Mobile apps: An effective, inclusive and equitable way of delivering patient and nurse education?
Stone T.E. et al
Nurse education today; Feb 2020; vol. 85 ; p. 104308
In this contemporary issues paper, we discuss the complexities of developing mobile health apps and their use in nurse and patient education. The subject of this review are apps of the type which include health and wellness programs and educational apps and are designed for private use outside of a health care facility: examples include fitness apps, such as Fitbit, and education apps.

‘Thinking like a nurse’. Changing the culture of nursing students’ clinical learning: Implementing collaborative learning in practice.
Williamson GR; et al
Nurse education in practice; Feb 2020; vol. 43 ; p. 102742
This article reports a study evaluating the implementation of Collaborative Learning in Practice models at a university School of Nursing and Midwifery with practice partners across the South West of England. We conclude that Collaborative Learning in Practice utilising models of coaching and peer support, offers benefits to students who are exposed to the reality of nursing practice from the beginning of their placement experiences, enabling them greater responsibility and peer support than under normal mentoring arrangements. Furthermore, there are benefits to the registrants because the burdens of supervising students are spread more widely. This is timely given the review of Nursing and Midwifery Council standards for programmes and student support and the need to increase placement capacity as a response to global nursing shortages.

Emotional intelligence as a mechanism to build resilience and non-technical skills in undergraduate nurses undertaking clinical placement.
Hurley J; et al
International journal of mental health nursing; Feb 2020; vol. 29 (no. 1); p. 47-55
The environments in which nursing work is undertaken can be highly stressful and complex with resultant harmful outcomes for the health of both nurses and patients reported. Undergraduate nursing students are particularly challenged when on clinical placement through having only partially developed work capabilities, with wide claims that these nurses remain underprepared for work even upon graduation. Over time undergraduate nursing education has arguably not prioritized developing resilience and other non-technical skills required to respond effectively to these challenges. We suggest that student and patient experiences of nursing placement, and mental health nursing placements in particular, would be enhanced by pre-placement emotional intelligence training and coaching. Such training will support nursing graduates to be work-ready upon entering the workforce.

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  
*Journal of clinical nursing*; Feb 2020; vol. 29 (no. 3-4); p. 545-555

We describe and analyse advanced practice nursing students' self-assessment of their clinical competence and need for further training and (b) 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 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.

Hill R; Woodward M; Arthur A  
*Nurse education today*; Feb 2020; vol. 85 ; p. 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. We undertook an evaluation of a new approach to clinical learning. The aims of the project were to consider the challenges of implementation; consider the perception of gains and losses of students and stakeholders experiencing the new model of practice learning; and consider the sustainability of the new model in the context of service delivery. 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.

Yuka Omura; et al  
*Journal of Japan Academy of Nursing Science*; Feb 2020; vol. 39 ; p. 298-305

This study aims to investigate the feelings of senior nurses working in the university hospitals toward postgraduate education from the perspective of years of clinical experience, participation in postgraduate education, and workplace environment. This survey establishes that the feelings of senior nurses working in the university hospitals toward postgraduate education differ with regard to the years of clinical experience, participation in postgraduate education, and workplace environment.

Hababbeh, Atallah A; Alkhalileh, Murad Abdulrahim  
*British Journal of Nursing*; Feb 2020; vol. 29 (no. 4); p. 222-228

A culture of patient safety is one of the cornerstones of good-quality healthcare, and its provision is one of the significant challenges in healthcare environments. The purpose of this study was to evaluate the effect of a surgical safety educational programme on the attitudes of nurses to patient safety in operating rooms (OR). Incorporating courses about safety culture into continuing education programmes may improve nurses’ attitudes towards patient safety. Nurses should be qualified to play an important role in creating a culture of patient safety.

The article reports that Nursing and Midwifery Council (NMC), Health Education England (HEE) and the Department of Health and Social Care (DHSC) are celebrating one year of nursing associates making a difference in care for people across England. It also mentions that the nurses offering new career development opportunities to thousands of aspiring professionals.

Nagle, Amy; Foli, Karen J.  
*Clinical Simulation in Nursing*; Feb 2020; vol. 39 ; p. 33-40

Reflection is an essential learning component of debriefing; however, the role of student reflection during debriefing remains unclear. This concept analysis highlights student-centeredness, an important phenomenon in a debriefing that brings forth our ability to include the student in debriefing in a new way.

