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FINE

EUROPEAN FEDERATION OF EDUCATORS IN NURSING SCIENCE

FÉDÉRATION EUROPÉENNE DES ENSEIGNANTS EN SCIENCES INFIRMIÈRES

BOOK OF ABSTRACTS

NURSING EDUCATION FOR A SUSTAINABLE FUTURE: FINE 2024 - Challenges and Opportunities

MARCH 2024
SANT CUGAT CAMPUS, BARCELONA
UNIVERSITAT INTERNACIONAL DE CATALUNYA

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The lack of nursing professionals to respond to healthcare challenges affects the whole of Europe

This was highlighted by the experts who participated in the second day of the international congress (FINE), which brought together more than 175 professionals, teachers and researchers in the field of nursing at the Sant Cugat Campus

The international congress "Nursing Education for a Sustainable Future: Challenges and Opportunities", promoted by the Department of Nursing and the European Federation of Nursing Sciences Educators (FINE), took place at the Sant Cugat Campus on 21 and 22 March and has been a success in terms of participation and attendance.

Throughout the first day, renowned speakers in the field of nursing at an international level highlighted the importance of creating educational environments with critical thinking to promote nursing leadership where interprofessional activities are developed, the need to invest in the educational and care field, and the need to promote the leadership of nurses in the field of nursing, and the need to recognise and regulate the figure of the advanced practice nurse. On the second day of the congress, experts focused their attention on the great lack of professionals and how the recognition of the various levels of nursing practice can respond to healthcare challenges present throughout Europe.

This was highlighted by Adela Zabalegui, deputy director of nursing research and teaching at the Hospital Clinic of Barcelona and first director of the Nursing Department at UIC Barcelona. In her speech, she stated that "although we have excellent universities and nursing schools, an aging population and the increase of chronic diseases make it necessary to have advanced practice nurses in the labour market to be able to respond to the current needs of society."

For her part, Katarzyna Ptak Bufkens, representative of the Directorate-General for Health and Food Safety of the European Commission, stressed the importance of "designing training initiatives for health professionals to improve the skills necessary for the digital and ecological transition of European health systems". She also reminded the audience that "it is essential to awaken the interest of young people in this profession, as well as having strategies that contribute to retain talent through professional promotion plans or training aimed at the greater specialisation of nurses". This is how "we will achieve more resilient health systems and safe health care," she added.

The Vice President of the European Federation of Nursing Sciences Educators (FINE), Maria Filomena Mendes Gaspar was in charge of giving the closing speech of the congress. In her speech, she stressed that the future of nursing training involves designing and defining an academic path that allows training in nursing to promote and improve the care they offer to society. "It is essential to have programmes that train young people with the necessary skills to practice nursing and have specialised training for professionals to grow professionally," she added.

Encarna Rodríguez, director of the Nursing Department, has valued the experience as "a great opportunity to highlight the great work that is being done in European universities to train nursing professionals from leadership and innovation."

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Chair of the International Council of Nurses (ICN)

Katarzyna Ptak Bufkens
European Commission, Directorate General for Heath and Food Safety

Adelaida Zabalegui
ViceDirector of Nursing at Hospital Clínic of Barcelona

Gemma Stacey
Deputy Chief Executive Officer, Florence Nightingale Foundation

Maria Filomena Mendes Gaspar
Coordinator Professor of ESEL (Lisbon School of Nursing) with public discussion in Nursing Administration

Round Table

Adriano Friganovic
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Laura Visiers Jimenez
Florence Network 2023

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Alessandro Stievano
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Jesús Rubio
CNDE

Esther Cabrera
UDINE

Isabelle Wachsmuth
WHO

Guest speakers

Cécile Dury
FINE Europe Présidente

Carmen Planas
Directora de Cures Infermeres del Sistema de Salut de Catalunya i directora de Cures Infermeres de l'Institut Català de la Salut (2023)

Encarna Rodríguez
Directora del Departament d'Infermeria de la Facultat de Medicina i Ciències de la Salut de UIC Barcelona

Cristina Monforte
Vicerectora d'Ordenació Acadèmica i Professorat de UIC Barcelona

FUTURE OF NURSE EDUCATOR EDUCATION

Oral Presentations session – 21 March

Exploring educators' learning in an international nurse educator education programme: a qualitative longitudinal study

Authors: Susanne Kean, Imane Elonen, Michelle Camilleri, Pilar Fuster-Linares, Heli Virtanen, Anneli Vauhkonen, Tomas Sollar, Andrea Solgajova, Dana Zrubcová, Leena Salminen

Aim: The aim of this exploratory, longitudinal qualitative study was to examine and describe the

European "Empowering Nurse Educators in the Changing World" (ENEW, 30 ECTS) programme participants' experiences over time.

Design: A qualitative longitudinal design was chosen to allow for insights into the participants' experiences of continuity and/ or change to emerge over time. The ENEW programme was designed and delivered in a blended learning format to a group of 42 international nurse educators. The programme entailed five modules: (1) Empowering Learning Environments in Nursing Education, (ELENE, 10 ECTS), (2) Global Health Issues (5 ECTS), (3) Issues in Future Nurse Education (5 ECTS), (4) Evidence-based teaching (5 ECTS), and (5) Ethics and Nurse Educators' Work (5 ECTS).

Data were collected at three time points over the programme delivery period of nine months. Semi-structured online interviews were conducted with eight participants resulting in 23 interviews. One participant was lost to follow-up for the phase 3 interview.

Data analysis: Interviews were transcribed verbatim, anonymised, checked for accuracy and then uploaded into NVivo 14 (Lumivero, 2020) for analysis. Data analysis was guided by Braun & Clarke's (2022) approach to thematic analysis. Data analysis was an iterative cycle of authors' independent analysis before coming together reflecting, discussing and agreeing on codes.

Ethics: Ethical approval was granted by the Principal Investigating University (Ref number: 24/2021, 7.6.2021).

Findings: Two major themes were evident in the data. Theme 1 is linked to specific courses in the programme and participants' learning over this time.

This also includes the implementation of learning in their home institutions (e.g. digital technology solutions). Theme 2 addresses the longitudinal nature of this study and offers reflection on participants' learning and challenges when learning in and with an international group of students. Study participants underlined the importance of international networks, their increased educator competence, and their further development of collaborative skills but also reflected on their learning when working in an international group that raised their awareness of social and cultural differences of participating countries.

Conclusion: The study programme was viewed as beneficial by participants. The international collaboration experiences further enhanced their professional competencies.

Funding: ERASMUS +

References:

Braun, V. & Clarke, V. (2022). Thematic analysis – a practical guide, SAGE, London.

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Key words: educators' education, longitudinal qualitative, thematic analysis, video-based

interviewing, ERASMUS +

Importance of metacognitive competence for academic excellence in nursing educators

Authors: Raúl Quintana Alonso, Elena Chamorro Rebollo, María Miana Ortega, Sara Perpiñá Martínez, José Antonio Cieza García.

Introduction: Metacognitive competence allows educators to monitor, self-evaluate and reflect on their own pedagogical praxis, with the aim of finding areas of weakness in their teaching function and establishing improvement actions that lead to excellent professional development. In this line, reflective practice is one of the most important processes in educators training, since it stimulates educators to develop different skills such as their own metacognition, decision making and logical thinking, encouraging them to systematically and cyclically review their classroom experience, using their perceptions and experience, as well as their students assessments, to evaluate the quality of their performance, taking actions to improve their teaching and their students learning standards.

Objective: To know the importance of metacognitive competence and reflective practice in nursing educators.

Method: Sequential explanatory study, designed through a cross-sectional descriptive study, in which 327 questionnaires about the importance of teaching competencies were administered to nursing educators in Spain, followed by a qualitative descriptive study through focus groups in which the importance of these competences was addressed in two groups, one made

up of students and recent graduates and the other with educators and academic authorities.

Results: The importance of metacognitive competence was 4.39 out of 5 (SD: ± 0,69) for the educators who participated in the quantitative study. A statistically significant difference was found in the importance given by nurse educators (4.47/5; SD: ± 0,625) versus non-nurse educators (4.17/5; SD: ± 0,819) (p=0.0146). Likewise, it was observed that the less teaching experience, the greater the importance given to this competency, with educators with 1 to 4 years of experience being those who gave it the highest rating (4.52/5; SD: ± 0,657), compared to those with 30 years or more with 4.19/5; SD: ± 0,822 (p=0.04). Despite this, all the ratings for this competency can be considered very high. Regarding the results of the qualitative approach, there was unanimity among educators and students on the importance of educators reflecting on and continuously evaluating their teaching activity, indicating that they should be able to receive and accept constructive criticism when students are not satisfied with their work, which is not always the case.

Conclusion: The development of metacognitive competence is fundamental for nursing educators, so it should be considered in the models of teaching competencies and in the training plans for these educators.

European platform to gain future-oriented skills and competencies in healthcare (EUVECA Project)

Authors: Henriette Hansen

The European healthcare sector faces significant challenges in maintaining its sustainability. To tackle this issue, EUVECA has identified 6 major megatrends that will be central areas of focus on developing learning and training initiatives for healthcare professionals and students. The overarching goal of EUVECA is to equip current and future healthcare professionals with the essential skills and resources needed to actively contribute to the establishment of a sustainable healthcare sector.

The EUVECA project and its focus on 6 megatrends

The European healthcare sector has for several years been undergoing major changes becoming increasingly digitalized, streamlined, and focused on more staff and patient involvement and patient responsibility, in order to gain maximum quality in care, patient safety, efficiency, and at the same time stay sustainable. This rapid development puts a heavy demand on health care professionals and students to adapt their learning and competence development, into competences and skills, which are not only related to traditional caring and curing skills, but increasingly related to e.g. digital skills, communication- and collaboration skills, multidisciplinary understanding, innovation awareness, facilitator of change processes, coaching of patients to become empowered and improve their health literacy.

EUVECA creates regional VET HUBS in the 7 participating regions (NO, DK, GE, NL, ES, IT and SL). The HUBS facilitates a collaboration between regional health care providers and health care education providers, finding new ways on how to break down the silos in the regional education system, so that students and health care professionals are better prepared to work in a collaborative way with the mega trends. We are working with ideas like micro credentials, apprenticeships, and closer collaboration between different educations – e.g nursing and engineering – to encourage the multidisciplinary collaboration around the patient already while studying.

On a European level, EUVECA develops a Web based platform, where students, health care professionals and educators with European inspired training materials and activities that can be add value to the regional collaboration in the VET HUBS. We are working with ideas like scenarios, patient stories and professional stories to be used in simulation training, mobility opportunities in relation to bachelor and master thesis, inter regional innovation training workshops etc. etc.

EUVECA is in the development phase, but when we reach March 2024, the prototype of the European Platform should be up and running and there should be good regional examples of collaboration to show.

The future recommendations for nurse educators in Europe

Authors: Leena Salminen, Maria Cassar, Michelle Camilleri, Laia Wennberg Capellades, Leandra Martin Delgado, Imane Elonen, Elaine Haycock-Stuart, Susanne Kean, Sanna Koskinen, Pilar Fuster Linares, Juha Pajari, Ľuboslava Pavelová, Terhi Saaranen, Andrea Solgajová, Tomáš Sollár, Anneli Vauhkonen, Heli Virtanen, Dana Zrubcová

Background: There is a need for high-quality nurse educators in Europe to guarantee an equal, evidence based and high- quality nurse education. By unifying and updating the nurse educator education, we can contribute to the quality and consistency of nurse education that is directly linked to the quality of health services. At this moment there is a considerable variation in the nurse educator education and competence requirements in Europe (Campos Silva et al., 2022). “A new Agenda for Nurse Educator Education (New Nurse Educator)” project was conducted in 2020-2023 to harmonize and optimize the competence and educational requirements for nurse educators.

Aim: The aim of the project was to create and set the future recommendations for future nurse educators, their education, competence requirements, continuous education and occupational well-being.

Methods: We based the recommendation on the research results and our experiences over the course of this project. To formulate the recommendations, we first asked each country for their suggestions, and secondly discussed the recommendations in a project group until we reached a

consensus. Thirdly, we asked experts in nurse education (n=13) to evaluate the recommendations before, lastly, to incorporate their feedback into the final formulation of the recommendations.

Results: Five evidence-based future recommendations for nurse educator education were presented at the end of the New Nurse Educator project (https://new-nurse-educator.utu.fi/?page_id=1117). The recommendations were: (1) Set the common European level qualification and competence requirements for nurse educators, (2) Develop international continuing education opportunities, (3) Promote occupational well-being in nurse educators, (4) Establish an Observatory for Nurse Educators (ONE), and (5) Establish a European Academy for Nurse Educator education. According to the experts' review the recommendations were needed and written clearly. The justifications describe the evidence of recommendations.

Conclusions: Future recommendations for nurse educators will guide the nurse educators' education and competence qualification and promote the more common nurse educators' action in Europe. These recommendations offer an evidence-based knowledge for the policy makers in the European Union and in all EHEA (European Higher Education Area) countries to evaluate and develop their nurse educator requirements and policies.

Keywords: nurse educator, competence, continuous education, recommendations, future

References:

Campos Silva S, Salminen L, Elonen I, Fuster Linares, P, Cassar M, Haycock-Stuart E, Saaranen T, Zrubcová D & Ewers M. 2022. Nurse educator education in six European countries – A descriptive study. International Journal of Health Professions 9(1), 67–77. DOI: 10.2478/ijhp-2022-0006

Occupational well-being workload of health care educators in relation to professional competence – the results from two research project

Authors: Anneli Vauhkonen; Terhi Saaranen; Maria Cassar; Michelle Camilleri; Leandra Martín-Delgado; Elaine Haycock-Stuart; Andrea Solgajová; Imane Elonen; Miko Pasanen; Heli Virtanen; Jenni Rinne; Leena Salminen

Background: Health care educators face many challenges in terms of their occupational well-being, such as excessive workload, mental strain at work, digitalisation and labour shortages (WHO, 2021; Howard et al., 2022; Jarosinski, 2022). Professional competence can be seen as one aspect of occupational well-being, yet there is little research on the topic creating a research gap. The results of two research project are presented: European New Nurse Educator project, 2020-2023, and Social and Health Care Teachers' Occupational Well-being in Finland project, 2020-2023.

Aim: To describe occupational well-being and balance of the mental workload among health care educators in relation to professional competence.

Methods: Cross-sectional data collection occurred at two stages between 2020–2022. Finnish data (n=489) were collected from Finnish health care educators in September 2020 electronically using the Occupational well-being of social and health care teachers—index questionnaire. European data (n=302) were collected electronically between May 2021 and February 2022 from Finnish, Spanish, Slovakian and Maltese nurse educators using the Health and Social Care Educator's Competence instrument along with items from the occupational well-being index questionnaire. Data were analysed by descriptive and multivariate methods.

Results: Overall personal occupational well-being (mean 2.63–3.68, scale 0–5) and balance of the mental workload (mean 2.63–3.41, Likert scale 1–5) were evaluated as moderate by health educators in both research projects but varied between the countries. Finnish educators evaluated their balance of the mental workload lower in the year 2020 than the year 2021. The multiple regression modelling revealed positive relation between professional competence, balance of the mental workload and personal occupational well-being. Further analysis showed connections between competence areas and occupational well-being. The Finnish 2020 data indicates professional competence and training such as sufficient education and clinical competence, continuing education opportunities, and efficient use of own competence are strongly related to personal occupational well-being. In the European data, administrative and curriculum competence such as management of own work and competence regarding curriculum, responsibilities, legislation and financial tasks are strongly related to personal occupational well-being.

Conclusion: Competence and mental workload of health care educators have a connection to occupational well-being. Notwithstanding the moderate level of occupational well-being which prevailed amongst the educators, the mental workload on health care educators requires further attention. Occupational well-being development activities and education and continuous professional development initiatives geared towards health care educators are to be planned accordingly.

Keywords: competence; nurse educator; occupational; well-being; workload

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Exploring continuing education perceptions and needs among nurse educators: a multinational cross-sectional analysis

Authors: Wennberg-Capellades L, Fuster-Linares P, Martín-Delgado L, Elonen I, Cassar M, Camilleri M, Vauhkonen A, Kean S, Solgajová A, Pasanen M, Koskinen S, Cid-Expósito MG, Salminen L.

Background: The literature acknowledges the diversity in the ongoing professional development and educational needs of nurse educators, but the evidence is limited. Despite the adherence of European countries to the European Union (EU) directives for nursing education, the criteria for nurse educators differ from one country to another. Addressing these recognized needs and educators' perspectives on ongoing education in this context will enhance the quality of nursing education, fostering harmonization across Europe.

Objective: This study aims to investigate the perceptions and requirements of ongoing education among nurse educators in four European nations.

Methodology: This study employed a cross-sectional comparative approach, involving nurse educators from four European countries. Data collection were gathered from 295 nurse educators representing 36 educational institutions across these nations, using an adapted instrument called The Educators' Professional Development (EduProDe) via an electronic survey. The selection of participating educational institutions was based on cluster sampling according to the Nomenclature of Territorial Units for Statistics (NUTS).

Results: Significant disparities were observed among the countries in terms of the demand for professional competence development ($p < 0.001$), forms of continuous education ($p < 0.05$), and barriers to ongoing education ($p < 0.05$). Nurse educators demonstrated strong motivation to engage in continuous education and expressed a need to enhance their professional competence. They emphasized the importance of learning from experts, employing various teaching methods, and participating in collaborative training with colleagues. Institutional support for educators' ongoing education proved to be vital for their professional growth.

Conclusions: Variances exist in the development of professional competence across the selected countries; nevertheless, nurse educators in all countries exhibit high motivation for ongoing education. Identifying and addressing ongoing educational requirements are essential steps in elevating the standards of nursing education.

Preparing the educator to teach: what happens before they transition to academia?

Author: Lesley Gratrix

Introduction: The first year of being a novice academic, when moving from being an expert in clinical practice, can be overwhelming and may result in novice academic attrition. From feeling unprepared to undertake the role, to expectations not matching reality, the transition can be challenging. Research has previously focused on what support and education is included to support people once they have transitioned into an academic role, but little research considers how to help prepare people for the transition and thus increase the chance of success.

Method: A systematic review of 19 articles and a cross-sectional survey with 122 responses from an international and varied professional sample were undertaken to explore the transition from clinical practice to becoming an academic. The results from both studies are combined to explore what can be done to increase the preparation for transition into academia and to consider factors that help retain staff in educators in these roles.

Results: There was evidence of a lack of preparedness for entering academia with both the existing literature and that from our survey suggesting people had unrealistic expectations of what the role would entail. Although many participants felt it was the right decision to move, and that they had support when in their new role, the literature shows that the transition itself could be better supported to increase the likelihood of retention. Factors associated with being likely to stay in academia included organisational support, feeling they had a choice in their career, and being ready for the transition including a good understanding of the role and holding positive motivations and desires. Having previous exposure to the academic environment had aided in some participants readiness.

Discussion and conclusion: More needs to be done to support those who wish to move into academia from clinical practice. Our next steps include exploring what new nurse academics would have wanted before they moved into academia to understand how we can better prepare them, reducing the anxiety that moving from a clinical expert to an academic novice can create. We need clinical staff to make a successful transition to inspire and train our future nursing workforce therefore, a model for preparation for transition will be developed to help support and prepare clinical staff to become the future educators.

Keywords: Academic workforce; Early career academics; Transition; Novice academic

A scoping review of instruments assessing the competence of nurse educators

Authors: Terhi Lemetti, Anni Pakarinen, Leena Salminen, Heli Virtanen, Toni Haapa

Background: Nurse educators' competence is essential to promoting excellence in nursing education, and many instruments have been developed to assess it. However, a comprehensive understanding of these instruments has been lacking.

Aim: The aim of this scoping review was to synthesize the instruments that assess nurse educators' competence.

