

# DAY 1

Scientific Tracks & Abstracts



27<sup>th</sup> Edition of World Congress on

# Nursing Education & Research

April 23-25, 2018 | Rome, Italy

**DAY 1**  
April 23, 2018

## Sessions

**Nursing in Emergency Medicine | Critical Care and  
Emergency Nursing | Nurse Career and Education |  
Patient Safety & Health Care | Teaching Strategies in  
Nursing Education**

**Session Chair**  
**Branko Gabrovec**

National Institute of Public Health, Slovenia

**Session Co-chair**  
**Marcella Kelly**

National University of Ireland, Galway

### Session Introduction

- Title: Nursing and medical staff's experiences of simulation education**  
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- Title: Do we know how to learn after graduating? Lifelong learning among community and oncology nurses – A cross sectional study**  
**Tal Granot**, Davidoff Cancer Center & Tel Aviv University, Israel
- Title: Exploring the views and experiences of teenage parents as service users of universal child and family health care services in the Irish context**  
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- Title: Why do we sometimes say NO? Consensus on the accommodation of traditional practices in critical care unit**  
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- Title: Lions don't eat grass...Addressing communication in critical care to enhance teamwork**  
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- Title: Mother's perception of their term and preterm babies**  
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- Title: Hydrofluoric Acid: The next terrorist weapon? Preparing yourself and your team**  
**Paul Rega**, University of Toledo, USA

# Nursing Education & Research

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Mari H Salminen Tuomaala, J Nurs Health Stud 2018, Volume 3  
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## NURSING AND MEDICAL STAFF'S EXPERIENCES OF SIMULATION EDUCATION

**Mari H Salminen Tuomaala**

Seinäjoki University of Applied Sciences, Finland

**Statement of the Problem:** Today's professionals are faced with increasingly complex health needs of the population. A combination of interdisciplinary knowledge and skills is required to ensure that the care is patient-centered, holistic and of the highest possible quality. However, multiprofessional simulation education has not been used enough as a part of continuing education.

**Objective:** The purpose of the research was to describe nursing and medical staff's experiences of the usefulness of simulation education in one hospital district in Finland. The research aimed at producing user-oriented knowledge to be used in the development of multiprofessional simulation pedagogical continuing education. The study is part of a larger research project, whose purpose is to build up a multiprofessional simulated learning environment for a network of partners. They involve a university of applied sciences, a vocational education center, a health technology development center and a hospital district.

**Methodology:** Data were collected using a web-based survey tool. The questionnaire contained both quantitative and qualitative items. Quantitative data was analyzed using SPSS Statistics for Windows 23 and qualitative data was analyzed using inductive content analysis.

**Findings:** Both nursing and medical staff experience that simulation education is useful for the development of their theoretical and practical competence. They need simulation based education that aims at better management of clinical care situations. Simulation education enables to develop communication skills. Simulation education has also an important role in promoting teamwork skills. Teamwork is one of the essential skills that should be practiced to promote collaboration and reduce errors. Successful multiprofessional teamwork has the benefits of combining skills and knowledge, crossing boundaries and creating effective networks to develop a more client-centered approach. Learning together can improve participants' technical and non-technical skills.

**Conclusion & Significance:** The knowledge produced in this research can be used in planning multiprofessional simulation pedagogical continuing education.

### Biography

Mari H Salminen Tuomaala, PhD in Health Sciences is a Senior Lecturer in Seinäjoki University of Applied Sciences, School of Health Care and Social Work. She is a Project Manager in simulation based education research and development project. She has worked over 20 years as Registered Nurse at medical departments, cardiac care unit and emergency department before teaching career. Her main research and expertise areas concern acute care (intensive care, out-of-hospital emergency care, care and counseling at the emergency department), simulation based education, psychosocial coping of myocardial infarction patients and their spouses, families as clients in health care and families in challenging life situations. She has about 40 conference presentations and over 50 scientific publications.

[mari.salminen-tuomaala@seamk.fi](mailto:mari.salminen-tuomaala@seamk.fi)

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## DO WE KNOW HOW TO LEARN AFTER GRADUATING? LIFELONG LEARNING AMONG COMMUNITY AND ONCOLOGY NURSES – A CROSS SECTIONAL STUDY

**Tal Granot, Diana Margolis and Ilya Kagan**

Davidoff Cancer Center & Tel Aviv University, Israel

**Background:** Development of the health care system evokes the necessitation of professional health caregiver to always be updated. The IOM and other nursing institutes performed a statement, that continuing learning among nurses is an imperative category. Literature review regarding nurses' habits and motivation for self-updating and continuing learning, are few and sometimes even contradict.

**Aim:** To determine the importance and responsibility that nurses relate to self-learning during their daily work.

**Tools & Method:** Research population was nurses from cancer center and from the community. The questioner had 2 parts: demographic (13 items) and learning (10 items). Most items based on 5 degree Likert scale.

**Results:** 72 responders answered the questioner (66%). 67.3% among oncology center and 75% among community nurses had advance course, 70% and 82.7% (respectively) had an academic degree. 91% of all responders believe that they have the responsibility for self-updating and 94% believe that they have the appropriate skills for that, but only 64.8% said they read more than 3 articles at the past year and 45% reported that they turn to electronic library by self-initiative rarely. Only 18% reported about often turning to electronic library and not even one as routine. At multi variance analyze there was significant negative correlation between those of 100% hours vs. partial regard to self-learning habits like reading articles, and participant at conferences or courses. No correlation was found between academic degree or advance course and self-learning among all participants.

**Conclusions:** Although 79.2% of responders had academic degree, and most of them believe they are responsible for their continuing learning, this study didn't reveal any evidence for academic studies as contributing factor for continuing learning among nurses. These study findings are not differing from some other studies, and it raises a huge question regarding nurses' education.

### Biography

Tal Granot RN, MA, has completed Master's in Nursing, Master of Philosophy and serves as Nurse of the Breast Cancer Ambulatory Unit, Institute of Oncology at the Davidoff Cancer Center (affiliated to Tel Aviv University). She guides women before and after chemotherapy, manage oral chemotherapy clinic, coordinate during crisis issues, and promote learning and research among nurses in the oncology center. She has relevant clinical, educational and administrative experience as senior partner in the IONS for oral therapy nursing care. She is a senior partner in national committee regarding job development of experienced oncology nurses in the ambulatory setting and a senior partner in the development of clinical safety standard guidelines in Davidoff Cancer Center.

