Late dropout from nursing education: An interview study of nursing students' experiences and reasons.
Bakker EJM et al
The global shortages of nurses require a closer look at why nursing students stop in the later years of their degree programme. The purpose of this study is to explore nursing students' experiences and reasons that lead to this late dropout. Semi-structured interviews were held in 2017 with eleven former nursing students who dropped out in the third year of their Bachelor's Nursing degree programme in the Netherlands. Data was collected and analysed iteratively, following the principles of Thematic Analysis. Two core themes were identified: 'ending up in a downward spiral of physical, psychological and social problems' and 'experiencing an increasing mismatch between expectations and reality'. Reasons for late dropout from nursing education are diverse and interlinked. In contrast with studies on early dropout, academic difficulties did not play a major role in late dropout. Negative experiences during clinical placements led to dropout in both groups. One group lacked a safe learning environment in clinical placements, study coaching and psychological support. The other group missed realistic information provision about nursing education and the broad range of career opportunities in nursing.

The Flipped Classroom Format and Nursing Professional Development.
Pilcher J.
The flipped classroom is increasingly described in the education literature. In the most basic terms, the phrase flipped classroom refers to learners doing some type of preparatory work prior to attending a class. Class time is then spent applying the content. This article includes an overview of evidence related to the flipped classroom, as well as examples of how the flipped format has been used in nursing professional development. Hints are included regarding planning and implementing a flipped classroom.

Measuring Preceptor Selection in Long-Term Care
Burt, S.C.
Orienting new nursing staff is costly for health care organizations. Identifying preceptor characteristics and structuring preceptor education to support those characteristics may improve the orientation process and decrease orientation cost. A descriptive, observational study identified preferred characteristics of potential preceptors (N = 39) in a long-term care/subacute facility. Results showed that mean ranks of three items on the preceptor instrument were significant, thus providing insight regarding content and desired outcome of preceptor education.

Predictors of Hospital Nurses' Cultural Competence: The Value of Diversity Training.
McLennon SM, Rogers TL, Davis A.
J Contin Educ Nurs. 2019 Oct 1;50(10):469-474.– RNs must be culturally competent to facilitate optimal health outcomes for diverse patients and families. The purpose of this study was to identify factors associated with cultural competence in hospital nurses. Results suggest that diversity training is associated with greater cultural competence. Further research is needed to identify optimal types, dose, and frequency of diversity training to enhance overall cultural competence.
Addressing the Perioperative Nursing Shortage Through Education: A Perioperative Imperative.
Beitz JM.
Perioperative nurse leaders are facing an unprecedented nursing shortage. Very few baccalaureate nursing programs in the United States prepare graduates for perioperative nursing, and many current perioperative nurses are retiring from practice or leaving the field for other reasons. It is a challenge for nursing administrators to fill the vacant positions because it takes several months to orient a novice perioperative nurse and it involves significant costs. This article provides current information about perioperative nurse and leader shortages, discusses the effects of the shortages on patient safety and health care facility finances, and reviews the available literature about perioperative nursing education from both an academic and health care facility administrative perspective. In addition, this article presents strategies for addressing the nursing shortage and describes implications for clinical practice, education, and research.

The Regenerative Horizon: Opportunities for Nursing Research and Practice.
Chlan L.L. et al
Regenerative technologies aim to restore organ form and function. Technological advances in regenerative treatments have led to patients increasingly seeking these therapies. The readiness of nursing to fully contribute to this emerging healthcare field is uncertain. The goal of this discipline-oriented overview is to enhance awareness in the nursing community regarding regenerative science, and to provide suggestions for nursing research contributions and practice implications. Next generation nurses will increasingly be at the forefront of new therapies poised to make chronic illnesses curable, thus restoring health and function to diverse groups of individuals. The regenerative care model imposes on the nursing community the imperative to (a) increase research awareness; (a) educate, develop, and deploy a skilled nursing workforce; (c) integrate regenerative technologies into nursing practice; and (d) embrace the regenerative technologies horizon as a future in health care.

Influencing factors and processes of interprofessional professional education (IPE) implementation.
Wong PS et al
Interprofessional education (IPE) is an instructional approach for equipping health professions students with essential competencies needed to provide collaborative patient-centred care. The implementation and sustainability of IPE are challenging for many institutions. This qualitative study identified barriers and facilitators in the processes of IPE implementation. Successful implementation of IPE may hinge on actions in 5 stages; commitment, faculty engagement, IPE design, support, and delivery. The processes will require consistent leadership to break down professional silos and enhance collaborative effort in IPE implementation.