Methods: A scoping review was conducted with the five-stage process informed by Arksey and O'Malley. The literature search was conducted in January 2021 using the CINAHL, MEDLINE and ERIC databases from January 2000 to December 2020. The predetermined search strategy was applied.Also, a manual search was conducted. The studies were selected according to inclusion and exclusion criteria to answer the research questions followed: (1) "What instruments are used to assess nurse educators' competence?", (2) "How are the psychometric properties of nurse educators' competence instruments reported in the literature?". The thematic synthesis was used.

Results: Of the 1,567 articles searched through, 25 met the inclusion criteria. A total of 19 instruments with 10 areas of competence were identified. Typical competence areas were pedagogical and nursing competence. Instruments were mostly used as a self-assessment instrument (n = 14) and/or other persons' assessment instrument (n = 7; students, nursing faculty members, administrators, head nurses, nurse mentors). The instruments were used to evaluate the competence of the academic nurse educators' (n=17), clinical nurse educators' (n=3) or both (n=5). However, the theoretical backgrounds of the instruments varied, and the psychometric properties were reported in varied ways in reviewed studies. (Lemetti et al. 2023.)

Conclusions: To assess nurse educators' competence comprehensively, a variety of theoretical backgrounds of these instruments, use of more than one instrument, and perspective for the measurement need to be considered beforehand. The selection of the instruments, to assess nurse educators', competence should be based on the use of valid measurements.

Keywords: competence, instrument, nurse educator, scoping review

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Accompagner l'évolution des sciences infirmières: un défi pour l'avenir du métier de formateur

Auteurs: Marielle Boissart, Isabelle Bayle

Le monde de la formation est engagé dans de nombreuses transformations impactant les pratiques des différents acteurs. Aujourd'hui l'activité des cadres de santé formateurs en institut de formation en soin infirmiers est peu lisible. Ils se définissent souvent comme des accompagnateurs dans la construction du chemin de professionnalisation de l'apprenant et sont la cheville ouvrière de la structuration des ingénieries pédagogiques en lien avec les besoins du système de santé. Mais qui sont-ils réellement ? Comment mettre en lumière les activités et les modes opératoires qui définissent leur métier ? Le CEFIEC (Comité d'Entente des Formations Infirmières et Cadres de santé) a constitué un groupe de travail national composé de 24 formateurs issus des différentes régions de France. L'objectif est de réaliser une analyse du dispositif de formation et de l'activité des formateurs qui assurent, orientent et accompagnent l'apprentissage des étudiants en soins infirmiers. La méthodologie utilisée vise à rendre intelligible les pratiques des acteurs. Elle s'appuie sur deux enquêtes quantitatives (1863 et 2541 répondants) et une approche qualitative (159 entretiens). Les premiers éléments assemblés mettent en lumière des visions multiples de l'exercice du métier. Suivant la conception du métier d'infirmier et du parcours professionnel des formateurs, les choix pédagogiques se différentient et les exigences s'adaptent en fonction du profil attendu du futur soignant. L'élaboration de l'arborescence d'une structure conceptuelle mettant en lumière des concepts organisateurs et des invariants opératoires se matérialise petit à petit.

Au total, cette étude relève d'une double intentionnalité à la fois épistémique et praxéologique. Elle donne des éléments de compréhension, des connaissances scientifiques empiriquement étayées au couple « activité/travail-développement du métier » tout en rejoignant des préoccupations d'ordre macroscopique en identifiant les ressources susceptibles de contribuer à la dynamique de professionnalisation du métier et des organisations (Wittorski).

En définitive, l'analyse de l'activité menée ici par les cadres de santé formateurs eux-mêmes participe de la quête et de l'affirmation de leurs professionnalités. Cette recherche a fait l'objet d'une publication sous forme de livre blanc largement diffusé au sein des instituts de formation du territoire français. Ce document phare est une référence permettant pour les équipes pédagogiques une projection vers l'intégration universitaire au travers de la définition 6 profils.

Mots clés : avenir de l'exercice professionnel des formateurs, intégration universitaire, sciences infirmières, ingénierie pédagogique, professionnalisation

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L'universitarisation de la formation en soins infirmiers en France: mythe ou réalité

Auteur: France Boyer-Vidal

Introduction: En France, la formation en soins infirmiers est dite "universitarisée" depuis 2009 car "la production française de recherche [...] dans les soins infirmiers où la France est presque absente des classements internationaux démontre la nécessité d'une intégration de ses formations dans les universités" (1). Cette universitarisation permettrait d'accentuer le processus de Bologne et d'amorcer une production de recherche en sciences infirmières. En effet "ce grade universitaire offre l'opportunité à celles et ceux qui le souhaitent, de faire valoir leur formation à l'étranger, ou de poursuivre avec un master" (2). Le but de ce travail est d'évaluer si l'universitarisation modifie la formation en soins infirmiers et particulièrement en recherche en sciences infirmières. Matériel et méthode : 250 étudiant·e·s en soins infirmiers de troisième année ont répondu à un questionnaire de 28 questions. Cette méthode permet de répondre à deux hypothèses. La première s'intéressait à la socialisation professionnelle des étudiant·e·s en soins infirmiers selon le niveau d'universitarisation de leur IFSI. La seconde cherchait à recueillir les représentations sociales des étudiant·e·s en soins infirmiers vis-à-vis de la formation infirmière et de la formation à la recherche en IFSI selon le type d'universitarisation. Les IFSI des répondant·e·s ont été classés comme peu ou pas, moyennement ou suffisamment universitarisés d'après les critères développés par Bourdoncle : universitarisation structurelle, des savoirs et du personnel (3). La socialisation professionnelle a été définie grâce à « l'espace infirmier » de Longchamp et al. où sont classés les infirmier·e·s en 4 catégories : « dominantes médicales », « dominées médicales », « élites infirmières » et « hétérodoxes » (4). Résultats : La socialisation professionnelle est identique peu importe le degré d'universitarisation des IFSI. Les représentations sociales vis-à-vis de la formation sont différentes, plus l'IFSI est universitarisé moins la formation semble pénible pour les étudiant·e·s. En revanche, le degré d'universitarisation ne joue pas sur les représentations sociales des ESI vis-à-vis de la recherche en sciences infirmières. Discussion : L'universitarisation est incomplète selon les critères de Bourdoncle. Elle se traduit par une pauvreté en matière de publication de recherche en sciences infirmières et une minorité d'enseignant·e·s chercheur·euse·s. En effet, aujourd'hui la plupart des formateur·ice·s à l'IFSI ne sont que cadres de santé. La conclusion de cette recherche serait "il nous faut aujourd'hui reconnaître cet engagement (universitaire, ndlr) et permettre davantage d'accès au statut d'enseignant universitaire associé" (5).

Mots-clés: universitarisation, soins infirmier, enseignement et éducation, recherche, socialisation

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Exploration des éléments facilitateurs et des barrières majeures à l'enseignement et à la pratique de l'Evidence Based Practice dans les milieux de l'enseignement en sciences infirmières grâce à des focus groups

Author: Audrey Chays-Amania

Introduction: L'Organisation Mondiale de la Santé (OMS) a établi les compétences générales (World Health Organization, 2016) ainsi que les compétences spécifiques en Evidence-Based Practice (EBP) qui doivent être détenues par les enseignants en sciences infirmières,

en Licence ou en Master (World Health Organization et al., 2017). Aujourd'hui, il n'avait pas encore été fait d'état des lieux sur les pratiques et l'enseignement de l'EBP en instituts de formation en France. Le Modèle d'implantation de l'EBP "Advancing Research and Clinical practice through close Collaboration for Education" (ARCC-E®) a été utilisé.

Objectif: L'objectif de cette enquête est d'explorer les éléments facilitateurs et les barrières majeures à l'enseignement et la pratique de l'EBP dans les milieux universitaires ou d'enseignement (instituts). Les barrières et les éléments facilitateurs à l'enseignement et à la pratique identifiés permettront de mieux comprendre l'environnement et ainsi de proposer des recommandations.

Méthode: Une étude qualitative descriptive multicentrique à visée exploratoire par focus group a été menée en région PACA en France.

Résultats: La pratique de l'EBP dans les instituts de formation n'est pas optimale. Des barrières ont été identifiées comme la perception erronée des connaissances, le manque de formation et de soutien organisationnel. La difficulté majeure est que certains enseignants pensent connaitre et pratiquer l'EBP. Or, ils confondent avec l'utilisation de la recherche, qui n'est pas non plus pratiquée correctement puisque les recherches sont faites quasi exclusivement en français. Ceci est pondéré par des éléments facilitateurs de la mise en œuvre de l'EBP : certains enseignants ont une perception adaptée de leurs connaissances et reconnaissent le besoin de formation, ils bénéficient parfois d'un soutien organisationnel et la pratique du mémoire de fin d'études les aide à s'actualiser. La formation initiale ainsi que la formation continue en EBP doivent impérativement être démarrées en France pour palier à ces manques.

Discussion: La formation des enseignants, des étudiants en Licence et en Master est le cœur de la stratégie de mise en œuvre de l'EBP. Cependant, une réforme du programme infirmier basée sur l'EBP permettrait une meilleure pratique. Un soutien des équipes est à développer du côté des cadres et des directions de soins. L'utilisation du modèle ARCC-E® afin de guider l'implantation en milieux académiques et cliniques est préconisé.

L'universitarisation de la formation infirmière en France: un défi ou une opportunité pour ses acteurs? Etude biographique sur le point de vue des acteurs de la formation en soins infirmiers français

Authors: Emilie Hecquet, Thierry Bouchetal, Nicolas Pinsault

En France, les réformes des formations sanitaires (Thilly, Duceux 2022) ne sont pas sans répercussions sur l'activité de formateur. L'objectif de cette étude est de mieux comprendre les logiques de professionnalisation (Wittorski, 2016) portées par les structures de formation et les logiques de développement professionnel (Barbier, Chaix & Demailly, 1994) portées par les formateurs pour mener à bien ces réformes. Afin d'appréhender cet objet, nous allons nous intéresser plus précisément à l'universitarisation (Bourdoncle, 2007) de la formation infirmière initiée en France dans les années 2000.

Cette étude qualitative a nécessité deux démarches d'investigation. Dans un premier temps, une enquête sous forme d'un questionnaire informatisé destinée à l'ensemble des directeurs des instituts de formation en soins infirmiers français a été réalisée afin de recueillir des informations relatives à cette intégration universitaire. Les résultats de cette étude observationnelle nous ont permis de sélectionner deux instituts ayant des caractéristiques communes (statut, taille, distance avec l'université) mais avec une intégration universitaire contrastée. Dans un second temps, des entretiens biographiques auprès des formateurs et de l'équipe de direction ont été réalisés dans les deux établissements. La stratégie d'enquête auprès de l'équipe de direction portait sur l'analyse de la logique de professionnalisation institutionnelle. Celle concernant le développement professionnel portée par les individus nous a permis d'appréhender leur vécu pour mettre en lumière ce qui les a amenés à devenir formateur, à comprendre ce qui leur a permis de se développer professionnellement et connaitre leur vision de l'universitarisation.

En France, une réforme majeure de la formation infirmière est annoncée pour la rentrée 2024. Nous pensons que les résultats de cette recherche (actuellement en cours) par l'identification des freins et des leviers au développement professionnel des formateurs en soins infirmiers en contexte d'universitarisation permettra d'amener un éclairage pour répondre à l'un des enjeux de la dimension sociale du développement durable (Dubois, Mahieu & Poussard, 2001) au sein des instituts de formation en soins infirmiers sous l'angle des pratiques managériales dans un souci d'accompagnement, de performance et de pérennisation des équipes de formateurs.

Mots clés : Formateurs, professionnalisation, universitarisation, développement professionnel, management durable.

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Développer les compétences de résilience en formation infirmièrie

Auteur: Olivier Morenon

La formation en soins infirmiers présente des défis émotionnels et physiques qui peuvent affecter la santé des étudiants. Cette communication présentera des résultats de recherche sur les facteurs de vulnérabilité et de résilience durant la formation infirmière ainsi que le rôle clé des accompagnateurs de résilience, et les stratégies pédagogiques pour développer ces compétences.

Objectifs : Mettre en évidence les facteurs de résilience identifiés dans le parcours des étudiants en soins infirmiers. Souligner la posture et les méthodes de l'accompagnateur de résilience. Proposer une pédagogie soutenant le processus de resilience

Méthodologie: La communication s'appuie sur des résultats de recherche qualitative publiés (Morenon, 2023 ; Morenon et al., 2017, 2018, 2020)

Résultats principaux : Vulnérabilité et vulnérabilisation en formation et durant l'exercice de la profession. Facteurs de résilience : les ressources personnelles et environnementales. Accompagnateurs de résilience : identification des compétences relatives à cet accompagnement

Propositions : Pédagogie de la résilience : les principes d'un programme de formation et adaptation de quelques approches pédagogiques favorisant le développement de compétence de résilience (Morenon, 2023)

Conclusion : La résilience n'est pas une caractéristique innée, mais une compétence qui peut être enseignée. L'intégration d'une pédagogie axée sur la résilience et le rôle vital des accompagnateurs peuvent grandement améliorer la qualité de la formation en soins infirmiers et le bien-être des étudiants. L'objectif à long terme est de prévenir l'épuisement professionnel et limiter les départs précoces de la profession.

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Les soins infirmiers du point de vue des étudiants de première année du diplôme d'infirmières: perceptions et préférences

Authors: Sánchez-Rueda, Guadalupe; Calmaestra Carrillo, Encarna; Codern-Bové, Núria.

Introduction: Depuis 1977, les soins infirmiers sont un diplôme universitaire en Espagne. Actuellement, et dans le cadre de l'Espace Européen de l'Enseignement Supérieur (EEES), les études sont structurées depuis 2005 en études de premier cycle (240 ECTS) et de deuxième cycle (Master). Depuis leur entrée à l'université, les soins infirmiers ont connu des changements importants, tout comme la société. De même, les programmes de formation et les paradigmes éducatifs ont évolué et il convient donc de se demander : connaissons-nous le public que nous avons dans les salles de classe ? Que pensent-ils des soins infirmiers ? Quelles idées préconçues ont-ils ? Où souhaitent- ils développer leur future profession ?

Dans une approche constructiviste, il faut d'abord déconstruire pour reconstruire. Il faut sans aucun doute d'abord connaître les étudiants. Et c'est à partir d'eux et de leur vision du monde que commence le processus d'enseignement-apprentissage partagé.

Objectif : Explorer et analyser les perceptions et les préférences des étudiants de première année du diplôme en soins infirmiers, avant de commencer leur phase de formation, en ce qui concerne les soins infirmiers, leur conception, les qualités nécessaires pour être infirmier et les domaines de soins dans lesquels ils souhaitent développer leur future activité professionnelle.

Méthodologie : Étude observationnelle descriptive réalisée au cours des années académiques 2020-21, 2021-22 et 2022-23. La population étudiée était constituée d'étudiants de première année de l'Escola Universitària d'Infermeria i Teràpia Ocupacional de Terrassa (EUIT), un centre rattaché à l'Universitat Autònoma de Barcelona (UAB). Un questionnaire ad-hoc fourni en ligne a été utilisé. L'analyse réalisée a été descriptive et comparative par années académique, par âge, sexe et provenance des études antérieures.

Résultats : 414 étudiants ont participé. Sur le nombre total de participants, 31 % (130) provenaient de l'année universitaire 2020-21, 36 % (147) de l'année universitaire 2021-22 et le reste, 33 % (137), de l'année universitaire 2021-22. Comme c'est souvent le cas dans les soins infirmiers, dans l'échantillon global, le pourcentage de femmes est supérieur à celui des hommes (85,7 % contre 13,8 %). Un seul étudiant s'est identifié comme non binaire. Par année

académique, la répartition du pourcentage de femmes et d'hommes était similaire à celle de l'échantillon total. En termes d'âge, la génération Zeta est la plus nombreuse (71%), le groupe des 18 à 22 ans est la tranche d'âge qui compte le plus grand nombre de participants (294). En ce qui concerne les voies d'accès aux études, un certain équilibre est observé entre les étudiants du Baccalauréat ayant passé les examens d'entrée à l'université (PAU), 52%, et les étudiants liés aux études professionnelles (42% des Cycles de Formation de Niveau Supérieur, CFGS). En Espagne, les études d'infirmière sont encore attrayantes pour un nombre considérable de personnes de différentes tranches d'âge. La génération Zeta choisit encore de poursuivre des études en soins infirmiers, bien que les tendances dans d'autres pays nous informent que cette situation peut également changer à court terme dans notre contexte 1. Lorsqu'on a demandé aux étudiants ce qu'étaient les Soins Infirmiers, l'option la plus souvent choisie était Profession (33 %), suivie de Discipline (15 %), Science (12 %) et Métier (7 %). Il est frappant de constater que l'option Toutes les réponses précédentes a été l'une des possibilités les plus sélectionnées (33%). Ces résultats indiquent qu'il y a un manque de spécificité épistémologique par rapport aux soins infirmiers. Ce fait, ainsi que la difficulté sociale d'identifier le service offert, ne contribuent pas au fait que les soins infirmiers puissent être identifiés et demandés par les usagers des services de santé 2.

En ce qui concerne ce qui était le plus important pour être infirmière, l'option la plus choisie par le global des étudiants était Avoir une vocation (15 %), suivie de l'Empathie (13 %) et Avoir de bonnes aptitudes à la communication. D'autre part, les options les moins choisies étaient Obéir au médecin (3 %) et Ne pas s'impliquer émotionnellement avec les utilisateurs (1 %). Bien que ces résultats indiquent que l'on s'éloigne du modèle technique et que l'on adopte une approche axée sur le modèle de soins centrés sur la personne, il est peut-être inquiétant d'un point de vue professionnel que la vocation soit identifiée comme l'attribut le plus important pour être infirmière. Ces résultats contrastent avec ceux fournis par d'autres études qui ont révélé que les étudiants en général avaient choisi les soins infirmiers comme opportunité d'emploi 3 et qu'au cours de leur formation, ils avaient une perception négative des soins infirmiers particulièrement forgée pendant les dernières années de formation4. D'autre part, si les compétences en communication et l'empathie apparaissent dans la littérature comme des attributs nécessaires pour être une « Bonne infirmière », la vocation n'est pas l'une des caractéristiques les plus mises en avant5. Il est possible que le fait que la vocation ait été identifiée comme un attribut important dans notre étude pourrait être attribué à des questions culturelles et historiques liées à l'évolution des soins infirmiers en Espagne. En qui concerne les préférences des étudiants pour le futur lieu de travail, la plupart aimeraient travailler à la fin de leur formation dans des services tels que : Urgence (26,81%), Hospitalisation pédiatrique (19,81%), Soins intensifs (8,94 %) et Soins extrahospitaliers (7 %). Cette tendance se maintient également lorsque les résultats ont été analysés par chaque année. Les cinq domaines que les étudiants des trois années académiques ont moins sélectionnés sont : l'Enseignement Universitaire, la Santé au travail et la Gériatrie (0%), la Santé Scolaire et les Centres socio-sanitaires (0,48%), la Recherche (0 ,96%), les Soins Palliatifs (1,69%), la Santé Mentale (4,59%) et les Soins de Santé Primaires (4,83%). L'analyse par chaque année indique également une répartition similaire à la globale des trois années. Toutes ces données nécessitent une réflexion et une discussion approfondies, car elles indiquent que les préférences professionnelles des futures infirmières sont éloignées des besoins sociaux et de santé actuels et futurs. Les soins aux personnes âgées et la santé mentale, ainsi que le maintien et le développement des soins primaires, sont essentiels pour répondre aux besoins actuels en matière de santé. Comme dans notre étude, d'autres recherches remarquent également le manque de préférence des étudiants pour ces domaines de soins, avec un accord particulier dans le rejet des domaines de soins gériatriques et de santé mentale6 7. Par rapport à cet aspect, les données fournies dans cette recherche, ainsi que la littérature déjà publiée, soulignent que les politiques de formation et de gestion de la santé devraient examiner de manière approfondie et urgente cette situation, quelles en sont les causes et proposer des actions qui pourraient contrôler un phénomène qui pourrait mettre en péril la disponibilité des infirmières dans certains domaines de soins essentiels dans la société d'aujourd'hui.

