



Joint Education and Training Library



Education Horizon- Scanning Bulletin – May 2019

Compiled by John Gale
JET Library – Mid-Cheshire
NHS Foundation Trust

Contents

General Healthcare Education	Error! Bookmark not defined.
Mentoring student researchers. Volunteers or voluntold?	Error! Bookmark not defined.
Motivation, cognitive strategies and academic performance	Error! Bookmark not defined.
What motivates training in public health?	Error! Bookmark not defined.
Medical Education	Error! Bookmark not defined.
Put down your notebooks, pick up your tablets.....	Error! Bookmark not defined.
What do GPs think about teaching medical students?	Error! Bookmark not defined.
Feedback and logs in the bush	Error! Bookmark not defined.
Do foreign students need international rescue?	Error! Bookmark not defined.
College of Radiologists call for doubling in numbers.....	Error! Bookmark not defined.
Branched decision making. The Tree of Life or barking up the wrong one? ...	Error! Bookmark not defined.
not defined.	
Tackling bullying of clinical students.....	Error! Bookmark not defined.
Nurse Education.....	Error! Bookmark not defined.
When self-handicapping holds you back	Error! Bookmark not defined.
Are students learning how to care?	Error! Bookmark not defined.
Training students to tackle obesity.....	Error! Bookmark not defined.
How do students use social media?.....	Error! Bookmark not defined.
When voting comes to the classroom	Error! Bookmark not defined.
Does simulation of palliation work?.....	Error! Bookmark not defined.
What do nursing students make of OSCEs?.....	Error! Bookmark not defined.
Crossing the lines in the Middle East	Error! Bookmark not defined.
What helps with the shock of the wards?	Error! Bookmark not defined.
What can we learn from escaping the room?	Error! Bookmark not defined.
The self-regulating student.....	Error! Bookmark not defined.
Simulation and psychological safety.....	Error! Bookmark not defined.
Physiotherapy Education	Error! Bookmark not defined.
Being there, or being great – is motivation the key?	Error! Bookmark not defined.
What do students make of motivational interviewing?	Error! Bookmark not defined.

Dentistry Education

Mouthwash and motivation

Source: Macedonian journal of medical sciences

In a nutshell: Proverbially genius is 1% inspiration and 99% perspiration; something which explains the huge number of brilliant first pages of novels yellowing in desk drawers up and down the country. In this study Sultan A. Almalki, from Prince Sattam Bin AbdulAziz University in Saudia Arabia, examined this issue in a sample of 187 undergraduate dental students. The researchers found a correlation between students' marks and their motivation. This included most of the components of motivation including self-efficacy for learning performance, control of learning beliefs and task value. Test anxiety showed a negative correlation with students' marks. Men from middle-class families and students living with their families showed a greater correlation between their marks and their motivation.

You can read the abstract of this article [here](#).

General Healthcare Education

When simulation comes to the lab

Source: Biochemistry and Molecular Biology Education

In a nutshell: For many of us labs conjure up images of Bunsen burners, high stools and chasing bits of mercury around the floor after accidentally-on-purpose dropping a thermometer to see what happens. Healthcare laboratories have more to them than that though and in this study Lisbeth Elvira de Vries, from University College Copenhagen and Michael May, from the University of Southern Denmark studied the effectiveness of a virtual laboratory simulation at teaching trainee laboratory technicians. 78 students took part in the study which used virtual lab cases in relation to a two-week course in gene technology. The study showed that virtual lab simulation helped the students connect theory with practice and visualise molecular processes as well as practical laboratory procedures and instrument techniques. The study also showed that the use of virtual lab simulation cases can contribute to increased study activity as well as motivation.

You can read the whole of this article [here](#).

