



48th World Congress on

Advanced Nursing Research

June 14-15, 2018 | Dublin, Ireland

Scientific Tracks & Abstracts Day 1

Advanced Nursing Research 2018

Sessions:

Day 1 June 14, 2018

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Session Chair
Denise A Smart
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Session Co-Chair
Lois James
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Ása Róin, University of the Faroe Islands, Faroe Islands

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Title: Undergraduate nursing student's preparation for clinical placement: A simulated live ward experience

Joanne Porter, Federation University, Australia

Title: Factors influencing the high school students' choice of a nursing career in Bahrain: Development of a best practice model for nursing recruitment

Eman Tawash, Royal College of Surgeons in Ireland, Bahrain

Title: Challenges experienced by registered advanced psychiatric Nurses employed in psychiatric facilities in South Africa

Evalina Van Wijk, Western Cape College of Nursing, South Africa

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Geriatric outreach and training with care (GOT Care!): An interprofessional solution to enhance training for the healthcare workforce and improve outcomes for vulnerable older adults

Millicent M Malcolm

University of Connecticut, USA

Geriatric outreach and training with care (GOT! Care), propelled with national grant funding, enhanced training for the geriatric workforce and improve outcomes for older adults. This academic-community partnership included geriatric faculty experts from nursing, medicine, dental medicine, pharmacy, physical therapy, social work, and public health. The team trained healthcare students for culturally sensitive, evidenced-based interprofessional geriatric care. The faculty-student team participated in a home visit outreach program to improve outcomes for older adults with multiple chronic conditions and high emergency department (ED) use. Using a comprehensive geriatric assessment, the team identified risk factors for hospitalization and made recommendations to primary care providers. This innovative quality improvement project resulted in positive outcomes for students, faculty, patients and primary care providers. Interprofessional students (N=264) were trained together and data was collected using the collaborative practice assessment tool. A statistically significant increase ($p < .000$) in student pre and post scores were found in the community linkages, coordination of care, communication, and information exchange subscales. Contextual data revealed: a) mutual respect for team members, b) open dialogue and communication among disciplines, c) patient centered focus, d) strong desire for collaboration, e) members are given an active role, f) promotion of interprofessional care at post-conference discussions, and g) networking with agencies. The effectiveness of this project for older adults (N=60) followed the Institute of Medicine Triple Aim parameters. Data were collected with a mixed methods approach using PROMIS Global Health 10, the Modified Healthcare Effectiveness Data and Information Set (HEDIS) and an in-person interview. Results indicate GOT! Care to be cost-effective geriatric training program focusing on quality care and improved health for the older adults served, with high levels of satisfaction and decreased ED visits among the GOT! Care patients.



Biography

Millicent M Malcolm is an Assistant Clinical Professor at the University of Connecticut School of Nursing. She was the Primary Investigator for geriatric outreach and training with care, a 3 year/1.4 mil government funded Inter Professional Training and Outreach Project. This project showed promise for inter professional collaborative education and practice as a means to improve vulnerable patient outcomes. She has been a Specialist in the care of older adults for over 30 years, board certified as a Gerontological Nurse Practitioner for the past 18 years. Her clinical practice focuses on home visits for frail older adults. Her research interests include inter professional training and practice, and reducing risks and preventing iatrogenic suffering for older adults. She was awarded the Connecticut Nurse Practitioner of the Year in 2015, and was inducted into the Fellows of the American Association of Nurse Practitioners in 2016.

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Nursing students' sleep patterns and perceptions of safe practice

Lois James

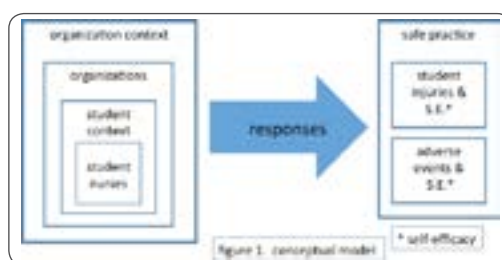
Washington State University, USA

Statement of the Problem: Nursing students make an abrupt transition from traditional classes into clinical rotations and shift work. Understanding student nurses' initial sleep patterns in response to clinical rotations can yield insights into opportunities for occupational interventions at the university and hospital level. The purpose of this project was to describe students' sleep patterns and perceptions of safe practice during their first semester of clinical rotations.

Methodology: We measured the sleep of 19 full-time J2 nursing students before, during, and after their first clinical rotations. Sleep was measured objectively using wrist activity monitors (actigraphy) and sleepiness was measured using sleep diaries for seven consecutive days at each time period. During these same time periods we used Bandura's self-efficacy scales to measure students' perceptions of safe practice. We then used multi-level-modeling (MLM) to explore associations between students' sleep, sleepiness, and their perceptions of safe practice.

Findings: Nursing students' sleep quantity did not differ across time periods; they consistently received approximately 7 hours and 20 minutes per night. The number of students reporting sleepiness however increased from 29% before rotations, to 32% during rotations, to 39% after rotations. Furthermore, students assigned to night shift rotations had lower self-efficacy scores than students assigned to day shift rotations (82% vs. 87%). Finally, within individual students, feeling sleepy significantly predicted lower safe-practice self-efficacy scores ($f=42.55$; $df=1.60$; $p<.001$).

Conclusion & Significance: Our results reveal that sleepiness significantly degrades student confidence in their ability to perform safe nursing practice. Our work addresses a gap in the total worker health (TWH) research by examining a critical period in the professional development of nurses, and helps to guide occupational interventions—particularly those targeted towards reducing nursing student sleepiness.



Biography

Lois James is an Assistant Professor at the WSU College of Nursing. She has a BA in Psychology from Trinity College Dublin, and received her PhD in Criminal Justice from WSU in 2011. During her time at WSU, she has brought in approximately \$3,000,000 of extramural funding as PI or Co-PI. She focuses on the relationship between sleep, health, and performance in elite populations such as nurses, combat medics, military personnel, police officers, and top tier athletes. Through understanding the prevalence and impact of sleep deprivation and circadian disruption within these populations she creates fatigue management strategies to help build resilience and reduce the risk of performance deficits and chronic health issues. Examples of these strategies are shift-work related fatigue management plans for police officers and nurses, and jet lag management plans for athletes competing overseas.

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Admission to discharge: Obstetric simulated clinical experiences

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With an increase in nursing programs, there is more competition for clinical sites for maternal-newborn clinical rotations. High fidelity simulated clinical experiences are being substituted for hospital clinical rotations. A technical college in the Southeast region of the United States of America is using five-hour simulated clinical experiences in which obstetric and newborn high-fidelity manikins are used as substitutes for hospital clinical rotations. Three patient scenarios are used for the simulated clinical experiences: gestational diabetes, preeclampsia, or preterm labor. Newborn nursing care and maternal complications are also incorporated into the scenarios. This use of simulated clinical experiences has been endorsed by the National Council of State Boards of Nursing and the National League of Nursing as a substitute for hospital clinical rotations. Nursing students have increased understanding of the entire antepartum nursing care to postpartum discharge process by participating in the simulated clinical experiences and are able to obtain hands-on nursing care experience when unable to obtain the clinical experience due to lack of a hospital clinical rotations.

Biography

Cheryl L DeGraw has many years of experience in Maternal-Child Nursing Care. She is a Neonatal Nurse Practitioner and has provided nursing care in labor and delivery, all three levels of the Newborn Nursery, and in Postpartum or Mother-Baby Units. She is currently the Lead Instructor for Family-Centered Nursing Care at a Technical College in South Carolina. She developed obstetric simulated clinical experiences (SCEs) to provide alternative clinical rotations to hospital settings when they are unavailable for nursing students. These SCEs have increased nursing student's understanding of the antepartum, intrapartum postpartum and newborn nursing care.

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The quality of nursing documentation in Tallinn Children Hospital

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Statement of the Problem: Growing interest in using NANDA-I nursing diagnoses has been observed in health care facilities due to the fact that it ensures using common terminology for patient's health assessment and in planning nursing care. Nursing documentation is uneven in quality in Estonia which hinders the availability and continuity of nursing care. Quality standards and indicators are not used for consistent assessment. Nurses are filling nursing records and do not consider them to be part of the entire nursing process. It leads to poor-quality nursing documentation, which prevents communication between simple, structured and focused professionals, which in turn affects the quality of patient care. The aim of the study is to describe the quality of nursing documentation in Tallinn Children Hospital. The research is quantitative, descriptive study.

