future. <https://topol.hee.nhs.uk/> accessed 12.10.22

### Biography - Katherine Wilson

Katherine (Kathy Wilson)

RN, Dip N, BSc (Hons), PGCHE, MSc, Doctorate in Professional Studies.

Kathy is Director of Professional Practice at Middlesex University London and has spent much of her academic career in roles that have focused on practice learning and assessment as this is where her passion lies. As chair of the Pan London Practice Learning Group (PLPLG) Kathy has overseen the development of the second Pan London Practice Assessment Document, with the support of a Project Manager, funded by HEE, PLPLG members and a large group of practice partner colleagues and students. This work has led to the development pan London approach to the implementation of the NMC standards and the creation of a range of online resources to support the development of practice assessors and practice supervisors.

Following the successful implementation of the PLPAD Kathy secured further funding to support the collaborative development of an electronic PAD in 2018 and working alongside My Knowledge Map this has now been implemented across 9 HEIs for nursing and is transforming the student and supervisor/assessor experience across London. Nursing Associate and Midwifery programmes across London are also in the process of implementing a pan London approach to an ePAD/eMORA..

### #260 Overcoming Barriers and Challenges to Implementing a New Role into Critical Care.

#### Authors

Mrs. Francesca Craddock - Cambridge University Hospitals (CUH)

Mrs. Lisa Enoch - Cambridge University Hospitals (CUH)

## Aim of paper

We wanted to share our experience of introducing a new and contentious workforce into our critical care. It highlights the importance of engaging with the teams and introducing change incrementally. The initial discussions and survey raised concerns and demonstrated a lack of understanding and negative bias towards the role. We used a staged approach over several months to ensure the lived experience of the RNA when introduced is positive, supported and successful. As a result we now have a motivated working group of band 5's who are developing a bespoke training package and determined to make the role a success.

## Abstract

**Introduction:** Registered Nursing Associates (RNAs) in Critical Care were first introduced in 2019 in response to workforce challenges. Historically these roles have not been on the NMC register and have been contentious. We decided to survey our staff to gain an insight and canvas their opinion on RNAs working within critical care.

**Methods:** We employed a cross-sectional two-part survey designed to collect data from a population of 350 clinical staff of all grades on two CCUs. After the first survey we implemented a series of interventions and then re-surveyed. These included: teaching sessions, posters, and Q&A sessions. The surveys were sent by email and WhatsApp and results were anonymised. Descriptive analysis was used.

**Results:** 94 people responded to the initial survey with 19 responding to the second survey. The first survey identified: only 34% believed that RNAs would be able to look after ventilated patients, 43% that RNAs could administer medication, 49% believe that RNAs had a place within Critical Care, and 47% believed that RNAs would have a

positive impact on the team. We found significant improvements in the results developed from the second survey: 68% now believe that RNAs would be able to look after ventilated patients, 95% that RNAs can administer medication, 90% that RNAs had a place within Critical Care, and 84% that RNAs will have a positive impact on the team.

**Conclusion:** The interventions using multimedia and multiple platforms had a positive impact on staff opinion and attitudes. It also highlighted where the gaps in knowledge and understanding remain. Limitations include the low response rate (particularly the post-intervention survey). Future implications: Innovative bespoke training program to be implemented and run alongside national CC3n competencies.

## 3 learning outcomes

- To address knowledge gaps as barriers to implementing new workforce to critical care.
- To examine how educational and engagement interventions have a positive impact on opinion and attitudes.
- To highlight the importance of change strategies and creating a positive environment to promote success.

## Biography - Francesca Craddock

Francesca Craddock BSc, RN.

Francesca has worked within Critical Care since 2013 and has been working within the Critical Care Practice Development Team at Addenbrookes since June 2022. From mid 2022, Francesca has been working to introduce Nursing Associates to Addenbrookes Critical Care Units alongside Lisa. Francesca has been responsible for leading the education programme steering group for Nursing Associates, developing posters to improve understanding and opinion of Nursing Associates for the current workforce, and holding frequent



question and answer sessions for the current workforce to gain a better understanding of the role. She is passionate about education within Critical Care Nursing and hopes to see the successful implementation of this innovative workforce within Cambridge University Hospitals Critical Care Units.

To further Francesca's development, Francesca is starting a PGCE in clinical education at UEA in January.

Prior to joining the Practice Development Team, Francesca has also worked as a Resuscitation Officer and worked within a smaller Critical Care Area within a District General Hospital.

## **#262 The Design, Implementation and Evaluation of a Digital Clinical Placement Hub.**

### **Authors**

Ms. Gabrielle Claire Cohen - The Christie NHS Foundation Trust

Ms. Alison Sanneh - The Christie NHS Foundation Trust

Ms. Sheena Chauhan - The Christie NHS Foundation Trust

Mr. Wesley Doherty - The Christie NHS Foundation Trust

Ms. Kirsty Marsh - The Christie NHS Foundation Trust

Mrs. Hannah Mccaughran - Clinical Educator

Mrs. Kelly Newiss - The Christie NHS Foundation Trust

### **Aim of paper**

Clinical education has transformed in recent years. Responding to Covid-19, hospitals invested in digital solutions, allowing workforce to maintain high quality services, collaborating across networks and responding at pace to changing needs.

A team of clinical educationalist, designed a transformational digital clinical placement, increasing Pre-registration Nurses and Allied Health Professionals access to high quality placement experiences.

Subject Matter Experts migrated from hospital clinical rooms to a virtual environment. Learners were exposed to systems of care, opposed to silo care set out on traditional placements.

This model mobilised local, national and global workforce to innovate, apply cultural sensitivity and scale-up.

### **Abstract**

Several drivers led to the design and implementation of an innovative, digital clinical placement hub, transforming clinical education in oncology. This includes The Cancer Workforce Plan, RePAIR and ACCEND initiatives.

Covid-19 created an interference to accessing placements in cancer settings. To reduce impact, clinical educationalist and digital team's collaborated on the development and design of a robust, high quality, digital clinical placement model.

Cancer Experts, across the cancer pathway, were invited to co-design clinical curriculums. Delivered through a digital tenancy, clinical educationalist, learners and clinical experts co-operated in equal measure to learnt experiences. Patient and practitioner stories sustained the backbone of a spiral clinical curriculum.

Learners self-assessed personal and professional growth and fed back to their peers through a 360 professional development e-portfolio. A coaching model was fully integrated into every element of product design, promoting knowledge transfer.

Three digital placements have been designed and delivered, through adopting the placement model. Evaluations of quality



consistently report in excess of forty percent self-assessed learner growth. Over six hundred two-week placements were delivered in the last year. The placements have moved into sustainability and numbers are projected to double.

A placement, co-designed with global partners, namely Kenya and Uganda are in the 'train the trainer' phase. This programme, 'A Foundations in Oncology for Nurses' addressed a critical need to increase nurse in cancer care across the globe, investing in cultural intelligence to serve our diverse populations.