Clifford, Stuart; et al  
*Collegian*; Feb 2020; vol. 27 (no. 1); p. 95-101

To establish greater understanding into nurse practitioners and their value within healthcare. Value in healthcare, when used as a tool of healthcare economics, is a marker for effective service recognition. Value cannot be determined without understanding, the lack of descriptive properties about Australian nurse practitioners contributes to the gap in
understanding the value of the nurse practitioner service. Nurse practitioners identified the need for specialist nurse practitioner education and perceived varying support for their roles. Results qualify a more informed value judgement of the nurse practitioner role.

Fostering graduate nurse practice readiness in context. Harrison, Helena; et al  
*Collegian*; Feb 2020; vol. 27 (no. 1); p. 115-124  
The healthcare environment is highly pressured, dynamic and demanding of staff. Existing research indicates that when graduate nurses begin work, they are not practice ready and struggle to adapt and manage their responsibilities as registered nurses. As part of a larger study, this paper examines the impact of the healthcare environment on graduate nurses' practice readiness and the factors that assist them to become practice ready. Creating positive workplace environments that support nursing students and graduate nurses to develop practice readiness can enhance the quality of care they provide, promote their retention in the health workforce and contribute to improved healthcare practice and outcomes.

Evidence-informed policymaking: Modelling nurses' career pathway from registered nurse to advanced practice nurse. Jokiniemi, Krista; et al  
*International Journal of Nursing Practice* Feb 2020; vol. 26 (no. 1)  
We formulate, validate, and disseminate policy, modelling nurses' career pathway from registered to advanced practice nurse. Evidence-informed policymaking is an effective, interactive way to work collaboratively in achieving consensus and translating knowledge into practice. The formulated policy will contribute to the increased awareness, acknowledgement, and implementation of the registered nurses' traditional and new roles within health care environments. Implementing and integrating the policy in national health care policy, legislation, education, and organizations across the country is a work in progress.

Integrating Mindfulness Into Nursing Education: A Pilot Nonrandomized Controlled Trial. Cheli, Simone; et al  
*International Journal of Stress Management*; Feb 2020; vol. 27 (no. 1); p. 93-100  
There is an increasing base of evidence that mindfulness-based interventions are effective in reducing stress in nurses. Little is known about the potential effect of mindfulness in fostering nursing education. The present article reports the preliminary data of a pilot study aimed to introduce a mindfulness-based education program for nursing students. The described mindfulness-based education program reports a significant increase of dispositional mindfulness and a significant decrease of perceived burnout. Further studies are needed to overcome the main limitations of the study: a low sample size and the absence of randomization.

Initial Outcomes of an Online Continuing Education Series Focused on Post-treatment Cancer Survivorship Care. Harvey, Allison; et al  
*Journal of Cancer Education*; Feb 2020; vol. 35 (no. 1); p. 144-150  
There is a growing number of post-treatment cancer survivors in the USA. Cancer survivors can have a variety of care needs and health care professionals must be prepared to meet these needs. The American Cancer Society (ACS) and the George Washington University (GW) Cancer Center developed The Cancer Survivorship E-Learning Series for Primary Care Providers (E-Learning Series) to address the need for cancer survivorship training and education among health care professionals with a focus on primary care. The GW Cancer Center analyzed evaluation data. Results highlight gaps in confidence among health care professionals regarding cancer survivorship care and the need for continuing education. There is also a need for additional uptake of the E-Learning Series among primary care providers. Results suggest that the E-Learning Series is an effective educational tool that increases learners' confidence in providing cancer survivorship care.

The relationship between perceived difficulty and reflection in the practice of discharge planning nurses in acute care hospitals: A nationwide observational study. Moriya, Eiko; et al  
*Journal of Clinical Nursing* Feb 2020; vol. 29 (no. 3/4); p. 511-524  
We clarify the characteristics and practice of discharge planning nurses in acute care hospitals and we elucidate the relationship between subjective difficulty perceived in practice and reflection. The importance of discharge planning for an effective transition from the hospital to a care facility is increasing. In acute care hospitals, however, it is not clear what discharge planning nurses are doing for patients who are highly dependent on medical treatment, the subjective difficulties they perceive in practical activities, and whether reflection by nurses can be expected to mitigate those difficulties. It was shown that discharge planning nurses with 13 months or more of experience and who practiced reflection on their practical activities perceived less subjective difficulty. Reflection in daily practice may mitigate the subjective difficulty of practical activities experienced by discharge planning nurses, and the establishment of an effective training method that promotes such reflection is required. In the future, it will be
necessary to construct and evaluate an effective education programme for discharge planning nurses that includes self-reflection on practice cases.