Methodology & Theoretical Orientation: Sample was taken from nursing records before and after NANDA-I nursing diagnoses training for nurses. The selection criteria's were: patient had to be in hospital for at least three days and there was individual nursing care plan for the patient. Data collection was done during September 2016 - March 2017. D-Catch instrument, the 4-score Likert scale were used. Data analysis: SPSS 19.0, descriptive statistics, means and t-test were used.

Results: 87 nursing record from 8 departments were evaluated (42 before and 45 after training). The results showed statistically reliable differences in the improvement of the quantity of the structure of nursing record ($t(85)=-3.004$, $p=0.004$), quality of nursing anamnesis ($t(85)=-2.915$, $p=0.005$), quantity of nursing diagnoses ($t(85)=-4.387$, $p<0.0001$), quality of nursing diagnoses ($t(85)=-5.768$, $p<0.0001$), quantity of nursing interventions ($t(85)=-2.982$, $p=0.004$), quality of nursing interventions ($t(85)=-4.343$, $p<0.0001$), quantity of assessment ($t(85)=-2.439$, $p=0.017$) and quality of assessment ($t(85)=-3.209$, $p=0.002$). No statistically reliable differences were found for the quantity of nursing anamnesis and the legibility of documentation.

Conclusion & Significance: The study showed the importance of NANDA training in application of new documentation requirements in nursing practice.

Biography

Irma Nool is affiliated to Tallinn Health Care, Estonia. Irma Nool has her expertise in critical thinking in nursing practice, enhancing the quality of nursing care. She has completed her Master of Public Health at University of Tartu from 2003-2006, Bachelor of Nursing at University of Tartu from 2003-2006 and Nurse Tallinn Medical School from 1992-1993.

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Improving Afghanistan midwifery - professional activities during antenatal care, labour and postpartum in North and East Afghanistan: Based on interviews during professional training for Afghan midwives in Estonia, Tallinn Health Care College

Kristina Krivats Arba, Marika Merits, Irena Bartels, Silja Mets Oja, Annely Kärema and Aet Maarja Leberecht

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Background: The research is carried out in the framework of the development project: improving quality of medical and info-technological education in North and East Afghanistan in 2014-2016. Afghan women's health indicators vary significantly from global standards. Afghanistan's maternal mortality rate was second highest in the world. Neonatal mortality was 60 deaths per 1,000 live births in 2002. By 2010, the maternal mortality rate had reduced to 327 deaths per 100,000 live births. The rate of educated midwives in Afghanistan is still insufficient. The shortage of skilled birth attendants has been a key factor in the high maternal and newborn mortality in Afghanistan. Efforts to strengthen midwifery pre-service education in Afghanistan have increased the number of midwives from 467 in 2002 to 2954 in 2010.

Purpose: To describe and find out factors which impact midwifery professional activities during antenatal care, labour and postpartum in North and East Afghanistan and how to improve medical and info-technological education to target group.

Design: The research method is qualitative, based on semi-structured interviews. The target group was nine Afghan midwives from North and East Afghanistan. The questionnaire consisted of questions which were divided into three themes: antenatal care, labour and the postpartum period. The interviews were carried out in Tallinn Health Care College. Interviews were conducted in the English language and recorded on video. The interview was voluntary, and the anonymity of the participants was guaranteed. The results were transcribed, processed and analysed.

Findings: Antenatal care, labour, and the postpartum period affect the most cultural and religious beliefs and the standards prevailing in the society. Antenatal care, labour and postpartum period were often reported to be underused, even when available. In the cities the midwife assistance was more accessible. Midwives recommend go to a hospital to give birth, speaking about the risks of labour at home. There was limited and uneven understandings of the importance of antenatal care and impact the risks to labour and the post-natal period. Afghan midwives require modern and evidence-based training what is based on accepted guidelines, medical and info-technological education. The project needs to continue.

Biography

Kristina Krivats Arba is a Midwife Curriculum Lecturer-teacher at Tallinn Health Care College, Estonia. Her research interests includes Midwifery and healthcare.

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Advanced practices: Concepts, divergences and challenges

Emília Campos De Carvalho

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Advanced nursing practice dates back to the 1960s; however, it still has different understandings regarding its conceptualization and application. The purpose of this presentation is to reflect on the scope of this concept, the divergences related to its understanding and its challenges in the field of assistance, teaching and research. The concept of advanced nursing practices is broad, it involves: professional training, as to cognitive aspects (specialized knowledge base), acquisition of mental abilities (clinical reasoning and ability to make complex decisions) and technical skills (expanded practice); formal qualification (diploma or certifications); and the characteristics of the country (health systems and occupational legislation). The divergences observed in this field make it difficult to determine the state of the art of advanced practices and may be related to the legal and educational aspects of the professional practice, the different scenarios and the characteristics of the countries. At first, its purposes contemplate expanding access to care due to the number of doctors; redistribution of labor; response to new demands; quality of care; financial issues; and professional recognition. To reach it, different strategies are described in the literature: home visits, internships, realistic simulations with actors, patients and simulators, discussions, consultations, different models of assistance, use of standardized language systems, among others. In the field of research, qualitative and quantitative methodologies have sought to identify advanced practices, perceptions of performance and experiences lived through the effects of educational interventions, through controlled trials with performance measures. The challenges reflect the comprehensiveness of the concept and characteristics of the countries. They comprise the practice of care (in particular the competence and scope of the professional practice), education (which lack measures to evaluate the result in the quality of care) and investigations (which are still incipient for most specialties and places).

Biography

Emília Campos De Carvalho RN, PhD is a Senior Professor at University of São Paulo at Ribeirão Preto College of Nursing (EERP-USP), Brazil. She is a Teacher and Advisor of nursing students in doctoral, master's and undergraduate courses. She has several clinical researches published in journals. She has experience on the following subjects: nursing process, simulation, communication, and clinical trials. She has a Scholarship in Research Productivity of the National Council for Scientific and Technological Development – CNPq.

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The lived experience of women with breast cancer in the surveillance phase of recovery: A liminal process to healing

Patricia K Amado

University of Miami, USA

Background: The use of language to create meaning is a way that human beings can make sense of their reality. The diagnosis of cancer is an earth shaking event and trying to make sense of it is a huge driving force in coping with this insidious disease. The use of writing and sharing stories gives insight. In order for healthcare givers to stay focused on the patient, a holistic approach needs to be incorporated in the nurse's plan of care for the cancer patient. The importance is in treating body, mind, and soul. The National Cancer Institute ([NCI], 2012); Breast cancer leading cancer in women ages 25-70; ([ACS], 2012) 2.9 million breast cancer survivors in the US Grant, Economou & Ferrell (2010) 30% of all new cancers are breast cancer IOM (2006) study report focus on survivorship clinics.

Research Design: The use of a qualitative design with a hermeneutic phenomenological approach will be followed to study the lived experience of women living with breast cancer. The study will utilize van Manen's hermeneutic phenomenological approach in exploring the lived experience, which focuses on a unique view into each human experience through the examination of language to gain knowledge from textual discourse and reflection and conversational interviews. Van Manen's six research activities will guide the interpretation of the findings. Qualitative researchers postulate that research cannot be seen objectively from the outside.

Results: Five of the 25 participants in this study discussed positive outcomes as a result of their experience with breast cancer. This study suggests that self enhancement or an overly positive bias about oneself is a liminal pathway to resiliency when experiencing illness stress. This study highlighted the need for understanding the role of resiliency and facing illness. Creation of a concept analysis specific to survivorship nurses have an important role on the medical advice and can have a direct impact on how the patient understands the disease process.

Strengths & Limitations: This study provided insight into the participants' lived experiences of the way women adapt by the use of narrative discourse to heal. The findings of this research study are limited by the possible homogeneous demographic characteristics of the research participants such as the locale of the study. A different socioeconomic area may warrant different results. The need to explore younger survivors could be a premise for further research on this topic.

Implications for Future Research: Gaining a deeper understanding from the women's illness narratives is a progressive and creative method in exploring their lived experience. This study will stimulate thought provoking dialogue in nursing circles about innovative paths about illness, health, and healing throughout the trajectory of living breast cancer.