The innovative digital clinical placement model proves effective and efficient in the delivery of high quality, clinical learning. Future research aims to explore the direct impact on patient clinical outcomes and positive care experiences.

This transformative work has mobilised a local, national and global cancer workforce, crossing boundaries, promoting inclusivity and collaboration and proves scalable.

It is now being shared and adopted across integrated care systems.

### **3 learning outcomes**

Digital solutions that socialise and support nurses and allied health professionals to professionally grow and develop in a safe and cultivating environment.

The delivery of innovative clinical learning that adds value to clinical outcomes and positive care experiences.

To increase capacity and continually improve quality, enriching clinical placements, promoting desirable clinical leadership and improved safety and care.

### **Recommended reading titles (please enter up to 3)**

[https://society-of-radiographers.shorthandstories.com/creative-provision-of-radiotherapy-clinical-](https://society-of-radiographers.shorthandstories.com/creative-provision-of-radiotherapy-clinical-placements/index.html)

[placements/index.html](https://society-of-radiographers.shorthandstories.com/creative-provision-of-radiotherapy-clinical-placements/index.html)

Digital Team - RePAIR Report  
2018\_FINAL.pdf - All Documents  
(sharepoint.com)

ACCEND Programme Briefing Paper Report  
template (hee.nhs.uk)

### **Biography – Gabrielle Cohen**

Gabrielle Cohen is an Oncology Nurse. She has worked at The Christie since she qualified in 2017 and began her career on one of the medical wards. In 2020 she completed a masters in Genomic Medicine and strongly believes there is a need for the integration of Genomics into oncology services. Earlier this year she joined the Radiotherapy Education team and part time works as a Genomics Clinical Fellow for Macmillan. She completed a coaching for educators' course with the British School of Coaching in 2021. Gabrielle thoroughly enjoys the education aspects of her job roles and believes that the placement model will greatly impact the care of those living with cancer. Gabrielle has a passion for enhancing knowledge and empowering the future workforce.

### **#263 Royal College of Nursing Education Conference and Exhibition 2023 1.2 Innovation in the Delivery of Education and Professional development**

#### **Authors**

Mrs. Edel Mattocks - University of  
Sunderland

Mrs. Catherine Graham - University of  
Sunderland

Mrs. Simone Bedford - University of  
Sunderland

Mrs. Keeley Gordon - University of Sunderland

### **Aim of paper**

The aim of this abstract is to explore the unique way that nursing education is delivered on the University of Sunderland Adult Nursing Blended Learning programme. The abstract will discuss:

- How the blended learning course is designed to enable nurse education to be accessible to more groups of people. Often those who without the flexibility of blended learning would not be able to become nurses.
- The unique and innovative methods of education that we use as part of the programme.
- The support offered to students.
- The results so far in terms of student satisfaction, attrition and success rates.

### **Abstract**

The demand for nurses in the United Kingdom (UK) is exemplified by the current UK Government target of recruiting 50,000 additional nurses by 2025 (DHSC 2022). The Blended Learning Adult Nursing programme at the University of Sunderland is one of seven blended learning nursing programmes in the country. We have a flying faculty and collaborate with placement partners in London and are planning for Yorkshire (May 2023). The programme aims to make nursing a career that is accessible to more people.

Much of the theoretical content of the course is delivered online, meaning that students can access learning at a time that is convenient to them. A range of experts create engaging interactive material for students to learn. These experts include people with knowledge of nursing, simulation, virtual reality, digital learning, and instructional design. We are collaborating with our clinical partners to

develop a virtual ward using funds from the Vice Chancellor's award.

The unique design of the programme makes clinical placement more accessible for students with family, caring or work commitments. The students spend 25-hours per week in placements during clinical placement blocks.

During theoretical learning blocks students attend skills and simulation sessions with public carer patient involvement (PCPI) members. PCPIs are people who have experience as patients or carers. Time spent with PCPIs in the university's purpose-built teaching facilities practicing communication and clinical skills under the supervision of registered nurses counts towards the student's clinical placement hours.

Each student has a named personal academic tutor to provide academic guidance/pastoral care and clinical link tutor to provide support whilst on clinical placement. This nurturing approach alongside the flexibility afforded from the course design has resulted in a 12% attrition rate, 93% student retention and high levels of student success with 95.3% of students passing year 1 of their studies.

### **3 learning outcomes**

- Describe the structure of the University of Sunderland Blended Learning Adult Nursing Course.
- Explore the innovative methods of education used.
- Analyse the results of this programme so far.

### **Recommended reading titles (please enter up to 3)**

Department of Health and Social Care (2022). *DHSC: workforce management information*. p. 1.

Grønlien, H. K. et al. (2021) A blended learning teaching strategy strengthens the

nursing students' performance and self-reported learning outcome achievement in an anatomy, physiology and biochemistry course – A quasi-experimental study. Nurse education in practice. [Online] 52103046–103046.

Ropero-Padilla, C. et al. (2021) A gameful blended-learning experience in nursing: A qualitative focus group study. Nurse education today. [Online] 106105109–105109.

### **Biography - Catherine Graham**

Hi, my name is Catherine. I am a Clinical Link Tutor and Lecturer for the Blended Learning and MNurse programmes at the University of Sunderland.

I have 15 years of experience as a Registered Adult Nurse. Between 2007 and 2013 I worked on a colorectal surgery at the Royal Victoria Infirmary in Newcastle. This unit is a UK centre of excellence for the care of patients with colorectal cancer and inflammatory bowel disease. I am experienced in the post-operative care of patients with colorectal cancers, Chron's disease, ulcerative colitis, and abdominal traumas in both a critical care and ward environment.

In 2013 I moved to Marie Curie Hospice in Newcastle where I continue to work alongside my job at the university in the field of specialist palliative care. At the hospice I care for patients who have palliative conditions and require specialist symptom management. I also care for patients who are in their last days of life. My job is a pleasure and a privilege. I joined the University of Sunderland in April 2022; I enjoy sharing the knowledge and joy that I have for nursing with the future of our profession.

## **#265 Education across systems: creating a new strategic approach for regional collaboration to enhance practice learning. Initial findings**

### **Authors**

Mr. Scott Topping - Cambridge & Peterborough ICS

Dr. Lisa Reynolds - Health Education England

Mrs. Alexandra Flack - Mid & South Essex ICS

Mrs. Clodagh Clarry - Norfolk & Waveney ICS

Mrs. Davinia Rodgers - Hertfordshire & West Essex ICS

Mrs. Therese Elliott - Suffolk & North East Essex ICS

Mrs. Helen Friend - Bedford, Luton & Milton Keynes ICS

Mr. Innocent Neshiri - Health Education England

### **Aim of paper**

Explore the process of developing and implementing a regional coproduced strategy to enable strategic leadership whilst addressing specific educational needs of each system across the East of England.

