

Education Bulletin



September 2020

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

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General Healthcare Education

Teaching empathy, coping with violence

Source: Nurse Education Today

In a nutshell: Cram together lots of ill people, stressed relatives, drunks and drug addicts with little in the way of refreshments or entertainment and then make them wait for hours with no indication as to when they will get help and it's no surprise that some of them become violent and abusive. One could say it's to the British public's eternal credit that more of them don't. Unfortunately doctors and nurses often bear the brunt of it and in this study Yong-Shian Goh, from the National University of Singapore, led a team of researchers investigating the use of a training programme called ECARE (Empathetic Care and Response) aimed at helping them to deal with potentially violent and abusive patients. 249 nurses and 50 medical students took part in the study which found that the ECARE course improved the participants' scores for empathy and confidence. The researchers concluded that their study demonstrated that "experiential learning could improve the learners' empathy through the integration of hands-on learning."

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2020.104591>

When lectures become sandwiches

Source: BMC Medical Education

In a nutshell: Along with Captain Boycott and the Duke of Wellington, the Earl of Sandwich joins the list of people whose eponyms are more famous than they are. To add to the linguistic complexity sandwich now also applies to courses and a demographic generation as well as a handy snack involving bread. In this study Anna Bock, from University Hospital RWTH in Aachen, Germany, led a team of researchers investigating the effectiveness of sandwich lectures in which a talking head on stage alternated with group activity. 64 dental students took part in the study which found that, compared to a traditional lecture, the sandwich lecture produced a higher level of learning and was enjoyed more by the students.

You can read the whole of this article at:

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02209-y>

Social media and students. Why meeting them where they're at can pay dividends

Source: Innovations in Education and Teaching International

In a nutshell: It's hard to imagine what people did at work before the invention of social media; have proper tea breaks and go to the pub for lunch if my Dad's experience is anything to go by. Young people use social media outside work too and in this study David Hortigüela-Alcalá, from the University of Burgos, in Spain, led a team of researchers looking into the use of Twitter and Instagram for teaching purposes. 197 students took part in the study, 100 of whom experienced "the pedagogical use of Twitter and Instagram." The study found that, compared to students not using social media, "the pedagogical use of Twitter and Instagram bore a significant influence, increasing both student motivation and involvement, as well as their degree of achievement."

You can read the abstract of this article at: <http://dx.doi.org/10.1080/14703297.2019.1579665>

A funny thing happened on the way to the (online) forum

Source: Interactive Learning Environments

In a nutshell: In the days before Twitter and newspaper comment sections allowed us all to happily exchange death threats and accusations of Stalinism, fascism and Nazism people used to communicate more slowly – and sometimes more civilly - using discussion boards and forums. Person A wrote a post and a while later, having sucked their teeth and thought about it, Person B would respond. In this study Xiaowei Kang and Wen Zhang, from the New Jersey Institute of Technology, studied the effectiveness of forum-based online teaching. They found that, compared to traditional class teaching, forum-based online teaching "effectively improved students' learning engagement and motivation as well as reduc[ing] procrastination and plagiarism." Although some students were "emotionally



resistant,” to the forum-based methods most believed their presentation and other academic skills could be improved by “forum-based online teaching,” and the students “generally accepted moderate levels of peer pressure and competition that were created by the forum-based learning process.”

You can read the abstract of this article at: <http://dx.doi.org/10.1080/10494820.2020.1817758>

Is information a gateway drug for education?

Source: Learning and Motivation

In a nutshell: “Increase of appetite had grown. By what it fed on,” said Hamlet, or, as Super Hans from Peep Show put it rather more succinctly “I’ll tell you what, that crack is really moreish.” In this study, a team of researchers, led by Annie S. Ditta, from the University of California, investigated whether providing a small amount of information to students could lead to a greater thirst for knowledge in the future. The researchers studied college-age people, people in large public universities and people in a small private university. They found that watching a TED talk video pertaining to any topic led to an increase in motivation to continue learning about that topic and other topics more generally. They concluded “these results reveal a need to broaden models of motivation to consider the importance of exposure to content to increase motivation to learn.”

You can read the abstract of this article at: <http://dx.doi.org/10.1016/j.lmot.2020.101668>

Inter-professional Education

Inter-professional education in GP practices

Source: BMC Medical Education

In a nutshell: In this study R. van der Gulden, from Radboud University Medical Centre in the Netherlands, led a team of researchers studying interprofessional education in GP practices. Despite people’s attitudes to interprofessional education and collaboration being positive they didn’t actually happen that much in GP training practices. Possible explanations for this included: limited knowledge, prejudice, lack of role models, and a hierarchical organisational structure. Integrating interprofessional education into daily practice e.g. via recurring scheduled meetings helped practices to do more of it.