Biography

Patricia K Amado received her Undergraduate Nursing degree from DeSales University (BSN), her Master's degree in Nursing Education MS(Ed), from Florida Atlantic University and her PhD from Barry University. She is currently enrolled in a FNP program to enhance her clinical expertise. Her areas of teaching include undergraduate and graduate courses across the curriculum as well as under graduate student advisement and mentorship. Her research is focused on areas of breast cancer and creating healthy transition post treatment. She is also recognized as a speaker in the nursing profession. She has spoken at international conferences and schools of nursing regarding her creation of liminal pathways in transitioning through chronic illness. Her research formed the basis of a concept analysis framework which she is developing to advance nursing practice. Past and present positions include Sigma Theta Tau, Delta Epsilon Iota International Honour Society and she is an active Member of the NLN and the ISNCC. Her most recent project is publishing her dissertation; the lived experience of women with breast cancer during the surveillance phase of recovery: a hermeneutic phenomenological inquiry.

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The duty to care: Examining nurses' ethical responsibility to report for work in the face of disasters and extreme events

Dónal O'Mathúna

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Epidemics, pandemics and disasters occur with increased frequency. Concerns are increasing about chemical, biological, radiological, nuclear, and explosive (CBRNE) events. The potentially large numbers of injured, traumatized and dying patients require many nurses and other healthcare professionals. Sometimes, caring for patients puts nurses at serious risk of harm, such as when patients are infectious or contaminated. This creates ethical conflicts between one's professional duty to care and the need to care for oneself, one's family, and future patients. History records many examples of nurses accepting significant risks during wars and infectious outbreaks, like with Ebola virus disease. Such decisions have been lauded as heroic whether undertaken for personal moral or religious reasons, or in response to a professional duty to care. However, some question whether such a duty to care is ethically obligatory in the face of pandemics and CBRNE events. The University of Toronto's report into pandemic influenza, completed after the SARS outbreak there, called for much further ethical analysis of the duty to care. A systematic review found that nurses are under-prepared for the ethical challenges faced in disasters. This presentation will review the ethical arguments used to justify and also limit the duty to care. It will discuss the World Health Organization's guidance on ethics in pandemics which notes that the duty to care is not unlimited during pandemics, and that employers and governments have reciprocal duties to provide training and protective equipment. This presentation will argue that rather than looking to legal and regulatory responses, the ethical virtues of courage and volunteerism should be fostered as part of promoting trust in nurses and other healthcare professionals. Virtue ethics includes a narrative approach that values the role of stories to inspire people to strive towards ethical ideals and praiseworthy leadership, even when caring involves serious risks.



Biography

Dónal O'Mathúna is Associate Professor in the College of Nursing at The Ohio State University, USA and in the School of Nursing & Human Sciences, Dublin City University, Ireland. His research interests focus on both healthcare ethics and evidence-based practice. His ethics research has focused on disasters and humanitarian crises. He has led funded research projects on healthcare and research ethics in the context of disasters and humanitarian crises. He has contributed to ethics initiatives and guidelines with the World Health Organization, UNICEF and the UN agency for disaster risk reduction (UNISDR). As the director of a new virtual Center for Disaster & Humanitarian Ethics (<http://www.ge2p2.org/cdhe>), he is helping develop practical tools and support strategies to facilitate reflection on ethical issues in humanitarian research. He has spoken and published widely, including peer-reviewed articles in *The Lancet*, *Bioethics*, *BMC Medical Ethics*, *Journal of Evidence-Based Medicine*, and *Worldviews on Evidence-based Nursing*.

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Nurse anaesthetist students' experiences of patient dignity in perioperative practice

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Aim: To describe how nurse anaesthetist students experienced patient dignity in perioperative practice.

Design: A hermeneutical design and the critical incident technique were used in order to obtain experiences from practice.

Method: In the autumn of 2015, after participating in a mandatory lecture on ethics, 23 nurse anaesthetist students reported their experiences and interpretation concerning violation and preservation of patients' dignity in the operating theatre. The text, which was a compilation of descriptions of a 35 incidents, was analysed by using a hermeneutical text interpretation.

Findings: The text revealed three main themes preserving patients' dignity; allocating time for the patient, inviting the patient to participate, and shielding the patient's body. Furthermore, three main themes of dignity violation were identified; alienation, backbiting, and invasion of the body's intimate sphere.

Conclusion: Discussion and reflection based on the personal experience of the students during their practice are ways to strengthen ethical awareness and promote an ethical and dignified caring culture.

Biography

Berit Taraldsen Valeberg is an Associate Professor and Head of Studies - Area of responsibility 7 at Oslo Metropolitan University, Norway.

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Very old people's management of hearing and vision in daily life

Gro Gade Haanes

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Statement of the Problem: Age related hearing and vision impairments are normal and increase by age. Sensory impairments are known risk factors for functional decline, reduced social participation, withdrawal, depression and accidents. Hearing and vision impairments make people vulnerable and have an impact on an individual's quality of life. The purpose of this study was to investigate how very old recipients of home care manage their hearing and vision in daily life. A second aim of this paper was to describe other daily matters of importance for the very old.

Methodology & Theoretical Orientation: Explorative, descriptive design. Semi-structured interviews were conducted with 10 recipients of home care, aged 89 years. Two broad areas of enquiry were investigated: how the elderly evaluated their hearing and vision and how they managed important daily matters. The interviews were analyzed in line with a qualitative thematic analysis method.

Findings: The participants felt frail and were coping with several challenges not directly related to hearing and vision impairments. The manifest content showed that all admitted to having hearing and vision problems, but the more latent content of the data showed that the elderly were marked by their high age and expressed a feeling of loneliness was expressed together with a lack of energy.

Conclusion & Significance: Very old people who receive home care admit to have impaired hearing and vision, but although they often feel loneliness, hearing and vision problems could not be prioritized by the very old. Instead, they use their most of their impaired energy to manage other serious health challenges.

Biography

Gro Gade Haanes is an Assistant Professor in Pharmacy, Ph.D. reader, Sjúkrarøkt knowledgeable faculty at University of the Faroe Islands, Faroe Islands. Gro Gade Haanes at the Department of Health and Society will defend his dissertation for the degree PhD. Hearing, vision, and lighting conditions among older recipients of home care.

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Implementing yoga into the management of patients with refractory low back pain in an outpatient clinic setting

Karen M Lewis
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Purpose: To evaluate the effectiveness of implementing yoga into the treatment of patients with chronic low back pain.

Design: Quantitative analysis with opportunity for qualitative feedback.

Method: Effectiveness of this complementary treatment was assessed using a pre-test/ post-test design of patients who volunteered to participate in yoga classes as part of their back pain management. Measurements included low back pain rating, perception of back pain interference with daily activities, and self-efficacy in dealing with chronic low back pain.

Findings: Although no statistically significant findings were found due to the small sample size, most participants demonstrated improved individual scores on all measurement surveys including qualitative comments.

Conclusion: Based upon the findings of these pilot study further studies on implementing yoga into the treatment of chronic low back pain are encouraged.

Study Number	Pre-Test Score	Post-Test Score
4001	15	12
4002	12	10
4003	15.56	10
4004	16	9
4005	6	3
4006	6	7
4007	20	15
4008	29	17
4009	12	10
4010	24	19.13

Figure 1: Modified Oswestry low back pain disability index (raw scores)

Biography

Karen M Lewis is a board certified Family Nurse Practitioner, Assistant Professor and Director of the Post-Master's DNP Program in the School of Nursing at Western Carolina University in Asheville, NC, USA. Prior to a career in academia she spent many years working clinically in the field of Neurosurgery where she cultivated an interest in spine related issues, prevention, and treatment. Her experience led her to a position where she successfully developed and managed a hospital based spine clinic. This career experience heightened her interest in complementary treatments for chronic low back and neck pain, and is her current research area of interest.

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Assessing the efficacy of student centered learning through nursing research

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Statement of the Problem: Student centered learning (SCL) has received tremendous support in higher education because of its focus on students and the benefits to their learning. Some of the benefits of SCL are: promoting students' problem solving and critical thinking skills, increasing communication skills and the ability to work in teams, and promoting interest in lifelong learning. While SCL continues to be well supported as the teaching approach that can prepare health professionals for the rapid changing 21st century work environment, some educators and students have expressed concerns about the approach including its emphasis on openness which creates an instructional approach that appears to lack structure and guidance. This paper presents the perception of nursing students and faculty on their transition to a context-based learning (CBL) program, a form of SCL using an exploratory descriptive design.

Methodology & Theoretical Orientation: Focus groups, participant observations and document analysis were used to collect data from nursing students and faculty members using problem-based learning (PBL) as the framework for the study.