### **Abstract**

The Clinical Learning Environment (CLE) Strategy is a dynamic approach which drew on a rapid review of existing literature and policy. Together with engagement of stakeholders across the 6 Integrated Care Systems (ICSs) and 6 Higher Education Institutions (HEIs) across the East of England, a strategic framework was coproduced with view to enabling effective and efficient partnership working, both at a local and regional level, to enhance the

clinical learning environment for nurse education and continued professional development.

Developed concurrently with the passing of the Health and Care Act and Integrated Care Boards (ICBs) being recognised as statutory bodies, the CLE strategy provided structure during a time of significant systemic change across the health and care landscape which had potential to risk the integrity and quality of the clinical learning environment, both for our current and future nursing workforce. Implementation of the CLE strategy during this period also offered assurance that education remained high on everyone's agenda, was evidenced at board level and provided a tangible resource to ICBs to inform strategic objectives for further investment to enhance the clinical learning environment.

The CLE strategy is a framework of 3 strategic pillars; Developing a culture of inclusive compassionate learning; System working and structures; and Educational excellence. 6 workstreams sit under the strategic pillars, all mapped against Health Education England's (2021) Quality Framework and underpinned by the Nursing & Midwifery Council (2018) Future Nurse Standards. During the implementation, each of the strategic pillars and workstreams had identified projects within each ICS, alongside an action plan with key performance indicators to address the specific needs of each system.

### **3 learning outcomes**

Understand the 3 pillars and 6 work streams of the Clinical Learning Environment Strategy; Identify quality markers for a dynamic, innovative and effective clinical learning environment; Understand the Interface of multi Integrated Care System, Higher Education Institution and regional working.

### **Recommended reading titles (please enter up to 3)**

<https://www.hee.nhs.uk/CLE-strategy>

<https://www.hee.nhs.uk/our-work/quality>

<https://www.nmc.org.uk/globalassets/sitedocuments/standards-of-proficiency/nurses/future-nurse-proficiencies.pdf>

### **Biography - Scott Topping**

Scott is a Registered Mental Health Nurse (RMN) and the Clinical Learning Environment Lead at Cambridgeshire & Peterborough ICS, working across the East of England to develop the Clinical Learning Environment Strategy. Scott trained as an RMN at Charles Frears School of Nursing, De Montfort University Leicester. Scott's clinical background is within Eating Disorders and Obsessive Compulsive Disorders, mainly based at South West London, which he continues to offer treatment and provide training for. Scott moved into practice development roles in 2017 where he piloted the Place Based Placements model for South West London ICS, developing innovative coproduced placements with people who had lived experience of mental health problems. In 2020, Scott co-wrote the BSc & MSc(i) Mental Health & Adult Nursing curricula at University of Roehampton.

Scott is passionate about student and staff well-being through training and empowerment. He most recently completed the RePAIR (Reducing Pre-Registration Attrition and Increasing Retention) Fellowship at Health Education England London where he led the establishment of the HEE London Student Shared Decision-Making Council. During this time, Scott also trained as a Professional Nurse Advocate with Derby University and subsequently wrote the mental health case study for the PNA best practice guide with NHSE.

## #266 A protocol for the development of a brief educational intervention to improve nurse knowledge and confidence to educate patients and carers pre-intravenous systemic anti-cancer therapy (SACT) in one Cancer Centre in Wales (UK).

### Authors

Dr. Lenira Semedo - Cardiff University/Velindre University NHS Trust

Dr. Rosie Roberts - Velindre University NHS Trust

Dr. Kathy Seddon - Wales Cancer Research Centre

Mr. Rashmi Kumar - Health and Care Research Wales

Mrs. Lesley Radley - Wales Cancer Research Centre

Prof. Jane Hopkinson - Cardiff University/Velindre University NHS Trust

### Aim of paper

To develop a brief intervention to improve nurses' knowledge and confidence to educate patients pre-cancer treatment.

### Abstract

**Background:** Nurse-led education helps patients manage cancer treatment side-effects. <sup>1</sup>Cancer treatments are becoming more complex with serious and unique side-effects. It is unknown whether qualified nurses at the Centre update or feel confident to deliver this knowledge. This includes nurses with less work experience. This may be challenging, alongside time constraints and potential patient anxiety following a cancer diagnosis. There is limited evidence on nurses' delivery of pre-SACT patient education. Provision of information to guide cancer treatment management has implications for patient

safety.

**Methods:** A single group pre-post design will be used. A three-phase approach will inform the development, acceptability and feasibility of an educational intervention. Phase I will investigate nurses' understanding and experiences through nurse observations of patient education (up to 30), questionnaires (n=30) and interviews (up to 30). Phase II will develop the intervention content by including information gained in phase I. Content will be informed by self-efficacy construct <sup>2</sup> and gain clinicians' and Project Partners' input. A quality framework <sup>3</sup> to guide intervention development will be used. Phase III will deliver the intervention (n=30) in a preferred format. Changes in knowledge and confidence will be investigated and analysed (pre- post intervention). Questionnaire feedback will be gained for acceptability and for optimizing the intervention in the future. A framework approach will be used to analyse qualitative data.

**Results:** A needs-led intervention will be developed to help nurses educate patients pre-cancer treatment. This may help develop recommendations in cancer treatment to support nurses in their educator role.

### Conclusions and implications for practice:

This work is needed to investigate whether nurse knowledge and confidence may be improved by an educational intervention. It may support nursing practice by considering nurses' learning needs to deliver patient education. This may inform the service offered to patients, contributing to safe cancer treatment.

### 3 learning outcomes

1. A better understanding of nurse knowledge and confidence to deliver pre-SACT education to patients and caregivers.
2. Process for the development of a brief



intervention for nurses tailored to their identified learning needs to support nurse-led provision of patient education.

3. Development of recommendations in cancer treatment education to inform service delivery.

### **Recommended reading titles (please enter up to 3)**

1. Jivraj N, Gallagher L.O., Papadakos J, Abdelmutti N., Trang A. and Ferguson S.E. (2018). Empowering patients and caregivers with knowledge: the development of a nurse-led gynaecologic oncology chemotherapy education class. *Canadian Oncology Nursing Journal*, 28 (1):4-7.

2. Bandura A (1977). Self-efficacy: toward a unifying theory of behavioral change. *Psychol Rev.* 84(2):191–215.

3. Wight D, Wimbush E, Jepson R and Doi, L. (2015). Six steps in quality intervention development (6SQulD). *Journal of Epidemiology and Community Health.* 70(5): 520–525.

