

Education Bulletin



June 2020

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Compiled by John Gale, JET Library (Mid-Cheshire NHS Foundation Trust)

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Dental Education

The distance-learning dentists

Source: Healthcare

In a nutshell: Given that dentists spend a large proportion of their time breathing in other people's exhalations it's perhaps not surprising that dental students ended up doing more distance learning than usual during the Covid pandemic. In this study Mariana Morgado, from the Centro de Investigação Interdisciplinar Egas Moniz in Portugal, led a team of researchers asking 118 dental students how they felt about this state of affairs. The results of the study showed that online problem-based learning "can be considered a relevant learning tool when utilized within the specific context of clinical dental education, displaying benefits over the traditional learning strategy."

You can read the abstract of this article at: <http://dx.doi.org/10.3390/healthcare9040420>

Burnt out all over. What are the risk factors for dental students?

Source: BMC Medical Education

In a nutshell: The incidence of burn out among healthcare professionals can sometimes make the average Californian wildfire seem like a child's birthday cake. In this study Simin Z. Mohebbi, from Tehran University of Medical Sciences, led a team of researchers investigating burnout in 131 dental students. The highest burnout score belonged to the domain of "overload," whereas the lowest belonged to the domain of "neglect." The most-frequently mentioned motivation for becoming a dentist was money, with the least-frequently mentioned being "failing to enter other fields." Students motivated by altruism were more likely to be burnt out than those motivated by "others' advice." And burnout was higher in students with inadequate or moderate financial support and lower in students with less-well-educated mothers.

You can read the whole of this article at: <https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02475-w>



General Healthcare Education

Clinical placements – getting the environment right

Source: BMC Medical Education

In a nutshell: In an ideal world, when students went out on clinical placements, hospital education departments would be expecting them, doctors would know what they were teaching them, the IT department would have set up their email accounts with wi-fi working perfectly and the library would have had access to their reading lists and bought all the appropriate books; all of which would be accompanied by an ice-skating competition in Hades and a fly-past by the porcine Red Arrows. The extent to which these conditions are met is known as the clinical learning environment (CLE) and in this study a team of researchers led by Malin Sellberg, from the Karolinska Institute in Stockholm, assessed CLE as it pertained to 280 students of medicine, nursing, physiotherapy and speech-and-language therapy. Physiotherapy students gave the highest score for CLE and medical students the lowest. The students gave the highest ratings for “equal treatment,” and the lowest ratings for “supervisors’ familiarity with the learning objectives.”

You can read the whole of this article at: <https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-021-02687-8>

When gratitude leads to aptitude

Source: BMC Psychology

In a nutshell: The trend for gratitude journals – writing down five things one is grateful for – has been of benefit to many people; not least the stationery industry. In this study Norberto Nawa, from the National Institute of Information and Communications Technology in Japan, led a team of researchers investigating the use of gratitude journals in 84 undergraduates. Half of the students were asked to list five things they felt grateful for six days a week while the rest filled out a neutral self-evaluation. The study showed that the students who filled out the gratitude journal displayed “significant enhancements in academic motivation,” and decreases in amotivation. Follow-up three months later showed no sign that this motivation was waning.

You can read the abstract of this article at: <http://dx.doi.org/10.1186/s40359-021-00559-w>

What healthcare workers are dying to learn

Source: Education Sciences

In a nutshell: Most people’s brushes with the medical profession culminate in death sooner or later. An Australian online course Dying2Learn was aimed at the general public, had a non-medical focus and encouraged personal reflection and open discussion yet most of the people who took part in it were healthcare workers. Why? In this study Claris Oh, from Flinders University in Australia, led a team of researchers trying to find out. The most-commonly-mentioned responses related to general interest in the topic of death and dying but healthcare professionals were more likely to mention work-related motivations and improving communication skills. They hoped to be better at talking about death and dying “which might indicate a possible gap in their formal education in this area.”