Findings: Although both students and faculty members identified the many benefits of CBL, all participants expressed that they would like both the CBL and lecture approaches to be used in the preparation of nursing students.

Conclusion: Through research, the evidence supporting the effectiveness of SCL is verified and confirmed as an appropriate teaching approach to prepare health care professionals for today's health care environment. Students in the health sciences such as nursing learn discipline specific concepts, which require explanation to students, especially in first year of the program. Thus, didactic instruction on some occasions is needed to clarify concepts and guide students in their learning. Based on this study's findings and previous studies, both SCL approaches and lecture methods are recommended to efficiently prepare students for the 21st century health care system.

Biography

Vivian Afrah Pupilampu obtained her Bachelor's degree in Nursing from the University of Ghana, Ghana, and a Master's and Doctorate degrees from the University of Alberta, Edmonton, Canada. She has practiced as a Registered Nurse and a Nurse Educator both in Ghana and Canada for sixteen years. Currently, she is an Assistant Professor in the Faculty of Nursing, University of Regina, Canada. Her expertise is in geriatrics and nursing education. She is very passionate about using innovative teaching strategies such as context-based learning in facilitating students learning.

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Person-centeredness in elder care: A secondary analysis of data from a study among home-dwelling men and women in the Faroe Islands

Ása Róin

University of the Faroe Islands, Faroe Islands

Aim & Objectives: As individuals in Western society's age, there is increasing demand for home-based care to help older people stay in their homes for as long as possible. A person-centred approach to care has been recommended in the literature. However, person-centredness as a concept is an often quoted, but ill-defined concept. This qualitative study investigates how older people's experiences with home-care reflect a person-centred approach to care. Data derive from an earlier study on ageing among home-dwelling men and women who are aged 67 to 91 and living in the Faroe Islands.

Methods: The study is a secondary analysis of data from an earlier qualitative study. Latent thematic analysis was used which meant coding issues of potential interest and collecting these codes into themes.

Results: Three themes appeared to combine the initial codes: sense of involvement, sense of meaningfulness and contextual conditions. Overall, the analysis showed that the users were seldom involved in planning or scheduling the care they received. What they were offered did not always make sense to them or correspond to their needs or preferences.

Conclusion: Findings from this study point at some possible barriers to successful implementation of person-centredness within elder care. Especially contextual conditions seem to limit the facilitation of person-centred practices.

Biography

Ása Róin is an Assistant Professor at the University of the Faroe Islands, Department of Health and Nursing Science, Faroe Islands.

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48th World Congress on

Advanced Nursing Research

June 14-15, 2018 | Dublin, Ireland

Peer support for mothers with antenatal depression

Fiona Cust

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As the number of mothers suffering from postnatal depression (PND) continues to rise at an alarming rate it was decided to explore methods of trying to support new mothers diagnosed as at risk of PND. Recent NICE guidelines (2015) have highlighted the need for the utilization of psychosocial support as opposed to the, often first hand, use of antidepressant medication. One of the main reasons for PND has been a distinct lack of social interaction and isolation. Could, therefore, disclosing to a fellow mother who has previously shared a similar journey may help to assist in the recovery from this debilitating illness? A small number of peer support workers (PSW's) were recruited to offer one to one home visits within the postnatal period to a mother considered to be at elevated risk of PND as diagnosed by the Edinburgh postnatal depression scale (EPDS). The PSW's visited the mother within their own homes from week six postnatally for a period of six weeks. Results were recorded both quantitatively and qualitatively by the recording of the EPDS scores, logbook entries and one to one interviews. These were transcribed, coded and categorized. Results collated display that the PSW's did indeed have a positive effect upon the mothers' mental health, outlook and indeed, their relationship with their baby.

Biography

Fiona Cust was a Senior Lecturer on the Specialist Practitioner Undergraduate and Master's Programme (Health Visiting) teaching both at undergraduate and postgraduate level. She is responsible for a personal tutor group, module development, module leading, teaching, and marking/assessing on a number of relevant field based modules in addition to marking on both adult and mental health modules. She teaches, assess and supervise both undergraduate and postgraduate students (Master's and Doctoral). She assists regularly with OSCE examinations and she is an Examiner for the undergraduate nurses (adult, child and mental health) within their practical examinations. She teaches regularly on both the children's, adult, and mental health degree programme in addition to guest lecturing on the Social Work Degree, Paramedic Degree, Midwifery Degree, Psychology Doctorate programme and Operational Departmental Practitioners Foundation Degree. She is also involved in a Postgraduate Research Awareness module and Inter Professional Education workshops.

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Undergraduate nursing student's preparation for clinical placement: A simulated live ward experience

Joanne Porter, Ainsley James, Linda Jones and Megan Jackson
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Aim: The aim of this paper is to report and showcase the development and evaluation of a simulated live lab ward experience for undergraduate nursing students.

Background: The proposed research will use live human actor simulation compared to manikin simulation to develop clinical thinking skills and the transition to practice for nursing students. In a study by Shinnick and Woo in 2012, they found that nursing students liked the practicality of human actors in a 12 minute simulated environment believing it enhanced their safety of practice and critical thinking skills. The use of simulation engages students through multiple learning styles allowing students to practice skills in a safe learning environment with the added important feedback and reflection loop.

Method: The live lab experience included 15 patient actors and relatives, together with undergraduate final year students in the role of registered nurse and second year students. The day included a pre-briefing, 2 hour shift in the live lab caring for the patients, a focus group interview and final full cast debriefing session.

Results: A total of 13 students participated in the event; each started the day with heightened anxiety however stated that the experience increased their clinical skills, teamwork, and communication skills.

Conclusion: A live lab simulation experience is greatly valued by participants and leads to increased clinical confidence. Although a time and resource intensive exercise the staff, patient actors, research crew and nursing student participants all enjoyed the experience which helped develop and enhance clinical performance and preparation.



Biography

Joanne Porter currently works at the School of Nursing, Midwifery and Healthcare at Federation University Australia, Gippsland campus. She teaches into the undergraduate program, and postgraduate higher degree supervision. She has worked both in Metropolitan and regional health facilities predominantly in emergency departments and intensive care units. Her research interests include, deteriorating patient outcomes, simulation, and emergency care research. Her PhD through Monash University used a mixed methods approach to investigate the affect family presence during resuscitation (FPDR) had on personnel in the emergency department. She currently holds the position of Senior Lecturer and has an extensive research history with a number of publications and competitive grants.

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Factors influencing the high school students' choice of a nursing career in Bahrain: Development of a best practice model for nursing recruitment

Eman Tawash and Seamus Cowman

Royal College of Surgeons in Ireland, Bahrain

Statement of the Problem: In response to the shortage of nurses, Bahrain continues to have high dependence on expatriate nurses to maintain the health services. The development and expansion of an indigenous nursing profession through increasing the number of Bahrainis working as nurses must be a health service priority. However, in attracting local candidates to study nursing, the public image of nursing in the Middle East continues to be of concern. The study aimed to identify factors that influence the high school students and their parents to choose the nursing profession as a future career and to explore and test strategic interventions to promote nursing as a career.

Methodology: A mixed methods research approach was used incorporating quantitative and qualitative dimensions. The study sample included high school students, students' parents, career guidance counsellors and nursing students. A one-group pretest-posttest design was also used to introduce a nursing recruitment intervention to a group of high school students.

Findings: Generally, high school students, parents, career guidance counsellors and nursing students have positive perceptions about nursing. However, nursing does not seem to be an attractive career option. It is proposed that the public perceptions of people about nursing may be grounded in strong cultural influences and any efforts to improve the enrolment and retention of Bahraini nurses should consider enhancing the social values of the nursing profession.

Conclusions: This study is seminal in being the first to report on factors that affect the high school students' perceptions and choice of nursing as a career in Bahrain. The findings are important in ensuring indigenous nursing developments in the small country of Bahrain and indeed the wider Gulf region. Recommendations are made for nursing practice and education through the Nursing Positive Recruitment Arabic Model (NURS-P.R.A.M) to work together to adopt new and creative strategies that can be employed to combat unfounded negative perceptions of nursing which may exist



Figure 1: The Nursing Positive Recruitment Arabic Model (NURS-P.R.A.M).

Biography

Eman Tawash was qualified as a Registered Nurse and worked as a Nursing Lecturer in different institutions for many years. She did her Master's in Health Professions Education and her PhD in Nursing education and recruitment. She is currently the Director of BSc Nursing programme in RCSI Bahrain. She is very interested in research, especially nursing and health professions education research.