You can read the whole of this article at:

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02206-1>

Teaching people to support refugees

Source: BMC Medical Education

In a nutshell: Refugees don’t leave their past behind when they arrive somewhere safer; many of them suffer from post-traumatic stress disorder (PTSD) because of the things that caused them to flee in the first place. In this study Stefan Jobst, from the University of Freiburg in Germany, led a team of researchers evaluating an inter-professional course about PTSD in refugees. 39 people took three of the courses which lasted half a day and was made up of eight modules. The participants were “very satisfied,” with the course and “a positive effect on their knowledge was detected.” However, there was no correlation between how satisfied the participants were with the course and how much they learnt.

You can read the whole of this article at:

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02220-3>

A noteworthy method of inter-professional education

Source: Nurse Education Today

In a nutshell: Despite the glamorous attractions of enemas, catheters and digital rectal examination perhaps the most important thing any healthcare professional can do is to write up a patient’s notes telling other people what they’re suffering from and what has already been done about it. In this study Anita Carin Gudmundsen, from The Arctic University of Norway, led a team of researchers investigating how writing up patients’ notes could help a



mixed team of medical, nursing, occupational therapy and physiotherapy students learn to work together. Three mixed groups of students took part in a two-week inter-professional placement in a geriatric rehabilitation ward. The researchers found that the students “creatively and dynamically used a narrative note in the electronic patient record system in the ward to create an overview of care and ensure continuity of care for the patients for whom they were responsible ... When new information was entered in the note, information already written by individual students and student pairs was reviewed by all students, revised and mutually refined.” The researchers concluded that “patient documentation can be a tool for stimulating inter-professional collaboration when students are allowed to organise patient care independently.”

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2020.104606>

Medical Education

The wonder of wikis

Source: BMC Medical Education

In a nutshell: A wiki is a resource on the internet which anyone can edit, the most famous example of which being, of course, Wikipedia. In this study Ali Ahmadian Khoynaroud, from Tabriz University of Medical Sciences, in Iran, led a team of researchers investigating the use of wikis in flipped classrooms. 205 masters students in a medical school took part in the study. 85 students did their group assignment on an educational wiki and 120 did it in the conventional way. The researchers found that the students in the wiki group were more satisfied with the course and did more – and better-quality – work.

You can read the whole of this article at:

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02223-0>

What makes for good peer coaching?

Source: Surgical Endoscopy

In a nutshell: Peer coaching has been shown to lead to very high rates of practice changes and use of new skills. In this study Sofia Valanci-Aroesty, from McGill University in Canada, led a team of researchers who interviewed 27 surgeons about peer coaching and what they thought made it work (or not). The surgeons agreed that coaching programmes should be voluntary, involve bi-directional learning and provide CME credits. Live, in situ, coaching was preferred. The surgeons motivations for taking part in coaching included a desire to learn new techniques (48%), keeping up-to-date with the evolution of surgical practice (30%) and improvement of patient outcomes (18%). Barriers included: surgical culture (42%), feeling that they didn't need it (26%), logistical constraints (23%) and not getting on with coaches (9%).

You can read the abstract of this article at: <http://dx.doi.org/10.1007/s00464-020-07968-9>

Improving wellbeing in junior doctors

Source: BMC Medical Education

In a nutshell: If you need hypnotic regression to remember the days when you felt enthusiastic about work and/or that it made a difference you might be suffering from burnout. Even junior doctors with full heads of hair, fully-functioning prostate glands and no children aren't immune and in this study Antonia Rich, from University College London, studied the effectiveness of a series of workshops which included group discussions of challenges experienced and strategies to enhance self-care and wellbeing. The researchers found that the junior doctors found the workshops useful and said they would recommend them to other people. One month after the intervention they had a statistically-significant reduction in disengagement and exhaustion and “improvement in boundary control.”

You can read the whole of this article at:

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02160-y>



Do adaptive tutorials make a difference?

Source: BMC Medical Education

In a nutshell: Adaptive tutorials are “a form of online intelligent tutoring system,” which “provided guided instruction with immediate personalised feedback on the user’s input,” i.e. they tell you what to do and give you marks as you go along. Material is broken up into manageable portions and more complex concepts introduced gradually with examples and feedback. In this study Stuart W.T. Wade, from the University of New South Wales in Sydney, led a team of researchers comparing and adaptive tutorial in radiology with more traditional web-based learning. The researchers found that the students finished the adaptive tutorials quicker than they did the web-based resources, they were more engaged with them and saw them as being more valuable. However, the test scores of the students using the adaptive tutorials and those using web-based resources were not statistically different.