You can read the abstract of this article at: <http://dx.doi.org/10.3390/educsci10040112>



Teaching healthcare workers advance-care planning

Source: BMC Medical Education

In a nutshell: In the good old days death was a relatively simple affair. You got sick, felt pain and, to paraphrase Philip Larkin, the priest and the doctor came running over the fields in their long coats. Nowadays it's a lot more complicated as doctors inject you with things, put 400 volts through your chest and drips into your arm so you can either recover, or spend nine months on life support until they run out of patience/50ps to stick in the meter and pull the plug on you. Getting patients to make decisions about how they want this process handled is called advance-care planning and in this study C.C. Yu, from the Geriatric Education and Research Institute in Singapore, led a team of researchers studying the effectiveness of the Respecting Choices® The Living Matters Advance Care Planning (ACP) facilitator training programme. They found that the programme led to improvements in understanding, confidence, and competence in managing ACP. The trainees continued to think of ACP as emotionally-draining but they enjoyed facilitating ACPs and "those who had experience completing/initiating ACP significantly held more positive views than those who did not."

You can read the whole of this article at: <https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-021-02735-3>

Putting the jigsaw together in Persia

Source: Journal of Education and Health Promotion

In a nutshell: Among the many items ineluctably migrating under the sofa - like salmon returning to their spawning grounds - in houses containing small children are pieces of jigsaw puzzles. Grown-ups – or, at least most of them – can be trusted with jigsaws though and the jigsaw technique of education sees people in groups assigned to study different aspects of a topic before returning to the group and sharing their knowledge, thus enabling the group to gather a picture of the topic as a whole. In this study Sareh [sic] Shakerian and Leila Abadi, from Shahid Beheshti University of Medical Sciences in Tehran, investigated the effectiveness of the jigsaw technique at teaching 44 community-health workers. Compared to lectures the jigsaw technique significantly increased the "mean score of motivation and performance."

You can read the abstract of this article at: http://dx.doi.org/10.4103/jehp.jehp_176_20

A healthy body and a healthy mind still go together

Source: International Journal of Environmental Research and Public Health

In a nutshell: Victorian schoolmasters used to swear by the doctrine *mens sana in corpore sano* – a healthy mind in a healthy body. It might not have felt like it when you wheezed around the school playing fields on a wet Wednesday afternoon but a team of researchers, led by Jie Zhang, from the Shanghai University of Sport, have backed it up with more evidence. They studied 1,004 college students in China and found that both men and women showed a significant increase in depressive symptoms from their first year to their second. "Perceived competence beliefs and task values toward physical activity were significant predictors of depressive symptoms," and "physically-active college students ... displayed fewer depressive symptoms compared to inactive peers over time."

You can read the abstract of this article at: <http://dx.doi.org/10.3390/ijerph18105121>



Interprofessional Education

When nurses and occupational-therapy students get together

Source: Nurse Education in Practice

In a nutshell: Rather like mixing ingredients together in a cake getting different health professionals to work together requires plenty of beating and stirring while keeping extraneous bodily fluids to a minimum. In this study Laurina Schmidt, from Swinburne University of Technology in Australia, led a team of researchers investigating the effectiveness of an interprofessional simulation exercise for nursing undergraduates and occupational-therapy students. 91 students and five lecturers took part in the study and interviews with them yielded two main themes, in turn made up of several sub-themes.

- Communication and Teamwork
 - Significance of communication in teamwork
 - Learning about, from, and with each other
 - Professional role identification and collaborative practice
 - Clinical leadership facilitated collaboration

- Lessons learnt from the simulation session
 - Enhanced preparation for clinical placement
 - The experience of interacting with a simulated patient
 - Holistic patient care

You can read the whole of this article at: <https://doi.org/10.1016/j.nepr.2021.103073>

Medical Education

Teaching evidence-informed practice. Part 219

Source: BMC Medical Education

In a nutshell: In the Middle Ages much time and energy was devoted to the quest of turning base metal into gold. The modern pedagogical equivalent is trying to enthuse students about evidence-based medicine, or, as in this study – led by Belinda J. Anderson, from Pace University in New York – evidence-informed practice (EIP). Between 2013 and 2018 Pacific College of Health and Science trained lecturers, and developed a curriculum in EIP, with money from the National Institutes of Health. The researchers found that the course led to a “statistically-significant improvement,” in students’ EIP skills, knowledge and behaviours although there was little change in their lecturers’ EIP-related clinical instruction.