Medical Education

Getting junior doctors to communicate better

Source: BMC Medical Education

In a nutshell: Learning how to communicate with patients is an important part of learning how to become a good doctor but several recent studies suggest that there has been a downward trend in junior doctors' communication skills. In this study J. Noordman, from Radboud University Medical Centre in Radboud in the Netherlands, led a team of researchers assessing the effectiveness of a training course for junior doctors which aimed to improve their communication skills and empathy. The course lasted three days and included the basics of patient-centred communication and empathy; practising with actors; and reflecting on video recordings of their own consultations with patients. Nine junior doctors from different specialties took part in the training, and they, and 137 patients took part in the study which found that the course increased the junior doctors' empathy scores (according to the patients) and significantly decreased the junior doctors' computer usage. However, the communication skills of the doctors did not improve and neither did their 'agenda setting.'

You can read the whole of this study [here](#).

What makes a good ward round?

Source: BMC Medical Education

In a nutshell: At markets farmers check how shiny animals' noses are, look at the brightness of their eyes and state of their teeth and take a decision about whether to sell, buy or send them off to the abattoir. Minus the abattoir ward rounds are the medical equivalent of this process with doctors touring the wards, assessing the health of patients and taking decisions about what to do with them. Some studies have shown that junior doctors' skills in carrying out a ward round can be deficient so in this article Elisa Vietz, from the Institut für Didaktik und Ausbildungsforschung in der Medizin in Munich, led a team of researchers attempting to find out what qualities junior doctors need to carry out a good ward round in surgery and psychiatry. The researchers interviewed 30 surgical and psychiatric ward staff. Relevant competencies for both fields were:

- Collaborative clinical reasoning
- Communication with the patient and the team
- Organisation
- Teamwork
- Management of difficult situations
- Self-management
- Error management
- Teaching

- Empathy
- Nonverbal communication
- Patient management
- Professionalism

Clinical skills were mentioned more often in interviews with surgical staff while non-verbal communication was mentioned more often in interviews with psychiatric staff who also stressed empathy and communication with the team more than surgical staff.

You can read the whole of this article [here](#).

Getting medical students to speak up and strike out

Source: BMC Medical Education

In a nutshell: Some people – like Tigger – like to go out and seize life by the scruff of the neck whereas others, like Eeyore, prefer to mope around and hope all the fuss and bother goes away eventually. The latter group of people don't always fare well in problem-based learning, being reluctant to discuss their work actively ('drone on about their assignment,' as us Eeyores would say) or engage in self-directed learning. In this study Ikuo Shimizu, from Shinshu University in Japan, led a team of researchers who looked into the effect of supplementing problem-based learning with additional e-learning to make what the researchers called 'blended,' PBL. The researchers found that blended PBL increased students' self-efficacy and motivation and also increased how much they learned. And the students who had experienced blended PBL also did more self-directed learning.

You can read the whole of this article [here](#).

Which makes students learn more, OSCEs or MCQs?

Source: BMC Medical Education

In a nutshell: OSCEs vs MCQs doesn't quite have the ring of Rangers vs Celtic, Lancashire vs Yorkshire or Roundheads vs Cavaliers but in this study Stefan Müller, from Universitätsklinikum Jena in Germany, led a team of researchers comparing what students used to prepare for them and how much they learned in order to prepare. 1,131 medical students from 32 German medical schools took part in the study which found that physical examination courses were the most important for students preparing for an OSCE, followed by class notes/logs and the skills lab. Other activities in clinical settings (e.g. medical clerkships) and collaborative strategies ranked next. However, resources for gathering knowledge (e.g. lectures or textbooks) were of minor

importance when students were studying for OSCEs. Studying time for OSCEs was lower than for MCQs but the average grade students were given for their OSCEs was higher.

You can read the whole of this article [here](#).

[Pulling pork into nerve block models](#)

Source: BMC Medical Education

In a nutshell: Most people's reactions on being presented with a piece of pork loin would be to Google some casserole recipes. Anaesthesia teachers are different though and in this study a team of researchers led by Leily Naraghi, from Maimonides Medical Center in Brooklyn, used a lean cut of pork loin, yarn soaked in ultrasound gel and drinking straws filled with gel to create models for students to practice ultrasound-guided regional anaesthesia on. The yarn represented peripheral nerves while the drinking straws stood in for vascular structures. Meat glue was applied between sections of the meat, partly to mimic fascial planes and partly to hold the whole thing together. The researchers concluded "we have developed inexpensive and easily reproducible models that create the realistic appearance of tissues, nerves and fascial planes under ultrasound. They can also accurately simulate hydrodissection of fluid in fascial planes." What the cleaners concluded is anyone's guess but meat glue is unlikely to feature on *Blue Peter* in the near future.