### **Biography - Lenira Semedo**

Lenira Semedo is a Velindre Research Associate at Cardiff University, Wales (UK) in partnership with Velindre Charity. Part of her work is to support nurses and Allied Healthcare professionals to become research active. She is currently working in a research project focusing in nursing education in cancer treatment. Also, involved in work related to adherence to cancer treatment and how that may best be supported by engaging patients, informal carers, and service providers. Lenira has a background in Health Psychology and her research interests focus on adherence to cancer treatment, long-term conditions, development of health-related information to aid decision-making, the patient pathway and behaviour change.

## **#267 Exploring the experiences of mature, female students from widening participation backgrounds who have considered leaving but remain on the Bachelor of Nursing (Adult) programme. An Interpretative Phenomenological Analysis study.**

### **Authors**

Dr. Owena Simpson - Work at University of South Wales. Studied at Cardiff University.

### **Aim of paper**

To develop an understand of the perceived challenges of undertaking the undergraduate nursing programme as a mature female from a widening participation background

To recognise the factors that support and encourage continuation on the programme

To use the knowledge attained to influence undergraduate curriculum development and student support systems

### **Abstract**

There is currently an international nursing shortage which is driven by an ageing population and increasing demands for health care (Drennan and Ross 2019). Challenges exist in ensuring that sufficient numbers of nurses are available to provide care in the complex and rapidly changing care environments of the NHS and social care. A significant national and international strategy for addressing the shortage of RNs has been to increase the number of students enrolled onto pre-registration nursing programmes.

The findings of this study clearly indicate a need for the structure of the programme to provide greater flexibility and opportunities for a wider range of delivery patterns for the pre-registration nursing programme. The current inflexible course design does not



allow for any variation or individuality based on student need and the programme structure needs to be more flexible so that the programme can be responsive to the individuals' needs (Wray et al. 2012). A curriculum that accommodates individuality, allowing the course to fit within the students' study plans, employment, and family commitments, thus providing greater flexibility which would maximise student retention is needed. The development of a sustainable model of course delivery would allow students to study whilst offering flexibility and opportunity for students to complete course requirements whilst also juggling their home and family lives. A modular system would allow for a curriculum which is more family friendly, where students, for example, with childcare responsibilities could have more flexibility to take a break from their studies over the school holiday periods (Christensen and Craft 2021). Although this would provide additional challenges in the organisation and management of the programme, and such changes may be constrained by the University systems and professional body regulations, it is necessary to focus on making the programme as student centred, family friendly and flexible as possible.

### 3 learning outcomes

To develop understanding regarding the factors which influence and motivate mature female students on BN programme to stay.

Understand the specific student support needs to help focus interventions to maximise student achievement.

Disseminate the knowledge that emerges as a result of this study to contribute to future curriculum and institutions' support system developments to promote success in this student group.

### Recommended reading titles (please enter up to 3)

Christensen, M. and Craft, J. 2021. "Gaining a new sense of me": Mature students experiences of under-graduate nursing education. *Nurse Education Today* 96, pp. 104617-104617. doi: 10.1016/j.nedt.2020.104617

Drennan, V. M. and Ross, F. 2019. Global nurse shortages-the facts, the impact and action for change. *British Medical Bulletin*. 130(1), p. 25. doi: 10.1093/bmb/ldz014

Wray, J. et al. 2012. Staying the course: Factors influencing pre-registration nursing student progression into Year 2 – A retrospective cohort study. *International Journal of Nursing Studies* 49(11), pp. 1432-1442. doi: 10.1016/j.ijnurstu.2012.06.006

### Biography - Owena Simpson

Having qualified in 1993 as a Registered General Nurse I gained experience as a practitioner in various general adult nursing settings. This experience, although mostly in the cardiac speciality has covered a variety of nursing environments, including general nursing, high dependency and intensive care. I completed the Post Graduate Certificate of Education for Nursing, Midwifery and Health Visiting in October 2004 at the University of South Wales. Prompted and enthused by this course I successfully obtained a post at the University as a Senior Lecturer within the General Adult Field. Since working at the University, I have managed modules in both pre and post registration education. My role also involves pastoral care of pre-registration students. I have been the deputy course leader for the undergraduate nursing programme and in 2016 successfully obtained the role of Head of Health and Social Care within the Faculty. I completed my Professional Doctorate (Doctor of Advanced Healthcare Practice) at Cardiff University in 2022 and my research study is entitled: Exploring the experiences of

mature, female students from widening participation backgrounds who have considered leaving but remain on the Bachelor of Nursing (Adult) programme. An Interpretative Phenomenological Analysis study.

## **#271 Centering on Black Caribbean men's voices to learn about oppression and anti-oppressive practice in mental health nursing practice.**

### **Authors**

Dr. Yvette Brown - University of Worcester

### **Aim of paper**

The paper presentation aims to show how the findings of my PhD study that focuses on Black Caribbean men, psychosis and oppression was used to explore oppression and anti-oppressive practice in pre-registration mental health nursing education.

### **Abstract**

As a mental health lecturer, the underlying philosophy of mental health care that I teach is to deliver recovery focused person-centred care. Too often there are groups that do not always experience mental health care in this way. One such group is Black African and Caribbean communities who when in distress and in need of safety and compassion have been consistently failed by mental health services due to racial inequality and oppressive practices (Dyer, Murdoch and Farmer 2020, Wessely 2018).

Mullaly states that oppression is an umbrella term for social conditions caused by systematic institutional processes that perpetuate inequalities through coercion, domination and privilege (Mullaly 2002). Using Interpretative Phenomenology Analysis, my PhD study centred on nine Black Caribbean men diagnosed with

psychosis to explore their oppressive experiences using Iris Young's (1990) five forms of oppression: cultural imperialism, powerlessness, exploitation, marginalisation and violence. The paper presentation will show how I used the research findings to teach equality, diversity and inclusion in pre-registration mental health nursing education. Connecting the theory of oppression to the real-lives of Black Caribbean men and learn from voices that are often silenced or seldom heard.

I will share how the findings from the study reveal forms of oppression, shedding light on how the men made sense of oppression and how oppressive practices impacts mental health and recovery. The paper will highlight that by centring on black men's voices student mental health nurses were provoked to be critical and reflective of mental health services, their own practice and explore strategies for anti-oppressive, inclusive practices; an essential requirement for the future mental health nursing workforce (Brown 2020; Dyer, Murdoch and Farmer 2020).

### **3 learning outcomes**

Consider the benefits of research-led teaching when teaching equality, diversity and inclusion in mental health nursing education.

Understand how the centring of Black men's lived experiences of mental health services enables student mental health nurses' understanding of oppression

Understand how the centring of Black men's lived experiences of mental health services facilitates critical thinking, reflection and strategies for anti-oppressive practice.

### **Recommended reading titles (please enter up to 3)**

Brown, Y. (2020) *Black men, mental health and oppression: What do we learn when we*

*listen to black men's voices?* Thesis, Coventry University

Dyer, J Murdoch, C. and Farmer P. (2020) 'Advancing mental health equalities strategies'. <https://www.england.nhs.uk/wp-content/uploads/2020/10/00159-advancing-mental-health-equalities-strategy.pdf> National Health Service.