**Empirical model of clinical learning environment and mentoring of culturally and linguistically diverse nursing students.**
Mikkonen, Kristina; Merilainen, Merja; Tomietto, Marco
*Journal of Clinical Nursing* Feb 2020; vol. 29 (no. 3/4); p. 653-661
We develop and test an empirical model of clinical learning environment and mentoring of culturally and linguistically diverse nursing students. Clinical learning is an essential part of nursing education; nursing students are required to master clinical competences and build a professional identity during their education. The global mobility of nurses requires high proficiency in cultural adaptability as well as the successful integration of cultural diversity into the healthcare system on a national level. The model needs to be further piloted and tested in organisational structures of clinical practice of culturally and linguistically diverse nursing students. The dimensions that explain mentoring in clinical learning needed to be further addressed in a theoretically consistent and empirically driven approach, according to these findings. In our study, we found that environmental and relational aspects are the most important for building an effective clinical learning environment. Universities and healthcare organisations can jointly leverage the model to foster clinical learning environments in clinical practice.

**Newly Graduated Swedish Nurses' Inadequacy in Developing Professional Competence.**
Widarsson, Margareta; et al
*Journal of Continuing Education in Nursing* Feb 2020; vol. 51 (no. 2); p. 65-74
The learning process for student and recently graduated nurses during their transition to professional nursing is stressful and challenging. The aim of this study was to describe recent graduates' experiences of developing professional competence in their basic nursing program and during their first year. Focusing on the intertwining of theoretical and practical knowledge can bridge the gap between these two organizations and create a foundation for lifelong learning of professional competence. Creating opportunities for reflection is central to the learning process.

**Partnering to Educate Nurses in Long-Term Care.**
Selleck, Cynthia; et al
*Journal of Continuing Education in Nursing* Feb 2020; vol. 51 (no. 2); p. 75-81
Despite a 2008 national call to retool a health care workforce for an aging America, the geriatrics-trained workforce is declining while the U.S. population continues to age. Formalized academic–practice partnerships between long-term care facilities and schools of nursing are one response to strengthening the work-force caring for older adults. This article details the activities of an intentional, synergistic, 3-year partnership between National HealthCare Corporation (NHC) and University of Alabama at Birmingham (UAB) School of Nursing. The partnership focused on providing continuing education and leadership development for NHC nurses while also providing nursing faculty with access to clinicians and patients in long-term care for the purposes of education, research, and quality improvement. The ultimate goal for both partners was improved patient outcomes.

**A Multimodality Approach to Learning: Educating Nursing Students in Palliative Care.**
Mason, Heidi; et al
*Journal of Hospice & Palliative Nursing* Feb 2020; vol. 22 (no. 1); p. 82-89
Palliative care education at the undergraduate and graduate level is necessary to improve the competency and confidence of nurses and ultimately improve the care of patients with a chronic illness. Unfortunately, the curriculum in nursing education programs lacks palliative care content, resulting in a lack of preparation and confidence among nursing students. The purpose of this study is to examine the effect of educating nursing. Results revealed a significant improvement in knowledge, attitude, and comfort with palliative and end-of-life care.

**Mutual Benefits of a Service-Learning Community–Academic Partnership.**
Tyndall, Deborah E.; et al
*Journal of Nursing Education* Feb 2020; vol. 59 (no. 2); p. 93-96
Service-learning community–academic partnerships provide opportunities for nursing student development. Although mutual benefit has been identified as a critical element for the success of these partnerships, research indicates a lack of attention to this element during the collaborative process. To increase capacity for sustainability of service-learning partnerships, the following strategies are recommended: initiation of a formal contract between partners, use of a guiding framework to identify outcomes, and faculty support for service initiatives. To increase capacity for sustainability of service-learning partnerships, the following strategies are recommended: initiation of a formal contract between partners, use of a guiding framework to identify outcomes, and faculty support for service initiatives.
education, staff and patient safety, and education costs. The journey to innovate included collaborating with the Apple higher education team to utilize mobile technology and to approach education methodologies in a tech-savvy workforce and environment. A competency first approach, using technology, provided the platform for rapid just-in-time learning capabilities, efficiencies, cost savings, and a cultural shift to peer accountability. Think Different is achievable for all settings and organization types.