[talg@einat.org.il](mailto:talg@einat.org.il)

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## EXPLORING THE VIEWS AND EXPERIENCES OF TEENAGE PARENTS AS SERVICE USERS OF UNIVERSAL CHILD AND FAMILY HEALTH CARE SERVICES IN THE IRISH CONTEXT

**Marcella Kelly**

National University of Ireland, Galway

**T**his study explores the views and experiences of teenage parents as service users of universal child and family health care services. The focus of this study was to reveal lived experience from the emic perspective. For this purpose interpretive hermeneutical phenomenology underpinned by Martin Heidegger's philosophical perspective was utilized. Thus, this study's phenomenological focus emphasized the explication of 'Being', in this instance 'being a teenage parent service user' and the exploration of that existence. The thematic analysis of the data revealed phenomenological findings represented in themes and subthemes of the phenomenon of both being a teenage parent service user of universal child and family health care services and of being in the world of the teenage parent. These themes included; being in the world of the teenage parent, being supported and helped and encounters with service entities as a service user. In the context of presenting these findings 'world' in this instance was viewed from the ontological perspective of being a teenage parent service user. Following the initial explication of the phenomenological findings it was evident that participants' existence was impacted by other people, processes and structures within their world. From these viewpoint critical realist principles using Derek Layder theory of social domains to explicate the causative mechanisms within social life that shaped the lived experience of being a teenage parent service user. The culmination of utilizing both phenomenological and

critical realist approach facilitated the explication of lived experience within the social context. The conceptualization of being a teenage parent service user revealed existence shaped by ideological social norms of the teenage parent. These understandings served to shape the personal and social sense of self contributing to the sense of difference, stigma and othering experienced. The negotiation of social milieu at the personal, interactional and contextual level revealed a struggle for participants in challenging the effects of social norms. This negotiation revealed the experience of being a teenage parent service user as dependent on how others in their world viewed them. It reveals the inherent power of others to shape the teenage parents' existence. It reveals the struggle teenage parents have to strive toward future goals and ambitions drawing on both material and cultural resources that facilitate these goals.

### Biography

Marcella Kelly is a Programme Director for Postgraduate Diploma in Nursing, Public Health Nursing and she did her PhD with Child and Family Research Centre, NUI, Galway, Teenage Parents as Service Users of Child and Family Health Care Services. She did her MSc Nurse Education in University College Dublin. She is the Registered Nurse Tutor, Registered Public Health Nurse, Registered Health Visitor (UK), Registered Midwife and Registered General Nurse. Her research interest includes Child Health and Well Being.

marcella.kelly@nuigalway.ie

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## WHY DO WE SOMETIMES SAY NO? CONSENSUS ON THE ACCOMMODATION OF TRADITIONAL PRACTICES IN CRITICAL CARE UNIT

**Tanya Heyns** and **Isabel Coetzee**

University of Pretoria, South Africa

**Background:** Patients admitted to critical care units receive specialised care based on modern science and technology. In these units doctors and nurses perceive western practices as superior to traditional practices. Conversely, South Africa comprises of diverse people (including nurses and doctors) and cultures, where up to 85% of the population believe in and make use of traditional practices when ill. Nurses are requested by patients and/or family members to incorporate traditional practices in the management of critically ill/dying patients. Some nurses do allow traditional practices, whilst others say no. Consensus should be reached on what should and what should not be accommodated.

**Aim:** Evaluate healthcare professionals accommodation of traditional practices in the critical care unit

**Methods:** Appreciative conversations with healthcare professionals and creative arts with nurses were used to collect data relating traditional practices accommodated in critical care units. Strategies were identified and consensus reached on which traditional practices should be accommodated in future.

**Results:** Healthcare professionals acknowledged that traditional practices are accommodated in a haphazard way and dependant on bedside nurses. Consensus was reached that traditional practices such as prayer, singing, religious symbols and rituals associated with dying are allowed by some nurses. In future traditional practices that are risk-free (e.g. topical application) and non-disruptive (healing session) should also be accommodated.

**Conclusion:** Healthcare professionals are required to develop cultural sensitivity and respect patients and/or families requests to allow traditional practices for the critically ill/dying patient. Accommodation of traditional practices should become an integral part of daily bedside nursing in critical care units. Traditional practices requested by patients and/or family members which cannot be accommodated should be discussed and re-negotiated to accommodate Western and traditional practices.

### Biography

Prof T Heyns is a senior lecturer at University of Pretoria for past 19 years involved in the education and training of pre-graduate and post-graduate students. Her area of clinical expertise is Emergency Nursing Care. She has supervised post-graduate scholars to completion a total of 41 Masters and 3 PhD students.. Currently she is supervising 11 Masters and 10 PhD students. She is an external examiner at several national and international universities, has examined 25 Masters dissertations and 9 PhD thesis. She has presented at various National and International Conferences relating Trauma and Emergency care as well as Practice development in the Critical Care environment. She has 20 published article in National and International Journals and is a lead researcher in an International Practice development research project with NRF Funding. She is a Fellow of the Academia of Nursing in South Africa (FANSA), as well as the past president of the Emergency Nursing Society of South Africa.

tanya.Heyns@up.ac.za



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## CARING IN NURSING HOMES TO PROMOTE AUTONOMY AND PARTICIPATION

**Maria Hedman**<sup>1,2</sup>

<sup>1</sup>Uppsala University, Sweden

<sup>2</sup>University of Gävle, Sweden

**Background:** Autonomy and participation are threatened within the group of older people living in nursing homes. Evidence suggests that healthcare personnel act on behalf of older people but are still excluding them from decision-making in everyday care.

**Objective:** The purpose was to describe registered nurses' experience of caring for older people in nursing homes to promote autonomy and participation.

**Research Design:** A descriptive design with a phenomenological approach was used. Data were collected by semi-structured individual interviews. Analysis was guided by Giorgi's method.

**Participants & Research Context:** A total of 13 registered nurses from 10 nursing homes participated.

**Ethical Considerations:** Ethical approval was obtained from the Regional Research Ethics Committee. Informed consent was achieved and confidentiality guaranteed.

**Findings:** The essence of caring for older people in nursing homes to promote autonomy and participation consisted of registered nurses' awareness of older people's frailty and the impact of illness to support health and well-being, and awareness of acknowledgement in everyday life and trusting relationships. Paying attention to older people by being open to the persons' wishes were aspects that relied on registered nurses' trusting relationships with older people, their relatives and surrounding healthcare personnel. The awareness reflected challenges in caring to promote older people's right to autonomy and participation in nursing homes. Registered nurses' strategies, hopes for and/or concerns about development of everyday life in nursing homes were revealed and mirrored their engagement in caring for older people.

**Discussion & Conclusion:** Awareness of older people's frailty in nursing homes and the importance of maintained health and well-being were described as the main source for promoting autonomy and participation. Everyday life and care in nursing homes needs to be addressed from both older people's and healthcare personnel's perspectives, to promote autonomy and participation for residents in nursing homes.

### Biography

Maria Hedman is a PhD student in the Department of Caring Science at the Faculty of Medicine, Uppsala University. She is a Specialist Nurse in care for older people. She has completed her MSc in Caring Science and is working as a Lecturer at University of Gävle since 2010. She is a RN since 1996, working mostly in care for older people. The research topic for her thesis is autonomy and participation for older people when living with long term conditions such as chronic illness.

[maria.hedman@hig.se](mailto:maria.hedman@hig.se)

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## THE RELATIONSHIP OF ETHICS EDUCATION AND MORAL SENSITIVITY AMONG UNDERGRADUATE NURSING STUDENTS

Hala Mohamed Mohamed Bayoumy<sup>1,2</sup>, Ola Mamdouh Esheba<sup>1,3</sup> and Gehad Al Halabi<sup>1</sup>

<sup>1</sup>King Saud Bin Abdul Aziz University for Health Sciences, Kingdom of Saudi Arabia

<sup>2</sup>Cairo University, Egypt

<sup>3</sup>Alexandria University, Egypt

**Background:** The nursing profession requires increasing competence of its practitioners at all levels. Competency among nurses cannot be achieved unless equipped with necessary moral sensitivity skills. Moral sensitivity is needed in protecting and promoting human health in uncertain, high degree of difficulty situations due to the nature of healthcare services. Nurses who have moral sensitivity skills can be trusted to act in ways that advance the interest of patients and could be made accountable for the practice. Therefore, how to best prepare students to deal with the ethical issues arise at work place is an important obligation of nursing education and research. There have been limited studies on the effects of ethics education on developing students' moral sensitivity.