You can read the whole of this article [here](#).

[Sharp Scratch aims to unveil hidden curriculum](#)

Source: British Medical Journal

In a nutshell: 'Sharp scratch,' is what medics say shortly before they stick a needle into you, despite the fact that the ensuing sensation isn't really much like a scratch at all. Perhaps 'little prick,' was ruled out on the basis that it might be prone to misunderstanding. It's also the title of a new [podcast](#) for medical students from the *British Medical Journal*. The podcast aims to teach students what lectures don't and covers skills such as writing a discharge letter, ordering a test, and navigating patients' notes. Doctors already on the 'shop floor,' talk about how to cope with a night shift, a death, a mistake, a complaint or a bully. "Each episode is an opportunity to tackle our unanswered questions about daily life as a medical student or new doctor."

[Squalor and the trainee doctor](#)

Source: BMC Medical Education

In a nutshell: Hospitals have a difficult trick to pull off when it comes to infection control. Whilst they are full of people likely to be more germ-ridden than most, and with weaker immune systems, they also need to combat microbes. Adding to the complications is the fact that doctors and nurses routinely breach the protective layer of skin which keeps germs out of most people's bodies and insert foreign bodies into any number of orifices. In this article U. Jayarajah, from the University of Colombo, led a team of researchers attempting to assess medical students' knowledge, attitudes and practice *a propos* hygiene. 333 students took part in the study which found that, overall, hand hygiene was moderate but improved as students' training went on. Attire hygiene was also graded as moderate; it was worse in men and also got worse over time. Equipment hygiene was unsatisfactory among most medical students, suggesting it needed to be emphasised more during their training.

You can read the whole of this article [here](#).

Training GPs to tackle fat people

Source: BMC Medical Education

In a nutshell: 'No rest for the wicked,' is a hoary old chestnut; news to Philip Green as he puts his feet up on his yacht in Monte Carlo. Fat people on the other hand seem hardly able to leave the house without a long queue of Guardian readers waiting to tackle them on their lifestyle choices. GPs are among them and in this study Harland Holman, from Spectrum Health Family Medicine Department in Michigan, led a team of researchers investigating what trainee GPs are taught about obesity education. The researchers surveyed family medicine clerkship directors in the U.S. and Canada. The most frequent barrier to teaching obesity-related topics was time constraints (89%). The most commonly-taught topics were co-morbid conditions (82.1%), diet (76.9%), and exercise (76.9%). The least commonly-taught topics were addressed less than 30% of the time and included cultural aspects, obesity bias, medications that can cause weight gain, medications to treat obesity, and bariatric surgery. Over half (59%) of clerkship directors were not planning to change their existing curriculum but 39% planned to add to the current curriculum. The clerkship directors' perceptions of the importance of obesity education were significantly associated with the number of topics covered during clerkship. No relationship was found between clerkship duration and the number of obesity topics taught.

You can read the whole of this article [here](#).

Teaching students about hypoglycaemia

Source: BMC Medical Education

In a nutshell: Having diabetes is a bit like being Goldilocks. You have to keep your blood sugar not too high (hyperglycaemia), not too low (hypoglycaemia) but just right. In this study Elizabeth A. Beverly, from Ohio University, led a team of researchers looking into the effectiveness of a course designed to teach junior doctors how to manage hypoglycaemia. 217 students took part in the study which found that the course improved their overall knowledge of diabetes and their ability to recognise the severity of hypoglycaemia. The students also learned how to approach diabetes from the patients' perspective and valued the clinically-relevant and practical information provided during the training session.

You can read the whole of this article [here](#).