Conclusions : Les étudiantes de première année en sciences infirmières n'ont pas une perception claire de ce qu'est la profession infirmière d'un point de vue académique et professionnel. Cette perception continue d'être influencée par des facteurs historiques, culturels et sexospécifiques. Ils identifient comme nécessaires certaines caractéristiques qui sont également approuvées par la littérature professionnelle (compétences en communication et l'empathie). Il est surprenant que la valeur de la vocation soit mise en évidence, un fait qui, dans notre contexte, pourrait également être attribué à des aspects culturels et historiques. Il est particulièrement inquiétant que les futures infirmières ne souhaitent pas travailler dans des domaines où le rôle de ces professionnels est essentiel, comme le domaine socio-sanitaire et gériatrique, les domaines de la santé mentale et les soins primaires.

Mots-clés : Perception, Préférences, Étudiants, Soins Infirmiers

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FOSTERING CLINICAL EXCELLENCE- FUTURE OF NURSE EDUCATOR EDUCATION

Oral Presentations session – 21 March

La dynamique de l'étonnement, un concept opératoire vers l'intelligibilité du jugement clinique infirmier; Analyse de l'activité par l'entretien d'autoconfrontation croisée en formation infirmière

Auteur: Céline Labat Pommier

L'apprentissage du raisonnement clinique occupe une place centrale dans la formation en soins infirmiers, mais il peut s'avérer complexe pour les étudiants de relier la théorie à la pratique. Souvent confondu avec le jugement clinique (JC), le raisonnement clinique demeure un processus complexe et invisible. Cette recherche explore la manière de guider les étudiants vers une pensée critique autonome, essentielle pour un jugement clinique pertinent, tout en examinant les pratiques de formation et en réfléchissant sur la convergence entre la théorie enseignée et la réalité infirmière.

L'enquête exploratoire menée dans la région Nouvelle-Aquitaine en France met en lumière la diversité des approches au sein des Instituts de Formation en Soins Infirmiers. Les processus cognitifs actuels se révèlent insuffisants pour favoriser un jugement clinique adéquat, incitant à approfondir au-delà des processus invisibles. En s'appuyant sur les travaux de Christine A. Tanner et John Dewey, l'étude évoque l'intérêt d'induire chez l'étudiant une démarche d'enquête en analysant les modes de rupture de l'activité. Le concept d'étonnement est convoqué pour inciter les étudiants à expérimenter et à découvrir les savoirs cachés dans l'action. En quoi la mise en œuvre du concept opératoire d'étonnement peut catalyser les processus d'apprentissage du JC dans une logique didactique en formation professionnelle infirmière?

L'auteur a eu recours à des entretiens d'autoconfrontation croisée pour identifier les perspectives offertes par l'opérationnalisation du concept d'étonnement dans l'apprentissage du jugement clinique infirmier. L'objectif est d'inciter les étudiants à expérimenter et à découvrir les savoirs cachés dans l'action. La recherche met en avant l'étonnement comme une stratégie pédagogique novatrice et un outil puissant pour catalyser l'analyse clinique. En pleine réforme des formations paramédicales, il apparaît pertinent d'explorer la voie de la métacognition pour enseigner et apprendre l'opérationnalité du concept d'étonnement.

Favoriser l'excellence clinique : un enjeu de l'encadrement des apprenants en stage

Auteur: Isabelle BAYLE

La recherche menée se déroule lors d'une activité d'encadrement mettant en scène un étudiant en soins infirmiers et un superviseur. Au cours de son activité de formation, l'étudiant, rencontre en permanence des situations singulières pour lesquelles il doit construire des réponses adaptées qui ne correspondent pas entièrement à un travail prescrit. Ainsi pour trouver une posture professionnelle adéquate il est important d'entrer dans une démarche réflexive afin d'analyser sa pratique au regard de concept clé. L'objectif de l'étude porte sur la manière dont les professionnels infirmiers transmettent les codes du métier de soignant à un étudiant. En suivant la méthodologie de la démarche ergologique et celle de la didactique professionnelle, la recherche donne à voir d'un état des savoirs et des compétences des différents acteurs aux prises avec le réel de l'activité et ceci dans un agir de l'activité humaine. C'est donc au cœur de situations de soins que l'étude se déroule. Travailler c'est faire des choix en action. L'activité ne se déroule jamais de manière linéaire. L'homme au travail est amené à redéfinir les impératifs de sa tâche au regard d'imprévu. Il va faire des choix en situation ou valeur et dilemme (Schwartz, 2003) vont s'articuler pour apporter une réponse et organiser l'action. La vision des tuteurs et des étudiants est, recueillie par des dessins, des observations, des entretiens simples et d'auto confrontations permettant de mettre en évidence des regards pluriels ou recherche en sciences de l'éducation et pratiques éducatives s'articulent. Les résultats témoignent de l'importance des valeurs soignantes. Ils mettent également en évidence les arbitrages que les apprenants sont obligés de réaliser pour pouvoir exercer le métier d'infirmier. Les dessins montrent l'écart entre l'approche des soins identifiée par les professionnels et la perception qu'en ont les étudiants. Dans tous les cas les acteurs décrivent leurs manières d'agir. Ils verbalisent la complexité de la situation de travail en l'inscrivant dans la singularité du moment. Ils énoncent les compromis et les choix qu'ils ont fait pour prendre une décision éclairée assurant la sécurité et une qualité des soins pour le patient. Les perspectives amènent à repenser les dispositifs d'encadrement afin de

viser une excellence clinique dans la formation des futurs soignants infirmiers.

Mots-Clés: Encadrement en milieu clinique, tuteur de stage, étudiants infirmiers, situation de soins.

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Safe drug management competence in clinical simulation in nursing students: results and permanence in one year

Authors: Cristina Alfonso Arias, Encarna Rodríguez Higueras, Pilar Fuster-Linares, Laia Wennberg Capellades, Albert Gallart Fernández-Puebla, Mireia Llauradó Serra

BACKGROUND: Safe medication management is a crucial competence that requires mastery of several dimensions, in which the nursing professional has a main role by being the last executor in the administration of the drug.

OBJECTIVES: To evaluate the impact of a teaching intervention based on clinical simulation comparing the use of two fidelities: high and low-medium to improve the competence of safe medication management aimed at second-year students and its effectiveness over time after 12 months. since the intervention.

METHODS: Study in two consecutive phases at a university during two academic years.

1st Phase: Non-blind randomized clinical trial in which low-medium fidelity was applied in the CG (control group), in which the students interacted with a mannequin and the high fidelity GI (intervention group) in which the students interacted with a standard patient.

2nd. Phase: repeated measures study of the same sample (T0: baseline; T1: post intervention; T2: 12 months post intervention. Three questionnaires were used to collect data: dose calculation, NURSPeM self-perception of safe management and MEDISIM checklist of practical skill in intravenous administration, which were carried out and validated by the research team.

RESULTS: 173 students (82GC and 91GI) were included. The groups were comparable at baseline in all areas. The educational intervention was globally effective in all areas and without differences between the study groups. In dose calculation they improved by 2.3 points on average (score range 0-10), in self-perception the changes were less evident and in practical skill they improved by 7.9 points (score range 0-26). These results were maintained up to 12 months after the study and again without differences between the study groups. Overall score calculation [T0 5.56 (2.1), T1 7.91 (1.9), T2 7.7(1.8)]; global checklist score [T0 13.3(4.7), T1 21.24(3.9), T2 17.30(6.9)].

CONCLUSIONS: The simulation has been effective in improving the safe management of medications in nursing students. The design of the context of the simulated experiences, the motivation of the students and teachers has an influence on the learning results of the students beyond the technological complexity of the simulator and the fidelity applied to the simulation scenario.

KEYWORDS: Nursing students, clinical simulation; safe medication management competence; dose calculation; self-perception; check list; fidelity.

Oral Presentations session – 22 March

Advanced nurse practitioner's valuable role in nursing and sustainable healthcare globally

Authors: Marie Carney

Background: Significant variations exist in how countries define the Advanced Nurse Practice (ANP) role which has led to countries not yet recognising or partially recognising the role and its associated competencies. Even though the ANP role encompasses the assessment, diagnosis and treatment of a range of conditions by undertaking advanced decision making, clinical skills and competencies the role remains undervalued in many countries. ANP roles vary by description, title and regulations between nations. ANP's extend the boundaries of the scope of practice of nurses, promote professional development, and enhance nursing knowledge. ANP's promote wellness, offer healthcare interventions and advocate healthy lifestyle choices for patients, their families and carers in a wide variety of setting, within the framework of relevant regulation and legislation.

Aim: To identify the roles and competencies currently being undertaken by ANP's and the outcomes being achieved by highlighting the complex nature of the roles and some of the successes in relation to patient care that are being achieved.

Method: An evidence review was undertaken, in 2023, to identify what is known about the subject. A total of 65 manuscripts were retrieved through EBSCO host, Pub Med Central, Google Scholar, Medline and CINAHL. Themes

were identified, defined, named, reviewed, analysed and coordinated.

Findings: Where the role is recognised many advantages accrue to the patient, nurse, healthcare and society. This is especially true in the areas of emergency, cardiac, respiratory, trauma care, recovery from surgery and pain relief amongst others. However, the contribution of ANP's remains under-recognised is some areas.

Conclusions: ANP's realise and articulate the value and diversity that they bring to health systems. However, they have been under-utilised generally, creating barriers to achieving universal health coverage and the Sustainable Development Goals. ANP's need to more actively articulate the value and diversity they bring to health care and to global health sustainability. Education for interdisciplinary partners, policymakers and the public regarding ANP capacities is needed as lack of awareness of the systemic processes that enable and constrain the role affects their contribution to healthcare systems.

Recommendations: ANP's need to highlight the extraordinary growth of the role and of their impact by increasing the quantity and quality of their research in journal manuscripts.

Nursing Research Center – supporting evidence-based clinical education at the HUS Helsinki University Hospital

Authors: Toni Haapa

Background: International quality accreditation programs, such as The Magnet Recognition Program, require that evidence-based practice (EBP) is implemented. However, EBP in healthcare is not yet implemented as expected, and there is unjustified variation in practices between different units and professionals. The implementation of EBP requires both systematic application of existing evidence and producing new evidence, as well as visible contributions to the nursing science. Therefore, nursing research centers have been established to hospital organizations globally to promote EBP.

Purpose: The Nursing Research Center (NRC) was established at the HUS Helsinki University Hospital in 2019 with the purpose to promote the production of nursing research evidence and its use in clinical practice, leadership, and education. This abstract describes the activities and results of NRC in relation to evidence-based clinical education.

Methods: The NRC is responsible for implementing the Health Science Research program (2022- 2025) at the HUS Helsinki University Hospital. The reseach program has four focus areas with one focusing on premises of professional nursing practice including quality and effectiveness of clinical education. The NRC provides nursing staff with consultation assistance when planning and implementing research and research-based development projects in relation to clinical education. Moreover, the NRC provides resources for educational research and research-based development of clinical education. The staff of NRC contributes to the production of nursing research evidence (incl. education research) and promotes the use of research evidence.

Results: Since 2019 the NRC has provided consultation assistance for the planning and implementation of several research and research-based development projects which have aimed to improve clinical education, for example establishing and evaluating a practice to transition program for nurses and a competency framework for clinical nurse educators. The NRC has provided resources for research by granting a total of 20 research months to doctoral researchers (n=4) who were/are conducting educational research. The NRC has been responsible for coordinating the national benchmarking network for quality of the student supervision and the network of clinical nurse educators at the HUS Helsinki University Hospital. These networks have promoted the quality of clinical learning environments by conducting educational research and implementing existing evidence into practices.

Conclusions: After establishing the NRC, nursing research (incl. educational research) is better coordinated at the university hospital, which enables the accumulation of research evidence needed to strengthen evidence-based practices. In addition, nurses will be better equipped for both research and research-based development skills, which enables fostering clinical excellence.

Keywords: evidence-based practice, clinical education, nursing education

Nursing students' competence at graduation in six European countries

Authors: Kajander-Unkuri Satu; Brugnolli Anna; Löyttyniemi Eliisa; Nemcová Jana; Palese Alvisa;

Rua Marilia; Salminen Leena; Simão de Oliveira Célia; Visiers-Jiménez Laura; Zeleníková Renáta, Leino-Kilpi Helena.

Changes in the population structure, new medical technological solutions, increasing workplace diversity and nurse shortage lead to increased demands regarding nurses' competence. There is a need for evaluating of competence in health care and particular attention should be focused on graduating nursing students (GNSs) as they are in essential role in taking the place of retiring nursing staff and meet the increasing need of care. In previous studies, GNSs have self-assessed their competence as good. Also, competence seems to be connected to few factors.

The aim of the study was to assess and compare the level of competence of GNSs at the point of graduation in Europe based on their self-assessment and to identify possible factors related to competence.

The data were collected using on-line questionnaire in February 2018 – July 2019 from GNSs from Czech Republic, Finland, Italy, Portugal, Slovakia and Spain. A total of 1746 GNSs responded. The competence was measured using Nurse Competence Scale (NCS; ÓMeretoja). Background

factors, such as age, gender, previous degree in healthcare, work experience in healthcare besides clinical practice, nursing as the 1st study choice, nursing career plan, satisfaction with current degree programme, and self-assessed level of study achievements, were evaluated. The data were analysed statistically with linear model, chi-square test, and Pearson correlation coefficient.

The self-assessed level of competence was on good level (VAS mean > 50-75). The highest level of competence was among Italian GNSs (VAS 68.1) and lowest among Slovakian GNSs (VAS 57.0).

There were statistically significant differences between GNSs in different countries. The category level mean scores revealed a statistically significant positive correlation between competence level and frequency at which competencies are utilized in clinical practice.

Satisfaction with current degree programme, having work experience besides clinical practicum, rating the level of study achievements as excellent or good, graduating to 1st study choice and having nursing career plan for the future were related to higher competence.

GNSs are graduating with a good level of competence, but the competence levels differ across EU countries. Based on competence related factors found during the study project, there is a need for discussion regarding how to support GNSs transition process to becoming qualified nurses.

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Factors related to newly graduated nurses' well-being at work: insights form support structures

Authors: Sanna Koskinen, Helena Leino-Kilpi, Leena Salminen, Minna Stolt, Riita Suhonen, Arja Suikkala, Johanna Wiisak.

Factors related to newly graduated nurses' well-being at work: Insights of nurse managers, occupational health nurses and nurse educators Factors related to newly graduated nurses' well-being at work is foundational for their commitment to the profession. Factors related to newly graduated nurses' well-being at work is foundational for their commitment to the profession. Understanding factors such as the wide-ranging professional responsibility and knowing one's own limits and resilience are crucial to retain nursing professionals in the older people care settings and attract newly graduated nurses. Nurse managers, occupational health nurses and nurse educators as representatives of support structures, play a vital role in promoting factors related to newly graduated nurses' well-being at work. These representatives, contribute their expertise and collectively address the well-being challenges newly graduated nurses encounter. The aim of the study was to explore the factors related to newly graduated nurses' well-being at work in older people services. The goal is to retain nursing professionals and attract newly graduated nurses to older people services. In this qualitative descriptive study, data was collected with focus group interviews (n=5) of nurse managers in the care settings for older people (n=6), occupational health nurses providing services to the nurses working in care settings for older people (n=2), and nurse educators teaching gerontological nursing (n=8) across Finland. The interview guide consisted of three major themes addressing early-career nurses well-being at work that included a question about the factors related to newly graduated nurses' well-being at work. The group interviews were conducted electronically using the Zoom videoconferencing program, which allowed for the recording of interviews. Data was collected from May to June 2023, and the qualitative data analysis is currently ongoing. The preliminary results show environmental, physical, psychological, social and ethical factors related to newly graduated nurses' well-being at work. This study will reveal valuable insights regarding the factors related to newly graduated nurses' well-being at work in older people services to retain nursing professionals and attract newly graduated nurses as seen from the perspective of key professionals supporting nurses at the beginning of their careers. These diverse viewpoints will form a solid foundation for further development efforts.

Clinical excellence in nursing – the ways for building a strong foundation

Author: Manana Machitidze

Promoting clinical excellence among nurse clinicians can include a variety of aspects and components that are important for achieving excellence in health care. These should consist of clinical reasoning, critical thinking, clinical skills, and competency-based continuing professional development components. Fostering Clinical Excellence is essential and should begin with nursing education because the formation of future professionals begins with nursing programs. Clinical excellence depends on fundamental principles of clinical reasoning and critical thinking. To make the right decisions in a complex and dynamic clinical environment, these skills need continuous improvement. Through education and mentoring, nurses can improve their clinical reasoning skills, which will allow them to adapt and quickly make vital decisions for patient health improvement. Knowledge of clinical skills is another critical component of clinical excellence. Competent skills include technical knowledge and the ability to use them correctly. A simulated practice environment provides a valuable learning ground that offers future nurses and nurse mentors a safe place to develop skills, make decisions, and reduce errors in the future. The connection between the simulation and the actual clinical space is crucial for the training of nurses. Finally, competency-based continuing professional development and assessment are critical in fostering clinical excellence. It ensures that nurses constantly adapt to new technologies, guidelines, and evidence-based practices. Continuing professional development promotes lifelong learning, fostering a culture of excellence that extends throughout a nursing career. Empowering nurses with the necessary knowledge and skills will enhance not only patient treatment and care outcomes but also will improve the value of the nursing profession.

Key Words: Clinical Excellence, Nursing Practice, Professional Development, Critical Thinking.

A phenomenological investigation of nursing student's experiences during clinical practice in surgical units

Authors: Sevim Akbal , Havva Bozdemir , Meltem Yildirim

Aim: This paper identified nursing students' experiences in clinics and focused on the impact of those experiences on them.

Background: We need to understand the factors affecting nursing students' clinical education to strengthen nursing education. Although some researchers have examined the factors affecting students' clinical education, more studies are needed in this area.

Design: A Qualitative descriptive phenomenological study

Methods: The research was conducted in an undergraduate nursing school in Edirne, Turkey. The sample consisted of 40 nursing students enrolled in the "Surgical Diseases Nursing" course. Data were collected for 14 weeks during the fall semester of the 2019-2020 academic year using a semi-structured online form called a clinical log. The data were analyzed using Colaizzi's 7-stage data analysis method.

Results: Participants showed positive or negative emotional reactions during their clinical experiences. They developed practical skills by observing healthcare professionals and integrating theoretical and clinical practice. Their sense of belonging and love for the profession were reinforced when they started to put their knowledge into practice and take part in patient care. Positive interactions with healthcare professionals, patients, and peers increased participation in clinical practice and their sense of professional belonging and motivation.

Conclusion: This study differs from other studies in that it deals with student experiences in surgical clinics. This study contains important results that answer the question of how to overcome the gap between theoretical and clinical education, which is an important problem in the literature, and what are the student experiences in this regard.

INNOVATIONS IN NURSING EDUCATION

Oral Presentations session – 21 March

The path to sustainable education: E-Learning through nursing students' perspective

Authors: Mirko Prosen, Sabina Ličen

Introduction: In recent years, the intersection of education and sustainability has gained increasing attention as societies worldwide face the urgency of addressing environmental challenges. Nursing education, like other fields, has undergone profound changes with the introduction of e-learning. The latter became even more important during the COVID -19 pandemic. This shift toward e-learning has not only redefined traditional approaches to teaching and learning, but has also raised relevant questions about students' perspectives and experiences with e-learning. This study explored the multiple aspects of e-learning from the perspective of nursing students, focusing on their perceptions, challenges, and overall experiences.