**Methods & Design:** The study aimed at gaining an in-depth knowledge of the relationship of ethics education on nursing students' moral sensitivity. Students' perceptions of the relative value of the ethics study in their morals were also explored among other background factors. A non-probability, convenient sampling techniques was utilized for recruiting 419 nursing students from different level of the Bachelor program. A quantitative cross-sectional design was used; accordingly, data were collected at one point in a time. The Arabic version of the moral sensitivity questionnaire (A-MSQ) was used to measure moral sensitivity among participants. This instrument has excellent psychometric properties.

**Results:** Students' mean age was  $21.27 \pm 2.48$  and GPA was  $3.5 \pm 0.64$ . 44.15% of students studied ethics, 11.93% faced ethical dilemmas during their clinical practicum. Moral sensitivity mean score was  $130.87 \pm 16.99$  for the total participants. Moral sensitivity mean score did not significantly differ between those who studied ethics and those who did not ( $132.61 \pm 14.72$ ;  $129.46 \pm 18.52$  respectively). Patient centered caring, professional responsibility, and constructing

moral meaning was significantly different between the two groups (at  $p < 0.001$ ). Experience of moral meaning experience moral dilemmas and conflicts, nurse-patient relationship, and experience of good deeds was similar across students regardless of the study of ethics course. Moral sensitivity was significantly different between students engaged in other ethics related learning activities ( $p = .001$ ).

**Conclusion:** Ethics study among participants was influential on their patient centered caring, professional responsibility and constructing moral meaning aspects of their moral sensitivity. Despite total score for moral sensitivity was not affected by ethics course study, it did significantly differ among students who did and did not engage in other ethics related activities. Current findings should inform program and curriculum developers of the impact of incorporating ethics study in all components of nursing education including theory and practicum training. Future longitudinal studies are needed to explore moral sensitivity development among nursing students.

### Biography

Hala Mohamed Mohamed Bayoumy, BScN, MScN, DScN is an Assistant Professor, King Saud Bin Abdulaziz University for Health Sciences. She is an author of many research articles (18) published in reputed journals. She has presented papers in numerous international conferences. She is in the Editorial Board of International Journal of Nursing & Clinical Practices. She was Editor for the special issue: Self Care Skills and Quality of Life of Patients - which was published under that journal. She is also a Reviewer for multiple journals and member of many academic bodies. Her research interests centers on advances in nursing education as well as exploring impact of different illness conditions, treatment modalities and nursing interventions.

hamr77@hotmail.com



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## START OR SALT: WHICH TRIAGE SYSTEM WOULD YOU CHOOSE FOR YOURSELF AND YOUR COMMUNITY?

**Paul Rega**

University of Toledo, USA

**Statement of the Problem:** Triage is critical in disaster medicine. There are a number of triage tools globally, but none has been scientifically validated. START (simple triage and rapid treatment) has the most traction because of its simplicity and its advocacy of two key medical interventions. SALT (sort, assess, life-saving interventions, treatment) has been advocated by reputable agencies in the United States such as FEMA, AMA (American Medical Association), and the National Disaster Medical System. SALT differs from START because of its recognition of victims with non-survivable conditions (gray) and the addition of two additional medical interventions (antidote administration and needle thoracostomy). However, despite SALT's proponents, it is not as well-known among healthcare professionals and students. The positives and negatives of both triage systems will be presented.

**Methodology & Theoretical Orientation:** The learner will receive an introduction of triage, its history and its evolution. Then there will be a comprehensive presentation of START and SALT triage reviewing the advantages and limitations of each. Following this, there is one or more triage table-top exercises with which the learner will review each case scenario and determine which victims are red, yellow, green, black, and gray. They will also determine what medical interventions are required. Debriefing of the scenarios will follow.

**Findings:** The learner will then determine which of the triage tools they would select for their own community and their own healthcare institution based on the knowledge they acquired in class and during the drill.

**Conclusion & Significance:** Triage is a critical aspect of emergency and disaster medicine. The presentation of triage in general and START and SALT systems in greater detail will empower nurses to take the lead in improving their own triage skills and selecting the best tool for their hospitals and their community.

### Biography

Paul Rega has been an Emergency Physician for over thirty years and has been board-certified in Emergency Medicine and Pediatric Emergency Medicine until his retirement. At present, his activities have been concentrated in education and research at The University of Toledo College of Medicine where he is an Assistant Professor in both the Department of Public Health & Preventive Medicine and the Department of Emergency Medicine. He currently has a number of semester courses relating to pandemics, global health, and disasters. Virtually all of his educational endeavors are multidisciplinary in nature (Medicine, Nursing, PA, Pharmacology, and Public Health) and he makes extensive use of simulation (table-top and functional exercises, high-fidelity simulations, hybrid simulations, etc.). His association with the university has also resulted in a number of publications in peer-reviewed journals and grants associated with disaster medicine, simulation medicine, and pandemic preparedness and response.

paul.rega@utoledo.edu

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## LIONS DON'T EAT GRASS...ADDRESSING COMMUNICATION IN CRITICAL CARE TO ENHANCE TEAMWORK

**Tanya Heyns** and **Isabel Coetzee**

University of Pretoria, South Africa

**Background:** Nurses appear to be disengaged from their work and workplace cultures. A three-year emancipatory practice development research project was done in 11 critical care units in Gauteng, a province in South Africa supported the statement. Existing workplace cultures in five public and six private critical care units were observed for a total of 230 hours. Communication was identified as one of the key challenges that affected teamwork negatively.

**Aim:** To share how communication challenges were collaboratively addressed to improve teamwork in one public critical care unit.

**Methods:** Using a qualitative approach, all nurses working in one critical care unit in a public hospital were purposively sampled. Five caring conversations were held (including six to nine participants per session) in the unit over a period of two months. Collaborative data analysis and consensus were used to identify communication challenges and co-construct a way forward to improve teamwork.

**Results:** Consensus was reached that through verbal and non-verbal communication nurses displayed 'unacceptable behaviour' which negatively affected teamwork in the critical care unit. The 'unacceptable behaviour' characteristics were outlined and then linked to the animals e.g. the crocodile. Photos of the animal were displayed in the tearoom to raise awareness of unacceptable behaviour that will not be tolerated in the unit. The actions improved the overall behaviour as well as teamwork in the unit.

**Conclusion:** Nurses should be able to be open and speak about challenges relating to workplace culture experienced in practice. Setting ground rules such as being non-judgemental provides a psychological safe space to talk freely about feelings and co-construct action plans to move towards positive workplace cultures. The nurses voiced that we should remember that 'Lions do not eat grass'.