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Challenges experienced by registered advanced psychiatric nurses employed in psychiatric facilities in South Africa

Evalina Van Wijk

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Statement of the Problem: Although advanced psychiatric nursing (APN) is a relatively new specialty in South Africa, there is no specific scope of practice /competency framework developed for this category of nurses. Therefore, basic psychiatric registered nurses and APN'S have the same job description with the result that the blended role of APN'S as equal partners in the holistic care of the bio-psychosocial needs of patients is generally not accepted and they experience resistance within multi-disciplinary teams. Due to the lack of a specific scope of practice/competency framework developed for this category of nurses other discrepancies' between the different training providers in the country identified were: different subject content as well as different skills/competencies are taught and assessed. Consequently not all graduates enter the profession with the same advanced level of knowledge and skills. This result in that state as well as the private sector can't draw up different job descriptions for advance psychiatric registered nurses and are compelled to use the same job description as those that is used for basic psychiatric registered nurse. These cause much unhappiness and demotivation amongst APN'S trained by different training providers because the skills/competencies they were taught are not reflecting on their job description.

Challenges: Most of the multi-disciplinary team members are not aware of the different skills and knowledge taught to advanced psychiatric students which grossly disadvantage them because they are not always allowed to work with patients and render care on an advanced level-this result in that when they complete their course, some of them are unable to work as an independent practitioner/to render care on an advanced level. Due to the lack of a specific scope of practice for APN'S they have the same job description as those with basic psychiatry, this further lead to conflict amongst the different candidates because those who did their courses at different training facilities cannot perform the same duties. This also lead to much unhappiness amongst graduates because some felt on completion there are very few specialist posts available, and even if they manage to be appointed in such a post, their expertise is not adequately utilized.

Conclusion: It is anticipated that if there was a specific scope of practice for APN'S, training providers should use it when designing the theoretical and practical curriculum. This would enable graduates irrespective of where they did their training to adequately address the bio-psychosocial needs of patients and families, to address the burden of disease, to maintain the sustainable goals and to play a pivotal role in alleviating the manpower shortage.

Implications for Nursing: Since it was identified by the South African Nursing Council and Health Care Providers that the scope of practice of APN's in South Africa urgently needs clarity and parity, a working group, in collaboration with SANCO, started to delineate the scope of practice of APN's and to develop separate job descriptions for basic registered psychiatric nurses and APN'S.

Biography

Evalina Van Wijk is a Psychiatric Nursing Lecturer in Department of Psychiatric Nursing, Western Cape College of Nursing Cape Town, South Africa and she is responsible for the advanced Psychiatric Nursing module. She obtained her Doctor of Philosophy (PhD) in the year 2011 at the University of Cape Town, South Africa.

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Workshop

Day 2

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Joanne Porter

Federation University, Australia

ER-DRIP education workshop learning to implement family presence during resuscitation into practice

The practice of allowing family to be present during resuscitation has been debated in emergency departments since the early 1980's, with evidence that the practice and implementation of family presence during resuscitation (FPDR) is inconsistent despite formal endorsement. This study aimed to develop an education package for emergency nurses, paramedics and medical personnel in order to develop competence in the implementation of FPDR. The aim of this interactive workshop will be to teach participants on how to implement the ER-DRIP (emergency personnel, reassurance, diagnosis, regular up-dates, interventions and prognosis), education package into clinical practice. Working through the education package participants will identify resuscitation team roles and responsibilities, identify the barriers, benefits and enablers of family presence during resuscitation using videos to assist learning. The three scenarios have been developed to assist with participant discussion and understanding of the implementation of FPDR.

Biography

Joanne Porter currently works at the School of Nursing, Midwifery and Healthcare at Federation University Australia, Gippsland campus. She teaches into the undergraduate program, and postgraduate higher degree supervision. She has worked both in Metropolitan and regional health facilities predominantly in emergency departments and intensive care units. Her research interests include, deteriorating patient outcomes, simulation, and emergency care research. Her PhD through Monash University used a mixed methods approach to investigate the affect family presence during resuscitation (FPDR) had on personnel in the emergency department. She currently holds the position of Senior Lecturer and has an extensive research history with a number of publications and competitive grants.

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Scientific Tracks & Abstracts Day 2

Advanced Nursing Research 2018

Sessions:

Day 2 June 15, 2018

Cardiovascular Nursing | Nurse Practitioners | Certified Nurse-Midwives | Gynecology | Clinical Nurse Specialist | Critical care and Emergency Nursing | Nursing Leadership and Management | Telemedicine and e-health | Disaster Nursing | Public Health and Nursing | Universal Health Care

Session Chair

Irma Nool

Tallinn Health Care College, Estonia

Session Chair

Nnenna Weathers

California State University, USA

Session Introduction

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- Title: Coping strategies of prelicensure registered nursing students experiencing student-to-student incivility**
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Zhao Wenting, Sichuan University, China

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The lived experience of nurses transitioning to electronic medical records usage: A phenomenological inquiry

Leesuk Ferencsik

Adventist University of Health Sciences, USA

Background: One of the most pressing global issues in health care settings is patients' safety. In an effort to decrease medical errors and improve the quality of patient care, many health care organizations have adopted an electronic medical record (EMR) system. However, to date, the lived experience of the nurses transitioning to EMR is not clearly understood.

Purpose: The purpose of this study was to explore the lived experience of nurses transitioning to EMR usage.

Philosophical Underpinnings: This qualitative study followed van Manen's phenomenological perspectives under the naturalistic (constructivist) paradigm with the research question, what is the experience of nurses transitioning to electronic medical records (EMRs) usage?

Methods: A qualitative phenomenological methodology was used for this study. A purposive sample of 15 nurses who have experienced transitioning to the EMR usage was selected. Data collection occurred with in-depth, semi-structured interviews using open-ended questions. Data analysis was guided by Max van Manen's (1990) phenomenological method, which includes describing, interpreting, textual writing and rewriting.

Results: Four core themes: doubting, struggling, accomplishing, and embracing emerged. Three subthemes: Balancing time between computer and patients and Increasing workloads and responsibility, which are subthemes of struggling, and leaving human interaction behind, a subtheme of accomplishing emerged from this qualitative, phenomenological investigation. These themes illuminated the lived experience of 15 nurses transitioning to EMR usage. Thomas Kuhn's (1996) process of scientific inquiry provided a framework to gain a deeper understanding of this phenomenon.

Conclusions: This study explored the lived experience of nurses transitioning to EMR usage in hospital settings. The results of the inquiry highlighted the essence of participants' experience by revealing their doubt about the EMR's functionality, struggle with transitioning and using the new EMR system, accomplishment of successful transition to the EMR system, and finally acceptance of technology in their daily work practice.

Biography

Leesuk Ferencsik is a Registered Nurse (RN) and Assistant Professor at Adventist University of Health Sciences, Orlando, Florida. She has been a RN since 1989 and worked in both South Korea and the United States on long-term care facility, health clinic, and all three levels of care: medical surgical unit, progressive care unit (PCU), and intensive care unit (ICU) in various acute care hospitals. Before she became a Nursing Faculty at ADU, she worked as a Clinical Nurse Educator for a multisystem ICU, Surgical PCU, and Transplant Unit. She has a passion for teaching and learning. She was very pleased when she became a Nursing Faculty at ADU where she can do both: learning and teaching. She earned a Bachelor of Science in Nursing from the Korea Open University, South Korea, Master's degree in Nursing Education from the University of Phoenix, and Nursing PhD from Barry University, College of Nursing and Health Sciences, Miami, Florida. She had also completed a year-long Healthcare Simulation Certification Course at University of Central Florida.

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Coping strategies of prelicensure registered nursing students experiencing student-to-student incivility

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Statement of the Problem: Incivility is rude or discourteous behavior that demonstrates a lack of respect for others. Some nurses purposefully target each other with uncivil behaviors. Incivility has invaded the nursing educational environment with deleterious results. Uncivil behaviors perpetrated by nursing students against other nursing students cause psychological and physiological distress for victims and witnesses. The purposes of this study were to identify the behaviors that constituted lateral student-to-student incivility, determine the frequency of experienced student-to-student incivility, and describe the coping strategies employed by prelicensure registered nursing students experiencing lateral student-to-student incivility.