**Nurses as educators: creating teachable moments in practice.**
Reynolds, Lisa; Attenborough, Julie; Halse, Jenny
**Nursing Times;** Feb 2020; vol. 116 (no. 2); p. 25-28

Effective workplace teaching is increasingly important in healthcare, with all staff being potential educators. The introduction of new roles and the need to create capacity for increased numbers of students can make it difficult to create a good learning experience. Despite the richness of clinical practice as a learning environment, creating capacity for teaching can be challenging. This article explores the possibilities for identifying and creating teachable moments in busy clinical environments and suggests a developmental model for incorporating these learning opportunities. Teachable moments linked directly to optimal patient care can potentially influence and shape a positive learning culture in clinical environments.

**Collaborative learning in practice: A systematic review and narrative synthesis of the research evidence in nurse education**
Williamson G.R. et al
**Nurse education in practice;** Jan 2020; vol. 43 ; p. 102706

Collaborative Learning in Practice is a model of placement learning for student nurses that is currently being implemented in the United Kingdom, apparently originating in Amsterdam. Potential benefits are reported to be increased placement capacity, reduced burdens on mentors as practice assessors, improvements in qualified nurses' job satisfaction, recruitment and retention, and better-developed preparedness for registrant practice amongst student nurses. Key findings support the assertions related to Collaborative Learning in Practice, albeit in different models of placement learning. Further research is necessary with Collaborative Learning in Practice stakeholders including staff and students, and regarding patient care metrics, to demonstrate benefits or otherwise and until that research takes place potential gains remain unproven.

**Learning to lead: A scoping review of undergraduate nurse education**
Scammell J.M.E.; et al
**Journal of nursing management;** Jan 2020

We explore undergraduate student’s preparation for leadership roles upon registration. Effective leadership is vital when promoting positive workplace cultures and high-quality care provision. However, newly registered nurses are not always well-prepared for leadership roles. The review highlighted some agreement about the knowledge, skills and behaviours to be addressed in leadership education. What varied more was the pedagogical methods used to deliver this, the extent of its integration throughout the programme and the nature of collaborative academic-practice working to ensure good quality clinical supervision.

**Lesson Plan Basics: Teaching in the Classroom With Confidence.**
Yonkaitis CF
**NASN school nurse ;** Jan 2020 ; p. 1942602X19893038

The ability to confidently teach a lesson to students, staff, or families is a skill all school nurses need to have. When a lesson plan is developed, a clear "road map" is created that guides the lesson and documents what is taught. Using the eight components described in this article, school nurses can develop a comprehensive lesson plan and teach with confidence.

**What are sensitivity and specificity?**
Swift A; Heale R; Twycross A
**Evidence-based nursing;** Jan 2020; vol. 23 (no. 1); p. 2-4

*Research made Simple* article which explores the terms sensitivity and specificity.

**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
**Nurse education in practice;** Jan 2020; vol. 42 ; p. 102668

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.

**Proposing Standards for Teaching Authentic Nursing Knowledge.**

Hanna, Debra R.

*Advances in Nursing Science*; Jan 2020; vol. 43 (no. 1); p. 42-49

This article's purpose is to propose ideas about developing teaching standards for each of 4 learner levels that lead to 4 types of nursing practice. The learner levels and types of practice are undergraduate/basic practice, graduate/enhanced practice, doctor of nursing practice/translational practice, and research doctorate/knowledge development practice. Each learner level requires different content and different teaching strategies. Thus, teaching at each level requires different teaching standards. This article is written in separate parts. Each section develops necessary ideas to support a set of recommended teaching standards needed to teach authentic nursing theoretical thinking at each level of nursing education.

**Keeping the Nurse in the Nurse Practitioner: Returning to Our Disciplinary Roots of Knowing in Nursing.**

Wood, Sylvia K.