You can read the whole of this article at: <https://bmcmmeduc.biomedcentral.com/articles/10.1186/s12909-021-02690-z>



Virtual patients and cultural competence

Source: BMC Medical Education

In a nutshell: In this study a team of researchers, led by Erica Rothlind, from the Karolinska Institute in Sweden, investigated how virtual patients could teach cultural competence in primary care to qualified doctors and medical students. The researchers interviewed the doctors and students and the theme “virtual patients might help improve cultural competence in physicians and medical students by complementing knowledge gained through the informal curriculum,” emerged. The participants found it “suitable as a tool for introducing the topic and for reflecting on one’s own consultations.”

You can read the whole of this article at: <https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-021-02701-z>

Why aren’t doctors getting stuck into research?

Source: BMC Medical Education

In a nutshell: Given the choice between treating patients and getting boxes of chocolates, or labouring over spreadsheets and references in the hope of getting an article published in the *Pitcairn Island Journal of Haemorrhoid Surgery*, most doctors are inclined to plump for the former, meaning that research participation by clinicians is declining. In this study Jaidyn Muhandirange, from Monash University in Australia, led a team of researchers investigating “the experiences, attitudes and understanding of research amongst medical students at an Australian medical school.” Out of 704 students fewer than half (44.9%) had contributed to a research project. Of those who had done research “increasing employability for specialty training programmes,” was the primary motivating factor for 51.9%, with only 20.5% citing an interest in academia as a motivator. Time constraints (65.3%) and uncertainty surrounding how to find research opportunities (63.8%) were the most-common barriers to getting involved in research.

You can read the whole of this article at: <https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-021-02713-9>

How much do ophthalmologists know about keratoconus?

Source: BMC Medical Education

In a nutshell: Ask most people what keratoconus is and they would probably guess at either a heavy-metal band, or a promising midfielder at AC Milan. It is, in fact, “a non-inflammatory eye condition in which the normally round dome-shaped clear window of the eye (cornea) progressively thins, causing a cone-like bulge to develop. This eventually impairs the ability of the eye to focus properly, potentially causing poor vision.” Cornea specialists know all about it, but how much do general ophthalmologists know? In this study a team of researchers, led by Philipp B. Baenninger, from the University of Zurich, attempted to find out. They asked cornea specialists to define “minimal keratoconus knowledge,” (MKK) and then used their answers to test general ophthalmologists on their know-how. 100 ophthalmologists took part in the study and none of them had MKK. Average MKK was 52%, but this ranged from 28.6% to 81%. Only 24% of participants correctly recalled the definition of keratoconus, 9% all risk factors, 5% all symptoms and 20% all treatment methods. The researchers concluded “there is a substantial mismatch between corneal specialist’ expectations and general ophthalmologists’ knowledge about keratoconus. The low recall of symptoms and risk factors may explain why ophthalmologists diagnose relatively few cases of keratoconus, resulting in inefficient care delivery and delayed intervention.”



You can read the whole of this article at: <https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-021-02738-0>

How do medical students cope with stress?

Source: BMC Medical Education

In a nutshell: While the rest of us were swanning round, playing football (badly), watching *Neighbours* and sitting in cafes reading the paper medical students were hard at work with wall-to-wall lectures, lots of coursework, and the odd encounter with an actual patient. So it's not surprising that medical students can find it all a bit stressful, but how do they cope with it? In this study Adam Neufeld from the University of Calgary and Greg Malin, from the University of Saskatchewan, attempted to find out in a study of 196 medical students. They found that, overall, the students' coping strategies were mostly adaptive, albeit with a few exceptions. Women used more behavioural disengagement, whereas men used less emotional and instrumental support. Third years used more denial to cope with stress than students in any other year.