Wessely, S. (2018) 'Modernising the Mental Health Act' *Independent Review of the Mental Health Act 1983*. London: Department of Health and Social Care.

Young, I. M. (1990) *Justice and the politics of difference*. Princeton University Press: Oxford.

## Biography - Yvette Brown

Yvette Brown is a Senior Lecturer in Mental Health Nursing at the University of Worcester. Her personal interests include recovery, cultural perceptions of mental health and centring lived experiences of mental health in teaching, learning and research to challenge and transform mental health practice.

## #273 Creating and implementing a simulated practice learning placement for year 1 nursing students.

### Authors

Mrs. Lucy Tyler - University of Roehampton

### Aim of paper

To share how a simulated practice learning placement was created and implemented and what the students gained from the experience.

### Abstract

#### Background:

Practice placements are an integral part of student nurse education; however, sourcing

can be challenging for Approved education institutions (AEIs). Simulation-based education has become embedded within nurse education, with the Nursing and Midwifery Council (NMC) increasing simulation learning hours. This encouraged nurse educators at a London based AEI to create an innovative simulated practice learning for a group of year 1 adult and mental health nursing students.

#### Aim:

The simulated practice learning experience aimed to provide students with an opportunity to practice knowledge and skills learnt thus far, potentially learn new skills and build on knowledge, in addition to achieving practice hours.

#### Method:

Simulated practice learning included Arts Therapies simulation, and family-focused parity of esteem themed simulation weeks focusing on Platform 2: Promoting health and preventing ill health and Platform 3: Assessing needs and planning care of the NMC standards for pre-registration. Each week included high-fidelity simulation using standardised patients, followed by facilitator-led debriefs in addition to service users/carers and expert clinicians who as practice supervisors provided feedback in conjunction to students writing reflections using the NMC reflection template to help identify learning. Students were asked to complete an evaluation. The evaluations and reflections were analysed to ascertain what learning had occurred.

#### Findings:

Overall, Students enjoyed the experience, recognising benefits of simulated practice learning experiences to their development, especially commenting on time to reflect and debrief throughout with expert clinicians and service users. They report increasing their knowledge, skills and confidence within the focused health

condition of alcohol dependency, multiple sclerosis and autism especially communication, assessment and management of care skills.

### **Conclusion:**

Practice placements sourcing remains challenging in nursing education. Simulated practice learning may be a supportive learning strategy. Further research is required to demonstrate the impact of student learning, and how this influences students' clinical practice.

### **3 learning outcomes**

- Demonstrates one way in which simulated practice learning can support student nurse development.
- Demonstrates one way in which simulation can enhance learning around parity of esteem for student nurses
- Highlights how AEI's could use simulation to support challenges in sourcing clinical placements for student nurses

### **Recommended reading titles (please enter up to 3)**

1. Nursing and Midwifery Council, (2018) Future Nurse: Standards of Proficiency for registered nurses.
2. Williams, J., Murphy, M., Garrow, A. (2022). Development of a simulation placement in a pre-registration nursing programme. British Journal of Nursing, 31:10

### **Biography - Lucy Tyler**

Lucy has been a qualified nurse since 2004. Her clinical career has been spent mainly in neurology and emergency nursing. She has always had a passion for facilitating the learning of others either in clinical practice or now in recent years within higher education where she has been involved in a variety of education innovations in undergraduate nursing education. Lucy has a keen interest in clinical skills and

simulation-based education, integrating mental and physical health and interprofessional learning within nurse education.

## **#277 Can interprofessional simulation between final year nursing and medical students improve their readiness for interprofessional learning?**

### **Authors**

Mrs. Jacqueline Yip - University of Liverpool

Mrs. Louise Shorney - University of Liverpool

### **Aim of paper**

This aim of this study is to evaluate the value of planned interprofessional simulation for pre-registration healthcare students within the School of Health Sciences and School of Medicine.

### **Abstract**

#### **Background**

Interprofessional (IPL) communication has been found to be one of the largest causes for patient errors within healthcare. Despite health professionals working together in teams upon qualification, their educational paths rarely cross during pre-registration training. We intended to construct an IPL simulation day for medical and nursing students to attend; aiming to understand the impact these activities could have on their professional attitudes towards themselves and their peers.

#### **Method**

The design of this study was a small-scale pilot, using one-group comparative with quantitative data generated through completion of pre and post simulation questionnaires. The students attend a full day of simulation, with them working collaboratively through a number of

scenarios. Our sample population consisted of 5th year medical students (5) and 3rd year nursing students (12), with a view to replicate real life working ratios.

## Results

The results of the study showed improvement within all areas of the questionnaire. Improved student understanding of their role within a team and increased understanding of the need to work and learn collaboratively to ensure patient safety. Anonymised free text feedback was also available to further support these findings.

## Conclusion

**These findings help to emphasise the importance of IPL within these 2 professional programmes. The intention is to embed sessions such as this within the curriculum, with a view to incorporate other AHPs. Aiming to improve students' self-awareness and understanding of other professional roles whilst increasing patient safety.**

## 3 learning outcomes

To gain insight into the students' experiences of interprofessional simulation across pre-registration medicine and nursing students.

To identify if interprofessional simulation sessions can increase students understanding of the importance of teamwork.

To utilise the findings to inform the School of Health Sciences & School of Medicine future interprofessional simulation education initiatives

## Recommended reading titles (please enter up to 3)

Horsburgh, M., Lamdin, R., & Williamson, E. (2001) Multiprofessional learning: the attitudes of medical, nursing and pharmacy

students to shared learning. *Medical Education*, 35 (9). Pp 876 – 883.

World Health Organization. Framework for action on interprofessional education and collaborative practice. Geneva: World Health Organization; 2010.

<http://apps.who.int/iris/handle/10665/70185>. Accessed 7th August 2022.

## Biography - Jacqueline Yip

Simulation Lead for the School of Health Sciences.

With a background in Emergency Nursing working within trusts across the north-west.

BN (Hons) University of Liverpool

PGDAP University of Liverpool

FHEA

**#278 The importance of Emotional Intelligence in Nursing; using a vlog series to support, motivate and educate students and qualified nurses.**

## Authors

Ms. Lesley Butcher - Cardiff University

Prof. David Sheard - York St John University

## Aim of paper

This paper aims to recognise the emotional labour required of nurses, and acknowledges the experience of compassion fatigue. It discusses the production of an innovative 'vlog' series, recorded 'in conversation' on the importance of Emotional Intelligence in Nursing. The vlog resource aims to motivate nurses to develop skills in emotional intelligence, which will support them personally, while helping to improve professional working relationships with their colleagues, patients, and families.