### Biography

Prof T Heyns is a senior lecturer at University of Pretoria for past 19 years involved in the education and training of pre-graduate and post-graduate students. Her area of clinical expertise is Emergency Nursing Care. She has supervised post-graduate scholars to completion a total of 41 Masters and 3 PhD students.. Currently she is supervising 11 Masters and 10 PhD students. She is an external examiner at several national and international universities, has examined 25 Masters dissertations and 9 PhD thesis. She has presented at various National and International Conferences relating Trauma and Emergency care as well as Practice development in the Critical Care environment. She has 20 published article in National and International Journals and is a lead researcher in an International Practice development research project with NRF Funding. She is a Fellow of the Academia of Nursing in South Africa (FANSA), as well as the past president of the Emergency Nursing Society of South Africa.

tanya.Heyns@up.ac.za

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## MOTHER'S PERCEPTION OF THEIR TERM AND PRETERM BABIES

**Selen Özakar Akça**

Hitit University Health School, Corum, Turkey

**M**other's perception of her baby is influenced by; reactions, previous experience, age, intellectual abilities, personal and cultural experiences, lack of social support, lack of information about support resources, disappointment after birth, mature/premature birth of baby. Pediatric nurses should help to initiate and maintain love formation in prenatal, postnatal, and postnatal periods with family and infant. Adoption of mother's pregnancy after pregnancy should help mother and baby in the early postnatal period to help the mother to perceive herself and her baby positively. This study aimed to determine how mothers with term and preterm babies perceive their new born babies. The study was conducted on term and preterm infant mothers who gave birth in the training and research hospital. No sampling has been applied in this comparative descriptive research method, term baby mothers (N=60) with at least primary school graduation who accepted to participate in the study between January 2015-December 2017, who gave their first birth and had no physical and psychological problems, and 35<sup>th</sup>-37<sup>th</sup> week born preterm infant mothers (N=60) have constituted the sampling. A questionnaire and a newborn perception scale were used as a data collection tool. The questionnaires were developed by the researcher, including demographic characteristics of the mother and introductory information about postnatal characteristics. The obtained data were evaluated using the significance test for the difference between two means of number and percentage and chi-square. It was determined that premature born babies were perceived as negative while term births were perceived positive by their mothers and this difference was found to be statistically significant ( $p=0.00$ ). Furthermore, it was detected that the descriptive characteristics of term and preterm infant mothers

did not influence the perception of their infants ( $p>0.05$ ). The fact that preterm infant mothers were not informed about prenatal babysitting, and if additionally the baby was not born in the desired gender, has increased their negative perception of babies. It has been recommended to support the behavior of mothers to perceive their baby positively, especially the early initiation of the relationships of preterm infants with their mothers.

### Biography

Selen Özakar Akça received her PhD degree from Istanbul University Institute of Health Science with the thesis entitled "Risk-taking behaviours of adolescents and the effect of nursing practice on substance abuse in accordance with model of change in adolescents" in 2013. She has been working in Hitit University Health School since 2008.

selenozakar@hotmail.com

## COMPARISON OF THE EFFECTS OF CONCEPT MAPPING AND PROBLEM-BASED LEARNING ON CRITICAL THINKING SKILLS OF NURSING STUDENTS

Mohammad Gholami, Amir Hossein Hossein Pour and Mandana Saki

Lorestan University of Medical Sciences, Khorramabad, Iran

**Statement of the Problem:** Concept Mapping (CM) and Problem-Based Learning (PBL) methods are constructivist teaching strategy used to develop problem solving abilities and meaning learning in nursing students. However, studies on the effects of CM and PBL on critical thinking have shown mixed results. The purpose of this study was to compare the effect of CM and PBL on critical thinking skills in nursing student in an orthopedic nursing course.

**Methodology & Theoretical Orientation:** A single-group quasi-experimental study with a pretest and posttest design was used. A convenience sample of second-year undergraduate students (n=44) enrolled in an orthopedic nursing course in an Iranian university of medical sciences (in Khorramabad, the administrative town of Lorestan Province in the west of Iran) were included. The CM method was used in one group over the first eight weeks of the first semester and PBL was adopted in the second eight weeks. Standardized self-administered questionnaire including the California Critical Thinking Skill Test-B (CCTST-B) administrated before and after the use of each of the approach methods. Data were analyzed in SPSS using the paired t-test.

**Findings:** Both groups showed significant improvement in overall and some subscales of the critical thinking skills from pretest to posttest ( $P<0.01$ ), but findings demonstrated that improvement in students' critical thinking skills (subscales of deduction, analysis, and inference) in the PBL group was significantly greater than in the CM group ( $P<0.05$ ).

**Conclusion & Significance:** The PBL has greater potential in foster the growth of critical thinking skills in nursing students. Further studies are also recommended to compare the effects of PBL and other teaching methods.

### Biography

Mohammad Gholami has work experience in emergency, critical cardiac care and neurosurgery care for 5-6 years. His PhD dissertation is focused on: process of health information seeking in patients with cardiovascular disease: design of model via grounded theory and Walker-Avant strategy. Currently, he supervises MScN theses, which concentrate on acute-chronic management diseases, cardiac care and evidence based nursing. He has been employed as a Faculty Member in the Nursing and Midwifery School of Lorestan University of Medical Sciences.

mohammad13565@yahoo.com

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## HYDROFLUORIC ACID: THE NEXT TERRORIST WEAPON? PREPARING YOURSELF AND YOUR TEAM

**Paul Rega**

University of Toledo, USA

**Statement of the problem:** Hydrofluoric Acid (HFA) is an agent whose components' action upon human tissue is unique among hazardous agents. This ubiquitous chemical destroys skin, fascia, muscle, and bone. The fluoride anion attaches with the body's calcium creating the potential for hypocalcemia, tetany and death in minutes if countermeasures are not instituted immediately. Calcium in all of its iterations is the antidote of choice. However, as much as HFA is a clear and present danger, knowledge of the agent, its clinical manifestations, and the therapeutic options are not taught among the medical and nursing specialties. This presentation serves to discuss HFA, demonstrate the use of high-fidelity simulators to reinforce education, and present an HFA mass casualty table-top exercise.

**Methodology & Theoretical Orientation:** A primer on HFA was available to the learner. Afterwards, an HFA case scenario was developed and the learner was challenged to deliver appropriate care at the scene of the exposure and in the emergency department. Emphasis was placed on the proper utilization of antidotes. The final stage is a table-top exercise dealing with multiple victims of an intentional attack and the efficient triage use of the various therapeutic choices based upon the initial triage of the victims.

**Findings:** Learners have acknowledged that the use of high-fidelity simulations reinforced their traditional education of uncommon but life-threatening medical conditions such as HFA exposure. The addition of a mass casualty event was purposely created to address terrorism and the need of emergency nurses and physicians to act quickly and competently to utilize resources efficaciously and save lives.

**Conclusion & Significance:** HFA is a unique hazardous agent that has not achieved the proper recognition as a potential agent of terror. The use of case simulations and table-top exercises can resolve that issue efficiently and entertainingly.