Methodology & Theoretical Orientation: This quantitative descriptive study recruited prelicensure registered nursing students in associate degree, baccalaureate degree, and diploma programs using nonprobability convenience sampling through the email member list of a national student nursing organization. Critical social theory was the study framework to explore the meaning of civil and uncivil student-to-student interactions and behaviors in daily academic life. Participants completed the Ways of Coping (Revised) survey and the Incivility in Nursing Education Revised (INE-R) survey anonymously online via email accounts.

Findings: The most frequently occurring incivility behavior was the use of media devices for purposes unrelated to the current educational task. Planful problem-solving (PP) was the coping strategy most often employed by participants. Data was analyzed comparing participants' nursing program levels, ages, genders, and ethnicities using descriptive statistics and Kruskal-Wallis analyses.

Conclusion & Significance: Four behaviors were identified as highly uncivil: threats about weapons; threats of physical harm; property damage; and discriminating comments toward others. This is a positive finding as civil societies consider these activities unacceptable, and often illegal. Recommendation for a universally accepted definition of academic incivility within the discipline of nursing is promoted so civil behavior can be modeled by educators and taught to students.



Biography

Robin Ann Foreman has been in nursing academia for over ten years. She teaches the Psychiatric/Mental Health course in the BSN Program and the Nurse Educator track specific courses in the MSN Program. She began studying interpersonal relationships and conflict management among nurses after her clinical students began experiencing incivility. Her doctoral dissertation investigated student-to-student incivility among prelicensure registered nursing students. She identified behaviors student nurses consider to be uncivil and coping strategies students employ when they are confronted with incivility. Her future work will be to develop educational programs to help nursing students have positive outcomes when uncivil behaviors are encountered using the ICE faculty intervention model for nursing student incivility: identification, coping skills, and empowerment. Critical social theory, oppressed group behavior theory, and the transactional model of stress and coping have guided this research.

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Adolescent girls' #MeToo experiences: Findings from a randomized controlled trial

Dianne Morrison-Beedy¹ and Linsey Grove²¹The Ohio State University, USA²University of South Florida, USA

The #MeToo movement has highlighted a prevalent problem facing women, the risk of sexual violence by men. Females who experience sexual violence or abuse are more likely to engage in risky behaviors as teens and later on in life. Little is known about the prevalence of such threats faced by adolescent girls, thus, the purpose of this study was to describe the risk faced by 738 urban girls ages 15-19 enrolled in a randomized controlled trial testing HIPTeens, a sexual risk-reduction intervention. Using audio computer-assisted self-interviews, we collected data describing girls' experiences with men pressuring, threatening or forcing them to have: (a) sex play, (b) attempted intercourse or (c) actual penetrative sex. We assessed whether a man used his position of authority or substances to do so. Unfortunately, every behavior assessed was reported by at least some of the girls in our sample. One-half reported they had given in to sex play (fondling, kissing, petting but not intercourse) when they didn't want to because they were overwhelmed by a man's continual arguments and pressure; one-quarter reported having done so multiple times. Even the least frequently endorsed question "How often have you had sexual acts (anal, oral or penetration by objects other than a penis) when you didn't want to because a man threatened you or used some degree of physical force?" was reported by 10% of girls. These findings should raise alarm over the frequency with which teen girls are sexually pressured, coerced or victimized, often by men who use their position of authority or providing substances (to an underage child) to perpetrate such acts. Tailored evidence-based interventions that integrate strategies that focus on both sexual violence and HIV prevention can help improve both outcomes. Further research addressing interventions targeting males is critical.

Biography

Dianne Morrison-Beedy joined The Ohio State University in 2018 as Chief Talent and Global Strategy Officer and Centennial Professor of Nursing. She was a Fulbright Scholar (Scotland), and recently listed on the Fulbright Specialist roster, and had a Senior Administrator Fulbright Award (France). She served as College of Nursing Dean and Senior Associate Vice President of USF Health, University of South Florida. She developed a sexual risk reduction intervention for adolescent girls, HIPTeens, recognized by the CDC and US Department of Health and Human Services as an exemplary evidence-based intervention for HIV/STI/teen pregnancy prevention. She has received numerous awards for her work; International Nursing Research Hall of Fame, Florida Top 100 Nurses, Excellence in HIV Prevention Award from Association for Nurses in AIDS Care, and Florida and New York State's Distinguished Researcher. She has over 250 publications including award-winning book on intervention research, and over \$12 million/research funding.

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The effect of faculty lead gentle persuasive approaches training has on nursing students to manage responsive behaviors

Tracy Christianson, Kim Morris and Tracy Hoot
Thompson Rivers University, Canada

Problem Statement: Nurses face a high level of risk of violence compared with other workers, with higher frequency towards those who are younger and less experienced. Risk of violence is similar for health care aides (HCA), and nursing students, with HCAs experiencing the highest rate of injury because much of their work and clinical practice is in residential care settings where many patients are at risk for challenging behaviors due to cognitive changes.

Purpose: The purpose of this project was to evaluate the effects of Gentle Persuasive Approaches® (GPA) training had on students' knowledge and ability to care for patients who have the potential for responsive behaviors. GPA is a training program recognized in Canada as best practice in the management of responsive behaviors of patient and provides the learner with the skills to interact and intervene to diffuse escalating care situations.

Methodology: A mixed-methods approach with a quasi-experimental, repeated measures design was used with nursing students (health care assistant [HCA] & bachelor of nursing [BSN]) who had limited exposure to the practice setting. The intervention took place over three phases with two HCA cohorts completing GPA through self-paced online modules (e-learning) with a two-hour face-to-face post e-learning review (Phases 1 & 2). Phase 3, the third HCA cohort and 1/2 of the BSN cohort received GPA training face-to-face (Phase 3) with GPA trainers, with the other half of the first year BSN cohort as the comparison group. Repeated measure questionnaires were administered pre-GPA, post-GPA, and post-clinical practice. At the close of each clinical practice, focus groups allowed students to reflect on how GPA prepared them for managing responsive behaviors.

Findings: Although the project is not yet complete at the time of this abstract submission, preliminary results are indicating positive results. Students recognize signs of changes in behaviors that may lead to responsive behaviors. Students describe their ability to manage and redirect patients to decrease such behaviors. Physical techniques learned and practiced in the GPA training helped students confidently manage physical aggression.

Conclusion: While no scientific conclusions can be made at present, preliminary data indicates GPA may have had a positive impact on confidence, skill, and knowledge manage responsive behaviors.

Biography

Tracy Christianson is a tenure track assistant professor in the School of Nursing at Thompson Rivers University. With over 25 years of nursing practice and teaching experience, her research focus is a blend of nursing education, gerontology, and rural health issues with an emphasis on improved practice and quality of care. Dr. Christianson has completed a number of research projects and has disseminated research findings at conferences and in peer-reviewed journals.

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Intervention possibilities to violence against children in interdisciplinary teamwork using simulation and e-learning methods

Marika Merits¹, Mare Tupits¹, Silja Mets-Oja¹, Rauni Rohuniit², Uno Traat² and Ülle Vanaisak²¹Tallinn Health Care College, Estonia²Estonian Academy of Security Sciences, Estonia

Background: Violence is not an inevitable consequence of the human condition. The full range of all forms of violence against children are only now becoming visible, as is the evidence of the harm it does. Governments are increasingly acknowledging and enforcing their human rights obligations to children, and recognising the prevalence and long-term impact of violence. The prevalence of violence against children in Estonia continues to be on high level. In Estonia the legal framework of intervention for police and the healthcare has been developed, but the cooperation between the institutions is weak, and therefore a victims support is too low and not effective. Necessity for common learning subject is caused by the need to offer for victims (children) the effective complete solutions, combining the healthcare and police work intervention.

Aim: To describe how students of two higher education institution learn to intervate possibilities to violence against children in interdisciplinary teamwork using simulation and e-learning methods. The emphasis is on common learning of nurse students and police students.

Design: Learning subject volume is 4 ECTS, the participating students are from Tallinn Health Care College (midwife and nurse students) and Estonian Academy of Security Sciences (security and police students). Combined course design contains: e - learning in Moodle environment and contact learning - a theory of violence and the impact to children, the legislation in Estonia and interdisciplinary teamwork in helping target group of victims; simulation practice is build up in various cases and intervention by combining healthcare and police work. Preparation lasted for one year, as a result the common learning subject was build up.