## Abstract

It is recognised that nursing involves emotional labour. The experience of 'compassion fatigue' among nurses is well-documented, particularly during the Covid-19 pandemic. A recent metasynthesis found physical and emotional expressions of burnout among staff. Feeling unsupported at work was identified as a major factor contributing to compassion fatigue. Likewise, "unsupportive relationships" in the workplace was cited as the main reason for nurses leaving the profession.

The prevalence of poor working relationships contradicts the NMC code's stipulation to communicate and work effectively in teams and be "aware of one's own behaviour and how this can influence others". Notably, it also fails to reconcile the expectation of the 'unsupported' nurse to deliver support, compassion, and person-centred care to patients.

It is imperative that nurses and nurse-leaders work in an emotionally intelligent way. This requires authentic self-awareness, self-regulation, motivation, and having the empathy and social skills necessary to navigate workplace relationships.

The impact of the Covid-19 pandemic has also presented unprecedented challenges to nurse educators, requiring them to modify their approach to teaching. 'Vlogging', otherwise known as 'video blogging', is a relatively new and innovative construct. It utilises an online platform to communicate a video message. Online videos are convenient, accessible and can reach individual nurses who cannot access formal education or support on this significant topic that is influential in how they carry out their role.

This novel approach consists of a series of three 30-minute vlogs. Two health professionals "in conversation" discuss, and actively demonstrate the meaning of emotional intelligence. There is emphasis on

compassionate leadership, with use of vignettes designed to guide understanding. The pressures that exist within the nursing and caring professions are addressed. This valuable resource seeks to motivate nurses to develop skills in emotional intelligence, which will benefit themselves, their colleagues, patients, and families.

## 3 learning outcomes

1. Understand the importance of having authentic self-awareness, self-regulation, empathy and social skills within nursing.
2. Understand how using emotional intelligence in the workplace can help to avoid compassion fatigue and burnout.
3. Be motivated to adopt a positive workplace culture, where staff can feel supported in all aspects of their role.

## Recommended reading titles (please enter up to 3)

Galanis, P., Vraka, I., Fragkou, D., Bilali, A. and Kaitelidou, D., 2021. Nurses' burnout and associated risk factors during the COVID-19 pandemic: A systematic review and meta-analysis. *Journal of advanced nursing*, 77 (8), pp.3286-3302.

Nolte, A.G., Downing, C., Temane, A. and Hastings-Tolsma, M., 2017. Compassion fatigue in nurses: A metasynthesis. *Journal of clinical nursing*, 26 (23-24), pp.4364-4378.

White, D.E. and Grason, S., 2019. The importance of emotional intelligence in nursing care. *Journal of Comprehensive Nursing Research and Care*, 4(152), pp.1-3.

## Biography - Lesley Butcher

Lesley is a Senior Lecturer in Nursing at Cardiff University. She has over 30 years' experience in Nursing, working mostly in specialist roles focused on caring for older people in care homes, hospitals, and community settings. She has a Master's degree in Psychoanalytic Psychotherapy. Lesley is passionate about applying and



instilling person-centred care principles in caring for people living with Dementia. She teaches extensively on this, across undergraduate and postgraduate programmes within Cardiff University, as well as delivering external presentations and webinars.

Lesley has conducted qualitative research on the barriers and facilitators to upholding human rights for people living with dementia in care homes. She is also a co-applicant and team member on a large NIHR research study across the UK, looking at the use of restrictive practices in the care of people with dementia in hospitals.

## **#282 The journey to NMC Approval with an Education Partnership Group using compassionate leadership**

### **Authors**

Ms. Jayne Murphy - Aston University

Dr. Jane Powell - Birmingham and Solihull ICB Education Partnership Group

Mrs. Jay Kumar - Birmingham and Solihull ICB Education Partnership Group

### **Aim of paper**

To share the key learning points on the journey to becoming an Approved Educational Institute for Adult Pre-Registration Nursing

### **Abstract**

An Education Partnership Group (EPG) was established in 2018 as a subgroup of the Local Workforce Action Board (LWAB) and now reports to the ICS People Board. Its central aim is to bring health and care partners from NHS, primary care, social care and AEIs together to ensure high quality education opportunities are established across the system based on what the local health and care needs are. Initially this was set up for non-medical undergraduate courses, including nursing, midwifery and

AHPs, and, more recently, this has now broadened to include medical and pharmacy UG education, with the intention to broaden the scope further. By streamlining and standardising processes, it has been able to minimise duplication and ensure better alignment of education provision across services.

There have been several successful outcomes including:

### **Course development**

- **Student Risk Assessment Panel** - Single Risk assessment and guidance

developed, and a system wide Independent Student RA panel was established

- **Data sharing** – The Group has a data sharing agreement in place which enables business intelligent data to be collected, analysed and shared to inform decision making with respect to recruitment, workforce supply and gaps. Supporting workforce intelligence from Trusts to enable better decision making across the ICS work force streams
- **Student Recruitment**
- **Clinical Placement Expansion**
- **New Community Placement Model**
- **Supported development of single portal** for online training of practice supervisors and assessors
- **Reducing Pre-registration Attrition and Improving Retention (RePAIR)**

### **3 learning outcomes**

1. Provide an overview of the journey towards NMC approval and AEI status
2. Discuss a regional approach to future nurse developments
3. Describe current collaborative work with a specific Education Partnership Group

## Recommended reading titles (please enter up to 3)

NHS (2020) *The People Plan* available via <https://www.england.nhs.uk/wp-content/uploads/2020/07/We-Are-The-NHS-Action-For-All-Of-Us-FINAL-March-21.pdf> Accessed 20.10.22

NMC (2018) *Future Nurse: Standards of Proficiency for Registered Nurses* available via <https://www.nmc.org.uk/globalassets/sitedocuments/standards-of-proficiency/nurses/future-nurse-proficiencies.pdf> Accessed 20.10.22

West, M.A. (2021) *Compassionate Leadership. Sustaining Wisdom, Humanity and Presence in Health and Social Care*. UK: The Swirling Leaf Press.

## Biography - Jayne Murphy

Jayne Murphy, Programme Lead Pre-Registration Nursing at Aston University

My interests are community nursing, prescribing, dementia, law and ethics. I love to see students flourish in both clinical and academic practice.

## #286 Creating Practice Learning Environments (Placements) for Student Nurses within Care Homes in Wales

### Authors

Mrs. Sarah Kingdom-Mills - Health Education Improvement Wales

Ms. Bernadette Evans - Health Education Improvement Wales

Mrs. Claire Hall - Health Education Improvement Wales

### Aim of paper

We aim to showcase the extensive scoping work that is currently going on across Wales regarding creating placement capacity

within the social care sector, supported by the newly commissioned care home education facilitator regional leads. This is a government funded initiative that emphasises the importance of developing relationships across the care homes, linked to the approved educational institutes; to narrow the gap of service provision between health and social care, whilst offering an option of a viable career pathway for nurses. Ensuring evidence based, positive person-centered compassionate nursing care outcomes for those who are supported within a care home setting.

