Healthy aging represents an aspect of nursing science where there is accelerating academic interest in a topic that is of great public interest. Thus, an opportunity presents to consider how best to leverage academic leadership roles to assure a forward-looking curriculum, foster relevant research, and communicate results to the public. There are many roles that academic nursing leaders can play in advancing transformational ideas such as healthy aging, including acting as incubator and resource, hub and bridge, educational futurist, and public advocate. Nursing brings to this transformational task knowledge of the need for evidence-based research to guide policy and decision making as it relates to aging, clinical experience, and an ability to convey to a non-professional audience the clinical experience and research results.

Growing evidence indicates that improved nurse staffing in acute hospitals is associated with lower hospital mortality. Current research is limited to studies using hospital level data or without proper adjustment for confounders which makes the translation to practice difficult. This study confirms the association between higher nurse staffing levels and lower patient mortality controlled for relevant confounders.

Training in EOLC was inconsistent across courses and professions. Further research is needed to understand how to remove the barriers identified and to improve the consistency of current training.

This study was performed as a quasi-experimental study using a standardized patient simulation program in order to explore the effects of education on the performance and knowledge of undergraduate nursing students with respect to pressure ulcers.
specific competences are essential for a successful heart failure management. The European Society of Cardiology (ESC) guidelines state that heart failure nurse specialists (heart failure nurses) with specific competences are essential for a successful heart-failure-management programme. Thus, the Heart Failure Nurse education today, 14 November 2019, Vol.85, pp.104266
The aim of this study was to describe the emotional cues expressed by patients and the cue-responding behaviors of nurses in oncology settings. This study revealed that nurses who had received palliative or oncology training responded more positively to the patients’ cues. The result of this study suggested that longer contact times are beneficial to nurse-patient communication, as patients might then have adequate time to express emotional cues during daily routine care, and nurses would have more opportunities to ask patients about their concerns and answer their questions. The pattern of the expression of the concerns by patients and the responses of nurses to those concerns can perhaps be improved by conducting further research on the subject, and by educational preparation at the undergraduate level, as well as by providing relevant continuing education to practicing nurses.

Does post-registration palliative care education for nurses improve practice? A systematic review
Thavaraj, Angela ; Gillett, Karen
International journal of palliative nursing, 02 November 2019, Vol.25(11), pp.552-564
We aimed to answer the question: what is the evidence that post-registration palliative care education for nurses improves practice? Little research exists exploring the impact of post-registration palliative care education for nurses. Existing outcome measures do not clearly demonstrate changes to end-of-life practice. Research is suggested to establish links between self-reported confidence and improvements to practice. Evaluation of the impact on practice should be an integral component of end-of-life education initiatives.

Trauma-informed education: Creating and pilot testing a nursing curriculum on trauma-informed care
Cannon, Lindsay M ; et al
Nurse education today, 01 November 2019, Vol.85, pp.104256
Trauma is a significant contributor to morbidity and mortality. Trauma-informed care (TIC) provides a safe and supportive healthcare environment for patients who have experienced trauma. Educating healthcare providers improves knowledge, attitudes, and skills related to TIC. However, nursing programs do not systematically integrate TIC education. The current study provides a trauma-informed nursing education model that is safe, appropriate, acceptable, and efficacious.

The influence of hospital location and 'level of care' on continuing professional development
Edward, Karen-Leigh ; et al
Nurse education in practice, 05 October 2019, Vol.41, pp.102634
Healthcare workers core skills are reinforced and knowledge of latest developments ensured by undertaking systematic continuing professional development. The current study explored the impact of health facility location and level of care provided on the continuing professional development offered to maternity services healthcare workers in Victoria, Australia. Key enablers are the capacity to share resources, have access to external courses and simulation equipment/centres, and the provision of relevant and timely continuing professional development programmes, indicating that ‘Educational hubs’ with credentialed staff working from better resourced regional facilities could deliver a complete array of CPD programmes to lower level facilities.

Does Simulation Training for Acute Care Nurses Improve Patient Safety Outcomes: A Systematic Review to Inform Evidence-Based Practice
Lewis, Kimberly A. et al
Worldviews On Evidence-Based Nursing. Volume 16:Issue 5 (2019); pp 389-396
Simulation is increasingly used as a training tool for acute care medical-surgical nurses to improve patient safety outcomes. A synthesis of the evidence is needed to describe the characteristics of research studies about acute care nurse simulation trainings and patient safety. An additional purpose is to examine the effects of acute care registered nurse (RN) simulation trainings on patient safety outcomes. Findings support the design of simulation training research studies for patient safety outcomes and use of simulation training and research in acute care RNs. Additional high-quality research is needed to support this field.

Unravelling heart failure nurses' education: Content comparison of heart failure nurses' education in three European Society of Cardiology states and the Heart Failure Association heart failure curriculum
Baldewijns, Karolien; et al
European Journal Of Cardiovascular Nursing. Volume 18:Number 8 (2019); pp 711-719
The European Society of Cardiology (ESC) guidelines state that heart failure nurse specialists (heart-failure nurses) with specific competences are essential for a successful heart-failure-management programme. Thus, the Heart Failure
Association (HFA) of the ESC developed the heart failure nurse curriculum (HFA curriculum). Several ESC member states developed cardiovascular education programmes to enable nurses to deliver high specialist care, but little is known of whether these curricula are in line with the HFA curriculum. Therefore, this paper describes the extent to which cardiovascular education programmes in Belgium, The Netherlands and Germany correspond to the HFA curriculum.