You can read the whole of this article at: <https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-021-02734-4>

Nurse Education

How graduate students develop academic identity

Source: Nurse Education Today

In a nutshell: Nurses doing postgraduate courses often find themselves lost in a sea of academic gobbledygook, confusing databases, and sharp-eyed markers seizing on misplaced commas in references with all the maniacal zeal of a sixteenth-century witch-finder. In this study Tara C. Horrill, from the University of Manitoba in Canada, led a team of researchers investigating how "peer mentorship specifically impacts the development of academic identity." They interviewed eight graduate students, two peer mentors and five lecturers acting as mentors. All the participants provided reflective journals on their experiences. Five themes emerged from the journals which were:

- Walking through quicksand
- Navigating a complex academic world
- Developing academic identity through relationships
- Intentional cultivation of community
- Finding solid ground

The researchers concluded that "our finding highlight the relational nature of academic identity development, and the significant benefit of providing mentorship to graduate nursing students outside of formal learning spaces."

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104949>



There's no escaping the escape room

Source: Nurse Education Today

In a nutshell: Escape rooms are becoming so popular that sometimes it feels as though we might all end up in one, desperately trying to build a model of the Eiffel Tower out of spaghetti, with nobody on the other side of the door to let us out. In this study Ana Anguas-Gracia, from the University of Zaragoza in Spain, led a team of researchers evaluating the use of an escape room in an undergraduate nursing course. 126 third-year nursing students took part in the course and nearly all (99.21%) of them said it was an appropriate and innovative teaching and learning strategy. The students enjoyed playing the game, thought it should be integrated into nursing courses and said that playing the game had increased their motivation for learning.

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104948>

Can virtual reality help nurses cope with sepsis

Source: Nurse Education Today

In a nutshell: Being immersed in an alternative reality used to involve a good book, some good drugs, or – in 1978 at least – a fervent belief that Scotland might actually win the World Cup. Nowadays all you need is a fancy headcam. In this study Rakshya Adhikari, from Charak Academy in Nepal, led a team of researchers investigating the use of an immersive virtual-reality (IVR) sepsis game by pre-registration nursing students. The study – involving 19 students – found that the IVR simulation created a significant increase in self-confidence and a significant decrease in anxiety. Four themes emerged from interviews with the students which were:

- Acceptability
- Applicability
- Areas of improvement for the game
- Limitations of the game

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104944>

Simulation, medication, administration

Source: Nurse Education Today

In a nutshell: Most parents of small children will be familiar with the experience of waking up at four in the morning to find a crying child and not being able to remember whether you've given them Calpol lately or not. Administering drugs to patients is rather more complicated and requires a lot more expertise than sticking an old envelope by the cot to record one's dosing schedule*. In this study Rinat Avraham, from Ben-Gurion University of the Negev, in Israel, led a team of researchers investigating the use of simulation to teach medication administration to 128 third-year nursing students. The simulation increased the students' preparedness both when designed for an individual student and for a group of students. *Simulation performance* was the main contributor to the participant preparedness among the individual sample, whereas *previous preparedness* was the main contributor among the group sample. The association between simulation performance and clinical performance was mediated by *preparedness after simulation* in the *individual* sample, but not in the *group* sample.

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104947>

*Rest assured, no children were harmed gathering material for this bulletin.



Pain in Spain, but was there any gain?

Source: Nurse Education Today

In a nutshell: In common with many other countries the Spanish healthcare system had a terrible time in 2020. A shortage of qualified nurses led the Spanish Government to authorize the recruitment of final-year nursing students to work in the health service and in this study Juan Francisco Velarde-García, from the Instituto de Investigación Sanitaria Gregorio Marañón, led a team of researchers who interviewed 18 of them. The researchers found that the students had an undefined, mixed role, which hindered their skills and activities. "Learning was self-directed, sometimes through trial and error, and through experiencing critical events." The students found that time pressures and having to learn under pressure made learning difficult but they did learn to be organised and effective, acknowledge their limitations, gain confidence, face their fears, and mature.