Findings: The subject needs some improvement. A students feedback is collected by the questionnaire in Moodle environment and by the instant feedback in the closing seminar. The following suggestions were brought up: to involve social workers as well victim assistance that solutions would be more effective, to add more complicated, and various cases and to improve the common part of Moodle environment. A satisfaction was expressed that nurse, midwife and police students will be able to share a mutually necessary information and act professionally by ensuring for victims the effective complete solutions and support. Innovation in education including shared learning on the example of the two higher education institution using e-learning and simulation by enhancing the interdisciplinary teamwork in the intervening of target group of victims.

Biography

Marika Merits is lecturer and psychologist in Chair of Midwifery at Tallinn Health Care College since 1995. She received diploma in Special Education and Psychology in University of Tartu. She has built different psychology Subjects in Nursing and Midwifery curricula, also she is involved in a number of international and local projects like Violence and Abuse, Improvement of Afghanistan Midwifery etc.

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Trials and tribulations of commissioned evaluation research

Maria Ponto^{1,2}¹Kingston University, UK²St. George's University of London, UK

This presentation will discuss potential and actual problems that may occur when carrying out commissioned research. For instance if the commissioned research is from an organisation that anticipates finding positive evidence for changes or interventions they introduced, this can create conflict if data do not show this. Sometimes access to the sample is through the organisation and the researcher has no control over data collection or methods for data collection. This can create anxiety for the researcher and may compromise their objectivity. The presentation will also discuss how to deal with such problems and will provide examples of strategies that can be used to maintain empirical rigor whilst fulfilling commissioned obligations.

Biography

Maria Ponto is an Associate Professor at School of Nursing at Kingston University and St. George's University of London and a Visiting Professor at Lapland University in Finland. She is a Nurse, Midwife and Psychologist and has links with many European Universities. She has run MSc programmes since 1996 in the UK and St. Petersburg in Russia and has given many lectures and presentations at international conferences. She has undertaken and supervised commissioned research in nursing and education.

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Implementation of the Edinburgh postnatal depression scale at a psychiatric ambulatory clinic

Nnenna Weathers and Richard Dass
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We evaluated the use of the Edinburgh postnatal depression scale (EPDS) as a screening tool to prevent the misdiagnosis of postpartum depression (PPD). The Stetler model (SM) was used to guide implementation of the EPDS in an ambulatory psychiatric setting for this quality improvement project. Women diagnosed with PPD during an eight-week period immediately prior to the implementation of the EPDS were compared with women diagnosed with PPD using the EPDS during an eight-week period. Three psychiatrists and one nurse practitioner (NP) agreed to implement the EPDS. A total of 29 pre- and post-implementation postpartum women (PPW) met inclusion criteria for this project making up the final sample. A total of 21 PPW were screened with the EPDS. Of those, 21 (100%) were diagnosed with PPD compared to six/eight (75%) PPW diagnosed with PPD without the use of the EPDS. Participating psychiatrists and the NP diagnosed two (25%) patients with non-postpartum depression and anxiety during the eight-week period when the EPDS was not used. Screening for postpartum depression with a tool that supports objective measurement of symptoms may help to more accurately diagnose PPD, and thus with more appropriate treatment of PPD.

Biography

Nnenna Weathers, PhD is an Assistant Professor in the School of Nursing at California State University Los Angeles where she is Director of Nurse Practitioner programs. Her research interest is in HIV and in other health disparity related research.

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The pursuit of hope: Hope and hoping in different nursing contexts

Vibeke Lohne

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Aim: This paper focus on experiences of hope and hoping in different clinical nursing contexts.

Background: Hope is an important part of everybody's life. However, less focus has been on similarities and differences on experiences of hope in different contexts of suffering and health.

Methods: This study of synthesized empirical knowledge from twelve research studies was based on methods of concept development. Findings from each study were compared to increase the typology and particular patterns of hope, clarifying and modifying the essence of hope.

Results: A synthesized understanding of the empirical findings revealed the following categories: despairing hope, uncertain hope in the acute and critical nursing context, struggling hope, flexible and creative hope related to the context of rehabilitation and universal and existential hope in the context of prevention and health promotion. The essences of hope which rose from the different contexts were possibilities, expectations, destiny, vitality and freedom.

Biography

Vibeke Lohne is a Nurse and a Professor at University of OsloMet. She has a degree (Dr Polit) from University of Oslo and her main research focus is on hope, dignity in critically illness and in the context of rehabilitation, and on family caregivers.

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The use of visual art as a method to enhance health professionals' communication with adolescents living with type 1 diabetes

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Purpose: The purpose of this paper is to describe the use of visual media, as a person-centred approach that health professionals should consider during therapeutic interactions with adolescents living with type 1 diabetes. This paper reports on a research study that adopted visual media produced by young people living with type 1 diabetes to share their experiences. The visual media functioned as both a conduit for communication and a strategy for establishing relationships.

Methods: Using van Manen's phenomenological approach, ten participants (nine females, 1 male) aged 16-24 years participated in the research. Each participant created artwork representing their lived experience in photographs, drawings and collages. Participants provided interpretations of the artwork, which complemented a phenomenological interview exploring their experience of living with type 1 diabetes. This process added depth, richness and rigour to their shared stories and informed the analysis of data and interpretation of findings.

Results: Art in the form of visual media is a powerful representation of lived experience and provides young people with a creative channel to express themselves. Using art as an approach to therapeutic interactions enhanced communication between participants and researcher by engaging the participants in the research process, enhancing therapeutic interactions by focusing on the visual media produced, and facilitating conversations regarding lived experience; all resulting in rich descriptions of the lived experience of type 1 diabetes. Insights and future opportunities are provided for researchers contemplating the use of art in qualitative research studies, such as phenomenology and lived experience.

Conclusions: Art is a valid and creative form of research data and is also a valuable tool for qualitative researchers wanting to involve young people as participants. Adopting age appropriate communication methods is a necessary skill health professionals must develop if they are to be effective practitioners.



Biography

Ainsley James is a Published Researcher with over twelve years in Clinical Practice and twelve years in Academia. Her clinical practice experience includes general nursing, orthopaedics, child and adolescent health, and experience as an Undergraduate Clinical Educator. She currently teaches undergraduate nursing and midwifery students at Federation University Australia. She has an extensive list of publications with her most recent being issues in recruiting young people to research. She was the recipient of an Australian Postgraduate Association (APA) Scholarship, enabling fulltime PhD candidature with Monash University. Her PhD research explored and described the lived experience of young people aged 16-24 years with type 1 diabetes. Using Max van Manen's approach to phenomenology, her research utilised visual images created by the participants and textual descriptions from interviews, to discover and provide insights into the lived experience of young people with type 1 diabetes.

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Digital storytelling: Learning through storytelling in nursing education

Penny Gill

Robin Trust, South Africa

Story-telling is an ancient human craft handed down from generation to generation. Digital storytelling (DST), the modern equivalent, is defined as a short first person multi-media video narrative that documents human life experience, ideas or feelings through story-telling. Research shows that DST, if integrated appropriately into the curriculum, can promote student-centered learning strategies such as reflection for deep learning, project-based learning, collaborative learning; development of digital literacies and the effective integration of technology into teaching and learning. All of these can enhance student engagement and contribute to student success. This paper is based on lessons learnt in an on-going DST project at a Cape Peninsula University of Technology, in South Africa. This project followed the Centre for Digital Storytelling workshop model which focuses on the collaborative sharing and developing of stories in so-called story circles and implemented participation and learning techniques such as Community Maps (which are visual techniques to explore the students' diverse backgrounds). The project emphasized narrative, visual and digital modalities over text, in order to increase confidence levels in students with low academic literacy skills levels. The researcher investigated the effectiveness of DST in teaching and learning amongst forty-five first year extended curriculum nursing students, by drawing on students' perceptions of the impact of DST as an alternative teaching and learning method. Qualitative methods of collecting data were used, which included focus group interviews with the students to elicit their perceptions on the effectiveness of DST for teaching and learning in nursing education. The inductive method of analysis was used to analyze data. The paper will present the impact of this study for teaching and learning; challenges encountered in the implementation of DST; and strategies for enhancing meaningful use of DST for teaching and learning amongst extended curriculum nursing students, as well as recommendations for future use.

Biography

Penny Gill has been a Nurse for over fifty years in Cape Town, South Africa. Recently she retired as a University Lecturer. She is a Pediatric Nurse and has been a Nurse Educator since 1986. Her special interests are curriculum design and the use of innovative teaching strategies using educational technology. Since 2008 she has been the Coordinator of an Extended Nursing Curriculum Program at a Cape Peninsula University of Technology where previously educationally, disadvantaged first year degree nurses complete their first year over two years. This program has enabled her to spend time with her students in developing various teaching strategies using modern technology to help the students engage with the curricular content using guided constructivism. The students then successfully integrate into the second year mainstream degree program.