**The impact of compassionate care education on nurses: A mixed-method systematic review**
Coffey, Alice; et al
*Journal Of Advanced Nursing*. Volume 75: Number 11 (2019); pp 2340-2351
We identify, describe, and summarize evidence from quantitative, qualitative, and mixed-method studies conducted to prepare nurses and nursing students to lead on and/or deliver compassionate care. The impact of compassionate care educational programmes on nurses was predominantly positive. Further evaluation of the long-term impact of these programmes on nurses, patients, and organizations is warranted. Optimal delivery of compassionate care can be achieved by building organizational infrastructures that support nurses from all levels to attend education programmes and lead on compassionate care delivery.

**Perspectives of nurse managers on information communication technology and e-Leadership**
Sharpp, Tara J. et al
*Journal Of Nursing Management*. Volume 27: Number 7 (2019); pp 1554-1562
We sought nurse managers' perspectives on challenges and opportunities with technology and how it may influence communication and leadership. Effective and safe patient care is dependent on multiple technology applications that require significant knowledge and practice. Nursing leadership may consider the need for more supported mentorship, and engaging programs to educate nurse managers about the dozens of applications required to effectively manage and lead. For technology to be used to its full potential it should be designed with nursing involvement.

**Attracting and retaining nurses through a clinical fellowship programme**
Marsh, Zoe; et al
*British Journal Of Nursing*. Volume 28: Number 18 (2019); pp 1207-1209
Shortages in nursing are the single biggest and most urgent workforce issue that the NHS needs to address. This article sets out the early success of the Nurse Clinical Fellowship Programme established by The Royal Wolverhampton NHS Trust. The unique programme aims to attract and retain nurses by offering a staff nurse post with supported access to academia, fully funded by the NHS Trust.

**New graduate nurses’ clinical safety knowledge by the numbers**
Murray, Melanie; et al
*Journal Of Nursing Management*. Volume 27: Number 7 (2019); pp 1384-1390
We explore new graduate registered nurses’ knowledge and attitudes concerning medical error and patient safety, during their first 6 months of professional practice. Results suggest that a theory practice gap persists with respect to medical error for transitioning new nurses. New nurses lack confidence around compromised patient safety situations and a knowledge gap around actions related to medical error. Nurse managers and educators should be made aware of this gap to implement strategies to decrease risk during novice nurse transition.

**Preceptors’ experiences of using structured learning activities as part of the peer learning model: A qualitative study**
Stenberg M, Bengtsson M, Mangrio E, Carlson E.
The clinical environment is a vital component of nurse education, constantly changing due to constraints of the current health care systems such as increasing number of students and a limited number of preceptors. Peer learning, is gaining momentum as an educational model highly suitable for clinical placements. The peer learning model incorporates structured learning activities that support student activity, but little is reported of the actual structure and content of those activities. Thereby, the aim of this study was to explore precepting nurses' experience of using structured learning activities as part of the peer learning model during clinical placement. The preceptors perceived the structured learning activities as beneficial for increased collaboration and reflection among students. Moreover, utilizing the structured learning activities was perceived to be time saving for the preceptors, however this is an area where further research is needed.

**Evaluating the impact of a coaching pilot on students and staff**
Underwood S, et al
A coaching pilot was developed following the publication of a number of reports that recommended a review into how student nurses are taught in clinical practice. A bespoke version of the Collaborative Learning in Practice (CLiP) model was developed, which used both coaching and peer learning to encourage students to lead the delivery of care for a
designated group of patients. A senior student led a team consisting of two junior students and they were given the responsibility of directing and coordinating the team in the manner expected of a registered nurse. A qualified nurse was responsible for the supervision of the students and used a coaching approach to teach. Findings from an evaluation revealed that the students benefitted from being able to work autonomously and were able to enhance their leadership and management skills.

The impact of nurse staffing levels and nurse's education on patient mortality in medical and surgical wards: an observational multicentre study.
Haegdorens F, et al
Growing evidence indicates that improved nurse staffing in acute hospitals is associated with lower hospital mortality. Current research is limited to studies using hospital level data or without proper adjustment for confounders which makes the translation to practice difficult. This study confirms the association between higher nurse staffing levels and lower patient mortality controlled for relevant confounders.

Students' perceptions of self-direction in pre-registration nurse education.
Pryce-Miller M, Serrant L.
This study explored to understand the lived experiences of a group of pre-registration nursing students’ in a United Kingdom Higher Education setting, in the context of increasing responsibility for self-direction throughout the learning process. Care is underpinned by evidence, knowledge and problem solving skills, predicated on enhanced student capability to ensure self-direction in learning. Clear expectations of responsibilities and roles in learning is key to supporting students from the beginning of the undergraduate programme. Teacher and student interaction is important in developing and enabling critical engagement in learning with clear directions and guidelines.

Precepting nurse practitioner students in the graduate nurse education demonstration: A cross-sectional analysis of the preceptor experience.
Todd BA, et al
The Graduate Nurse Education (GNE) Demonstration seeks to increase the number of advanced practice registered nurses (APRNs) in clinical practice. With the overall increase in APRN programs and, particularly, enrollment in nurse practitioner (NP) programs, there is growing competition among students to secure quality clinical precepting experiences. As universities work to recruit quality preceptors, they should consider tailoring their approach based on the preceptor’s clinical role. In addition, schools located within the same region should consider streamlining administrative processes to form sustaining and productive clinical partnerships.

Hill R, Woodward M, Arthur A.
Nurse Educ Today. 2019 Nov 21;85:104295
There are challenges in creating positive clinical learning environments. A new model of practice learning for pre-registration nurse education was pilot-tested in the East of England. The Collaborative Learning in Practice model (CLIP) was developed from a similar model of practice learning used in the Netherlands. Our findings suggest that collaborative learning in practice offers many benefits as an approach to clinical learning but with important caveats. Attention needs to be paid to particular aspects of the model such as sufficient numbers of students, and an acknowledgement of perceived losses as well as gains.

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