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104942>

When new isn't always better

Source: Nurse Education Today

In a nutshell: Rather like rings on trees you can tell how old people are by what software they're happy using. Sadly, for those of us of a certain age, the old holy trinity of PowerPoint, Excel and Word has recently been augmented by a huge array of apps nobody quite knows what to do with. In this study Güzel Nur Aras, from Ağrı İbrahim Çeçen University and Bahar Çiftçi from Atatürk University (both in Turkey) compared the effectiveness of Kahoot online learning software to a more traditional question and answer session using Powerpoint. 65 nursing students took part in the study which found there was no difference in achievement and motivation levels between the two groups. Lecturers' blood pressure was not measured as part of the study.

You can read an abstract of this article at: <http://dx.doi.org/10.1016/j.nedt.2021.104930>

Situated learning and conflict resolution

Source: Nurse Education Today

In a nutshell: Situated learning "takes as its focus the relationship between learning and the social situation in which it occurs." In other words learning is as much about one's social relationships with one's colleagues, teachers, and instructors as it is about the quality of teaching, approach and materials. In this study Han-Gyo Choi and Sung Hee Ahn, from the Catholic University of Korea, studied the effectiveness of a conflict-resolution programme based on situated learning theory. 48 final-year nursing students took part in the study which found that problem-solving ability and subjective conflict resolution were both significantly improved by the programme, as was objective conflict resolution.

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104951>

Critical thinking and critical care

Source: Nurse Education in Practice

In a nutshell: Critical thinking can be loosely defined as the ability to think, rigorously and from first principles, for oneself. For many of us it's all a bit too much like hard work and – like vigorous physical exercise – we tend to give up



as we get into middle age, sub-contracting our thinking to the leader writers of our favourite newspapers. In this study a group of researchers, led by Shona Willers from Southern District Health Board in New Zealand, reviewed the literature on teaching nursing students and junior nurses to think critically in acute settings. The researchers found 23 articles which met their quality criteria and identified three main themes arising from them: learner-teacher relationship; reflection; and inquiry. The researchers found that strong relationships promoted positive role modelling and effective feedback – both of which contributed to the teaching of critical thinking. “Reflection strategies such as concept mapping and journaling were frequently used, while active student inquiry further promoted critical thinking in the acute setting.”

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2021.103074>

Peer learning in critical care

Source: Nurse Education in Practice

In a nutshell: A bit like coaches toiling away in the shadow of flashy football managers, preceptors are the unsung heroes of nurse education, taking less-experienced nurses under their wing and looking after them while they find their feet. In this study Anna Kjällquist-Petrisi and Ami Hommel, from Malmö University in Sweden, interviewed preceptors about their experiences of peer learning in an intensive-care unit. Three categories emerged from the interviews which were:

- Collaboration and communication
- Responsibility
- Psychosocial environment

“Some preceptors felt responsible for the delivery of adequate clinical practice despite students having difficulties in communicating and collaborating with each other or being at different experience levels.”

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2021.103086>

When solving the problem doesn't always solve the problem

Source: Nurse Education Today

In a nutshell: When I was a child I once attempted to put a recorder on the sloping roof of our piano. Again and again I picked it up and put it back on and again and again it kept rolling off. Eventually my mum came along and put the recorder at right angles to the edge of the piano, leaving me amazed at her powers of lateral thinking and problem-solving. One could argue the same scenario plays out when nurses manage patients' transitions between primary and hospital care; the immediate problems might be solved but the underlying ones remain in place. In this study Rikke B. Bøje, from Aarhus University in Denmark, led a team of researchers developing “a learning intervention in order to enable nurses to develop transitional healthcare practice.” Nine health professionals from primary-care services and seven from hospital services took part in the study. The participants identified several “needs for development,” including a wish to involve patients and their next-of-kin more and to emphasise relational care. They began to see challenges as caused by a systemic contradiction between their preoccupation with bureaucratic and managerial demands and patients' expectations of coherent care in transitional care. “The process of understanding challenges enabled the participants to change their perception from a need to solve problems as they appear on the surface to a need to address underlying systemic contradictions.”