Methods: A qualitative, descriptive research design was used, organised based on COREQ guidelines. Data collection was conducted in 4 focus group sessions with a purposive sample of 10 bachelor's and 6 master's nursing students in the spring of 2023. The collected data were analysed and interpreted using the traditional method of content analysis. Various measures were taken at all stages of the research to ensure the trustworthiness and credibility of the findings. The study was done within a project "Development of a digital education standard in higher education for ensuring equity and accessibility in digital education - J5-4572", cofinanced by the ARIS – Slovenian Research and Innovation Agency.

Results: The analysis yield three categories describing nursing students' experience with e-learning: (1) aspects of quality and personal experience with e-learning; (2) E-learning: preparedness, roles and support; (3) psychosocial context of e-learning. Nursing students generally view e-learning as a favourable approach to education, emphasizing especially its advantages in terms of flexibility and practicality. This opinion is particularly pronounced among master's students, many of whom have jobs alongside their studies and see e-learning as an ideal way to effectively manage their daily responsibilities. In contrast, bachelor's students tend to prefer synchronous face-to-face learning interactions. Prolonged periods of asynchronous e-learning can sometimes lead to a loss of concentration for bachelor's students.

Discussion: The study's findings reveal that nursing students generally perceive e-learning as a positive approach to education. The alignment between e-learning and sustainability is noteworthy. By opting for digital platforms, students engage in a mode of education that is inherently more sustainable. However, in nursing, e-learning can be used up to a point, as some competences can only be achieved through bedside learning and face-to-face interaction. Despite certain limitations, e-learning has proven to be an innovative approach to teaching and learning and should be considered one of the dominant methods in higher education in the future. This study has also identified future research topics, including e-learning effectiveness in nursing education and its impact on student well-being.

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Co-creating the 4DPApp, a mobile learning technology in practice placement: building the bridge between nursing academy and clinical placement

Authors: Carlos Martínez-Gaitero, Beata Dobrowolska, Cristina Casanovas, Ariadna Huertas, Esther Cabrera, and the 4D Project Consortium

Background: The clinical education in nursing students involves complex coordination between various actors1. It's a very well known problem that there is an important bridge between academic environment and clinical placement2. With a rising number of students and increased demand for healthcare services, there's a need for tools to simplify the learning process and focus on value-driven activities3,4,5.

This presentation shows the 2nd phase of the 4D Project6 that aims to introduce mobile technology in practice placements to close this gap between nursing academy and clinical placement. The 4D Project addresses this need by creating personalized mobile applications (4DPApp) for students and mentors (clinical tutors, link teachers, and academic assessors). The 4D Project is structured in three phases: (1) preliminary research to define the problem and context, (2) collaborative development of mobile application, and (3) a pilot study to testing in clinical settings7. The 4DPApp prototype has been created through discussions and analysis by researchers and nursing students and mentors.

Objective: To cocreate, to design and to develop a mobile learning technology in practice placement using various (co-)design methods, to respect students and mentors' core values and needs.

Method: The research employs a mixed-methods approach to investigate co-designing a clinical skills-based mobile application. To coordinate innovation, we utilize the University Innovation Canvas, which outlines key factors for digital transformation and sustainable innovation and application of specific co-design techniques like the value proposition canvas, personas, scenarios, and user journey.

Results: A prototype of the mobile learning technology for practice placement was created during the design phase. The application was carefully designed to meet the specific needs identified through co-design. It offers a user-friendly interface that improves communication and interaction among students and mentors. The 4DPApp facilitates seamless information exchange related to onboarding, welcoming day, feedback and reflective practice, learning goals and student's evaluation.

Conclusions: Teachers and clinical nurses continually face dynamic challenges in the realm of clinical training. It is imperative to bring clinical institutions and HEIs (Higher Education Institutions) closer together. The 4DPApp holds promise as a transformative tool solving this gap. The introduction of a digital tool can aid nursing students and mentors in more effectively managing the learning process, promoting the integration of clinical and academic aspects of healthcare education. Finally, the 4D project will ensure the use and introduction of mobile technologies in practice placements and learning processes in European HEIS in nursing.

Keywords: practice-based learning; practice placement; technology enhanced learning; nursing; co-creation.

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Unveiling transformative pedagogy: integrating arts-based modalities and reflexive writing in nursing education

Authors: Michelle Camilleri, Sharon Martinelli.

In this collaborative presentation, we invite attendees into our journey as nurse educators navigating uncharted territory to cultivate transformative educational experience. Our focus was on adopting an innovative approach, integrating arts-based modalities, writing and reflexivity within a personal and professional development module for second year baccalaureate nursing students. A rising number of studies investigate the integration of arts-based learning in medical education programs, including the use of transformative aesthetics for nursing students (Lake et al, 2015; Elhammoumi & Kellam, 20017)

By weaving together creative expression and reflective practices, our goal was to transcend conventional teaching methods, ushering nursing students into a humanistic realm of learning. We sought to cultivate the idea of learning that goes beyond limitations 'expansive learning' rather than being confined as discussed by Holbery et al., (2019). This approach involved and promoted introspection, establishing a personal and reflective space for students to explore not only their immediate surroundings but also and their professional role in the extensive landscape of nursing and healthcare (Ghaye & Lillyman, 2014).

Our interactive approach, utilising artwork, and reflective writing as diverse forms of expression aimed to stimulate inquiry and provoke critical thinking (Casey, 2009). Through discussions, we encouraged students to question, analyse and make connections, with the ultimate objective of not just enhancing cognitive skills, but more importantly to deeply nurture a connection to the empathic core of nursing. Students were encouraged to explore diverse perspectives through creative exercises, to gain a deeper understanding of the unique needs of individuals from various backgrounds. In addition to nurturing empathy, the integration of creativity into nursing education proved to be a dynamic catalyst, stimulating problem-solving and advancing inclusivity, equity, and sustainability.

However, this pedagogical endeavour did not come without its challenges. These obstacles, whether logistical or pedagogical, served as a learning curve that shaped us as educators. As we overcame these challenges, our understanding of the potential and limitations of integrating arts-based modalities and reflexive writing in nursing

education deepened. The journey of overcoming these hurdles became an integral part of our own professional and personal development, contributing to the narrative of our evolution as educators to push the boundaries of traditional teaching methods.

Aligned with Bourgault et al., (2022), the discussion unfolds as a narra2ve delving into the process and the pedagogical strategies as well as the implementa2on of upcoming curricular decisions across the design, teaching, and reflec2on phases of the recently launched baccalaureate nursing students' course.

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Faculty on the Role of Arts-Based Experiential Learning

The post COVID-19 new graduate nurses: findings from POSTCOVID_COMPENURSE study

Authors: Dr Sara Dentice, Dr Anna Brugnolli, Prof Luca Grassetti, Prof Alvisa Palese, Dr Stefania Chiappinotto.

Background: During the COVID-19 pandemic, important transformations have occurred in nursing education (e.g., Dewart et al., 2020), significantly affecting the learning patterns and perceived competencies of graduates (e.g., Thirsk et al., 2022). However, the variations among different cohorts of students and the resulting differences in perceived competencies at graduation have not been fully documented. The aim of the study was to investigate the level of competences of these students' cohort, which started and concluded their training during the COVID-19 pandemic.

Methods: A longitudinal study was conducted. A survey that measured the individual profile, clinical learning experience during bachelor's, and perceived competences developed (Nursing Competences Scale, NCS [Meretoja et al., 2004]) of recent graduates in nursing in two universities in northern Italy was used. Data were collected from students graduated in 2020 (first post-COVID-19 group), 2021 (second) and 2022 (third) and compared with data collected in a pre-COVID-19 group (Kajander- Unkuri et al., 2021).

Results: A total of 1156 completed questionnaires were collected. Perceptions of competences follow a pattern across the different cohorts, with a decrease between the pre-COVID-19 generation and the first, an increase between the first and second group (which does not return to pre-COVID-19 levels) and a decrease for the third group. Differences in the perceived competences resulted statistically significant between the pre-and the first post COVID-19 group; moreover, some NCS competences resulted statistically significant between the pre-COVID-19, the second and the third group.

Discussion: A significant different level of competences over the cohorts was perceived in many items as measured by the NCS. The emerged pattern was mainly influenced by the limitation of practical opportunities (Rossettini et al., 2021), which reduced the students' interaction with patients and critical capacity (Basso et al., 2022). In particular, the first COVID-19 generation showed a marked decline in the perception of the competences developed, as documented (Rohde et al., 2022). The clinical training at the patient's bedside is an essential element in nursing education (Morgan, 2006).

Conclusion: The COVID-19 pandemic has profoundly affected the education and competence development as perceived by nursing students in Italy. It is crucial that universities develop programs and address students' concerns about their preparedness. Further research should assess competence perceptions among future graduates and the effectiveness of different teaching techniques and specialized mentoring programs.

Keywords: nursing education, students, competences, COVID-19.

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Quality through resilience & innovation – these are the flemish bachelor programmes in nursing

Author: Lien Beyls

The Accreditation Organisation of the Netherlands and Flanders (NVAO) has confidence in the quality of the Bachelor's degree programmes in Nursing. This is evident from the overview report published by NVAO in February 2023 on the assessments of these programmes. However, this was not the case in 2015, when NVAO issued negative accreditation decisions for all these nursing programmes. NVAO took these decisions because the programmes did not comply with Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications. What followed was a thorough reform of the curriculum and an extension of the duration of studies. NVAO's overview report sketches a general picture of the assessment procedures and the substantive findings of the assessment panels. The report concludes with NVAO's insights and policy recommendations. Breeding grounds for innovation

The assessments show that the Bachelor's programmes in Nursing have successfully extended the duration of study and indeed meet the European criteria. NVAO appreciates the efforts of all those involved in developing a high-quality and innovative curricula. The programmes have been developed together with the stakeholders and are well founded in terms of professional content and education. The good practices and recommendations of the assessment panels will help these programmes in their further development. The programmes are a breeding ground for innovation through the use of high-tech skills labs and new didactic concepts. However, the limited number of available internships in certain healthcare domains puts pressure on clinical education and the quality of the internships. That is why the valorisation of innovative technologies is imperative, but the European directive is currently still putting the brakes on this. So there is a need for a review to deliver the best possible EU-recognised

nurse. NVAO recommends that the federal government make room in federal legislation for this educational innovation in the bachelor's programmes in nursing. The assessments also show that the programmes clearly work on clinical reasoning in all necessary domains and the research skills of the students. In addition, the assessment panels note that the students develop a critical attitude, entrepreneurial spirit and that creativity is stimulated.

There is a strong feedback culture in the programmes. This is made transparent through follow-up via (digital) portfolios, which are also increasingly being adopted by the professional field in the context of competence growth.

A range of broadening and in-depth elective courses, the contract internship and the Bachelor's thesis provide room for individual profiling of the students. The assessment panels refer to the high quality of the assessment. The evaluation forms used, lead to a coherent, substantiated, transparent, valid and reliable assessment at level 6 of the Flemish Qualification Structure. In the professional field, there is great satisfaction with the achieved learning

outcomes and the employability of Flemish students in various care contexts.

Monitoring remains necessary In addition to the aspects that are directly related to the quality of the bachelor's programmes in nursing, NVAO also makes recommendations in the overview report that may affect this quality.

https://www.nvao.net/en/news/2023/2/overview-report-bachelor-of-nursing (newsflash)

https://www.nvao.net/en/publications/overview-report-ba-nursing (publication - full text)

Drop in the ocean or the start of something big? A mix-methods review and standardized interviews of projects for the training of interprofessional competencies in nursing education in German-speaking regions

Authors: Laura Püschel, Frederike Lüth, Miriam Leimer, Wolfgang von Gahlen-Hoops, Katrin Balzer, Anne Christin Rahn

Background: Integrating interprofessional education (IPE) into health professions education is essential for effective collaboration in healthcare practice [1]. In Germany, funding and local initiatives (e.g. [2]) have led to an increase in IPE opportunities, but IPE has not yet been embedded systematically in undergraduate education of the health professions, like nursing education. The aim of the project interEdu (concept development to enhance interprofessional education in vocational and academic nursing education) is to develop and pilot an interprofessional core curriculum for undergraduate nursing education in Germany. To inform the curriculum development, we aimed to identify characteristics, effects and context factors of projects for the training of interprofessional competencies in nursing education in German-speaking regions.

Methods: We conducted a mixed-methods review [3] and standardized interviews. Primary studies on the development, evaluation and/or implementation of IPE in Austria, Germany or Switzerland comprising a minimum of 15 hours teaching and reporting predefined information on the learning activity (e.g. target groups, learning objectives) were included in the review. We searched five databases, German-language journals and websites. Titles, abstracts (first ti0% by two reviewers) and full texts were screened by one person. Data of the projects was summarized narratively. Additionally, we interviewed participants of IPE projects in Germany, addressing the following topics: (1) characteristics, learning/teaching methods and materials, (2) subjective effectiveness and feasibility, (3) context factors of planning and implementing the project. We analysed quantitative data descriptively and inductively categorised free-text answers.

Results: For 24 IPE projects identified, we retrieved 20 eligible references and conducted interviews on 16 projects (15 project managers, 18 teachers, 5 students). Role understanding, interprofessional communication and/or teamwork were the most frequently addressed competency domains (>90% projects). The dominating teaching mode was face-to-face teaching used with a variety of methods (>80% projects). For some projects, positive effects on learners' outcomes (e.g. attitudes, knowledge) were reported in the references and interviews. Perceived changes in healthcare practice were rated low by interviewed participants. Supportive programme managers and staff training were often mentioned in the interviews as facilitators for planning and implementing IPE. Barriers were different curricula and locations of involved health professions. Some projects did not manage to embed the newly developed IPE unit in the curriculum beyond the project/funding period.

Discussion: Our findings provide valuable information for sustainable integration of IPE in German- speaking regions. Further research should focus on long-term IPE implementation, including methods for transferring IPE into changes in healthcare practice.

Keywords: Interprofessional education, nursing education, curriculum development, standardized interviews, evidence synthesis

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Lessons learned in nursing education: a national survey.

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During the COVID-19 pandemic, Italian Bachelor Programs in Nursing made significant changes to their learning path and teaching methodologies to ensure educational continuity (Palese et al., 2022). Classroom lectures moved online, most universities suspended internship activities replacing them with distance learning (Morin, 2020), while a few tried to maintain in-person clinical training (Barisone et al., 2022). These changes, often reactive and unplanned, affected nursing education at a global level (Carolan et al., 2020) leading to reflections on the resilience of educational systems and their ability to adapt to students' learning needs in an evolving context. Today, simply reverting to prepandemic teaching methods without assessing the changes made, might overlook the unique learning experiences this period provided.

In 2022-2023 a qualitative descriptive study (Bassi et al., 2023) was conducted among nine Italian Bachelor Programs in Nursing with the aim of exploring what teaching strategies were introduced in the pandemic phase and which ones should be maintained even in the post-pandemic phase. After identifying a set of recommendations that can guide the Italian nursing education to move forward in the post-pandemic era, this study seeks to assess the extent to which these recommendations are being applied nationally and to understand the current educational practices being utilized.

Based on the information gathered in the previous qualitative study and in accordance with the existing literature (Ricci et al., 2019), a bespoke questionnaire has been developed. Specifically, it consists of two sections: an initial one dedicated to collecting the demographic and professional information of the participants (age, gender, education, professional experiences, years of service, etc.), and a main section that comprises a set of items allowing participants to gauge the degree to which each recommendation is being applied in current nursing education. The data collection will be performed in November 2023 involving all of the Italian Bachelor Programs in Nursing. Approximately 300 Heads of these Bachelor Programs or Coordinators of training activities will be asked to participate. Emerging findings will be presented at the conference.

Key words: COVID-19, lessons learned, nursing education, survey, Italy.

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Training transversal skills in healthcare higher education: learnings and challenges from an international and interdisciplinary project (ITSHEC

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The inclusion of training in transversal skills within formal nursing education is an imperative in the current context. The increasing complexity of care within a growing, diverse, and demanding population, coupled with evolving working environments, requires that the future generations of nurses are well-prepared with the necessary skills and attitudes to face these challenges. Additionally, at the educational level, training these competencies poses a challenge in both teaching and learning processes, calling for innovative teaching and assessment methods that break with traditional lecture-based and theoretical content evaluation approaches.

From this rationale emerges the Erasmus+ project: Integration of transversal skills into health and social care, higher education, and the curriculum, the aim of which was to design, pilot, implement and evaluate teaching-learning strategies and resources to teach transversal skills in undergraduate and postgraduate health education. Over the past three years, four universities and one company collaborated internationally to accomplish this objective.

In the first phase of the project, a methodological guide was developed to provide a framework for the subsequent design of pedagogical activities. Subsequently, working

teams from different collaborating institutions embarked on designing activities that were piloted and evaluated in the context of a Summer School held in Barcelona, which brought together students from various health sciences disciplines and different participating universities. The pilot phase enabled discussions and reflections on the challenges of designing and implementing pedagogical actions aimed at fostering transversal skill development. It also promoted an enriching exchange between faculty and students, allowing the latter to voice their concerns and suggest improvements. Following the Summer School, the working teams were able to refine the initially proposed activities based on the feedback received. Finally, in the last phase of the project, a training session for faculty members was held in Croatia, focusing on the challenges of applying these methodologies and the role of the teaching staff. The session also served as a platform for sharing best practices. As a culmination of this co-creative process, a collection of 23 ready-to-use activities was developed and is currently accessible to the general public at: https://itshec.upf.edu/resources/ .

This project stands as an example of international collaboration among institutions, promoting the sharing of best practices in training the new generation of healthcare professionals. It has facilitated a profound and collaborative reflection on curricula, teaching methodologies, and assessment methods, highlighting the benefits of cooperation among the various stakeholders involved in the teaching and learning process.

How to sustainably promote interprofessional competencies in vocational and academic undergraduate nursing education: development of a nation-wide core curriculum for interprofessional education in German nursing education (interEdu

Authors: Tanja Lehnen, Lisa Wolter, Jutta Busch , Laura Püschel , Frederike Lüth , Miriam Leimer, Anne C. Rahn , Katrin Balzer, Wolfgang von Gahlen-Hoops

Background: Interprofessional collaboration in healthcare is deemed a crucial factor in reaching a high-quality, person-centered care, encompassing joint decision-making and coordinated actions among all healthcare professions involved in the care process. However, interprofessional collaboration is not yet become the standard practice within German health professions. Interprofessional education (IPE) is recognized as a pivotal means to enhance effective collaboration among diverse healthcare professions in care practice. [1, 2] IPE pertains to the interaction between learners from at least two distinct professions, fostering an environment for them to learn from, about and with each other, aiming to develop interprofessional competencies that enhance the quality of care. [1,3] In Germany, nursing education comprises two distinct pathways: the vocational and the academic undergraduate education, with limited connection with medical schools. Furthermore, there exist diverse curricula, learning outcomes, and organizational structures. [4] Consequently, developing an IPE curriculum tailored to these unique conditions presents a formidable challenge.

Methods: The interEdu project (concept development to enhance interprofessional education in vocational and academic nursing education) is structured into a conception phase and a pilot phase. The initial phase involved data collection through a mixed-methods approach, encompassing rapid review, standardized interviews, qualitative interviews, and an expert workshop. [5] Based on the findings, the interprofessional core curriculum for the vocational and academic nursing education was formulated and is currently undergoing piloting and evaluation in the second phase.

Results: The interprofessional core curriculum of the interEdu project contains eleven chapters. In addition to presenting empirical findings from the conceptual phase, the curriculum addresses target audiences for IPE, delineates various learning settings (including classrooms and care practice skills lab), defines domains of interprofessional competences, explores barriers and facilitators for implementation, and provides module descriptions. These short module descriptions offer educators guidance in structuring their lectures while allowing flexibility.