### Abstract

This session will focus on a new process in the development of an All-Wales Care Home Education Facilitator (CHEF) team.

A successfully evaluated CHEF pilot in 2021 revealed the significant value of learning within care home settings and how this contributes to students' professional development. Three regional CHEFs commissioned by Health Education Improvement Wales (HEIW) funded by Welsh Government are now working strategically and operationally across Wales. The role is multi-faceted and spans the whole student journey including selection and recruitment, delivery of supervisor/assessor training, monitoring the quality of placements and supporting staff with students who are not meeting required levels of proficiency, enhancing positive outcomes for nursing education and professional development through the increase of placement availability for nursing students within care homes.

There are approximately 6,500 nursing students enrolled on pre-registration programmes at any one time across Wales, placement capacity is key, given increased student commissioned numbers, in a range of settings. Although placement expansion is important, the quality and sustainability of the practice learning experience is paramount. Practice learning experiences

are therefore dependent on a robust governance framework, assurance that educational audit/quality measures are in place, connectivity with universities and other external stakeholders, and evident welcoming student cultures. Increased placement capacity benchmarked against the governance framework, alongside student and placement evaluation will act as performance indicators to measure impact of the CHEF role.

Increasing placement learning within social care settings will help to contribute to a future workforce that possess a cohesive understanding of health and social care structures. Students therefore require placements that contribute to their understanding of inclusive, engaged, sustainable and responsive services caring for the people of Wales in their own homes and communities as identified within A Healthier Wales: Our Workforce Strategy for Health and Social Care (HEIW & Social Care Wales 2020).

### **3 learning outcomes**

- 1) Understanding of the multi-faceted role of the Care Home Education Facilitator in Wales
- 2) Appreciation of the Governance frameworks that are required to provide quality assurances for any newly created care home placement
- 3) Underpinning truncated work that is required to proceed from an initial discussion to the allocation of a student within a newly created care home placement

### **Recommended reading titles (please enter up to 3)**

- 1) Berntsen, K. and Bjork, I.T. (2010). Nursing students' perceptions of the clinical learning environment in nursing homes, *Journal of Nurse Education*, 49(1), 17-22.

- 2) Cooke, J. Greenway, K. and Schutz, S. (2021). Learning from nursing students' experiences and perceptions of their clinical placements in nursing homes: An integrative literature review, *Nurse Education Today*, 100, Available at: <https://www.sciencedirect.com/science/article/pii/S0260691721001143>

- 3) Neville, C. and Dickie, R. (2014). The evaluation of undergraduate nurses' attitudes, perspectives and perceptions toward older people. *Nurse Education Today*, 34(7) 1074-7

### **Biography - Sarah Kingdom-Mills**

I am one of the trio of Regional Lead Care Home Education Facilitators (CHEF) commissioned by Health Education Improvement Wales, funded by the Welsh Government.

Since 1996 I have practiced as a learning disability nurse. I have worked in Wales and England within a range of Health and Social Care settings, I have also worked within Leadership and Management roles and more recently in Practice Education.

My clinical experiences include assessment and treatment, specialist learning disability and autism services, complex behavioural challenges and continuing healthcare needs. In 2017 I took the decision to focus my career around Practice Education, an area of my work that I am passionate about. Taking on the role of the first CHEF in Wales in February 2021; an exciting and challenging opportunity. Following the successfully evaluated pilot the foundations for the regional roles had been laid and are now coming to fruition.

I am an alumni with the RCN Wales having been a finalist in the Nurse of the Year Awards 2021 for 'Supporting Education and Learning in Practice'; In addition, I chair the All Wales Practice Education Forum, and I

am a Bevan Commission Exemplar focusing on creating student nurse placements within care homes.

## **#287 Involving Experts by experience: mutual benefits guaranteed**

### **Authors**

Ms. Jayne Murphy - Aston University

Dr. Mary Drozd - Aston University

Mrs. Charlotte Bates - Aston University

### **Aim of paper**

To discuss the importance of involving experts by experience in programmes and the anticipated benefit to the students, the academic team, and the experts themselves

### **Abstract**

During the development of a pre-registration adult nursing curriculum, experts by experience were consulted to develop ideas for an inclusive approach to curriculum delivery. This led to feedback from individuals consulted stating the positive effects of being involved in the process. On further discussion with the academic team, positive feedback from experts by experience has recently been shared. It is apparent that there are positive effects of being invited to share experience from the experts themselves, in addition to the students who are fortunate enough to witness the event.

The literature will often refer to experts by experience as service user involvement. It is becoming more widespread and is perceived by both staff and service users to be a good policy (Omeni et al 2014). Involvement of experts by experience contributes to developing students' caring skills by supporting their understanding of the lived experience and reality of situations in healthcare environments (Thompson et al 2020). Health Education England produced a

Guide to Good Practice in Patient and Public Involvement in nurse education and state that the benefits of patient, service user and carer engagement in nurse education have profound and long-lasting impacts for the nursing profession. There is emerging evidence that explains the benefits to students, tutors, the health service and the experts by experience themselves. For instance, increased self-esteem, confidence and life satisfaction in being able to make a contribution, 'give something back' and turn a difficult time in life into a benefit for others.

It is important to consider how experts by experience are invited to contribute to the curriculum, so that the benefits are maximised for the experts themselves, the students and the academic team who are often responsible for organising the activities and events.

### **3 learning outcomes**

1. Explain the various approaches to involve experts by experience in curriculum development and delivery
2. Consider how all participants benefit from involvement of experts by experience in undergraduate and post graduate curriculums
3. Evaluate the positive impact on wellbeing for both contributors and recipients of experts by experience

### **Recommended reading titles (please enter up to 3)**

NHS England (2022)  
<https://www.hee.nhs.uk/our-work/patient-public-involvement-nurse-education>

Omeni E, Barnes M, MacDonald D, Crawford M, Rose D. Service user involvement: impact and participation: a survey of service user and staff perspectives. BMC Health Serv Res. 2014 Oct 25;14:491. doi: 10.1186/s12913-014-0491-7. PMID: 25344210; PMCID: PMC4212124.

Thompson, J., Tiplady, S. and Cook, G. (2020) Older people's involvement in healthcare education: views and experiences of older experts by experience. *Working with Older People*, Vol. 24 No. 2, pp. 125-135. <https://doi.org/10.1108/WWOP-01-2020-0003>

## **Biography - Jayne Murphy**

Jayne Murphy, Programme Lead Pre-Registration Nursing at Aston University

My interests are community nursing, prescribing, dementia, law and ethics. I love to see students flourish in both clinical and academic practice.