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Progressive impact of burnout on nurses' wellbeing

Michael Galea

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Nursing profession is a highly stressful vocation. Participants (N=241), who work in three different hospitals in Malta, were assessed on the impact of burnout on their holistic wellbeing. Nurses completed the Maslach Burnout Inventory-Human Services, the Satisfaction with Life Scale, the Faith Maturity Scale, the Positive and Negative Affect Scale, the Big Five Personality Inventory, and demographic variables. Results from this cross-sectional correlational study indicated that: a) Professional nurses in Malta suffer from high levels of burnout, particularly from high exhaustion and depersonalization and low professional accomplishment; b) As expected, burnout negatively correlated with subjective well-being; and c) A path analysis indicated the progressive impact of burnout, first on one's personality and affective mood, and eventually on one's wellbeing and spirituality. The implications and recommendations from these results were discussed.

Biography

Michael Galea is a Clinical Psychologist and Senior Lecturer at the Mental Health Department, Faculty of Health Sciences, University of Malta. He read Master's in Pastoral Theology from the University of London, UK, a Master's in Science in Pastoral Psychology from the University of Loyola, Baltimore, MD, USA. Furthermore, he did his Doctorate in Clinical Psychology from the same university. He has worked in different settings and with various populations, including addiction counselling (Sedqa), as a Consultant Psychologist (Malta Prison system), family and individual psychotherapy (Appogg, Cana Movement). Besides private practice, he is a Senior Lecturer at the Mental Health Department, University of Malta. He has authored a number of peer-reviewed journal articles and chapters in books, and is working on two new books, besides those already published. He is a regular participant in a popular live TV show on mental health - related subjects, which includes phone-in participations as well. His current research interests include stress and burnout at work, post-traumatic growth and psychology of religion & spirituality.

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Family presence during resuscitation (FPDR): Development of an education training package

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Federation University, Australia

Aim: The aim of this paper is to report and showcase the development of an education training package using video scenarios utilizing the acronym ER-DRIP to teach clinicians on how to implement family presence during resuscitation (FPDR).

Background: The practice of allowing family to be present during resuscitation has been debated in emergency departments since the early 1980's, with evidence that the practice and implementation of FPDR is inconsistent despite formal endorsement. This study aimed to develop an education package for emergency nurses, paramedics and medical personnel in order to develop competence in the implementation of FPDR.

Method: The acronym ER-DRIP (emergency personnel, reassurance, diagnosis, regular up-dates, interventions and prognosis) was developed following a state wide survey, a period of resuscitation observation and interviews with emergency personnel in Victoria. An education training package was developed, which provides students with a series of videos together with discussion notes which aims to develop the skills necessary to successfully implement FPDR for both pediatric and adult patients. The three scenarios include a pediatric respiratory arrest, a myocardial infarction and a stroke victim.

Results: A total of three scenarios were written and filmed with the use of simulation trained live actors, emergency personnel and paramedics aiming to mimic resuscitation events.

Conclusion: FPDR, although widely endorsed is practiced inconsistently. Additional training and education around the implementation and practice of FPDR was identified as essential, the training package aims to build clinical confidence and competence.



Biography

Joanne Porter currently works at the School of Nursing, Midwifery and Healthcare at Federation University Australia, Gippsland campus. She teaches into the undergraduate program, and postgraduate higher degree supervision. She has worked both in Metropolitan and regional health facilities predominantly in emergency departments and intensive care units. Her research interests include, deteriorating patient outcomes, simulation, and emergency care research. Her PhD through Monash University used a mixed methods approach to investigate the affect family presence during resuscitation (FPDR) had on personnel in the emergency department. She currently holds the position of Senior Lecturer and has an extensive research history with a number of publications and competitive grants.

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Developing a critical skills assessment for disaster response military personnel: A pilot study

Denise A Smart

Washington State University, USA

Purpose/Aims: Prior to starting our two-year National Guard sleep study, our research team was faced with the challenge of identifying a method of measuring medical decision making in a military field setting that would be non-disruptive to the disaster response training exercises underway. Thus, the purpose of this pilot study was to select an appropriate set of medical calculation questions and basic life support (BLS) questions sensitive enough to detect fatigue-related critical skills deterioration.

Rationale: Demands of our larger study and the urgency of needing information to guide which questions to employ required us to gather preliminary evidence regarding the similarity of the response time and difficulty of the questions used to measure medical decision making. As such, we used Doctor of Nursing Practice (DNP) and Baccalaureate of Science Nursing (BSN) students as a proxy for National Guard medical personnel.

Method: Thirty-seven students who were enrolled in a DNP program or a BSN program participated in this study. Over the course of three days, student participants were sent five questions in the morning and five questions in the evening. On the fourth day, students were sent 10 questions in the morning and 10 questions in the evening. DNP students received medication calculation questions and BSN students received BLS questions. All questions were drawn from standardized test bank sources, were multiple choices and were thoroughly reviewed by the research team for relevant content prior to study testing.

Results: Twenty-five (50%) and twenty-eight (56%) of the 50 BLS and medication calculation questions met the selection criteria of average response times between 10 and 50 seconds and accuracy of at least 80%. From these, 16 questions were selected from both sets with smaller standard deviations, minimum response times of at least 5 seconds and maximum response times less than 90 seconds.

Implications: In order to test the impact of sleep deprivation, fatigue, or any other stressors on critical decision making skills of military medical personal during field training operations it was necessary to develop a test battery of questions that are sensitive enough to detect variation due to human factors. Our study accomplished this objective, and the resulting medication calculation and BLS questions can be used to readily assess deterioration in critical decision making skills within a field setting.

Biography

Denise A Smart has her expertise in military population health and occupational health. Her focus is on workplace safety during training and real-world military disaster responses for National Guard medical personnel. She has experience of over 22 years as a Navy Nurse and Public Health Officer for the Air National Guard before retiring in 2012. She has been working closely with Dr. Lois James (Co-Investigator) on this two-year research project.

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Surveying the awareness rate of knowledge of elderly fall guideline and attitude towards guidelines among the different levels hospital nurses

Wen Yan and Qian Chen
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Objective: To compare the status of the awareness rate of the guidelines on falls in the elderly and attitude towards the guideline among nurses in secondary hospitals and tertiary hospitals in Sichuan Province.

Methods: From April to June 2017, a total of 800 nurses from 8 secondary hospitals and 8 tertiary hospitals in Sichuan Province with a convenient sampling method were recruited to conduct questionnaire survey on the awareness rate of knowledge of falls in the elderly and attitude towards guidelines for comparative analysis.

Results: The awareness rate of all nurses on the knowledge of fall in the elderly was 26.3%, there was significant difference in the awareness rate of the guidelines for falls among the elderly (22.6% vs. 29.9%, $\chi^2=5.358$, $p<0.05$) between the secondary hospitals and the tertiary hospitals. The nurses' attitudes towards the guideline between the secondary and tertiary hospital were statistically significant [(54.60±6.39) vs. (58.06±6.88), $t=7.291$, $p<0.001$].

Conclusion: The awareness rate of nurses' knowledge of elderly fall guideline in the secondary hospitals and the tertiary hospitals was low, nurses' attitudes towards guidelines were both positive in the two level hospitals. It is suggested to use nurses' positive attitude to guideline and train nurses in systematic professional anti-fall by setting guidelines for intervention of fall in elderly patients in hospital so as to reduce the incidence of falls in hospitalized elderly patients.

Biography

Wen Yan is a Master graduate student majoring Geriatric nursing of West China School of Medicine, Sichuan University.

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The development situation of acute care of the elderly unit

Zhao Wenting

Sichuan University, China

This paper introduced the basic concept, development background, development situation and pattern of acute care of the elderly unit, so as to improve the public cognition and development of acute care of the elderly unit. The practices of acute care of the elderly unit could improve the hospital outcome of elderly patients and enhance the quality of life.

Biography

Zhao Wenting is a postgraduate student at West China Hospital of Sichuan University, majored in geriatric nursing. She has published more than 2 papers in her first year in Master's degree. She loves her career in nursing, and wants to help more people to live better Corresponding Author: Zhang Xuemei.

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