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104950>



Is university really the best option?

Source: Nurse Education in Practice

In a nutshell: In the days of free tuition and student grants one could go to university without really thinking about it, spend three years indulging one's intellectual, pharmacological, alcoholic, and (if you were lucky) sexual curiosity and emerge unencumbered by student debt. Now, not so much. In this article Edward Pursell, from the University of London and independent researcher Niall McCrae argue that the move of nursing education into universities has served neither nursing students themselves, or patients, as well as intended. Students are worse off than their predecessors, have fewer practice opportunities, and often lack the sense of belonging that existed when training was hospital-based. "The academic environment is a deterrent to some who cannot afford fees or who would struggle to attain a university degree. Branch-specific courses have produced an inflexible workforce." Pursell and McCrae conclude that "the move from practice to universities was a bold approach, but it has failed. We urge a revised apprenticeship model, with university input and generic training."

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2021.103081>

In-service training and the deteriorating patient

Source: Nurse Education in Practice

In a nutshell: Like sand on dunes and pop stars' careers patients in hospital can go downhill at a moment's notice. In this study Mina Azimirad, from the University of Eastern Finland, led a team of researchers comparing in-service training in recognising deteriorating patients, among nurses in Finland and the UK. 180 nurses took part in the study, 86 from the UK and 94 from Finland. The nurses' views on the in-service training were positive but a lack of confidence, delays caused by hospital culture, and fear of criticism remained barriers to putting the training into practice. The nurses' self-reflection on their management of deteriorating patients indicated that 20-25% of deteriorating patients were missed. The researchers concluded that "nurse managers should promote a no-blame culture, mitigate unnecessary hospital culture and routines, and facilitate in-service education focusing on identification and management of deteriorating patients, simultaneously improving nurses' confidence."

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2021.103093>

Helping nursing students be ready for action

Source: Nurse Education in Practice

In a nutshell: Cynical observers of the EU's Covid-vaccination process can find their views confirmed when they reflect that – in her previous incarnation as German Defence Minister – Ursula von der Leyen was responsible for the German Army being so short of guns that they had to use broomsticks on a military exercise. To judge from some of the more doom-laden literature nursing students are about as well-prepared for starting work after the end of their nursing degree and in this study Michele Ragsdale, from Georgia Southwestern State University, and Jenny B. Schuessler, from the University of West Georgia reviewed the effects of final-year nursing placements and simulation on nursing students' readiness for practice. They found 48 articles that met their quality criteria. Themes relating to final-year placements included:

- Clinical-reasoning skills
- Barriers to the senior practicum
- Transition



Themes relating to simulation included:

- Preparation
- Competence development
- Clinical reasoning
- The number of human patient-simulators used

The researchers concluded that “nurse educators must ensure simulations are well-organized with clear objectives and that preceptors are supported in teaching and assessing students.”

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2021.103087>

But is it really so bad on placements?

Source: Nurse Education Today

In a nutshell: To judge from some of the gloomier articles on nursing students’ clinical placements the whole process is akin to trying to learn the finer points of hotel management at *Fawlty Towers* or military strategy under Captain Mainwaring. But is it really that bad? In this study Robyn Cant, from the Federation University Australia, led a team of researchers reviewing the evidence on nursing students’ evaluations of their clinical placements. The researchers found 21 studies which met their quality criteria. Overall satisfaction was 83.2%, while the students rated the “experience,” dimensions of their placement at 75.4%. The highest-rated dimension was Supervisory Relationship, whereas “Role of the Nurse Teacher,” was rated lower and more inconsistently.