### Biography

Paul Rega has been an Emergency Physician for over thirty years and has been board-certified in Emergency Medicine and Pediatric Emergency Medicine until his retirement. At present, his activities have been concentrated in education and research at The University of Toledo College of Medicine where he is an Assistant Professor in both the Department of Public Health & Preventive Medicine and the Department of Emergency Medicine. He currently has a number of semester courses relating to pandemics, global health, and disasters. Virtually all of his educational endeavors are multidisciplinary in nature (Medicine, Nursing, PA, Pharmacology, and Public Health) and he makes extensive use of simulation (table-top and functional exercises, high-fidelity simulations, hybrid simulations, etc.). His association with the university has also resulted in a number of publications in peer-reviewed journals and grants associated with disaster medicine, simulation medicine, and pandemic preparedness and response.

paul.rega@utoledo.edu

# DAY 1

Video Presentation



27<sup>th</sup> Edition of World Congress on

# Nursing Education & Research

April 23-25, 2018 | Rome, Italy



# Nursing Education & Research

April 23-25, 2018  
Rome, Italy

Mansour Mansour, J Nurs Health Stud 2018, Volume 3  
DOI: 10.21767/2574-2825-C1-002

## THE CONTRIBUTIONS OF UNDERGRADUATE NURSING EDUCATION IN DEVELOPING ASSERTIVE COMMUNICATION BEHAVIORS AMONG SAUDI NEWLY-GRADUATED NURSES: QUALITATIVE FINDINGS

**Mansour Mansour<sup>1</sup>, Maha Al Madani<sup>2</sup>, Abdelrahman Al Anati<sup>3</sup> and Aysar Jamama<sup>4</sup>**

<sup>1</sup>Fundamental of Nursing Department, College of Nursing, Imam Abdulrahman Bin Faisal University, Kingdom of Saudi Arabia

<sup>2,3,4</sup> Community Health Nursing Department. College of Nursing, Imam Abdulrahman Bin Faisal University, Kingdom of Saudi Arabia

**Statement of the Problem:** Newly-qualified nurses perceive the transition into their new professional role as highly stressful, and they may not be well-equipped, or even ready, to acquire high-caliber skills such as speaking up against perceived unsafe practice. Developing assertive communication skills at an early stage of the nursing career was reported to be challenging. Undergraduate nursing education plays a vital role in preparing future nurses to work in complex and often stressful working environment. Saudi Arabia has unique socio-cultural and educational contexts, which may influence how health care professionals interact, communicate and manage their professional practice. Little research has examined the impact of undergraduate nursing education in shaping the development of speaking up attitudes against unsafe practice from Saudi newly-graduated nurses' perspectives. The purpose of this study was to examine the Saudi newly-graduated nurses' views on the contributions of undergraduate nursing program toward developing their assertive communication behaviors.

**Methodology:** This study is part of a larger project which involved cross-sectional survey of 83 newly -graduated Saudi nurses from five publically-funded hospitals in the Eastern Province, Kingdom of Saudi Arabia. 45 nurses provided free text, qualitative

responses, which were then thematically analyzed. Findings: Four main themes emerged from the study: Theory-Practice Gap, Perceived Blurred Professional Boundaries, Perceived Level of Knowledge Vs Personality and Quality of Nursing Education.

**Conclusion & Significance:** Developing and nurturing assertive communication behaviors among Saudi undergraduate nursing students is the result of complex interplay of social, cultural, personal and educational factors. Nursing training is the cornerstone for empowering nursing students. There is a need to develop operational definition of assertive communication skills that can be taught and practiced both in clinical and university settings.

### Biography

Mansour Mansour is an Associate Professor in Nursing, Imam Abdulrahman Bin Faisal University, Saudi Arabia and has a research interest in patient safety and patient safety education. He was involved in an international project on testing and implementing the WHO Multi-professional Patient Safety Curriculum Guide. He is a Registered General Nurse and Registered Nurse Tutor at the Nursing and Midwifery Council, UK.

mjmansour@iau.edu.sa

# DAY 2

Symposium



27<sup>th</sup> Edition of World Congress on

# Nursing Education & Research

April 23-25, 2018 | Rome, Italy

# Nursing Education & Research

April 23-25, 2018  
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Sheetal Barde alias Sheetal Anand Bobade, J Nurs Health Stud 2018, Volume 3  
DOI: 10.21767/2574-2825-C1-002



## PROGRESSION OF NURSING EDUCATION AND RESEARCH IN INDIA

### Sheetal Barde alias Sheetal Anand Bobade

Symbiosis International University, India

**N**ursing had originated independently and existed centuries ago in India. In past, the progress of nursing has been hindered by many difficulties. Since independence 1947, many changes have taken place and attitude toward nursing is still changing. The basic programme for combined general nursing and midwifery developed rapidly after 1871. Nursing research progression is evident by emergence of professional organizations, growth of educational institutions, research and in-depth curriculum. Indian Nursing Council is a statutory body that regulates nursing education and ensures measures for equivalence, exchange and practice for nurses in India and in abroad. Continuing nursing education supports the professional practice of nursing and the delivery of safe, evidence-based, high-quality care for patient. It supports nurses to acquire updated knowledge and skills needed to practice as technology advances. In India, nursing profession follows evidence based practice; it is booming day by day. In contest, statutory councils have initiated continuing nursing education at national and state level as a mandatory practice to renew the licensure for nursing practice. Inter professional research for nurses and inculcation of research in the curriculum echoed the impact of evidence-based practice (EBP) to improve the safety, efficiency and effectiveness of care. The nursing teacher in today's times of rapid advancement in technology is no longer be the only way for imparting knowledge and skill in classroom and in clinical setting. Integration of theoretical and practice is a demand in nursing. In India, the teaching strategies in most of the nursing colleges are still following traditional method but there are universities, which follow

advance technology in theory and clinical teaching. Name a few; simulation based learning, problem based learning, e-learning, use of multimedia in the classroom, blended learning, etc. Commonly recommended strategy to improve nursing education is to recruit more quality faculty and to support existing faculty to develop their educational provision and practice. Challenges are inadequate educational monitoring and governance at state and central level; poor physical infrastructure; lack of professional development; inadequate clinical experience etc. Opportunities are international collaborating for conferences; international partnership indicated for collaborative approach for education and research; participatory approach for entire nursing curriculum development process.

#### Biography

Sheetal Barde, a dynamic individual with excellent nursing and leadership skills who has a track record of delivering academic excellence in a professional manner through her academic performance. She is highly motivated, energetic and has a positive, realistic and supportive attitude towards the needs of her students. She can effectively lead and supervised students with varied level of knowledge to help them to achieve set targets. She is working as an educationalist for last 8 years. Her Passion is to teach and guide students in developing new learning strategies as well as to make them aware about their strengths. She has done her specialization in Psychiatric Nursing. To her account she has 15 research publications in Indexed Journals. Reviewer Board Member of Scopus indexed Journals. Currently she is working as Assistant Professor at Symbiosis College of Nursing, Symbiosis International University, Pune, India.

shitalbarde@scon.edu.in

# Nursing Education & Research

April 23-25, 2018  
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Kalpna Sawane alias Jasneet Kaur, J Nurs Health Stud 2018, Volume 3  
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## PROGRESSION OF NURSING EDUCATION AND RESEARCH IN INDIA

### Kalpna Sawane alias Jasneet Kaur

Symbiosis International University, India



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#### Biography

Kalpna Sawane alias Jasneet Kaur has her expertise in Community health nursing and Andragogy with 14 years of teaching experience. She has embraced a fanatical interest in research so have contributed to 9 research publications and on a way for her doctorate. Her action research focused on application of cooperative learning on off task behavior of nursing students and problem of large classes as a part nursing teaching strategies. Her focus area at community practice is aiming on health practices related to HIV, Hepatitis B, and alcoholism and disaster management at community level. On a personal note she reflects a varied personality including ambition and thoughtfulness. She is very close to her family and blessed with two kids.