You can read the whole of this article at:

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02237-8#abbreviations>

Are 3D models better for teaching anatomy?

Source: BMC Medical Education

In a nutshell: Quite a few people have 3D printers at home now. How they cope with printer jams and what the equivalent of photocopying your bottom is, is something of a mystery but a number of medical schools are also using 3D models to teach anatomy. In this study Zhen Ye, from Shandong Academy of Medical Sciences, led a team of researchers reviewing the evidence into their effectiveness. They found that compared to students using more conventional methods of learning those using 3D models had “advantages in accuracy and answering time.” “In the test of anatomical knowledge, the test results of students in the 3D group were not inferior ... to those in the conventional group ... [and] more students in the 3D printing group were satisfied with their learning compared with the conventional group.”

You can read the whole of this article at:

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02242-x>

Moving smoothly from trainee to consultant

Source: British Medical Journal

In a nutshell: Some people argue that there is more to moving from a junior doctor to a consultant than learning how to do a bow-tie, honing one’s golf swing and the ability to defend a parking space with the tenacity of a ferret down a rabbit-hole – if nothing else being the person the buck stops at requires a certain amount of confidence and courage, if not expertise. In this article Abi Rimmer interviews three people about making this transition. Rebecca Caulfield, an ST8 from Mersey Deanery advises asking about opportunities, going to consultants’ meetings and reminding people that you are nearly finishing your training. “Identify your dream job and then ask for it – if you don’t ask you don’t get... Being a consultant involves some management so it might help to read a business plan or try courses for new consultants on medical education and management.” Andrew Tabner, a consultant from Royal Derby Hospital, advises taking a little time off before starting one’s first consultant role. Pick your department with care and think about your job plan early. Don’t forget to think about finances and get a good financial adviser. And Nikola [sic] Henderson from NHS Tayside advises being polite and kind to patients and staff and remembering that no job is beneath you. Build relationships and allies. Get email installed on your phone and protect scheduled non-working time.

If you have access to the British Medical Journal you can read the whole of this article at:

<https://doi.org/10.1136/bmj.m3677>



Nurse Education

Making simulation psychologically safe

Source: Nurse Education Today

In a nutshell: For anyone not involved in air-traffic control or piloting Edwardian liners through icebergs making mistakes can be a valuable way of learning. Learning from mistakes requires psychological safety and in this study Carol T. Kostovich, from Loyola University in Chicago, led a team of researchers who interviewed 37 nursing lecturers asking them how they created psychological safety during simulation exercises. Five themes emerged from the interviews which were:

- Setting the stage
- It's OK, it's simulation
- Everyone is here to learn
- Planned strategies
- Facilitator as observer

The researchers concluded “faculty perceive that they play a role in establishing a psychologically safe learning environment during all three phases of a simulation experience. Scenarios are purposefully designed to emotionally protect students while they participate in unfamiliar encounters. Strategies are implemented throughout all three phases to facilitate student risk-taking as part of the learning process. Faculty watch for verbal and non-verbal cues by students signaling a potentially psychologically unsafe learning environment, and intervene to protect them if necessary.”

You can read the abstract of this article at: <http://dx.doi.org/10.1016/j.nedt.2020.104468>

When training uses virtual patients

Source: Nurse Education Today

In a nutshell: Examining the real world, as constituted in 2020, it's easy to see why a virtual one might seem more attractive. Researchers are starting to look into virtual patients for simulations with nursing students; you don't have to pay them expenses, give them tea and biscuits or listen to their stories about Aunt Mabel's haemorrhoids. In this study Shefaly Shorey, from the National University of Singapore, led a team of researchers looking into the effectiveness of communication skills training using virtual reality. 24 nursing students and six “clinical facilitators,” took part in the study. Early implementation, continued accessibility, enhanced realism and better technology were listed as key areas for improvement, whilst increased “situational sensitivity,” and language training were recommended to improve the students' communication skills.