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104983>

Flexible rostering and clinical placements

Source: Nurse Education in Practice

In a nutshell: In the days before these things were computerised – and who knows maybe since – many a school head was driven to a nervous breakdown trying to make sure that Mr Perkins wasn’t teaching chemistry to the fifth form and domestic-science to the first years at the same time, while ensuring Toby and Arabella weren’t simultaneously making a cheese soufflé, solving quadratic equations, and running laps of the rugby pitch. Rostering software has solved similar conundrums when it comes to scheduling nurses’ shifts but students on placements often find themselves bitterly bandaging when they should have been at their children’s sports day. In this study Judy Brook and Charlotte Kemp, from the University of London, studied the effects of a flexible-rostering system for nursing students’ clinical placements. Interviews with staff and students found that the system gave students control over their work-life balance and enabled them to feel empowered in their clinical areas, less anxious, and more focused on their development. Clinical staff reported “unexpected benefits in terms of student attitude and attendance, allowing them to focus on teaching rather than dealing with concerns or changing the rota.” There were a few practical “challenges,” with the system but both students and staff felt that this could be overcome by developing “rostering guidelines.”

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2021.103096>



When essay marking goes automatic

Source: Nurse Education in Practice

In a nutshell: Between organising gender-neutral toilets, topping up the crayons in the safe space and rooting out incriminating statues it's hardly surprising that academics sometimes find it hard to squeeze in marking students' essays. Help is at hand though and in this study Tracey C. Stephen, from the University of Alberta in Canada, assessed the effectiveness of an automated essay-scoring (AES) system. They compared the effectiveness of the automated system at marking 399 pieces of work, compared to two human markers. AES "approximated or surpassed agreement and reliability measures," achieved by the human markers and was more efficient. The researchers concluded that "AES is a reliable and cost-effective means of scoring constructed-response nursing examinations." Now, if only they could come up with a robot to sign petitions and write to *The Guardian* ...

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2021.103085>

Simulation in the Balearics

Source: Nurse Education Today

In a nutshell: It's hard to imagine wanting to do anything in the Balearic Islands but sunbathe, swim and eat something fishy washed down with a glass of dry white wine. Some people study to be nurses there though and in this article Alba Carrero-Planells, from the University of the Balearic Islands, examined the effectiveness of high-fidelity simulation for teaching nursing students basic nursing procedures. 91 students took part in the study and they gave the simulation an overall score of 9.3 out of 10. They were most-satisfied with the practical dimension of the simulation and least-satisfied with "motivation to attend class." They described the simulation as "a playful learning method allowing them to put their theoretical knowledge into practice and helping them to manage their fears before coming into contact with real care settings."

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104981>

Can an app help international nurses settle in?

Source: Nurse Education Today

In a nutshell: For most new workers on a ward it can be a stressful and unsettling experience; according to temperament one could end up adopting either the headless-chicken approach to work (chasing it until you crash into it) or the traffic-bollard method (being frozen to the spot while it all swirls around you). This problem can be even more acute for nurses from abroad and in this study Christina Aggar, from Southern Cross University in Australia, studied the effectiveness of a mobile app called mPreceptor specifically designed to support internationally-qualified nurses' communication and leadership skills during a six-week clinical placement. The app facilitated weekly learning content and activities in the areas of clinical communication and leadership; including self-assessment, goal-setting, case studies, and weekly detailed reflections. The study found that the app led to a significant increase in "nurse self-concept." "Leadership skills were significantly greater for those internationally-qualified nurses who engaged with mPreceptor."

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2021.104982>



Case-based learning, waiting for the next episode

Source: Journal of Professional Nursing

In a nutshell: Charles Dickens' novels were released in serial format with each instalment ending on a cliff-hanger in much the same way as contemporary chimpanzee-based drama *EastEnders*. In the same way patients tend to recur in GP's surgeries and hospitals – often until either the medical profession or the patient themselves gives up on the situation. In this study Mohammad Gholami, from Lorestan University in Iran, led a team of researchers analysing the effectiveness of case-based learning with multi-episode case studies. The researchers found that, compared to lectures, multi-episode case-based learning improved the students' problem-solving ability and learning motivation.

You can read the abstract of this article at: <http://dx.doi.org/10.1016/j.profnurs.2021.02.010>

Online Education

Alone, cooperating or competing. Which works best for gamified learning?