[kalpanasawane@scon.edu.in](mailto:kalpanasawane@scon.edu.in)

# Nursing Education & Research

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## PROGRESSION OF NURSING EDUCATION AND RESEARCH IN INDIA

### Sheela Upendra

Symbiosis International University, India

Nursing had originated independently and existed centuries ago in India. In past, the progress of nursing has been hindered by many difficulties. Since independence 1947, many changes have taken place and attitude toward nursing is still changing. The basic programme for combined general nursing and midwifery developed rapidly after 1871. Nursing research progression is evident by emergence of professional organizations, growth of educational institutions, research and in-depth curriculum. Indian Nursing Council is a statutory body that regulates nursing education and ensures measures for equivalence, exchange and practice for nurses in India and in abroad. Continuing nursing education supports the professional practice of nursing and the delivery of safe, evidence-based, high-quality care for patient. It supports nurses to acquire updated knowledge and skills needed to practice as technology advances. In India, nursing profession follows evidence based practice; it is booming day by day. In contest, statutory councils have initiated continuing nursing education at national and state level as a mandatory practice to renew the licensure for nursing practice. Inter professional research for nurses and inculcation of research in the curriculum echoed the impact of evidence-based practice (EBP) to improve the safety, efficiency and effectiveness of care. The nursing teacher in today's times of rapid advancement in technology is no longer be the only way for imparting knowledge and skill in classroom and in clinical setting. Integration of theoretical and practice is a demand in nursing. In India, the teaching strategies in most of the nursing colleges are still following traditional method but there are universities, which follow advance technology in theory and clinical teaching. Name a few; simulation based learning, problem based learning, e-learning,

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#### Biography

Dr. Sheela Upendra is Assoc. Professor at Symbiosis College of Nursing, Symbiosis International University, Pune, India. She has logged in health care nearly 21 years of experience in Clinical and Educational sector. She has an outstanding academic background that includes Ph.D in Nursing, Masters in Sociology, Post graduate diploma in hospital administration and in Diabetes education. She believes that Research serves the key foundation and contributes towards strong academic foundation. Her true desire is to become a focus and strong leader in Nursing Profession. Her recent activities include associations with Non-governmental organizations in support of Community service for the betterment. She is Reviewer and Editorial board member in Indexed journals. She is a frequent speaker at State and National Conference and is an approved Speaker and Observer of State Nursing Council. A Gold medal recipient in Undergraduate Programme, a University topper in Post Graduation and Trained Nurses Associations of India, Pune Chapter Best Teacher Award for 2011. She is interested in badminton and a singer. On a Personal level, Life to Dr Sheela means Family and Friends.

sheelaupendra@scon.edu.in





# Nursing Education & Research

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Shobha Naidu, J Nurs Health Stud 2018, Volume 3  
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## PROGRESSION OF NURSING EDUCATION AND RESEARCH IN INDIA

### Shobha Naidu

Symbiosis International University, India

Nursing had originated independently and existed centuries ago in India. In past, the progress of nursing has been hindered by many difficulties. Since independence 1947, many changes have taken place and attitude toward nursing is still changing. The basic programme for combined general nursing and midwifery developed rapidly after 1871. Nursing research progression is evident by emergence of professional organizations, growth of educational institutions, research and in-depth curriculum. Indian Nursing Council is a statutory body that regulates nursing education and ensures measures for equivalence, exchange and practice for nurses in India and in abroad. Continuing nursing education supports the professional practice of nursing and the delivery of safe, evidence-based, high-quality care for patient. It supports nurses to acquire updated knowledge and skills needed to practice as technology advances. In India, nursing profession follows evidence based practice; it is booming day by day. In contest, statutory councils have initiated continuing nursing education at national and state level as a mandatory practice to renew the licensure for nursing practice. Inter professional research for nurses and inculcation of research in the curriculum echoed the impact of evidence-based practice (EBP) to improve the safety, efficiency and effectiveness of care. The nursing teacher in today's times of rapid advancement in technology is no longer be the only way for imparting knowledge and skill in classroom and in clinical setting. Integration of theoretical and practice is a demand in nursing. In India, the teaching strategies in most of the nursing colleges are still following traditional method but there are universities, which follow

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#### Biography

Lt Col Shobha Naidu (Retd) is an alumna of Armed Forces Medical College (AFMC) College of Nursing, Pune. The lady officer was commissioned into the Military Nursing Service in the rank of Lieutenant. She is an all-rounder with keen interest in Sports, Co-curricular and Extra-curricular activities. She has done M.Sc. nursing with specialization in Obstetrics & Gynaecological nursing. She will be shortly completing the Doctorate programme. Col Shobha has rendered 22 years of impeccable service in the Armed Forces and served in different terrains of the country including the high altitude area. She is presently the Offg. Director at Symbiosis College of Nursing. The lady faculty has put in a total of 26 years of service including 18 years of teaching experience. Col Shobha is a sober and disciplined individual with a friendly demeanor. She is passionate about teaching her clinical specialty and has special interest in research.





# DAY 2

Scientific Tracks & Abstracts



27<sup>th</sup> Edition of World Congress on

## Nursing Education & Research

April 23-25, 2018 | Rome, Italy

# DAY 2

April 24, 2018

## Sessions

Types of Nursing Education | Nursing Research and Evidence Based Practice | Professional and Continuing Nursing Education | Midwifery & Women's health

### Session Chair

**Paul Rega**  
University of Toledo, USA

### Session Co-chair

**Ligia Patricia Rojas Valenciano**  
University of Costa Rica, Costa Rica

### Session Introduction

**Title: Proactive approach: Developing and implementing guidelines for treating patients with oral anti-cancer agents (oaca) in the home-care setting: Experience of a comprehensive cancer center**

**Tal Granot**, Davidoff Cancer Center, Israel

**Title: Violence against employees in nursing care in Slovenia**

**Branko Gabrovec**, National institute of Public Health, Slovenia

**Title: Educating family caregivers of vegetative patients as a very important necessity: A qualitative study**

**Fateme Goudarzi**, Lorestan university of Medical Sciences, Iran

**Title: Sleep problems in patients treated at surgical services**

**Zehra AYDIN**, Hitit University Health School, Corum, Turkey

**Title: Twelve tips for using participant observation in clinical practice**

**Isabel Coetzee**, University of Pretoria, South Africa

**Title: Effects of self-management program on health outcomes/statuses in patients with musculoskeletal disorders**

**Amir Hossein Hossein Pour**, Lorestan University of Medical Sciences, Khorramabad, Iran

EuroSciCon

Nursing Education 2018

# Nursing Education & Research

April 23-25, 2018  
Rome, Italy

Tal Granot et al., J Nurs Health Stud 2018, Volume 3  
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## PROACTIVE APPROACH: DEVELOPING AND IMPLEMENTING GUIDELINES FOR TREATING PATIENTS WITH ORAL ANTI-CANCER AGENTS (OACA) IN THE HOME-CARE SETTING: EXPERIENCE OF A COMPREHENSIVE CANCER CENTER

**Tal Granot, Hana Ferman, Sarit Ashkenazi, Yael Stern, Ruth Busani, Hiba R, Ramiz A S, Orly F, Silvia Daniel, Juliet D and Amira M**

Davidoff Cancer Center, Israel

**Introduction:** The ongoing trend of using orally-administered instead of intravenously-administered anti-cancer agents might improve patients' quality-of-life and sometimes reduces costs. However, as this trend facilitates transition of patients to the home-care setting, issues such as patient monitoring, and addressing adverse events (AEs), become more challenging. Thus, this trend requires remodeling patient care and the communication between the ambulatory care staff and the patients.