## **#290 Development & Implementation of a Preceptorship Programme for Internationally Educated Nurses**

### **Authors**

Ms. Lianne Humphries - King's College Hospital, NHS Foundation Trust

Mx. Joanne Poulter - Kings College Hospital, NHS Foundation Trust

### **Aim of paper**

The Corporate Education Team at King's College Hospital NHS Foundation Trust (KCH) are aiming to provide a Preceptorship Programme designed specifically for Internationally Educated Nurses (IENs). We recognise that this group of nurses are experienced with extensive knowledge and skills and we aim to equip them with the tools to adapt to work within the NHS and life here in the UK. Our aim is to enable them to transfer previous skills and build on experience to ensure that our IEN Preceptees are working at the top of their scope of practice with the opportunities to develop their careers.

### **Abstract**

Capital Nurse (2017) recommends that preceptorship should be available to support all newly registered nurses. The

development of the Preceptorship Programme for IENs at KCH aimed to incorporate the Capital Nurse Preceptorship Framework (Capital Nurse 2017) and the additional learning needs of IENs. A scoping exercise was carried out with Key Stakeholders to ascertain the need for a bespoke programme and the aims and objectives of the programme.

A proposal was taken to the Trust's Nursing & Midwifery Board where it was agreed that a pilot programme would be developed and implemented which would be evaluated and then adapted accordingly, to enable delivery to all IENs in the Trust.

The scoping confirmed that this group has different learning needs from preceptees who are newly qualified.

Six key themes were identified;

- Personal Wellbeing
- NHS Culture
- Patient Journey & Experience
- Technical Skills
- Non-technical Skills (Communication & Leadership)
- Professional Development

The themes have been incorporated into a six month programme. In addition to the taught content, included is a structure of protected time for reflection and restorative clinical supervision.

There is a significant body of research documenting the negative impact that, limiting our IENs ability to practice clinical skills they are already competent in, has. Feelings of incompetence, a perceived lack of respect, fears of becoming deskilled and decreased job satisfaction are common themes within research (Al-Hamdan et al, 2015; Stievano et al 2017; Salami et al 2018; Bond et al 2020; Mechen 2021). In light of this a 'skills day' and the subsequent expectation to retrain these skills has not been included within this programme. In its place a workbook has been developed which

focuses on completion of a self-assessment, personal development plan, portfolio development and regular meetings to ensure support in practice throughout the six months.

### 3 learning outcomes

1. To promote understanding of why the need for a bespoke preceptorship programme for IENs is necessary
2. To promote knowledge of how a bespoke preceptorship programme for IENs can be successfully implemented and evaluated
3. To promote understanding of the challenges faced with implementation

### Recommended reading titles (please enter up to 3)

Bond S, Merriman C, Walthall H (2020) The experiences of international nurses and midwives transitioning to work in the UK: a qualitative synthesis of the literature from 2010 to 2019. *Int J Nurs Stud* ;110:103693. doi:10.1016/j.ijnurstu.2020.103693

Mechen K (2021) Are we doing enough to support experienced internationally educated nurses (IENs) to transition successfully into work in the UK NHS? *Evidence Based Nursing*

Workforce Race Equality Standard (WRES) Implementation team (2019) A Model Employer: Increasing black and minority ethnic representation at senior levels across the NHS. NHS England Accessed Online: 25/10/2022 Accessible: <https://www.england.nhs.uk/wp-content/uploads/2019/01/wres-leadership-strategy.pdf>

### Biography - Lianne Humphries

Lianne Humphries has been a nurse working within the NHS for over 20 years. Her special interests are Critical Care Nursing and Nurse Education. She has worked within

various roles within Critical Care before moving into the Corporate Education team at King's College Hospital in 2020. She began work there with the Pre-registration Nurse Education team where she updated the Scope of Practice for students to reflect the Future Nurse Proficiencies. She then moved to the Post Registration Education Team where she has been key in the development and implementation of the bespoke Preceptorship Programme for Internationally Educated Nurses.

### #293 The knowledge, experiences and perceptions of general adult student nurses when caring for an adult patient with a learning disability: A qualitative study

#### Authors

Ms. Helen Marshall - University of Liverpool

Ms. Maxine Cromar-Hayes - University of Liverpool

Dr. Carolyn Lees - University of Liverpool

Mrs. Karen Deane - Merseycare NHS Foundation Trust

Mr. Denis Parkinson - University of Liverpool

#### Aim of paper

- To examine the knowledge and understanding of student nurses on an undergraduate programme about the needs of adults as patients who have a learning disability
- To explore the experiences and perceptions of student nurses when caring for adult patients with a learning disability
- To identify any gaps in knowledge and plan future curriculum content built around student need in order to provide inclusive and patient centred care



## Abstract

Evidence suggests that patients with a learning disability continue to experience health inequalities. A contributing factor is a lack of knowledge and understanding by health care professionals. Exploring student nurses' experiences and knowledge when caring for this group of patients, will inform future curriculum planning content. This study aligns with the Oliver McGowan mandatory disability and autism training recently introduced into health and social care environments.

Nursing students were invited to attend a focus group interview to share their experiences and perceptions regarding caring for a patient with a learning disability. There were 3 focus groups for 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> year undergraduate nurses.

The interview data was analysed to interpret the participants' experiences and data analysis was informed by the descriptive nature of the research. The process began by the individual members of the research team reading and re reading transcripts, followed by the use of a thematic map. The transcripts were read and re-read for understanding, then significant sections were selected to identify three main themes:

- knowledge
- confidence
- communication.

Based on preliminary data analysis and to raise awareness about learning disability, a 'Time for change' event was held at the University of Liverpool with Paula McGowan a multi collaborative event attend by undergraduate nurses and health and social care staff.

As a result of the study findings a strategy is now in place to review the curriculum content to ensure it is inclusive and responsive to student need. By maximising the use of simulation and learning disability related scenarios the aim will be to enhance

the delivery of nurse education. An interdependent learning event for student nurses and members of local learning disability organisations is being discussed. The findings from the study are transferable across other health care disciplines so maximising the impact and reach.

## 3 learning outcomes

- To recognise the importance of preparation in education in order to support student nurses to feel confident to care for a patient with a learning disability on clinical placement
- To understand the wider health and social care context regarding health inequalities that this population of patients face
- To understand and provide reasonable adjustments to support and empower patient centred care

## Recommended reading titles (please enter up to 3)

1. <https://www.hee.nhs.uk/our-work/learning-disability/current-projects/oliver-mcgowan-mandatory-training-learning-disability-autism>
2. <https://www.mencap.org.uk/sites/default/files/2018-06/Treat%20me%20well%20top%20%20reasonable%20adjustments.pdf>

## Biography - Helen Marshall

Helen Marshall is a lecturer working at the University of Liverpool. Her nursing career has been spent in the community setting caring for a wide range of patients with a multitude of health and social needs. She is a Queens Nurse and District Nurse. She has a strong interest in adult safeguarding and the Mental Capacity Act due to her previous role as a safeguarding adults specialist nurse.