The Development of Trauma and Resilience Competencies for Nursing Education.
Wheeler K et al
Trauma and its consequences have been identified as a high-priority public health risk. A growing body of research reveals the devastating long-term consequences from common and widespread adverse events across the life span. In addition, recent research links medical procedures and medical illnesses with posttraumatic stress disorder. Nurses too are at risk and suffer vicarious trauma. Nurses must be able to recognize and assess for early trauma symptoms and assist in enhancing resilience in order to prevent and care for those with trauma. However, there is a lack of trauma-informed and trauma-specific training in nursing education. Given the ubiquity of traumatic events, the pervasive physical and emotional sequelae of trauma, and the existence of evidence-based treatment for trauma; there is a critical need to develop core competencies for nursing education and practice. The purpose of this study is to develop and validate Trauma and Resilience Competencies for Nursing Education. Implications for education, practice, and research are discussed. The Trauma and Resilience Competencies for Nursing Education will be disseminated widely through publications and are available online.
The purpose of this study was to explore the experiences and perceptions of Dutch postdoctoral nurses working in research with leadership and career development. A generic explorative qualitative design with semistructured in-depth interviews was used. A criterion sample of 13 postdoctoral nurses working in research in the Netherlands was included. The data were analyzed using thematic analysis. This study demonstrates that postdoctoral nurses do show considerable progression in their leadership and career development; however, they experience the scientific working environment as challenging. The findings of this study indicate the need for more academic positions, the strengthening of the infrastructure for nursing research, and the development of supportive leadership and mentoring programs for postdoctoral nurses to provide optimal evidence-based and high-quality care for patients. Postdoctoral nurses need to develop strong leadership competencies to strengthen research, education, and evidence-based practice in clinical care to improve patient and healthcare outcomes.

Hospitals, clinics, and community agencies serve as clinical learning environments (CLEs) for both health care professionals and students. To achieve the Quadruple Aim, the CLE must be optimized to support team work, problem solving, and innovation. This article reviews the National Collaborative for Improving the Clinical Learning Environment initiative and provides implications for both academic and practice nursing education.

Use of teamwork skills during rapid response calls is important in the management of patient decompensation outside of the intensive care unit. The ability of a rapid response team (RRT) to influence patient outcomes depends on early team building and effective team performance. Simulation-based team training (SBTT) has been shown to be effective in teaching nontechnical teamwork skills. Rapid Cycle Deliberate Practice (RCDP) is becoming increasingly popular in simulation-based education. Emerging literature on the application of RCDP suggests this method may be superior to traditional reflective debriefing (TRD) in the acquisition of technical skills related to medical management, but fewer data exist that evaluate application of RCDP in teaching nontechnical teamwork skills. We describe a blended approach, using TRD with RCDP to hardwire teamwork behaviors including role assignment, task delegation, situational awareness, global assessment, and shared mental model to a nursing-led RRT.

Considerable confusion exists about the differences between mentoring, coaching, and precepting. This article was constructed to help professional development and clinical nurses in both understanding and differentiating between these important roles. This article serves as an overview, which will be followed by a subsequent Teaching Tips article on each separate role.

Shared decision making (SDM) is beneficial for interprofessional teams but also challenging to implement correctly. Oncology nurses are at the forefront of patients' treatment and, therefore, one of the most essential components of the SDM process. The aim of this pilot study was to examine the effects of a one-hour web-based SDM education session on self-reported knowledge, attitudes, adaptability, and communication skills related to SDM among oncology nurses. This study provides preliminary evidence that a one-hour web-based SDM education session is acceptable and has positive effects on oncology nurses' self-reported knowledge, attitudes, adaptability, and communication skills. More research is warranted to validate these findings.
**Development of resilience in nursing students: A systematic qualitative review and thematic synthesis.**
Amsrud KE, et al
Resilience is a term commonly used to describe the ability to turn adversity into opportunities and learn from demanding situations. There seems to be a need to identify support strategies for developing resilience among nursing students in order to strengthen their professional practice. The aim of this review was to synthesize qualitative research exploring how resilience can be developed in nursing students. The review question was: How can nurse educators support students' development of resilience? In conclusion, a learning culture characterized by trustworthiness appears to be a catalyst for developing resilience in nursing students. A variety of support strategies in nursing education contribute to resilience in nursing students, thus influencing their readiness to care.

**The Interim NHS People Plan: implications for nurse education.**
Scammell J.
Proposals to tackle nursing recruitment and retention issues centre on addressing workplace culture and improving leadership, as Janet Scammell, Associate Professor (Nursing), Bournemouth University, explains.

**The self-assessment of clinical competence and the need for further training: A cross-sectional survey of advanced practice nursing students.**
Taylor I, et al
The aims of the present study were i) to describe and analyse advanced practice nursing students' self-assessment of their clinical competence and need for further training and ii) to analyse the possible predictive variables in their self-assessment. The self-assessment of clinical competence in nursing education is important for identifying professional development and educational needs to improve patient care. The findings indicate that self-assessment is appropriate for students in advanced practice nursing programmes. This study implies that programmes in advanced practice nursing need to familiarise students with the possibilities of information technology. It questions the entry requirement that stipulates that prospective students must have several years of clinical work experience as registered nurses before entering advanced practice nursing programmes. These programmes need to communicate that competencies other than direct clinical practice are also needed for students' future roles. The study contributes to the exploration of how students self-assess own clinical competence and need for further training in advanced practice nursing programmes. Further research should evaluate the development of clinical competence.

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