**Objectives:** To describe the development and implementation of guidelines related to the treatment of cancer patients with oral anti-cancer agents in a comprehensive cancer center.

**Methods:** Guideline development included several steps such as performing a literature review, identifying safety issues, evaluating the number of patients, developing patient capabilities assessment tool, and creating relevant documents (e.g. information and contacts orders for each treatment and checklists/follow up sheets for the staff).

**Results:** Guidelines were developed and implemented during 2013-2014. At present, the ambulatory care nurses proactively monitor the treatment of approximately 70 patients (per week), who are being treated at home. The monitoring is performed by

phone/email/meetings, and includes confirming appropriate drug handling and administration (e.g., issues related to storage, dosage, and drug-food interactions), follow-up on blood tests, symptoms assessment, and hospitalization, if needed. Guidelines adoption by staff members improved patients' monitoring and decreased the rates of AEs (e.g., renal failure) and hospitalizations (will be presented).

**Conclusions:** Proactive approach by developing and implementing guidelines for managing patients treated with OACA was associated with improved patient care.

### Biography

Tal Granot, RN, MA, has completed Master's in Nursing, Master of Philosophy and serves as Nurse of the Breast Cancer Ambulatory Unit, Institute of Oncology at the Davidoff Cancer Center (affiliated to Tel Aviv University). She guides women before and after chemotherapy, manage oral chemotherapy clinic, coordinate during crisis issues, and promote learning and research among nurses in the oncology center. She has relevant clinical, educational and administrative experience as senior partner in the IONS for oral therapy nursing care. She is a senior partner in national committee regarding job development of experienced oncology nurses in the ambulatory setting and a senior partner in the development of clinical safety standard guidelines in Davidoff Cancer Center.

talg@einat.org.il

# Nursing Education & Research

April 23-25, 2018  
Rome, Italy

Branko Gabrovec, J Nurs Health Stud 2018, Volume 3  
DOI: 10.21767/2574-2825-C1-002

## VIOLENCE AGAINST EMPLOYEES IN NURSING CARE IN SLOVENIA

**Branko Gabrovec**

National Institute of Public Health, Slovenia

**W**e are presenting results of 5 researches on violence on employees in nursing care. In this research we have included nursing employees in psychiatric nursing care, homes for the elderly, paramedic services, community nursing and drug addiction rehabilitation centers. Researches were carried out by means of quantitative, non-experimental research, with a questionnaire being used as the method for gathering data. Researches were carried out from year 2013 to 2016. Accumulated data were analyzed by means of descriptive statistics, correlation, Kolmogorov-Smirnov test, Pearsonov  $\chi^2$  test, Mann-Whitney U test and linear regression with statistical significance value of  $p < 0.05$ . We have found a high exposure to violence of employees in nursing care from patients. In the greater extend they are exposed to verbal violence, often also to physical violence and sexual harassment. The highest prevalence can be observed at psychiatric nursing care. In the researched fields we have also found that a lateral violence is common. Research identifies issues of assuring safety and quality of treatment in the field of aggression. It is directed to the field that is yet not covered by present regulative or work practice. Researches on the field of nursing care, which come in contact with aggressive patient, have yet not included wider circle of participles or discuss the need of additional functional training for employees.

### Biography

Branko Gabrovec, PhD, MSc is a Senior Researcher at the Department of Health Care, NIJZ. With 19 years of working experience at health care system and also as an Assistant Professor, he started his career in a psychiatric hospital, continued at community health care center and National Institute of Public Health. His research interests are in nursing, ageing, healthy ageing, frailty, quality and safety in health care. He is author of many scientific publications.

[branko.gabrovec@nijz.si](mailto:branko.gabrovec@nijz.si)

April 23-25, 2018  
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Fateme Goudarzi et al., J Nurs Health Stud 2018, Volume 3  
DOI: 10.21767/2574-2825-C1-002

## EDUCATING FAMILY CAREGIVERS OF VEGETATIVE PATIENTS AS A VERY IMPORTANT NECESSITY: A QUALITATIVE STUDY

Fateme Goudarzi<sup>1</sup>, Heidarali Abedi<sup>2</sup>, Kourosh Zarea<sup>3</sup>, Fazlollah Ahmadi<sup>4</sup> and Hossein Goudarzi<sup>5,6</sup>

<sup>1</sup>Lorestan University of Medical Sciences, Khorramabad, Iran

<sup>2</sup>Islamic Azad University, Isfahan, Iran

<sup>3</sup>Ahvaz Jundishapur University of Medical Sciences, Iran

<sup>4</sup>Tarbiat Modares University, Iran

<sup>5</sup>Borujerd Health Network – LUMS, Iran

<sup>6</sup>Hamadan University of Medical Sciences, Iran

**Introduction:** Patients in a permanent vegetative state are living human beings, thus providing dignified and humanized care for them is very important. The mean survival predicted for these patients is 2-5 years, but there have been reported some patients with survivals of more than 10 years. It is worth noting that, because of their special self-care state, these patients need continual medical and social interventions and should also receive extensive care related to keeping their airways clear, immunity, liquid and electrolyte balance, nutrition, skin and corneal integrity, defecation and urination, giving them sensory stimulation, etc. On the other hand, the mentioned care should be provided by professionals, but in many countries such as Iran, because of the prolonged care period of these patients, they are discharged after their situation gets stabilized, and then they are cared for by family caregivers at home. So, continued education for family caregivers of these patients is very important but is unfortunately neglected because although home care is a very important part of the health system, it has not been adequately implemented or has been mis-implemented in the primary health care of Iran. Therefore, the present study was conducted to explain the process of vegetative patients' care performed at home by home caregivers, one of the dimensions of this process being their educational needs and how to receive them.

**Materials & Methods:** The present qualitative study was conducted from 2013 to 2015 in some provinces of Iran. Purposive sampling was used and 22 informants, including 17 family caregivers and 5 professional caregivers and hospital nurses, participated in this study. Ethical considerations were respected in the sampling process. Unstructured face-to-face interviews, observation, and field notes were used for data gathering. Data collection continued until data saturation was achieved and major themes became apparent. Content analysis was performed using the Lundman

and Graneheim approach and the constant comparative technique. Guba and Lincoln's criteria were followed to ensure rigor in this qualitative study.

**Findings:** As a result of data analysis, the main theme of seeking opening education emerged, and its' three sub-themes included: the necessity of education, avid seeking of education and effective education. These three sub-themes had 8 subcategories. These subcategories revealed that incomplete discharge education and the patients' need to receive multiple cares result in much fear in family caregivers. In response to this scary lack of knowledge, caregivers sought information from all sources, including professional and unprofessional sources. However, the result of the efforts of family caregivers in searching for information was accessing effective education that resulted in providing effective care for their patients.

**Conclusion:** Patients in a vegetative state need a variety of professional care and lack of optimized education to the family caregivers and families results in much psychological stress for them. So creating a process and a system for continuous and desirable education in the health system is very necessary. To achieve this goal, the proper intervention is to add home care to Iran's health system.