*Advances in Nursing Science*; Jan 2020; vol. 43 (no. 1); p. 50-61

Nurse practitioners are a vital and growing body of primary healthcare providers. The ever changing advancements in science and technology and the increasing complexities in health care delivery are significant factors culminating in the expanding role of nurse practitioner led care. Nurse educators are striving to develop nurse practitioner curricula to keep pace with the increasingly sophisticated knowledge and competencies nurse practitioners must possess to render safe quality care as independent primary health care providers. However, nursing theory is losing its place as a formative foundation in nurse practitioner curricula. Multiple factors such as content-laden, competency-based, medically focused education have caused a diminishing presence of nursing theory, shrinking the philosophical basis for nursing in nurse practitioner education. The loss of the central unifying focus of the discipline and discipline-specific knowledge (nursology) risks losing the very identity that forms the basis and relevance for nurse practitioner practice. Moreover, the loss of the nurse in the nurse practitioner unmoors nurse practitioner practice from its theoretical and scientific basis, losing discipline-specific attributes that lead to higher levels of patient satisfaction and improved patient outcomes. Keeping the nurse in the nurse practitioner is a moral imperative in nurses' ethical and social contract with society. This article discusses relevant literature and offers recommendations to keep the nurse in the nurse practitioner.

**Satisfaction and self-confidence in the learning of nursing students: Randomized clinical trial.**

Raniere de Oliveira Costa, et al

*Anna Nery School Journal of Nursing*; Jan 2020; vol. 24 (no. 1); p. 1-9

We identify and compare satisfaction and self-confidence in the learning of nursing students from the use of simulation and traditional teaching in adult immunization scenarios in the context of Primary Health Care. Because they generate satisfaction and self-confidence, simulation and traditional strategies can be mutually used in nursing training.

**Nursing education under review.**

Reeves, Julie

*Australian Nursing & Midwifery Journal*; Jan 2020; vol. 26 (no. 9); p. 28-28

The article reports on the scope of an independent review of nursing education which was undertaken by the Australian government in 2019. Topics discussed include a comprehensive response from the Australian Nursing and Midwifery Federation, the overall state of nursing education based on the result, and the quality of clinical placement experiences in undergraduate programs.

**Contextualizing Instructional Technology to the Demands of Nursing Education.**

Smart, Denise; et al

*CIN: Computers, Informatics, Nursing*; Jan 2020; vol. 38 (no. 1); p. 18-27

This article reviews current technologies in nursing education and the impact of technology on learning. The integration of technology into nursing curricula is thought to improve efficiency and enhance student experiences through active learning and interactive learning designs. Consumers of healthcare (patients) demand quality care and expect highly skilled, compassionate, ethical practitioners; to this end, training and education of future nurses by skilled, qualified nurse educators who are comfortable with technological demands of all aspects of healthcare are fundamental. While it is essential that nurses and nurse educators continue to publish as a mechanism for open discussion and transparency in our teaching and learning approaches, we need higher levels of evidence to strengthen the argument that technology improves the learning environment and student outcomes and has a positive impact on clinical settings and patient care.
Cross-cultural perspectives on gerontology in nursing education – a qualitative study of nurse educators’ experiences. 
Rosendahl, Sirpa; Mattsson, Karin; Yuwanich, Nuttapol
Gerontology & Geriatrics Education; Jan 2020; vol. 41 (no. 1); p. 109-120
This study focuses on nurse educators’ perspectives on teaching gerontology within nursing curricula in two cultures. An increasing aging multi-cultural population with large caring needs requires not only informal elder care provided by family members, but also professional nursing staff trained in gerontology. The aim of this study was to explore how Swedish and Thai nurse educators describe the role of teaching gerontology within nursing educations in Sweden and Thailand. Pedagogical strategies need to be developed by nurse educators specialized in cross-cultural gerontology to improve current and future nursing educations in both countries.

Relationships between organizational and individual support, nurses’ ethical competence, ethical safety, and work satisfaction.
Poikkeus, Tarja; Suhonen, Riitta; Katajisto, Jouko; Leino-Kilpi, Helena
Health Care Management Review; Jan 2020; vol. 45 (no. 1); p. 83-93
Organizations and nurse leaders do not always effectively support nurses’ ethical competence. More information is needed about nurses’ perceptions of this support and relevant factors to improve it. The aim of the study was to examine relationships between nurses’ perceived organizational and individual support, ethical competence, ethical safety, and work satisfaction. Organizational and individual support for nurses’ ethical competence should be strengthened, at least in Finland, by providing more ethics education and addressing ethical problems in multiprofessional discussions. Findings confirm that organizational level support for ethical competence improves nurses’ work satisfaction. They also show that individual level support improves nurses’ sense of ethical safety, and both organizational and individual support strengthen nurses’ ethical competence. Practice Implications: These findings should assist nurse leaders to implement effective support practices to strengthen nurses’ ethical competence, ethical safety, and work satisfaction.

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