Conclusion: A comprehensive interprofessional care curriculum for vocational and academic undergraduate nursing education has been devised and is undergoing piloting in Germany. It is a challenge to establish it sustainably in different curricula in nursing schools and universities. Furthermore, the curriculum could serve as a template for other healthcare professions seeking to implement IPE in their respective educational programs. The ultimate longterm objective is to enhance interprofessional collaboration in care practice.

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Interprofessional learning in clinical placements promotes students' competencies: a mixed-methods evaluation of the Lübeck interprofessional training ward (LIPSTA)

Authors: Frederike Lüth , Martina Traut, Max Moll, Birte Hildebrand, Niklas Gebauer, Nikolas von Bubnoff , Katrin Balzer, Stefanie Mentrup

Background: Interprofessional collaboration in clinical practice plays an important role in meeting the current and future challenges in healthcare [1]. To optimize collaboration and develop competencies in practice, interprofessional education should be integrated into placements of health professions students. Therefore, we implemented the Lübeck interprofessional training ward (LIPSTA) in the Department of Hematology and Oncology at the University Hospital of Schleswig-Holstein (Germany) in 2022. During four-week LIPSTA placements, students of nursing, human medicine, and physiotherapy are responsible for 2– 4 patients under the supervision of professionals. The mixed-methods study aimed to evaluate the structures and processes of the LIPSTA concept from the perspective of students and professionals as well as the development of students` interprofessional learning outcomes.

Methods: Mixed-methods evaluation with pre-post-design: Students assessed their subjective competencies development in interprofessional collaboration using psychometrically tested questionnaires at the beginning and the end of the placement, and after three months. A self-developed satisfaction questionnaire was used at the end of the placement. In addition, we conducted semi-structured interviews with students after the placement and supervisors at the end of the implementation phase. We analyzed the quantitative data descriptively and used content analysis for qualitative data.

Results: The students (nursing n=7, medicine n=4, physiotherapy n=2) were satisfied at the end of the placement, although occasional lack of supervisors or deviations from LIPSTA components such as interprofessional ward rounds led to a decrease in satisfaction. We noticed an increase in students' self-reported competencies in interprofessional collaboration (Interprofessional Socialization and Valuing Scale [2–3], 1=very low, 7=very high) from mean 5.2 (standard deviation (SD) 0.6) to 6.1 (SD 0.4) from the beginning of the placement to three months after the placement. Qualitative data with students (n=10) suggests distinct improvements in interprofessional competencies (e.g., role understanding, teamwork, and communication). Students and professionals (n=8) describe an increase in practical knowledge, skills (e.g. independent work), and professional behavior in practice.

Conclusion: The LIPSTA model proved to be feasible in clinical practice and showed the potential to increase students' competencies for interprofessional collaboration. Currently, the model is available for a few students and oncology patients only. To enhance the reach of the LIPSTA model, we currently plan a hospital-wide implementation of key LIPSTA components, based on the evaluation findings and lessons learned so far. Keywords: Interprofessional training ward, interprofessional competencies, learning outcomes, mixed-methods evaluation

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Dialogical reflection on collaborative experiences in the context of clinical nursing supervision: a qualitative approach

Author: Ana Paula Morais Carvalho Macedo

Background: The insufficient appropriation of supervisory practices and interorganizational collaboration by nurse supervisors, coupled with the urgent demand to promote appropriate training contexts, highlights the need to reflect on and innovate the continuous training strategies of clinical supervisors, whose impact on the training of future nurses guarantees the promotion of their personal and professional autonomy. Our project, Collaborative Experiences, based on the Freirian method's, proposes the modernization of intercollaborative pedagogical processes for supervisors and supervisees, enabling them to respond effectively to the growing challenges of education and the future of nursing.

Methods: A qualitative approach, addressed to a convenient sample of eight nurse supervisors integrated

into the current continuous training proposal, uses the analysis of dialogical reflections according to the three levels of reflexivity defined according to Van Manen.

Results: Three levels of reflexivity were identified in relation to the inter-organizational collaborative continuing training experience, namely level 1 (technical), which brought out in supervisors an analysis of their current supervisory practices and the need for future application of a set of pedagogical strategies that promoted the efficient and effective achievement of their short-term objectives. Level 2 (practical) addressed issues related to the implications of supervisory action beyond metacognition, namely the supervisor's understanding and communication in a broad context of relationships with different social actors (other supervisors, supervisees, hospitals, and academia). And level 3 (emancipatory and critical nature), which corresponded to the final period of training, extending to the ethical, social, and political dimensions in the autonomous and secure formation of the supervisor-supervisee relationship. At this point, the supervisor evolves to a deeper stage of inquiry and evaluation, with a capacity for constructive criticism.

Conclusion: The dialogic narratives allowed us to understand how supervisors and supervisees developed their thinking and actions. This reinforced awareness of the urgent need to reconstruct supervision practices, considering the demands of a post-modern world, which poses challenges to nursing education systems and health organizations. The proposed training model was based on a process of collective construction and was underpinned by the three major milestones of the Freirean method: 1) the transdisciplinary field; 2) humanization centered on the supervisor or supervisee, resulting from collaborative, welcoming spaces that encourage the sharing of experiences; and 3) humanization centered on the individual user of care. The same seems to favour the development of a profile of critical and collaborative reflection, which is fundamental for building autonomy and professional identity.

Kewords: Clinical Nursing Supervision; Collaborative Experiences; Education; Autonomy Development; Freirian's Method

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Nurses, midwives and students' reports of effective dedicated education units in five European countries: a qualitative study

Authors: Sara Pedregosa-Fauste, Núria Fabrellas, Ester Risco, Mariana Pereira, Ewa Dmoch- Gajzlerska, Fisun Şenuzun, Sandra Martin, Adelaida Zabalegui.

Background: The quality of the learning environment depends on student learning opportunities, the collaboration between academic and healthcare institutions and the relationship among students, health professionals and university faculty members. Unfavorable environments for students have been described due to organizational weaknesses, a poor relationship between students and supervisors, and negative attitudes or behaviors from these professionals. Also, the distance between educational and health institutions, the lack of supervision and feedback to the student, the lack of learning opportunities, the lack of the student's sense of belonging, the gap between theory and clinical practice, have been described as limiting factors for an optimal learning environment. Dedicated Education Unit has emerged as alternative to standard models for being beneficial to improve students clinical experiences and professionals grown.

Objective: To explore nursing/midwifery students, Clinical Mentors, Link Teachers and Head Nurses experiences within "Dedicated Education Unit" in 6 European clinical placements and the necessary elements for a powerful clinical learning environment.

Design: A multi-country qualitative study.

Methods: Focus group interviews were performed to identify the personal and organizational factors of importance for students and nurses/midwives.

Results: Data analysis produced 4 main themes (1) Clinical placement organization, (2) students' clinical knowledge and skill acquisition, (3) students, and nurses/midwives' experiences within the Dedicated Education Unit model and (4) factors for creating an effective learning environment.

Conclusions: A close educational-service collaboration, a realistic clinical placement planning, a focus on student learning process and an investment in professionals' education and development among others, are elements to set up a powerful clinical learning environment.

Implications for the profession: It is considered advisable and urgent to improve the working conditions of nurses/midwives and the learning environments of students as a strategy to alleviate the global shortage of nurses and respond to the increasingly demanding health needs of the population.

Impact: Due to the close relationship between students' learning and the clinical environment' elements, nurse educators seek innovative models which allow students to manage patient care and their transition to practice. To implement new learning strategies, identifying students, nurses and midwives perceptions and suggestions is a powerful information to evaluate implementation process and outcomes.

Public Contribution: Our findings could help managers to meet the human and organizational requirements to create a successful learning environment in every student placement.

Nursing students' perceptions of the eportfolio experience in Malta

Authors: Corinne Scicluna Ward , Maria Cassar . Sharon Matinelli , Daren Chircop , Barbara Anne Nicolls

In January 2020, the Department of Nursing, University of Malta (UM) introduced the Google Sites Practice electronic portfolio (GSPep) to the 2019 cohort of pre-registration nursing students. The goal was to use this eportfolio as a pedagogic tool that nurtures the systematic assembly of learning experiences and reflections that demonstrate safe and effective growth. The initiative was evaluated along the years of its use by students during the three-year pre-registration nursing courses offered at the UM. This paper discusses the experience of students' using the GSPep. An evaluative methodology was adopted to explore the experience of students with the GSPep digital environment. The method used in this study was an online survey at the end of their course and is part of a bigger case study that will also look into the experiences of nurse educators, who were involved, either directly or indirectly. The main finding was that most of the student nurses were able to engage with the process of collecting and presenting their work as evidence in the digital environment. However, the challenge, was using the digital environment as a dynamic working space where students constructed meaning from their experiences through discussions with Link Lecturers. Reflection and feedback to enhance learning and progression was lacking and some thought that the paper format was less confusing and did the job of providing evidence of learning. Despite the small sample size (N=26), making these findings difficult to generalize, the evaluation has led to further refining of the processes and continued annual evaluation and the findings may lend themselves well as guiding directions for educational entities considering the introduction of similar initiatives.

Keywords: eportfolio, nurse education, reflective practice, evaluation, continuous practice development

Savoirs émancipatoires et praxis infirmière au Luxembourg: défis cliniques et académiques

Auteurs: Laurence Bernard, Marie Friedel, Dave Holmes, Dan Lecocq, Semra Smajic, Thibault Dubois, Afi Agboli, Micha Massaad.

L'Université du Luxembourg a reçu le mandat interministériel de développer des Bachelors de formations initiale et spécialisées en Sciences Infirmières, autrefois enseignés au Lycée Technique. Jusqu'alors, environ 60% des enseignements infirmiers étaient réalisés par des médecins. À l'automne 2023, les premières infirmières ont été accueillies au sein de cette jeune université. C'est dans ce contexte qu'un quesLonnement a surgit autour des raisons d'un enseignement infirmier majoritairement dispensé par des non infirmiers. Une analyse critique du contexte à l'aide des savoirs infirmiers de Chinn et Kramer a été menée. Les résultats préliminaires identifient des défis quant à la mobilisation des savoirs infirmiers et particulièrement la praxis et le savoir émancipatoire dans l'enseignement et la pratique infirmière. Deux constats méritent d'être soulignés : l'approche biomédicale est omniprésente tant dans le milieu d'enseignement que clinique et cette approche a des conséquences sur la (non) reconnaissance de l'expertise de l'infirmière. Le modèle biomédical ancré dans le paradigme de la catégorisation doit être questionné à l'aide du savoir émancipatoire. Des pistes de réflexion permettent de promouvoir un modèle collaboratif qui mise sur des relations égalitaires au sein de l'équipe interprofessionnelle en partenariat avec les patients. Finalement, une culture durable de l'utilisation des savoirs infirmiers devrait être renforcée dans la formation et la pratique infirmière.

Réforme de la formation infirmière initiale en France : promouvoir l'excellence Clinique

Auteurs : Michèle Appehshaeuser; Marielle Boissart.

Contexte: La France est engagée dans une révision de son programme de formation infirmière initiale en réponse aux évolutions actuelles du système de santé et aux projections réalisées. Ce projet s'inscrit dans un contexte marqué par des tensions démographiques fortes qui menacent l'accès aux soins Le CEFIEC, association qui regroupe l'ensemble des instituts de formation en soins infirmiers du pays, est un partenaire incontournable dans ce projet et souhaite exercer un leadership fort afin de promouvoir un programme de formation qui conduise à l'excellence clinique des diplômés.

Objectifs du projet • Partager la vision systémique de la réingénierie de la formation infirmière initiale • Positionner le raisonnement clinique comme clé de voute de l'activité infirmière • Adapter la formation aux besoins de la population dans une démarche de responsabilité populationnelle • Anticiper les nouvelles missions cliniques des infirmières dans un contexte de raréfaction de la démographie paramédicale et médicale • Accompagner les équipes pédagogiques au changement de paradigme • Fédérer autour d'un projet d'avenir

Méthode: Le cadre de référence développé par Iwasiw et Coll. (2018) a été retenu :

• Création d'un groupe de travail , • Recueil de données, analyse et synthèse du contexte dont les facteurs internes et externes • Choix des ancrages philosophiques et pédagogiques, • Formulation des objectifs et des résultats attendus, • Développement du référentiel de formation, incluant sa mise en œuvre et son évaluation • Mise en œuvre du référentiel, évaluation, • Évaluation formalisée du programme

Résultats Les propositions du groupe de travail du CEFIEC ont été formulées en juin 2023, puis réactualisées au fil des réflexions: • Analyse du contexte • Ancrages philosophiques et pédagogiques, • Objectifs et résultats attendus, • Référentiel de formation, incluant sa mise en œuvre et son évaluation,

Des séminaires ouverts à l'ensemble des instituts adhérents ont été réalisés sous la forme de webinaires durant l'été afin de recueillir les commentaires et d'affiner le projet. Une version consolidée du projet a été développée puis déposée sous forme de contribution aux ministères pilotes.

Perspectives: Le CEFIEC souhaite être force de propositions dans cette réforme en apportant des propositions concrètes, ambitieuses mais réalistes. Une réflexion au long court sous forme de groupes de travail est entreprise en collaboration avec les parties prenantes concernées par cette réforme.

Mots-clés : formation infirmière initiale, leadership, référentiel de formation, lobbying, démarche projet

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OMS, la situation du personnel hospitalier dans le monde, 2020 OMS, Health and care : Worforce in Europe : time of act

Développer les compétences non-techniques dans une équipe médicale pluridisciplinaire via la simulation conception d'un parcours de scénarios basé sur une pédagogie expérientielle

Auteurs: Sophie Delvaux., Joséphine Delcaye, Jonathan Goffoy, Jean-Christophe Servotte.

Résumé: La communica@on porte sur la présenta@ on d'un disposi@f pédagogique innovant qui permet le développement de compétences non-techniques (CNT) chez les futurs infirmier.e.s. Des éléments de contexte démontreront la nécessité d'améliorer et expérimenter les CNT dans le secteur médical. Ils présenteront ensuite 5 scénarios de simula@on ainsi que les réflexions psychopédagogiques qui les sous-tendent.

Abstract :

Au niveau international, de nombreuses études (Ex. : Khon et al., 1999 ; Michel et al., 2010;

Eurobaromètre, 2010) ont démontré que 8 à 12% des patients subissent les conséquences

(décès et complications) d'évènements indésirables évitables liés aux soins dans le domaine de

la santé. Plus marquant, entre 70% et 80% de ces évènements sont d'origine non-technique

(ex. : OMS, 2017; The Joint Commission, 2016) c'est-à-dire liés à des manques au niveau de la

communication, du leadership, du travail d'équipe, de la prise de décision et de la conscience

de la situation. Les services les plus touchés sont les services aigus et techniques tels que le

bloc opératoire, les soins intensifs et les urgences.

Ainsi, l'apprentissage des CNT s'avère indispensable à inclure dans les curriculum de formation

des (futurs) professionnels de la santé. Or, au sein de la littérature, les lacunes en matière

d'enseignement et formation relatives aux CNT sont pointées du doigt (Pearson & al. 2007 ;

Pearson & al. 2011,). L'importance accordée à celles-ci dans le milieu médical serait donc à la

hauteur de leur déficit dans les programmes d'apprentissage que ce soit en formation initiale

ou en formation continue.

Ainsi, le dispositif pédagogique présenté vise à apporter une réponse pédagogique innovante

pour permettre le développement de CNT chez les futur.e.s infirmier.e.s .

Un parcours pédagogique en cinq étapes sera présenté comprenant deux scénarios de

simula@on hors milieu hospitalier (décontextualisa@on) et trois scénarios de simula@on en

milieu hospitalier (contextualisé).

Mots clés: Compétences non-techniques, pédagogie expérientielle, simulation

S'enrichir par les pratiques de soins infirmiers en Europe , une richesse en formation : Le concept d'Aroma-soins

Auteurs - Orateurs : Pascale DIDRY – Nathalie Dubois

Auteurs associés : Sonja Scheuren - Alexa Schwall

Innover dans la formation, s'enrichir par les pratiques du soin en Europe, sont des richesses dans la formation initiale des infirmiers. La communication que nous souhaitons proposer traite de l'innovation de la formation en partant à la découverte de l'Europe et du concept innovant de l'Aroma-Soins. Mener une réflexion sur ce concept illustre le champ des possibles et développe le prendre soin. En 2009, le référentiel de formation évolue et l'institut de formation en soins infirmiers saisit l'opportunité d'internationaliser la formation. Le projet pédagogique intègre ce nouvel axe avec l'objectif de s'ouvrir aux pratiques de soins européens notamment en confrontant, questionnant l'exercice de l'Autre et ainsi permettre une ouverture de sa propre pratique. Développer la compétence culturelle au cœur de la formation devient une visée indispensable, une exigence du prendre soin, un enrichissement pour le soignant et le soigné et un levier indispensable à la personnalisation et à l'adaptation du soin. Le programme Erasmus fut le premier projet mis en place pour cet axe. Il permet le départ en stage de 10% des étudiants. Souhaitant diversifier les projets, une unité optionnelle de 4 jours « Partir à la découverte des soins infirmiers en l'Europe » est proposée chaque année aux étudiants de troisième année et cela depuis 13 ans. Son objectif lie une thématique santé à un pays européen ; « La place de la famille lors d'une hospitalisation en Espagne », « La fin de vie en Belgique », « La prise en soins des personnes âgées aux Pays-Bas » ... En 2021, c'est au sein d'un hôpital Luxembourgeois que nous avons découvert le concept innovant de l'Aroma-Soins, basée sur l'utilisation des huiles essentielles à un dosage moindre que l'aromathérapie. L'ensemble du personnel est formé à ce concept et tout patient, quel que soit sa pathologie et ses besoins, peut en bénéficier : une philosophie et une culture du soin centrées sur le patient. Ainsi, des étudiants accompagnés de deux formatrices ont pu découvrir ce concept en rencontrant des infirmières formées à l'Aroma-Soins et bénéficier d'une mise en pratique au sein des unités de soins, une ouverture vers une approche soignante innovante. Nous présenterons le concept et un focus sur la toilette parfumée conclura notre présentation

Former les étudiant.e.s sages-femmes au repérage des violences conjugales durant la grossesse.

Auteur: Sophie Evrard

Alors que l'ONU mentionne l'égalité entre les sexes comme objectif prioritaire (5.2), 35% des femmes indiquent avoir été exposées à des violences au cours de leur vie (OMS, 2021). Les violences conjugales, elles peuvent débuter ou s'intensifier lors de la grossesse. Elles ont un impact important sur l'évolution de celle-ci (Alhusen, 2015). Cette problématique concernerait 3 à 9% des grossesses (Alhusen, 2015). Il est recommandé de réaliser un dépistage systématique en période prénatale (OMS, 2017 ; HAS, 2020) pour en diminuer les conséquences pour la santé maternelle et permettre une prise en charge pluridisciplinaire.

En formation initiale, cette problématique est peu développée. Pour aborder ce sujet sensible et serieux, le choix s'est porté sur une méthode pédagogique innovante : l'escape game. Il vise à former les étudiant.e.s sages-femmes au repérage des violences conjugales. Le dispositif a été créé sur base des recommandations professionnelles d'après le modèle CEPAJe. Des expert.e.s (n=6) ont évalué la validité de l'EG via le Content Validity Index (I-CVI = X) (Shelestak, D., 2014). Une étude observationnelle descriptive auprès du groupe (n=73) s'est déroulée en mars (groupe 1) et mai (groupe 2) 2022. L'objectif de cette étude était de mesurer la jouabilité de l'EG via l'échelle GAMEX et la pertinence pédagogique. Pour le groupe 1, les résultats montraient des résultats satisfaisants en termes de jouabilité (total : 79 ; 75-85) mais inférieurs à ceux retrouvés dans la littérature. Des améliorations ont été réalisées en termes de jouabilité et de débriefing. En comparant les deux groupes, les résultats du groupe 2 se sont améliorés pour le total 97 (88.2-111) ($p<0.001$).