Feedback in the emergency department

Source: BMC Medical Education

In a nutshell: To learn things from their work junior doctors need to get feedback from their clinical teachers. This isn't always easy to come by, particularly when teachers can be faced with a choice of giving feedback to a trainee or rushing off to resuscitate someone. In this study Chung-Hsien Chaou, from Chang Gung Memorial Hospital in Taiwan, led a team of researchers studying emergency department consultants' and junior doctors' perceptions of feedback. The researchers found that the majority of feedback, which usually lasted between one and five minutes was initiated by the consultants. The consultants were significantly less satisfied with the feedback process than the junior doctors and positive feedback was provided infrequently in clinical settings. Both groups admitted hesitating between providing and seeking feedback and completing clinical work. Being busy, the teachers' clinical abilities, the learners' attitudes, and the relationship between both parties were reported as the most influential factors in feedback provision.

You can read the whole of this article [here](#).

Getting pharmacists in to teach doctors

Source: BMC Medical Education

In a nutshell: In modern times medicine has gone from doling out ineffective drugs which made little difference one way or another to dispensing very effective ones that can do a lot of damage if misused. Many of these mistakes are perpetrated by junior doctors and one idea to improve this is to get pharmacists in to teach medical students. The University of Liverpool organises 'Safe Prescribing,' teaching sessions during years three to five of the undergraduate medical curriculum. The programme

consistently receives positive feedback and leads to students feeling more comfortable and confident in a variety of prescribing scenarios. In this article Naomi Lloyd, herself from the University of Liverpool, talks more about the programme and the benefits it can confer.

You can read the whole of the article [here](#).

Nurse Education

Does my competence look big in this?

Source: Nurse Education Today

In a nutshell: Are you feeling enough inadequacy and self-loathing at the moment? If not, seeing yourself on video can always boost supplies of those particular feelings. For nursing students, video debriefing has become part and parcel of getting feedback after taking part in simulation exercises and in this study H. Zhang, from Linköping University in Sweden, led a team of researchers asking them what they felt about it. 27 nursing undergraduates from a university in Singapore took part in the study. Three themes emerged from the interviews with the students which were:

- Journey from traditional verbal debriefing to video-assisted debriefing
- Praise and criticism of video-assisted debriefing
- The road to successful video-assisted debriefing

The students thought that the video debriefings complemented verbal debriefings by offering objective evidence and “improved their attitudes and behaviours through the unique experience of an emotional roller coaster.” They concluded that “learners should be desensitised to the fear of video and their discriminating capabilities should be developed prior to video-assisted debriefing.”

You can read the abstract of this article [here](#).

Sense of coherence and success. Do they go hand-in-hand?

Source: Nurse Education Today

In a nutshell: Sense of coherence is the degree to which one finds life manageable, comprehensible and meaningful. If you can get these three particular philosophical lemons aligned on the fruit machine of life you’re likely to hear the tinkle of happiness cascading into the slot of existence two-thirds of the way up your thighs. In this study Natura Colomer-Pérez, from the University of Valencia, in Spain, led a team of researchers looking into the links between nursing students’ sense of coherence and

their motivation. The researchers found that a high sense of coherence was related to higher motivation and better academic performance. The researchers also found that “the environments that provide and facilitate greater external resources such as health, education, culture, association, leisure and recreation, for the community, have higher global levels of sense of coherence.”

You can read the abstract of this article [here](#).

MOOCs and first aid

Source: Nurse Education Today

In a nutshell: MOOCs are massive open online courses. It’s often thought that salmon fry have as much chance of reaching adulthood and making it back upstream to spawn themselves as people do of completing a MOOC but in this study Miguel Morales Chan, from Galileo University in Guatemala, led a team of researchers investigating the experience of students as they took a MOOC on first aid and emergency treatment. 2114 students enrolled in the MOOC with the enrolled students showing “high levels of commitment and motivation to learn about this topic through a varied [sic] of innovative educational resources, such as videos, learning activities, and interactive animations.” The students “expressed their desire to continue learning with this type of methodology.”

You can read the abstract of this article [here](#).

Hot water? Towel? Unfolding obstetric experience simulation?