### Biography

Fateme Goudarzi is an Assistant Professor in Nursing, Medical-Surgical Department, School of Nursing, Lorestan University of Medical Sciences, Khorramabad, Iran, She did her BSc in Nursing at Shahid Beheshti University of Medical Sciences, MSC in Medical-Surgical Nursing, at Tehran University of Medical Sciences and PhD in Nursing, Ahvaz Jundishapur University of Medical Sciences.

fatemegoudarzi75@yahoo.com

# Nursing Education & Research

April 23-25, 2018  
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Zehra Aydin, J Nurs Health Stud 2018, Volume 3  
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## SLEEP PROBLEMS IN PATIENTS TREATED AT SURGICAL SERVICES

**Zehra AYDIN**

Hitit University Health School, Corum, Turkey

**S**leep is an important need for people to be healthy both physically and spiritually. As patients need more sleep and resting, it is important to make nurses, who are responsible for taking appropriate initiatives for sleeping problems, aware of sleep qualities and how they should be evaluated. It is well known that sleeping qualities can be affected by pain, related to diseases, encounter with unknowns after surgery and environmental factors and it is aimed to determine the factors affecting the sleeping conditions of the patients in surgical clinics and to improve these factors. This descriptive study was conducted on patients treated in the training and research hospital surgical services. No sampling was applied in the study and the patients who were treated on the dates of the study (May 2016-December 2017) constituted the sample. Data has been collected through the personal characteristics data sheet and the Pittsburgh Sleep Quality Scale using face-to-face interview method. The data of the study were evaluated by appropriate statistical methods. Statistical significance level was accepted as  $p < 0.05$ . Two hundred and ninety seven patients have participated in the study, 44.7% of the patients were women and 55.3% were male. When the sleeping qualities are examined according to the personal information form of the participants, there was a statistically significant difference in terms of gender, hospital information state, daily sleep time, hospitalized clinic and hospital stay period ( $p < 0.05$ ). When the patients' sleep quality during hospitalization is considered to be low according to the scale results; it is recommended that patients should be informed about the diseases and the interventions to be done. The influence on the sleep routine has to be prevented and the treatment and maintenance of the patient has to be planned to avoid any change in the sleeping patterns.

### Biography

Zehra AYDIN was born in Iğdır, Turkey in 1986. She graduated Master of Science in 2014. She is PhD student in Istanbul University Institute of Health Science. Her department is surgery and she has been working in Hitit University Health School since 2013.

[zehra86\\_sevgi@hotmail.com](mailto:zehra86_sevgi@hotmail.com)



# Nursing Education & Research

April 23-25, 2018  
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Isabel Coetzee et al., J Nurs Health Stud 2018, Volume 3  
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## TWELVE TIPS FOR USING PARTICIPANT OBSERVATION IN CLINICAL PRACTICE

**Isabel Coetzee, Seugnette Rossouw, Tanya Heyns, Ilze van Eeden  
Celia Filmalter and Joanita de Kock**

University of Pretoria, South Africa

**P**articipant observation is a method of data generation through the observation of activities as it occurs in a natural context. Using the views of participants during observation enabled the researchers to gain an understanding of practices, social views and interaction between people to give meaning to aspects for which little was known prior to the observation. The researchers did 230 hours of participant observations in 11 different critical care units, to gain a deeper understanding of the current workplace culture in the critical care environment. The researchers paired with participants in the critical care units to observe collaboratively. Following the observation session the researcher and the participant shared what they have observed regarding the workplace culture. Clinical practice in nursing is complex and the nature of the context most often influences data collection and research findings. Participant observation is regarded as a method of data collection to observe, explain and understand relationships between team members and normal daily activities of clinical practice. The researchers used direct observation as method to gain contextual understanding of the clinical practice and approach the observations as observer-participants. The aim of this presentation is to share the 12 tips to take into consideration when using participant observation as a data collection method in clinical practice.

### Biography

Isabel Coetzee is working as a Senior Lecturer in the Department of Nursing Science at University of Pretoria for the past 19 years. She has published 16 articles since 2010. Her tertiary experience includes teaching Postgraduate Diploma in Critical Care for past 19 years; Medical and Surgical Nursing Science for pre-graduate second year students and Research Methodology for Master's students. She is the Coordinator for PhD programme. She has completed supervising 30 Master's students since 2009, 2 PhD candidates and currently supervising 10 Master's and 7 PhD students. She has done her PhD (UNISA) in 2010. She played a role of an examiner for approximately 25 Masters' degree and 11 PhD candidates since 2011. She received the Critical Care Society of South Africa's Presidents' Nursing Award for outstanding contribution to Critical Care (2013), inaugurated as a Fellow of the Academy of Nursing in South Africa (FANSA) (2015) and South African representative of the World Federation of Critical Care 2017-2020.

Isabel.Coetzee@up.ac.za

# Nursing Education & Research

April 23-25, 2018  
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Amir Hossein Hossein Pour, J Nurs Health Stud 2018, Volume 3  
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## EFFECTS OF SELF-MANAGEMENT PROGRAM ON HEALTH OUTCOMES/ STATUES IN PATIENTS WITH MUSCULOSKELETAL DISORDERS

**Amir Hossein Hossein Pour**

Lorestan University of Medical Sciences, Iran

**Statement of the Problem:** There is evidence that participation in self-management programs is beneficial for patients with musculoskeletal disorders and a large number of trials have been performed; however, the conclusions are not consistent with each other. The purpose of this review study was to evaluate the impact of self-management interventions in improving health outcomes/statues for patients with musculoskeletal disorders.

**Methodology & Theoretical Orientation:** In this review study PubMed, CINAHL, and EMBASE were searched for intervention studies published between 2000 and 2015 with the following Mesh terms: pain, disability, fatigue, quality of life, depression, distress, health outcome, health statues, rheumatoid arthritis, fibromyalgia, arthritis, neck/back pain and self-management or self-care. We included randomized controlled trials (RCTs) of self-management interventions that enrolled patients 18 years of age or older who were diagnosed with musculoskeletal disorders. Articles were limited to journals published in English-language. Abstracts were identified against inclusion criteria and appraised independently by two reviewers, using a critical appraisal tool.

**Findings:** In this review, 21 studies which met the review criteria were fully retrieved and appraised. Fourteen of 21 studies with 6581 patients measured health outcomes. Outcomes were grouped into clinical improvement, and improved health status. Six out of 10 studies that measured pain intensity, disability and fatigue reported significant reduction among those receiving self-management programs. In 5 RCTs, there were significant improvement in health distress, depression,

activity limitation, global health, and self-efficacy with long term benefits for depression and quality of life subscales (to 12 months follow up). The findings of two study showed that self-management programs have small to moderate effects in improving pain and disability at the long-term level (16-18 weeks), but the medium-term (8 weeks) effect for disability is not significant. Finally in one study, no significant reduction in pain was recorded.

**Conclusion & Significance:** Our findings suggest that self-management programs had a positive effect in reducing pain, fatigue and in improving health outcomes/ statues.

### Biography

Amir Hossein Hossein Pour is an Undergraduate Nursing Student. He works as a Researcher at the School of Nursing and Midwifery of Lorestan University of Medical Sciences (Iran). He has research experience in cardiac and chronic care.

amir.ho3ein19955313@gmail.com