Les étudiantes des 2 groupes se sentent mieux préparées et pensent avoir des connaissances utiles pour repérer les victimes. Il existe des différences statistiquement significatives entre les deux groupes, les étudiantes du groupe 2 pensent mieux orienter les femmes ($p=0.04$), oser poser la question des violences ($p=0.02$) et disent avoir déjà rencontrées des femmes victimes ($p<0.001$).

En conclusion, il est nécessaire de le tester et de l'améliorer en interrogeant le public-cible. Les adaptations ont amélioré significativement sa jouabilité. D'autres recherches sont nécessaires pour tester son efficacité.

Mots-clés : grossesse, violences conjugales, escape game, formation

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DIVERSITY AND INCLUSION IN NURSING EDUCATION

Oral Presentations session-22 March

Partnership model in faculty of health care integrate theory into practice

Authors: Mag. Jožica Ramšak Pajk, Mateja Bahun, Marta Smodiš, Asst. Prof. Sanela Pivač, Asst. Prof. Sedina Kalender Smajlović

Key words: Education, students, clinical practice, nursing

Introduction: Integration and linkage between nursing faculty and clinical settings plays a key role in shaping the future nursing workforce. At the Angela Boškin Faculty of Health Care, we are building and promoting a model of partnership between the faculty and the clinical environment. It is an effective example of connection between academic education and clinical practice, which ensures that students develop the competences necessary for successful nursing practice.

Objective: The paper aims to present the key elements of this model and their positive impact. The elements are integration of theory and practice, mentoring with regular training of mentors, regular meetings, on-the-spot evaluation, assessment of students' competencies, detailed instructions of conduct and evaluation from them about quality of clinical practice.

Theoretical background: The model of partnership between the faculty and the clinical environment is based on the integration of theory and practice. The faculty provides theoretical knowledge that is closely linked to the clinical experience that students gain in clinical settings. Namely, we include lecturers from clinical backgrounds in the educational program.

Mentoring, in the sense of connecting the faculty coordinator with the HCI coordinator, plays a key role in the partnership model. Experienced mentors in a clinical environment provide students with leadership, implementation of nursing care with training of practical skills, and support in the development of professional competencies. To ensure that the exchange of opinions and experiences is good and that we take care of continuous education, training for mentors is organized every year on current topics.

The next important element of good integration is constant communication and monitoring of students, because we are aware that the faculty must adapt to the needs of young generations of students and changes in the clinical environment. The latter ensures that clinical training proceeds in an agreed manner. In last two years we give a special emphasis on course of mentoring due to serious shortage of nurses, their high workload and consequently impact on quality of mentoring.

Conclusion: Continuous cooperation with the clinical environment is based on the principle of excellence and striving for improvement. The model encourages the use

of scientific evidence and its application in practice, and supports common research activities that strengthen the common bond and improve quality of nursing care. At the same time, we emphasize the safety of patients and the development of high moral and ethical norms in students.

Ibero-American consensus on communication skills for nursing degree students

Authors: Ana Mª Pérez Martín, Mercedes Gómez del Pulgar Gª-Madrid; Almudena Crespo Cañizares, Sonsoles Hernández Iglesias; Mariana Alina Renghea; Cristina Papadakis Romero.

Keywords: Competency-Based Education. Professional competence. Health Communication; Nursing Education; consensus

Introduction: The development of communication and interpersonal relationship skills is essential for the proper exercise of the Nursing profession, as a science of care and for which humanized treatment is essential. Having unified criteria for their training and evaluation is an essential backbone in the training of future professionals. Regarding to the training of nursing students in Ibero-American context, we didn´t found un agreed list of communication skill, which is why this work is proposed with the objective of defining the communication skills to be acquired during Nursing studies by consensus. Learning results, in the most relevant areas of clinical communication, that can be applied to teaching, establishing priority competencies as "core- competences".

Material and methods: Remote Modified Delphi is used. A driving group of 5 communication experts and a scientific committee of 7, from 14 countries, was formed. Through "snowball" sampling, an international panel of 80 experts from Spain, Portugal and Latin America was formed. Opinion was requested about the learning results associated with each dimension, evaluating them using a 9-level Likert-type scale, in which the position of the median and the level of agreement reached were analyzed.

Results and discussion: Six competency areas of clinical communication were defined. 68 learning results were obtained and 17 of them are considered key, without significant differences between regions.

Conclusion: This consensus represents a basis for implementing homogeneous training in communication skills. It would be important to explore their real applicability and evaluate their acquisition.

Well-being and academy efficacy challenges for studying away from home students: prioritizing inclusivity

Authors: Dhurata Ivziku,; Marzia Lommi, Noemi Giannetta, Miriam Cultrera, Lucia Filomeno, Daniela Forte, Fabio D'Agostino.

Key words: inclusivity, studying away, nursing students, well-being, academic efficacy

Background: University education has the potential to offer students a positive experience, allowing them to connect with new people and create a brighter future. However, students often encounter adjustment challenges (Rahat & Ilhan, 2016). These challenges can be amplified for students who study away from home, whether local or international, and they can exert a substantial influence on well-being and succeeding in university (Mortenson, 2006). Difficulty in adapting to new environments frequently leads to a higher likelihood of dropout or academic underperformance (Pitkethly & Prosser, 2010). Only a limited number of studies have explored factors that could affect the well-being of students studying away from home (Alharbi & Smith, 2019).

Aim: The aim of this study was to investigate the well-being and efficacy of academic work of nursing students studying away from home.

Methods: We used a cross- sectional descriptive design. The framework of reference was Sodexo Quality of Life well-being (2014). The variables included in this research were positive student well-being, academic efficacy, social support, social mistreatment, and challenges to development (Smith, A., & Firman, K. 2020). We recruited 253 nursing students, both local and international students, from two universities in Rome. We distributed an online anonymous survey to students via university email. Descriptive and linear regression analyses were performed in preliminary data.

Results: Nursing students were mostly female (77.9%) of a mean age of 23 years (SD 4.8), single (86.6%), and 26.1% had a previous experience in studying away from home. Mean scores for positive well-being were 6.6 (SD 1.7) (scoring from 1 strongly disagree to 10 strongly agree) and for academic efficacy were 7.3 (SD 1.7) (scoring from 1=not at all, 10 = extremely). Some differences were noticed among national and international students. International students presented lower scores in efficiency in academic work ($p<0.001$), perceived less social support ($p<0.001$) (scoring from 1 strongly disagree to 10 strongly agree), higher social mistreatment ($p<0.001$) (scoring from 1=not at all, 10 = extremely), and more challenges to development ($p=0.012$) (scoring from 1=not at all, 10 = extremely). On both samples positive well-being was associated with quality of university life (=0.561***), engagement in academic work (=0.301***), academic efficiency (=0.445***), social support (=0.387***), feeling valued at university (=0.545***), and negatively influenced by stressors like friendship problems (=-0.345***), social mistreatment (=- 0.317***) with some differences among samples. Academic efficacy is similarly associated with quality of university life (=0.356***), feeling valued at university (=0.357***), the social support (=0.229**)with differences among samples.

Conclusions: The findings presented provide valuable insights into the well-being, and academic efficacy of nursing students studying away from home, shedding light on important factors that influence their experiences in educational settings. Interestingly, disparities emerged between national and international cohorts. These discrepancies highlight the unique stressors and barriers faced by international students within academic environments, necessitating targeted interventions to address their specific needs and enhance their overall well-being and academic success. Furthermore, the associations between various factors and well-being and academic efficacy underscore the intricate interplay between individual, social, and environmental factors in shaping students' experiences. Factors such as quality of university life, engagement in academic work, and social support emerged as significant predictors of positive well-being and academic efficacy, underscoring the importance of fostering supportive and inclusive learning environments that promote student engagement and a sense of belonging.

University educators should consider these findings to enhance education models and services for those students, to improve their outcomes. Implementing effective teaching methodologies like cooperative learning, gamification, or peer evaluation can cultivate a collaborative and supportive learning environment, equipping students with teamwork skills for their future careers. This, in turn, can foster friendships, reduce mistreatment, alleviate stress, promote emotional resilience, and create an atmosphere of positive relationships and a sense of belonging within the university community.

In conclusion, the findings underscore the importance of adopting a multifaceted approach to supporting nursing students, an approach that acknowledges the diverse needs and experiences of students while promoting a culture of inclusivity, support, and academic excellence within educational settings. Further research and targeted interventions are warranted to address the specific needs of international students and promote the well-being and academic success of all nursing students.

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Representing sexual and gender diversity using narrative photography in a transcultural nursing course

Author: Leyva, J.M.

Introduction: Caring for sexually diverse populations is challenging for nurses, given the lack of training in the curriculum in most countries worldwide. To avoid discrimination and vulnerability, transcultural training and interventions are required. At Universitat Autònoma de Barcelona (Spain), a compulsory course is taught during the first year of the nursing degree; this course includes specific content about sex, gender, sexual orientation, and gender expression. Nursing students' subjective meanings of sexual diversity remain unknown. Therefore, this study aims to understand nursing students' representations of sexual diversity from a transcultural nursing approach.

Methods: Qualitative descriptive study. Narrative photography was used to represent with a picture and a personal reflection the concepts of sex, gender, sexual orientation, and gender expression. This method is based on photovoice and reflective practice and has shown positive results in previous experiences. Pictures and texts were thematically analyzed using Capminha-Bacote's model's main themes: attitudes, awareness, knowledge, skills, sensitivity, and encounters.

Findings: A total of 62 pictures and reflections were collected. The main cultural attitudes identified were related to advocacy and promoting respect and tolerance. Cultural awareness was represented by accepting people despite sexual orientation or gender expression. All the theoretical concepts included in the course were appropriately represented, such as queer, transgender, cisgender, and homosexuality. The main cultural skills identified were using proper pronouns and rejecting heteronormativity and biologism. Cultural sensitivity was shown through critical and reflective thinking, promoting respect and rejecting punishment. Cultural encounters were not identified in the data.

Discussion: Nursing students are culturally competent to care for sexually diverse populations. Students are committed to providing humanized, person-centered care. More training is needed during the nursing degree to consolidate and integrate this competence. Including sexual diversity in the nursing degree may improve transcultural competence by providing appropriate care.

Nursing students' experiences of lateral violence during clinical placements: a qualitative interview study and implications for nursing education

Authors: Katharina Tolksdorf , Laura Püschel , Katrin Balzer

Background: Nursing students are at high risk of experiencing violence in the training context. Violence often comes from nurses, a phenomenon usually described as "nurses eating their young" [1]. Experiences of lateral violence in German nursing education have not yet been studied and compared between students in undergraduate education and vocational training.

Aim: (1) To explore nursing students' experiences of lateral violence during clinical placements and related training needs, differentiating between higher nursing education and vocational training, and (2) to delineate implications for nursing education as well as structural preventive measures.

Methods: Qualitative study consisting of semi-structured interviews with nursing students enrolled in undergraduate education or vocational training programs in various regions of Germany. Interviews were audio-recorded, transcribed verbatim and analyzed using an explorative approach with inductive category formation.

Results: 16 students (8 in undergraduate higher education, 8 in vocational training) participated in the interviews. Analysis of the data is still ongoing and will be completed before December 2023. Preliminary findings indicate that nursing students experience a variety of lateral violence incidents, most of them falling into the category of psychological (verbal) violence. Incidents are particularly prevalent in the nursing home and hospital setting and are often triggered by a situational combination of several personal and work-related factors. Undergraduate students experience additional prejudices and verbal violence due to their academic education. Students expressed needs for a designated contact person and the implementation of consequences for violent nurses. They wish to be prepared before their first practical placement and to learn about self-defence and building self-confidence, conflict solving and communication skills as well as coping strategies.

Discussion: Students might benefit from classroom and practical training prior to the first placement and immediate reaction to violent nurses to stop further normalization of lateral violence. Undergraduate students may need an argumentation guide for their studies to effectively counter prejudice.

Conclusion: This study indicates that lateral violence is present in clinical placements of nursing students while effective prevention measures are available and should be used effectively by nursing educators.

Keywords: nursing education, clinical placements, lateral violence, qualitative research, communication skills

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Au-delà de la compétence interculturelle infirmière : comment les cadres de santé formateurs peuvent-ils enseigner la sécurité culturelle en formation initiale des infirmiers afin de lutter contre les pratiques discriminantes en santé ?

Auteur: Aurélie Tschaban

Dans un contexte politique français où les migrations et le passé colonial demeurent des sujets sensibles et influencent les décisions sociales, les inégalités et les discriminations en santé envers les populations issues de l'immigration sont reconnues (Braud, 2021 ; Cognet, 2020 ; Défenseur des droits, 2020 ; Lambert et al., 2022 ; Mestre, 2022 ; Sauvegrain, 2021). Un travail de recherche doctorale vise à déterminer comment les cadres de santé en instituts de formation en soins infirmiers peuvent construire l'enseignement et l'apprentissage de la sécurité culturelle afin de permettre la mise en œuvre de pratiques soignantes non discriminantes à l'égard de l'ensemble des usagers du système de santé. En effet, en quoi l'enseignement de la sécurité culturelle en formation initiale des infirmiers apparait-il être un outil de réflexivité majeur du cadre de santé formateur dans l'optique de participer à la professionnalisation des étudiants dans une démarche éthique et équitable ? Nous démontrerons que la finalité de cet apprentissage n'est pas de viser l'unique sensibilisation des apprenants à la rencontre interculturelle mais bien de réfléchir l'adaptation et la sécurisation de leurs pratiques soignantes aux besoins des personnes soignées dans une approche holistique. Après avoir objectivé les discriminations dans le système de santé français, nous montrerons les limites de l'enseignement de la compétence interculturelle auprès des futurs soignants. Nous réfléchirons de quelle manière l'enseignement et l'apprentissage des concepts d'altérité, de pluralisme culturel, d'équité en santé, de justice sociale ou encore d'humilité culturelle pourront être des freins aux pratiques discriminantes en santé.

Mots clés : Discriminations en santé, formation initiale, infirmiers, formateurs, sécurité Culturelle

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Posters

21 March

The global procedures

Author: Sara Balzan

The global procedures: an educational proposal to initiate critical thinking.

Introduction: nursing professions are impoverished by intrusive technical professionalism that obscures the essence of being a nurse. There is a need to educate in-depth and emotional involvement, to develop a sense of awareness. The training in surgical nursing is full of procedural contents that focus on technique, to the detriment of the two complementary educational and relational ones.

The aim of this training project is to initiate an overall perception, a global way of being a nurse, in every practical situation, avoiding the objectification of the person.

Materials & methods: a training project in which students are asked to rewrite the technical procedures including relational and educational knowledge.

Conclusions: the relational and educational skills during the technical procedures not only complete the nursing gesture but become necessary for its effectiveness. The students involved demonstrated correct maturity and intuition: without openness and trust, there is no caring relationship.

État des connaissances des étudiants infirmiers français et efficacité de l'enseignement en prévention et contrôle de l'infection

Author: Stéphanie Bouget Mohammedi

Introduction: Afin de prévenir les infections associées aux soins, l'hygiène est enseignée en France aux Étudiants en Soins Infirmiers dès l'entrée en formation. L'objectif principal de cette étude était d'évaluer les connaissances des précautions standard des étudiants à leur entrée en formation puis à l'issue des enseignements d'hygiène. Les objectifs secondaires étaient de mesurer la progression au test de connaissances, de mesurer les facteurs prédictifs de réussite et rechercher l'efficacité des différentes techniques pédagogiques.

Matériel et méthodes: Une étude quantitative par questionnaires auto-administrés en ligne sous LimeSurvey s'est déroulée entre le 1er septembre 2022 et le 7 mars 2023 auprès des Instituts de formation en soins infirmiers français. Trois auto-questionnaires ont été administrés : le premier auprès des formateurs en hygiène sur leurs modalités d'enseignements et les deux suivants auprès des étudiants en soins infirmiers sur leurs connaissances et caractéristiques sociodémographiques avec un questionnaire « Avant » et un « Après » la formation en hygiène. La progression au test de connaissances « Avant » / « Après » a été mesurée sur une cohorte restreinte. Des analyses uni et bivariées ont été effectuées, les analyses statistiques ont été réalisées sous RStudio version R 4.2.2.

Résultats: Les formateurs de 59 instituts de formation ont participé à l'étude. Pour l'enquête d'évaluation des connaissances « Avant » la formation, 3 739 étudiants en soins infirmiers ont participé et ti 378 pour l'enquête « Après ». En début de formation, le score au test de connaissances était de 35,67 sur 50 (ds=3,76) soit un niveau de connaissances modérées. Après la formation en hygiène, le score au test de connaissances était de 37,55 sur 50 (ds=3,48) soit un niveau de bonnes connaissances. Les étudiants ayant obtenu un diplôme d'aide-soignant ont obtenu des résultats significativement meilleurs que les autres étudiants à l'entrée en formation mais aussi au test de connaissances « Après » la formation en hygiène. Au sein de la cohorte restreinte le score a progressé de +2,1 points sur 50. Seule la réalisation d'audit de pratique a permis d'améliorer les connaissances des étudiants après la formation (p=0,05).

Discussion: Les connaissances des étudiants en soins infirmiers en hygiène sont hétérogènes et modérées. À la fin du 1er semestre de formation, le niveau de connaissances en hygiène des étudiants a peu mais significativement progressé. Les techniques pédagogiques utilisées sont variées et combinées. Seule la réalisation d'audits a montré une efficacité.

Mots Clés: Formation en soins infirmiers; Précautions standard; Hygiène des mains; Enseignement

Cross-cultural adaptation of a validated scale for the evaluation of nursing competences in Europe

Authors: Mariana Alina Renghea; Mercedes Gómez del Pulgar; Sonsoles Hernández; Ana Perez Martin Almudena Crespo Cañizares

Introduction: The European Directive includes the competencies that nurses must demonstrate in this context. Demonstrating them requires validated instruments. There is a scale for evaluating nursing competences, validated in 2011, which responds to the competences of Order CIN 2134/2008, and which is being used in more than 30 institutions to evaluate the practices of undergraduate students since 2014.

Aim: Transculturally adapt the nursing competency evaluation scale to the European context.

Material and methods: Study with a mixed approach, based on expert consensus and application of validation indices. Scope: Nursing training Schools in the United Kingdom, Romania, and Portugal

The scale was translated into each of the languages, also a form was prepared, requesting opinions on clarity, relevance and appropriateness, using a Likert scale. Groups of experts duly selected from each country were formed and a two-round Delphi panel were carried out.

Internal and external validation coefficients, absolute and relative frequencies, and means were applied to the responses. Study started in October 2022 and expected to conclude in June 2024.

Results: Internal validation of the instrument is available in the three countries. We were able to achieve consensus on the proposed scale. The study is in the phase of applying the evaluation to Nursing Students and Professionals in Romania. The study continues in the UK and Portugal.

We are expecting to have complete results on the cross-cultural adaptation of the instrument in June 2024 and thereby contribute to unifying criteria and standards that facilitate the evaluation and mobility of students and professionals in Europe.

Key Words

Nursing Evaluation Research; Educational Evaluation: Competency-Based Education, Transcultural Nursing, Program Evaluation and Research Instruments.

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Patient safety as the axis of evaluation in an OSCE of nursing students

Author: Laura Brichs Masnou

Introduction: in the nursing degree, active methodologies should be used to promote the acquisition of skills necessary for the development of clinical practice. The fundamental pillar of competency development must revolve around patient safety and in this way promote a culture of safety in the student himself to lay the foundations for his future practice. In order to evaluate the acquisition of skills, the Objective Structured Clinical Evaluation (OSCE) is considered the gold standard but requires valid and reliable rubrics. Including in these rubrics criteria related to patient safety helps both the student and the teacher to consider backbone safety. In this way, both the teaching given and the evaluation carried out will make the learning process more coherent.