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2020.104592>

Helping new nurse become more resilient

Source: Nurse Education Today

In a nutshell: Resilience Based Clinical Supervision (RBCS) is based on Compassion-Focused Therapy and aims to reduce work-related stress and support people to “reframe their experiences through structured and reflective discussion.” It aims to teach skills in mindfulness, distress tolerance, and “positive reframing.”* In this study Gemma Stacey from Nottingham University led a team of researchers studying the effectiveness of RBCS in a study of 48 newly-qualified nurses. The study showed that the new nurses were “extending and accepting compassion to and from their peers, signifying the compassionate flow within the group setting. This was continued through the development of self-care strategies ... [used] in practice, which allowed compassion to flow into patient care and towards colleagues.”

*I.e. positively reframing your cruise liner sinking as “It's been lovely to experiment with new deck-chair formations and/or I'm having a nice refreshing dip in some lovely cold water.”

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2020.104564>



Breathe deeply, pass your exam

Source: BMC Medical Education

In a nutshell: One of the best ways of relaxation is, of course, a gin and tonic and a bag of salted peanuts in a comfy armchair. Unfortunately this can be frowned upon in a clinical environment and in this study Sadaf Mojarrab, from Shiraz University of Medical Sciences, led a team of researchers studying the effectiveness of less alcohol-dependent relaxation techniques on nursing students' performance in an OSCE exam. 76 students took part in the study, 41 of whom took part in a pre-exam anxiety-coping programme which included relaxation and soothing techniques, diaphragmatic breathing training and progressive muscle relaxation training, accompanied by light instrumental music with the other students forming a control group. The study found that the relaxation programme led to a substantial reduction in anxiety and improved the students' exam results.

You can read the whole of this article at:

<https://bmcmmededuc.biomedcentral.com/articles/10.1186/s12909-020-02228-9>

The fine art of reflective practice

Source: Nurse Education in Practice

In a nutshell: "The unexamined life is not worth living," argued Socrates. This didn't do much good for poor old Narcissus who got turned into a daffodil when he stopped to admire his reflection in a puddle. You pay your money and you take your choice I suppose. Nurses and doctors are encouraged to be reflective, however, and in this article B. O'Brien and M.M. Graham, from the University of Limerick in Ireland, studied the effect of guided reflection organised during fourth-year nursing students' internship. Three categories emerged from interviews with the students which were:

- Beginnings for reflective learning
- Engaging in reflective learning
- Being a reflective practitioner

The students said that the guided group reflection provided positive opportunities for enhancing confidence and "valued reflective time within the closed group structure, which fostered personal and professional development."

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2020.102884>

No place like home for trainee nurses

Source: Nurse Education in Practice

In a nutshell: For most people nursing conjures up images of hospitals but a lot of nursing is done in people's homes. Placements to learn about doing this aren't always easy to arrange and in this study Caralise W. Hunt and Morgan Yordy, from Auburn University in Alabama, developed an "alternate [sic] home health experience that provided students [with] the opportunity to complete a home evaluation, patient assessment, and teaching for a community resident with an acute or commonly-occurring medical condition." The researchers concluded that the experience enabled students to "meet the clinical objectives to demonstrate effective communication, conduct a home assessment, and provide health promotion teaching within the community."

You can read the abstract of this article at: <https://doi.org/10.1016/j.nepr.2020.102891>

Simulation and medication

Source: Nurse Education Today

In a nutshell: It's easy to get a decimal point in the wrong place, particularly at the end of a long shift. When doctors' handwriting is taken into account it's a miracle it doesn't happen more often. In this study Sarah J. Craig, from the University of Virginia, led a team of researchers assessing the effectiveness of "additional clinical simulation experience and debriefing sessions focused on medication safety practices." The researchers found that the simulations and debriefings made no difference to students' knowledge but did lead to a "significant statistical increase in competency [sic]"

You can read the abstract of this article at: <https://doi.org/10.1016/j.nedt.2020.104605>



Pharmacy Education

When lecture capture loses its lustre

Source: International Journal of Educational Technology in Higher Education

In a nutshell: Although it might feel like a hostage situation for those involved in them lecture capture is just the video recording of lectures so they can be watched again, or for the first time with the benefit of being able to wear pyjamas. In this study Farhat Naz Hussain, from Qatar University, led a team of researchers analysing the usage of captured lectures by undergraduate pharmacy students. The researchers found that first-year students were the most likely to watch captured lectures and that they were most likely to watch them at the beginning of the academic year implying that either more students turned up to watch lectures in the flesh or that students had decided their lecturers had nothing worthwhile to say, either in the flesh or digitally.

You can read the abstract of this article at:

<https://educationaltechnologyjournal.springeropen.com/articles/10.1186/s41239-020-00214-1>