Source: Australasian Journal of Educational Technology

In a nutshell: Generations of Sunday School teachers have used songs, colouring in and jiggling about to try and teach their pupils about the mysteries of the Incarnation, Crucifixion and Resurrection only to watch their erstwhile charges drift away from the Church in droves; which goes to show that you can use as much sugar as you like but if you can't convince your pupils the pill is tasty and nutritious you're wasting your time. Nothing daunted higher-education lecturers have been using computer games to teach undergraduates this, that, and the other for a few years now and in this study Di Zou, from the Education University of Hong Kong, led a team of researchers studying the use of computer games to teach 90 undergraduates information literacy. The results showed statistically-significant effects of the way the games were played on students' learning performance, motivation, self-efficacy, and "flow," experiences. Playing the game on one's own was inferior in all four aspects. Playing cooperatively was more effective at enhancing learning performance and "flow," whereas playing competitively was better at promoting self-efficacy.

You can read the abstract of this article at: <https://ajet.org.au/index.php/AJET/article/view/6682>

Pharmacy Education

When the pharmacy classroom goes online

Source: BMC Medical Education

In a nutshell: Many people suspect pharmacists disappear into a parallel universe when they nip into the back office to prepare their medication; perhaps setting to in a wizard's hat with pestles, mortars and glass flasks full of bubbling potions. Like many other students those studying pharmacy have had to move into the online world during the Covid pandemic and in this study a team of researchers, led by Omar A. Almohammed, from King Saud University in Saudi Arabia, asked them how they found it. 87 students took part in the study and they were "mostly positive," about the experience. They enjoyed the time flexibility that allowed "the learning of new skills and reflection on previous experiences," although 15% experienced difficulty finding quiet places with a reliable internet connection, or had difficulty working on team-based activities whilst others were anxious about the lack of adequate patient-care



experience. On balance though, the students found the experience enriching as they gained experience and understanding of academic workflow, gained skills, and overcame the challenges they faced.

You can read the whole of this article at: <https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-021-02698-5>

When robots mark your homework

Source: Innovations in Pharmacy

In a nutshell: The words “see me,” written in red pen at the end of an essay have struck fear into generations of pupils presaging at best a thorough shellacking and at worst the kind of scenario Sting outlined in “Don’t Stand So Close to Me.” Marking is already automated in some universities and in this study Leah Parsons Simpson, from Kentucky Community and Technical College System, led a team of researchers investigating the use of automated feedback for 139 third-year pharmacy students. The researchers tested the use of ExamSoft which provides a “strength and opportunities*,” report to students. They found that “students who received enhanced ExamSoft feedback reported significantly higher relative autonomy index for feedback review than students who did not receive the feedback. This suggests that the enhanced ExamSoft feedback was autonomy-supportive.”

You can read the abstract of this article at: <http://dx.doi.org/10.24926/iip.v9i2.984>

*Presumably along the lines of “you won’t get an opportunity to work in a chemist’s if you come up with much more of this drivel.”

... and if it’s not automated feedback it’s computer games

Source: Innovations in Pharmacy

In a nutshell: From the perspective of an outsider most computer games seem to feature either football, World War Two, or organised crime. One might have thought the workings of the human immune system could provide a welcome alternative to this unholy trinity of screen-based time-wasting with people piloting T cells as they whizz around the inside of human bodies, trying to avoid crashing into the spleen and zapping microbes. One imagines this wasn’t quite what a team of researchers, led by Connie S. Barber, from Southern Illinois University, had in mind when they studied the use of the Classcraft® learning system in an Immunology and Immunization training course. Classcraft® is a “gamified learning system designed to integrate easily with normal classroom activities and to enhance collaboration and teamwork.” The researchers found that value and enjoyment motivated the students to use Classcraft® and that “the ease of use of the system positively impacted students’ enjoyment ... students’ choice regarding how much they were required to engaged with the system positively impacted the value and enjoyment that they experienced.”

You can read the abstract of this article at: <http://dx.doi.org/10.24926/iip.v11i4.3328>