Objectives: Share the evaluation experiences about the inclusion of clinical safety items that a student must achieve in an Objective and Structured Clinical Evaluation (OSCE) in nursing students from 1st year Bachelor Degree.

Methods: The process included several steps. 1) a categorization for the safety items was defined. It consisted in 3 levels: conditioning items, critical items and mild items according to their relevance and impact in patient safety and related to the learning outcomes of the students. 2) A nominal group was carried out to define the initial rubrics and establish the evaluation criteria related to patient safety of the 7 existing rubrics using the established categorization. The group was carried out with nursing members from different safety committees from different hospitals.

Results: The classification of three levels of items related to patient safety was defined. Conditioning items (n=9), which establish conditions that the student had to meet to pass the exam because they were considered essential as a learning outcome, for example: hand washing, patient identification, medication calculation, correct route of administration, correct drug and checking allergies. Critical items (n=20), were those that affected the morbidity and/or mortality of the patient. The student must exceed 70% of them. And mild safety items (n=32) related to an impact on the patient (they were not considered to directly affect morbidity and/or mortality) and had been established as a learning outcome, where the student must exceed 65%.

Conclusions: Having patient safety as the axis in the OSCE evaluation allows us to guide student learning towards safety and train future professionals sensitive to a culture that is so necessary in the professional future.

Keywords: Patient safety, OSCE, competencies, evaluation, rubrics.

Relational ethics in nursing education

Authors: Dr Adrienne Grech, Ms Gabriella Muscat, Dr Maria Cassar

Ethical decisions and actions are an inherent part of the everyday practice of nursing. Ethics in nursing is intertwined with the understanding of interpersonal relationships among healthcare professionals, patients and their families. Consequently, it is vital that nurse educators prepare students towards establishing relations that lead to ethical action. Ethical decisions often encountered by nursing students relate to human/patient rights and patient safety. These decisions are often challenged by student concerns related to applying ethical values, the autonomy to provide ethical care and whistleblowing (Albert et al., 2020).

This paper will explore the decisions relating to patient rights and patients safety by referring to the main elements of relational ethics which are engagement, mutual respect, embodiment, and interdependent environments (Bergum and Dosser, 2005). The meaning of these elements are described, and their value in nursing care

delivery is discussed in consideration with the dilemmas experienced by nursing students. In view of distinguishing the importance of drawing upon relational ethics in nurse education as a critical foundation for ethical action, the authors argue the value of relational ethics against a backdrop of the following contention; a lack of ethics preparation amongst students (i) may hamper nurses' potential to work within a health care team (ii) may jeopardise the ability of nurses to let their speak up when ethical issues are experienced, and (iii) that relational ethics holds a framework which may address gaps in ethics education in nursing programmes and direct initiatives for education of future generations of nurses.

Innovative approaches and methods for ethics pedagogy are proposed in the context of contemporary multicultural nature of most health care systems, their users and their workforce, across the globe.

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Keywords: Relational Ethics, Ethics pedagogy, Nursing students, Nursing programmes

Teaching evidence based practice to nurses students in master, a longitudinal quasi experimental study

Authors: Audrey Chays-Amania, Jocelyn Schwingrouber, Sébastien Colson

Aim: To investigate students' beliefs about EBP over a 6-month period, before and after completing the training

Method: A 6-month longitudinal quasi-experimental study without a control group EBP-Beliefs for students' tool was used after translation and cultural adaptation, from ARCC-E© Model (Fineout-Overholht, E. & Melnyk, B., 2017)

Results: Response rate 100% pre-test, 88% post-test, 75% 6-month test The test score rose from 48 in the pre-test, which means that there is no belief in EBP, to 76 in the immediate post-test and 74 in the 6-month post-test. The training strategy therefore achieved good results that were maintained over time. However, it would be necessary to obtain a score above 80 to affirm that EBP beliefs are strong.

Discussion: This type of result should enable other universities to offer EBP teaching at Masters level to nursing students. However, it is imperative that undergraduate nursing students are also trained. It's perfectly possible to start developing an EBP culture and practice within the first week of training

Use of VR serios game to develop emotional competence amongst nursing students; a preliminary study

Author: Daren Chircop, Roderick Bugeja, Georgios N. Yannakakis, Marvin Zammit, Maria Cassar, Lisa Gomes

In this paper, the authors present an account of the application and utilisation of a VR Serious Game in nursing education. A brief account of the design and production process of the Serious Game is presented. This educational initiative was part of an ERASMUS+ project, SG4NS, which was led by the University of Minho, Portugal and which involved collaboration with five other university partners from Malta, Italy, Portugal, Spain, and Romania. The context of the use of the VR serious Game is explained and the evaluation exercise related to the Serious Game which ensued in the specific context of the University of Malta is reported. The use of the referred Serious Game was one of the main modes of teaching and learning in a workshop which focused on the development of Emotional Competence amongst nursing students. The findings arising from the analysis of the data collected in the evaluation exercise which was carried out in Malta are shared and discussed. The findings revealed three main themes. In the first theme, the participants describe why they participated in the workshop. In the second, the participants highlight the positive aspects associated with the workshop. Finally, in the third theme, the participants provide recommendations for future workshops on emotional competence. Recommendations for future research, innovation, and practice are shared.

Keywords: Emotional Competence, Nursing education, Serious Games, Virtual Reality, Nursing Students

L'analyse de pratique professionnelle ou l'émergence de la pensée critique

Author: Céline Delerive

En France la formation infirmière se déroule sur le modèle de l'alternance intégrative. Très tôt en stage, les étudiants en soins infirmiers sont confrontés à des situations de soins qui les interpellent. Le choix de l'IFSI de Sarrebourg s'est porté sur des journées de retour à l'IFSI consacrées à l'analyse des pratiques professionnelles (APP) animées par un cadre de santé formateur en présence d'un professionnel du terrain. L'objectif de l'étude est de démontrer l'importance de la pensée critique dans l'acquisition des compétences infirmières notamment la compétence 8 intitulée : « Rechercher et traiter des données professionnelles et scientifiques ». Un des critères d'évaluation de cette compétence est la pertinence dans la qualité du questionnement professionnel. Une de nos missions principales est d'accompagner l'étudiant dans le développement de sa pensée critique, clé de voute du processus de professionnalisation. La méthode utilisée est qualitative, basée sur l'observation et le recueil de données lors de séances d'analyse des pratiques professionnelles sur 3 séances pour une même cohorte d'étudiants. Selon Ennis (1985) la pensée critique « est une pensée

raisonnable et réflexive orientée vers une décision quant à ce qu'il faut croire ou faire ». Les résultats de cette étude chercheront à identifier les apports significatifs de l'APP dans le processus de professionnalisation des étudiants. Actuellement, sur les trois années de formation, nous mesurons l'évolution du regard porté par les étudiants sur les situations de soins vécues. Ce cheminement permet d'envisager l'APP comme un élément clé contribuant à l'élaboration de leur posture professionnelle. Notre postulat est le suivant : la pensé critique opérationnelle contribue à la qualité des soins en permettant au professionnel de s'adapter et de prodiguer des soins personnalisés.

Mots Clés: compétences infirmières, démarche réflexive, pensée critique, processus de professionnalisation, situations de soins vécues, soins personnalisés

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Promoting social justice through nursing education: a study protocol to optimize equitable access to future healthcare

Authors: Parés, Gemma; Zabalegui, Adelaida.

Background: Social Justice is a paradigm that has been intensively developed in recent years within the realms of cooperation, NGOs, and human rights organizations. However, it can also become an opportunity for educational institutions, especially in higher education, and specifically in the Nursing degree program. The nursing degree program is characterized by its humanistic origins, directly related to the care of individuals. Nevertheless, it has traditionally been focused on the technical and professional training of students, ensuring specialization and access to the job market. In our study protocol, we are implementing an educational intervention grounded in Service-Learning, targeting a socially disadvantaged population – newly arrived Maghrebian women in Spain. This proposal guided by sustainability, aims to address present-day educational and social needs without compromising the ability of future generations to meet their own needs (United Nations Brundtland Commission, 1987). This participatory and reflective educational intervention leverages the capacity of Nursing Degree students to embrace the principles of Social Justice: the fair and equitable distribution of resources, recognition of others and their diversity, and active engagement in democratic processes (Fraser 2008; Murillo and Hernández, 2011).

Methods/Design: A mixed-method approach with a descriptive and interpretative purpose is directed towards third-year Nursing students at the Tecnocampus University (Catalonia, Spain) who are enrolled in the subject of Service-Learning. We will conduct a hermeneutic phenomenological design based on the philosophical and methodological contributions of Martin Heidegger with an experimental group of 25-30 students enrolled in the subject. This will be complemented by a quasi-experimental design, including pretests, posttests, and a follow-up assessment with a control group of 75-80 students not enrolled in the subject. The triangulation of these two methodologies will be used to confirm the obtained results.

Expected Outcomes: This study can provide relevant insights into the effectiveness of an educational intervention such as Service-Learning in changing students' attitudes towards Fraser's Social Justice model and its core pillars - critical awareness, recognition, and democratic participation.

Discussion: The results of this study protocol regarding Social Justice Education through the Service-Learning methodology can contribute to improving access to healthcare for socially disadvantaged population groups through justice and equity. Furthermore, this study can provide valuable tools for replication in different educational settings and in other countries.

Key words: Social Justice education, Service-Learning, Nursing students, socially disadvantaged population.

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Le rôle d'infirmier dans le dépistage des violences et la prise en charge des victims

Author: Maëlle Guyomard

L'Organisation Mondiale de la Santé a reconnu la violence comme problème de santé publique mondiale en 2002. Depuis cette date, les acteurs de santé s'organisent pour prévenir les violences et prendre en charge les victimes

cependant la formation des soignants sont encore à leur balbutiement sur ce sujet. Par conséquent aujourd'hui et en France, quel est le rôle des infirmiers dans le dépistage et la prise en charge des victimes ?

Le rôle des infirmiers évolue et le dépistage des victimes est devenu une de leur incontournable mission. De nombreux outils sont mis à la disposition des soignants comme les recommandations de la haute autorité de santé, les informations préoccupantes, les signalements et ou encore les formations dédiées. Une fois ces victimes dépistées, une prise en charge personnalisée est à définir et les infirmiers ont un rôle central et déjà reconnu dans la connaissance des besoins des victimes.

Une fois les infirmiers sensibilisés ou formés à cette problématique de santé publique, il sera possible de renforcer et diversifier dans cette discipline, par exemple en créant référents violences dans les services de soin peuvent être imaginé ou encore des infirmiers médico-légale en pratique avancée, mais c'est le sujet de mon autre intervention lors du FINE.

Mots Clés: Infirmier·e, Victimologie, Dépistage, Violences

Assessing the role of digital competencies in higher education's online learning environments: a systematic literature review

Author: Sabina Ličen and Mirko Prosen

Introduction: With the increasing integration of digital technologies into the higher education environment, the competences required for effective online teaching have moved to the forefront of educational discourse. Previous research has focussed primarily on the digital skills of students, overlooking the equally important role of teachers in shaping the online teaching experience. This gap in research is particularly concerning as teachers are central to the quality of learning in online environments.

Methods: In this study, a systematic literature review is conducted to investigate the role of teachers' digital competencies in online higher education. Databases such as EBSCO—Medline with full text, Science Direct and PubMed were searched using keywords such as "digital competences", "online education", "higher education", "e-learning" and "higher education teachers". The inclusion criteria were peer-reviewed articles published within the last ten years that addressed the digital competences of teachers in online education. Data from the selected articles were summarised to identify key competences, methods used and key findings to address the existing research gap.

Results: The initial search yielded 356 articles. After a rigorous assessment based on the inclusion criteria, 13 articles were selected for final analysis. The review revealed that key digital skills are essential for teachers in online higher education, such as digital communication, online pedagogical design and digital assessment skills. The methods used in the studies examined generally included surveys, interviews and content analyses. The results suggest that the effective integration of these competences positively influences the quality of online education. However, a need for standardised frameworks and further empirical studies was identified. This review serves to consolidate existing knowledge and identify areas for future research.

Discussion: The study emphasises the clear need for digital literacy among teachers to improve the quality of online higher education. While the 13 studies reviewed provide valuable insights into key competences such as digital communication, pedagogical online design and digital assessment skills, the limited number of articles and the diverse methodologies show that the field is still in its infancy. The lack of a standardised framework for digital competences in higher education points to an important area for future research. This review not only consolidates the current understanding, but also emphasises the need for more comprehensive, empirically grounded studies of online higher education.

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Favoriser l'excellence clinique: le dilemme de l'apprenant en soins infirmiers entre louvoyer et s'affirmer en stage

Author: Geoffroy Néel, Mme Sylvie Derrien, M. Tony Lavéant, Mme Élodie Le Fèvre, M. Cyrille Pélerin, M. Lucas Pichot

Contexte: La formation en soins infirmiers compte 2 100 heures d'enseignements, comme des cours magistraux, des travaux dirigés, des travaux pratiques, et 2 100 heures de formation clinique ou stages. Elle a une visée professionnalisante grâce à cette immersion sur le terrain (Coudray & Gay, 2009).

Les apprenants sont toujours très motivés à l'idée de prendre en soin des personnes et d'apprendre à réaliser des actes/activités. Toutefois, lors des temps de vécus de stage et d'analyse de la pratique professionnelle proposés à l'institut de formation, les étudiants expriment régulièrement le besoin de verbaliser certains ressentis en lien avec les pratiques d'accompagnement (Paul, 2012).

Ils sont sans cesse tiraillés entre le rôle d'agent ou d'acteur (Bourdieu, 1980), tributaire de la nature de l'accompagnement et de l'autorité pédagogiques.

Rappelons que les étudiants, en processus

d'apprentissage, peuvent être en situation de vulnérabilité conjoncturelle (Morenon, 2017), notamment par leur statut d'apprenant (FNESI, 2022).

Cinq apprenants novices (Benner, 1976) (Morel, 2012) en soins infirmiers de l'institut de formation des professionnels de santé de Lannion proposent une réflexion congruente et engagée autour d'un poster scientifique. Il a été élaboré à partir de leurs premières expériences professionnelles et en lien avec une enquête menée auprès de leurs collègues de promotions. En effet, la plupart expriment leurs difficultés à dire parfois « non » aux sollicitations des équipes pour la réalisation de certaines activités de soin qu'ils évaluent comme non adaptées pour eux en termes de compétences (Le boterf, 2004), d'éthique, ou de législation. Ils sont bien en capacité de se questionner sur le sens des actions qui leur sont confiées par les professionnels de santé, mais le pas à franchir pour s'affirmer avec assertivité peut être anxiogène. Une estime de soi (André, 2005) et une confiance en soi équilibrées (André, 2005) peuvent être des atouts pour étayer sa posture professionnelle (Portal, 2012).

L'objectif pédagogique visé pour le public (Bloom, 1979): - Comprendre les ressentis et les difficultés des apprenants en stage à se positionner vis-à-vis d'une consigne et/ou d'un propos, en y associant du sens.

La méthode pédagogique mobilisée par le groupe: socioconstructivisme.

Discussion: Les auteurs pourront être sollicités par email pour échanger sur leur poster.

Mots clés: Apprenant en soins infirmiers – Compétences - Estime de soi – Posture professionnelle – Stages

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Favoriser l'excellence clinique chez les apprenants: utilisation des thérapeutiques avec Harry Potter

Auteur principal: M. Geoffroy Néel, cadre de santé infirmier, formateur (I.F.P.S. Lannion)

Auteurs contributeurs: M. Julien Borrelly, Mme Marine Henry, Mme Florence Hervé, M. Thibaut Lavéant, Mme Solen Morellec, Mme Hélène Ng Kon Tia, Mme Estelle Olivry (étudiants en soins infirmiers I.F.P.S. Lannion)

Contexte: Le cadre de santé formateur en institut de formation en soins infirmiers accompagne (Paul, 2012) les apprenants dans leur acquisition de savoirs en thérapeutiques. Cependant, l'utilisation des termes « calculs de doses » et de « pharmacologie » peuvent être des freins à l'apprentissage dès le début des enseignements (Viau, 2002), majorés par des expériences parfois laborieuses avec les mathématiques. L'estime de soi (Doré, 2017) concernant leur capacité à réussir, peut en être impactée. Il semblait opportun de concevoir un travail dirigé (T.D) ludique, dans un intervalle d'apprenance (Durat, 2022), pour réconcilier les apprenants avec cette unité d'enseignement et ainsi renforcer leur raisonnement clinique (Psiuk, 2013). Mon intention pédagogique était de faire écho au principe d'éducabilité (Meirieu, s.d.): Le vrai pari éducatif c'est celui de l'éducabilité associé à celui de la non-réciprocité : tout faire pour que l'autre réussisse, s'obstiner à inventer tous les moyens possibles pour qu'il apprenne mais en sachant que c'est lui qui apprend et que, tout en exigeant le meilleur, je dois me préparer à accepter le pire… et surtout à continuer à exiger le meilleur après avoir accepté le pire! Elle était également en lien avec l'éthique (Chalmel, 2010, p. 146): La pédagogie est donc une réflexion sur mon action éducative en vue de l'améliorer, une dialectique théorie-pratique dans laquelle je travaille les résistances de mes élèves et les miennes propres.

La consigne de travail énoncée était brève afin de ménager le suspense:

- Possibilité de se déguiser pour les apprenants/formateurs dans le thème,

- Se répartir en groupe restreint sous une bannière, par exemple Serpentard,

- 45 minutes pour réaliser le T.D., puis 45 min de restitution en promotion,

- Se confiner dans une pièce obscure, et utiliser uniquement une lampe frontale pour s'éclairer,

- Calculatrice proscrite.

Le T.D. comportait 33 questions, dont des questions à réponses ouvertes et courtes telles que la prise en soin d'un dragon covidé, des calculs de potions et leurs répartitions lunaires/solaires destinées à des patients « Moldus ».

Les objectifs pédagogiques (Bloom, 1979) :

- Démontrer ses savoirs (compréhension),

- Exprimer ses savoirs à ses collègues (compréhension),

- Restructurer ses savoirs (application),

- Évaluer ses savoirs (évaluation).

La méthode pédagogique mobilisée : le socioconstructivisme.

Discussion: Le retour des apprenants fût très positif : révisions ludiques, esprit d'équipe présent. Concernant les résultats à l'évaluation théorique : 47 apprenants sur 61 ont validé.

Mots clés: Convivialité - Éducabilité – Pratique pédagogique innovante – Raisonnement clinique – Thérapeutiques

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Sustainable development in nursing curricula

Author: Oona Nissinen

The purpose of this thesis was to find out what research has been done on sustainability in curricula of nursing education. Little research has been done on curricula and their content may vary between schools and countries. The study examined how the different aspects and goals of sustainable development are reflected in curricula. The aim of the thesis was to identify what has been studied in the past and, at the same time, to highlight areas for further research.

The method used in this thesis was narrative literature review. For the review, information searches were conducted in the key databases: CINAHL, PudMed, Medic and Eric. A total of 1 040 search results were obtained from the databases. A total of 43 articles were selected for full text review, of which 9 were selected for the final review.

The results of the review showed that there is heterogeneity in the content of curricula. The socio-cultural aspects of sustainable development were the most studied (cultural competence, global health, social determinants of health, sexuality and sexual minorities, and norm-critical aspects of key documents guiding nursing education).

In one school, sustainability module has been developed, evaluated, and integrated into the curriculum. The results show that some of the countries did not have teaching of ecological sustainability in their curricula at all. There where sustainability was taught, students found it relevant and evaluated it high. Perceptions and attitudes of nursing educators towards the integration of sustainability issues in the curriculum need further development. 81% of respondents in one study did not include the health impacts of climate change in their teaching.

The integration of sustainability into curricula is essential for the competence of future nurses. Among the aspects of sustainable development, economic aspects have not been studied in curricula. In future curricula, more attention should be paid to sexuality education and LGBTQ topics. The official documents that guide nursing education follow a certain norm, which is not socially equal. The impact of the environment on health should be better considered in future teaching. Sustainability should be made more central and integrated more into the nursing curriculum. The core competences and directives guiding nursing curricula have aimed to make education more coherent and of higher quality everywhere. However, established practices are still needed to link nursing education internationally, particularly in the areas of sustainability.

Models of clinical reasoning across European countries

Authors: Ana Pérez-Perdomo

Introduction: Clinical reasoning is the ongoing process in which a nurse/midwife quickly and accurately assesses a care situation by collecting cues, making the right observations, processing the information and coming to an understanding of a person's problem, planning and implementing interventions, taking the right actions with the right goal in mind, evaluating outcomes and reflecting on and learning from this process. The University of Ljubljana, the Polytechnic Institute of Setubal, the University of Warsaw, the Atlas College of Genk, the UC Leuven- Limbourg, and Fundació Clínic per a la Recerca Biomedica collaborated in a European project Erasmus+ named "Clinical reasoning in nursing/midwifery education and clinical practice" to build interconnection, innovation, inclusion and digital competence in clinical reasoning in nursing and midwives' students. Provide an operational framework, will explain what registered nursing/midwifes students and registered nurses/midwifes understanding is, of clinical reasoning across various EU countries, and what is necessary to realize higher levels of integrated clinical reasoning.

The aim of this study is to identify the different clinical reasoning models used with nursing/midwifery students across various EU countries.

Methodology: It is a descriptive study that identifies and describes the various teaching models for nursing/midwife students across EU countries. To conduct this study, researchers administered an ad hoc questionnaire to representatives from each group, for the purpose of gathering pertinent information pertaining to subjects, methodologies, and educational strategies.

Results: Out of the six institutions, only three had an established clinical reasoning model widely recognized; the other three institutions used clinical reasoning processes not based on models. The Levett-Jones (2010) model used in the UC Leuven-Limbourg (Belgium) has eight stages, beginning with the students considering the patient´s situation and finishing with the stage reflecting on the strategies. The IREUPIC model from Webber (Johnson & Webber, 2010) used in the Polytechnic Institute of Setubal (Portugal) has seven stages, beginning with identifying variables, and the last step is to control them. Finally, the six steps of proactive nursing of Bakker (Bakker and van Heycop, 2014) used in the Atlas College of Genk (Belgium) have six stages, from an orientation to the situation of the patient to a post-review of the situation of the patient.

Conclusions: There are different models to teach clinical reasoning. University colleges in Europe are involved in the education of nurses/midwifes who are being adequately prepared to work in complex situations using clinical reasoning.

Key words: Clinical reasoning, nursing and midwives' students, clinical reasoning models.

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Mentoring in generation Z nursing students: a needs assessment

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Since the covid-19 pandemic, Nursing is in the focus of social attention due to the visibility of the responsibility and impact linked to professional practice (Buchan et al., 2022), and also due to the deficit of professionals to respond to the needs of society (OECD, 2021). Recent European projects and publications have anticipated a very worrying situation in the coming years if a strategic response to the current scenario is not designed. Likewise, key organizations around the world are also voicing more nursing presence in decision-making forums to sustain and make an impactful contribution to the current societal challenges (Galbany et al., 2022; Bakker et al., 2018; ICN, 2021). Future leaders are initially raised through the nursing degree, but also during the first years after graduation. One of the keys to adequately integrate and manage the different challenges underlying academic and clinical learning, enhance the retention of professionals and develop leadership capabilities is the existence of effective mentoring (Hafsteinsdottir et al., 2017 ; Mikkonen et al., 2022). At an international level, mentoring strategies and programs have been developed and proven their effectiveness both during internships and in the transition to the professional world (Rush et al., 2019; Bodys-Cupak et al., 2022). However, these programs are scarce and some contexts lack of the culture of mentoring with no standardized mentoring models to respond to the needs of students or new professionals (Kenny et al. al., 2021), especially considering the profile of current students and new professionals who mostly belong to generation Z, which is distinguished by being digital natives that prefer teaching methods linking mentorship learning to clinical experiences, online tutorials or videos, interactive gaming, and virtual learning environments

(Vizcaya-Moreno et al., 2020).

Consequently, our research seeks to describe and analyze, from the perspective of nursing students, the mentoring needs in relation to the dimensions of academic and clinical learning. We also intend to analyze whether the identified needs are present throughout the four years of the degree or only at specific moments of the learning process.

As part of a larger study, a descriptive qualitative study was conducted involving Generation Z nursing students of different academic years. The results of an online consultation have been transcribed, and recurrent themes are being identified and formulated (Braun & Clarke, 2006). Investigator triangulation is being used during the analysis.

The Conference will serve as a platform to present our results that will be further developed to construct a mentoring plan from the students' perspective and thus improve the nursing degree's curricular itinerary, the profile as graduates and facilitate their transition to the professional world and their capacity to respond and sustain current and future challenges.

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It's looking good! A survey of European nurse educators' competence

Authors: Leena Salminen, Maria Cassar, Michelle Camilleri, Laia Wennberg Capellades, Leandra Martin Delgado, Imane Elonen, Elaine Haycock-Stuart, Susanne Kean, Pilar Fuster Linares, Juha Pajari, Ľuboslava Pavelová, Terhi Saaranen, Andrea Solgajová, Tomáš Sollár, Anneli Vauhkonen, Dana Zrubcová.

Background: Nurse educator competence is multidimensional and has been seen as a vital and substantial element in ensuring the quality of nurse education. The World Health Organization (2016) and others have described and defined educators' required competence areas. Whilst there are variations in definitions, the consensus is that an educator needs to administrate the evidence-based content of nursing care using appropriate pedagogic and teaching methods, including through digital methods. This study was conducted as a part of an Erasmus+ funded project "A new Agenda for nurse educator education in Europe" (https://new-nurse- educator.utu.fi/)

Aim: The aim was to describe and analyse the nurse educators' self-evaluated competence in Europe.

Methods: The data were collected with two validated instruments, 1) Evaluation of the Requirements of Nurse Teachers, ERNT (20 items, scale 1-5, Salminen et al. 2013) and 2) Health and Social Care educator's competence, HeSoEduCo (43 items, scale 1-4, Mikkonen et al. 2020) from educators themselves (n=329) in four European countries (Finland, Malta, Slovakia and Spain) in May/2021-2/2022

using an electronic questionnaire. As background factors age, the highest education and working experience in nurse education were asked. The data were analysed with statistical analysis.

Results: The mean age of educators was 48 years. Half of the educators had a Doctoral level education and half had a Master's level education. Educators had about 13 years of working experience as an educator. The overall competence of the educators was good, measuring with both instruments, but there were variations between individual educators and countries. The total ERNT was 4.5 and the total HeSoEduCo was 3.4. The more experienced educators evaluated their competence higher than those having less experience. Competence on evidence-based practice and the relationships with students were evaluated the highest and pedagogical, education technology and cultural competence was evaluated the lowest though they were also at the quite good level of the competence.

Conclusion: The overall nurse educator competence is clearly at a good level in the selected European countries. Still, there is a need to maintain and promote educators' competence with relevant continuing education focusing on pedagogical issues and strengthening the cultural competence.

Keywords: Nurse educator, competence, self-evaluation

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Les hommes ne devraient pas entre infirmiers.../Men should not be nurses

Author :Morton Sean

This poster explores the multifaceted issue surrounding the underrepresentation of men in the nursing and why they should not be nurses, examining the factors contributing to this disparity. Despite an increasing global demand for healthcare professionals, nursing remains a predominantly female-dominated field. This poster explores the implications of numerical imbalances, media representations, and societal perceptions that contribute to the reluctance of men to pursue nursing careers. Firstly, scrutinizing statistical data on the gender distribution within nursing, highlighting the persistently low percentage of male nurses. Understanding these numerical imbalances is crucial in identifying the systemic challenges that hinder men from entering and thriving in the profession. Examining historical and contemporary data allows for a comprehensive analysis of trends and potential areas for intervention. It explores why other typically gender biased healthcare professions have shifted this narrative. Secondly, the poster investigates media representations of nursing and its impact on shaping societal perceptions. Media often reinforces traditional gender roles, portraying nursing as a female-centric profession. This stereotyping not only discourages men from pursuing nursing careers but also perpetuates gender biases within the healthcare industry. A critical analysis of media portrayals aims to shed light on the need for more accurate and inclusive representations of nurses in popular culture. Finally, the paper explores the societal perceptions of nursing as a profession primarily suited for women. Stereotypes and gender biases contribute to discourage men pursuing nursing, perpetuating the notion that caregiving roles are inherently feminine. In conclusion, this abstract emphasizes the need for a paradigm shift in perceptions of nursing, addressing both numerical imbalances and media representations to encourage more men to pursue and succeed in nursing careers. By fostering inclusivity and challenging traditional gender norms, the nursing profession can benefit from a diverse and well-rounded workforce that reflects the evolving nature of healthcare and that author doe not, in fact believe that men should not be nurses.

What would make the nursing profession attractive to young people in Europe

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Background: The results of an RN4CAST give us important micro- and meso-level insights into working conditions, norms, health care team relationships, and career opportunities in direct care. The results highlight the importance of the number of patients per nurse and the importance of nurses' level of education at the bedside. Both had a significant impact on monitoring patient outcomes. Nurses' work environment had significant effects on job satisfaction, professional development, and staff retention (1-5).

Question: Why do European countries need to change their understanding of nursing education and development? We answer the question with a simplified application of the discourse technique, which helps to maintain or change social status by transforming power and attitudes (6).

Discourse: Implementing the 4600-hour curriculum required by the EU Directive is extremely difficult in three-year undergraduate nursing programs. Nursing students are among the most stresses student groups, which also

affects their choice of study and thus career. Politicians and employers are not interested in extending nursing education to four years, and countries will only take this step if the requirement is enshrined in the Directive. The fact is that European countries do not adequately support the development of bachelor's, master's, and PhD education in nursing and do not offer jobs for Advanced Nurse Practitioner (ANP), Clinical Nurse Specialist (CNS), or minimal Specialised Nurse (SN) after bachelor's education. The numerous systematic reviews that have evaluated the clinical effectiveness and quality of care provided by nurses in advanced roles compared with general practitioners/ physician consistently show that task shifting results leads in equivalent or better quality of care (1, 7). According to the study by Maier et al (7) most Central and Eastern Europe countries belong to the group of countries with the least developed advanced practical skills of nurses.

Conclusion: The introduction of new roles for nurses with master's degrees, redistribution of existing roles,

improvement of nurses' education to implement patient-centred health care, effective health care coordination, implementation of evidence-based health care, and quality assurance are also needed. A four-year bachelor's degree, ANP and CNS with clear competencies for independent professional practise must be added to the directive. This will make nursing an attractive choice of study and career. The declining interest in nursing education and the often stereotypical and condescending view of the role and work of nurses on the health care team should be a red flag to all who work on health care reform.

Key words: education, bachelor, master, advanced competences, nurses

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Empowering the nurse educators in the changing world: the students' perspectives

Authors: Andrea Solgajová, Dana Zrubcova , Ľuboslava Pavelová , Imane Elonen ; Anneli Vauhkonen ; Michelle Camilleri ; Leandra Martín-Delgado ; Elaine Haycock-Stuart ; Heli Virtanen ; Leena Salminen

Background: Nurse educator education varies in European countries and not every country can meet the needs for continuous nurse educator education.

Aim: To introduce and evaluate the education programme Empowering the Nurse Educators in the Changing World (ENEW) – from the perspective of the programme participants.

Methods: The ENEW education programme is divided into five different study units of 5-10 ECTS. Study units are 1) Digi pedagogy and social media in nurse education; 2) Global health issues; 3) Future nurse education; 4) Ethics in nurse educators' work; and 5) Evidence-based teaching in nurse education. A variety of teaching environments and approaches are analysed including distance learning (webinars, online units, and social media). The experiences of three nurse educators as students in this programme will be presented.

Results: The results show students' opinions on each study unit of the education programme and opinions on the applicability of the education programme in nurse educator education in the European countries. Analysis revealed the elements of the programme the students evaluated most and the content and learning strategies they valued for developing as a nurse educator.

Conclusions: Future nurse education is challenged to develop effective programmes, such as the ENEW programme, that reflect current changes in health care.
Keywords: nurse educator; education; student; future

Evaluating an international nurse educator education programme using community of inquiry model – a cross-sectional study

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Background: Continuous education is important for the development of nurse educator's competence. There are various opportunities and sources of education that should be highquality, easily accessible, and independent in time and place. Currently, one of the most effective opportunities seems to be online education for nurse educators. The theoretical concept recommended for its guidance is Community of Inquiry (COI).

Aim: The objective is to evaluate the Empowering the Nurse Educators in the Changing World (ENEW) education programme from the COI perspective.

Methods: Community of Inquiry Peer Review tool (Shelton & Hayne, 2017) was used to evaluate the frequency of COI elements in online and hybrid study units of the ENEW education programme. All students who participated in the education programme (n = 42) were invited to the study through the digital learning environment. A total of 16 (38 %) students participated in the survey. Descriptive and inferential statistics were used.

Results: Most of the students agreed or strongly agreed that the pedagogical, social, and cognitive presence was updated during the education programme. Teaching experience positively correlated with all the COI elements, while age and clinical experience did not. Affective expression correlated negatively with clinical experience. Teaching experience had stronger correlation with teaching presence.

Conclusions: From the COI perspective, the ENEW hybrid education programme meets the fundamental requirements of high-quality education. Professional development of nurse educators' competences is essential and online or hybrid education is necessary. Keywords: nurse educator; continuous education; community of inquiry

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Étude de l'évolution de l'état de santé des étudiants en première année de licence en sciences infirmières: une étude quantitative

Author: Cathy Thiel

Contexte : La santé des étudiants en santé et en particulier des étudiants en sciences infirmières est un sujet de préoccupation international et national.

Objectif : L'objectif de cette étude était d'évaluer l'état de santé globale perçu au début (T0) et à la fin (T1) de la première année de formation dans quatre instituts de formation en soins infirmiers français, publics en Lorraine (France).

Méthodes : Cette étude descriptive a été conduite par un questionnaire anonyme, autoadministré, en version numérique auprès de 585 étudiants infirmiers. Résultats : Parmi la population générale, 294 étudiants ont répondu à T0 (Population A), 168 à T1 (Population B) et 108 aux deux temps de l'étude (Population C). À T0, 94% des étudiants de la population A ont déclaré une bonne voire excellente santé, 98% de ceux de la population C à T0 versus 88% à T1. Il est noté une dégradation significative entre T0 et T1. Cependant, il n'y a pas de différence significative du niveau d'anxiété entre T0 etT1. Un sommeil non-réparateur est perçu par 57% des étudiants de la population A ; ce pourcentage augmente à 66% pour ceux de la population B. Les difficultés d'endormissement augmentent significativement entre T0 et T1. Les données staturo-pondérales, la pratique d'un sport et les habitudes alimentaires étaient stables.

Conclusions : L'état de santé globale perçu s'est modérément détérioré durant la première année d'études d'infirmier, particulièrement la perception d'un sommeil non-réparateur. Cependant, leurs comportements de santé sont plutôt sains et stables. Ces résultats pondèrent les représentations sociales négatives concernant la santé des étudiants en particulier celle des étudiants en sciences infirmières. Les résultats de cette étude devraient attirer l'attention des enseignants, des étudiants et des encadrants en stage. La conservation de leur état de santé et la promotion d'une hygiène du sommeil semblent être des axes d'amélioration pour une qualité de vie des futurs soignants de demain.

Mots clés : étudiants infirmiers, état de santé, comportements de santé, étude quantitative

Nurses' competence and realization of empowering discourse in patient education

Authors: Heli Virtanen, Essi Hörkkö, , Anna Kostylev, Maria Riuttaskorpi Silja-Elisa Eskolin.

Background: Empowering patient education is an essential area of nurses' professional competence. Empowering Discourse (ED) is a complex face-to-face patient education intervention, which needs specific competence of the nurses. Therefore, it should be taught and learned already in nursing education as well as in nurses continuing education.

Aim: The aim of this study was to evaluate nurses' competence and realization of ED in patient education and the association between them.

Methods: A cluster randomized trial with data collection of structured questionnaires and observation of patient education was used. The data were collected from seven surgical wards of one university hospital in Finland. Sample consisted of 58 nurses, 107 patients and 107 patient education sessions from day-surgery (4) and inpatient (3) wards. The wards were divided randomly to intervention or control groups. In the intervention group a computer simulation program of Empowering Discourse was used as a continuing educational intervention. Data collection methods were: The Competence in Empowering Discourse (CED) -questionnaire with 84 items divided in two areas: knowledge and skills in the method and content of ED (VAS scale 1-10), the questionnaire to patients (44 items) on evaluation of method and content of ED and observation form (48 items) on realization of method and content of ED. Data were analyzed statistically. Analysis of the association is ongoing.

Results:

Nurses assessed their knowledge (method, mean 7.8, SD 0.9 and content, mean 7.0, SD 1.2) and skills (method, mean 7.5, SD 1.1 and content, mean 7.0, SD 1.2) moderate at baseline. There was no significant increase in the assessment at the second measurement point. In the beginning of the study, realization of patient education was quite low in both method (44 %) and content (33 %). There was an increase in realization of content at the second observation (37 %). Intervention group had significant increase in realization of skills of evaluation and ending the discourse and realization of content. After the second observation patients evaluated realization of the method of ED (mean 4.2, SD 0.8, scale 1-5) and their own knowledge (mean 8.5, quartile range 1.8, VAS scale 1–10) as good.

Conclusion: This study provided information on nurses' competence in empowering patient discourse from subjective and objective point of view. There were differences between nurses' self-assessments and observation showing development needs for clinical patient education but also for teaching and learning about empowering patient education

Web-conference – promising tool to learn patient education in nursing education

Authors: Leena Salminen; Teija Franck, Merja Nummelin, Nina Rantalaiho, Visa Virtanen, Heli Virtanen.

Background:

Patient education is one of the main competence areas in nursing care and need to learn during nursing education. Web-conference is a teaching and learning method for bringing the patient into the classroom. There is a real patient at the nurse's reception in hospital which is delivered via internet connection to students in the classroom.

Aim: The aim of this study was to evaluate the learning outcomes in patient education of nursing students when using web-conference and the usability of the web-conference as a learning method.

Methods: Longitudinal research design with survey data collection was used. The data was collected in three following study terms from second and third-year nursing students in Finland in the years 2021- 2022. The Competence in Empowering Discourse (CED) questionnaire and usability questionnaire were used. The CED consists of 84 items divided in two areas: knowledge and skills on the method and content of patient education. The scale was VAS scale 1-10. Usability questionnaire consisted of 13 structured questions on pedagogical usability and learning in web-conference (5-point Likert scale) and four open-ended questions on students' experiences of web-conference teaching. At the first measuring point 48 nursing students answered the questionnaire, and the second point 51 and the third point 26 students. No background factors were asked. The data was analysed statistically and with content analysis.

Results: The knowledge and skills of patient education of nursing students increased during the webconference in their education. At the beginning students' knowledge was moderate (mean 5.71, SD 1.05) and after the third teaching situation it was improved little (mean 6.69, SD 0.79). The students' skills increased also (1. measuring point: mean 5.78, SD 0.85 - 3. measuring point: mean 6.76; SD 0.88). Pedagogical usability was evaluated to be rather high, but it decreased little during the education (mean 4.21, SD 0.83 – mean 4.14, SD 1.02). Web-conference was evaluated as supporting students' learning of patient education (mean 3.81, SD 0.84 - mean 3.80, SD 0.90) and there was no change during the education. The students experience of web-conference was motivating and it helped their learning because they can follow the real situations.

Conclusion: The web-conference as a teaching and learning method is promising in learning of patient education. This study showed evidence that web-conference provides good learning outcomes, but students also consider it to be a useful method of learning patient education.

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