Source: Nurse Education Today

In a nutshell: Like finding you haven’t prepared for an exam which takes place tomorrow or trying to take a suitcase full of jam jars to Llandudno on a London bus delivering a baby is – literally – the stuff of nightmares for most people. Midwives are – thank goodness – made of sterner stuff but even then not all student midwives get a chance to practise baby delivery on their clinical placements. In this study Mary Elizabeth Guimond, from Robert Morris University in Pennsylvania, led a team of researchers looking into the effectiveness of “an unfolding obstetric experience simulation in an undergraduate nursing programme.” 53 students took part in the study which found that the simulation was “effective in helping our students demonstrate the achievement of course objectives through improved obstetric self-efficacy scores and scores for shift-to-shift communication.

You can read the abstract of this article [here](#).

What makes nursing students want to help the aged?

Source: Nurse Education Today

In a nutshell: All over the world the number of older people, as a proportion of the population, is increasing. Unfortunately the number of nurses and doctors wishing to specialise in geriatrics is not growing at the same rate. In this study Xiaohui Chai, from Shandong University in China, led a team of researchers studying student nurses' motivation to go into gerontology. 305 student nurses from six hospitals took part in the study which found that geriatric attitudes, aging anxiety, empathy, clinical practice environment and stage of clinical practice were all "notable predictors," of student nurses' "career motivation toward gerontological nursing." The researchers concluded "student nurses' career motivation toward gerontological nursing needs to be improved, especially at the first month of clinical practice. Targeted interventions should cultivate positive geriatric attitudes, relieve anxiety about aging, promote empathy, and enrich the clinical practice environment to improve student nurses' career motivation toward gerontological nursing."

You can read the abstract of this article [here](#).

Can disasters bring people together?

Source: Nurse Education Today

In a nutshell: There's nothing like a good disaster to bring people together; a theory which the current leadership of the Conservative and Labour parties seem determined to test to destruction. Also pursuing this train of thought were a team of researchers led by Heiddy Digregorio, from the University of Delaware. The researchers got 109 nursing students to take part in a simulated disaster drill and then assessed their abilities at communication, collaboration, patient focus, team functioning and conflict management. Following the disaster drill the students identified gaps in communication, collaboration, roles and responsibilities, collaboration, team functioning and conflict management.

You can read the abstract of this article [here](#).

Jigsaw teaching. Come together or the art of falling apart?

Source: Nurse Education Today

In a nutshell: The Jigsaw teaching technique is a method of organising classroom activity that makes students dependent on each other to succeed. It breaks classes into

groups and breaks assignments into pieces that the group assembles to complete the assignment. Depending on one's level of optimism it can either be a great way of getting everyone to work together or involve everyone twiddling their thumbs until Jimmy takes his pencil out of his nose. In this study Neda Sanaie, from Shahid Beheshti University of Medical Sciences, led a team of researchers who divided 94 nursing students into two groups. One group had traditional lectures while the other formed a Jigsaw group. After taking part in the Jigsaw group the students' scores for self-regulated learning and academic motivation improved.

You can read the abstract of this article [here](#).

Teaching teachers to teach, not just to assess

Source: Nurse Education Today

In a nutshell: Weightwatchers would not be the global concern it is today if it simply told people their weight every week and gave them no idea how to improve the situation. However, this is often the experience of nursing students after taking part in simulation exercises with many of them reporting that they get told their marks but don't really get enough information about how to do better in the future. In this study Jennifer Mulvogue, from Central Queensland University, led a team of researchers examining the effectiveness of an intervention designed to help nursing simulation facilitators develop and learn self-reflective learning skills to use when facilitating simulation debriefs. The researchers designed and developed a six-hour workshop which used Open Dialogue techniques – an approach used in mental-health care. Eight nurses took part in the study and they said that the course was beneficial to their professional development and had helped them develop their own self-reflective learning skills.

You can read the abstract of this article [here](#).

Looking after new district nurses

Source: Nurse Education in Practice

In a nutshell: District nurses can conjure up a range of images from stout middle-aged matrons pootling about the Yorkshire Dales in Morris Minors to nervous women picking their way through syringes to change a colostomy bag on the 19th floor in Camden. Those who want to go into it have to do a nursing degree first and then a post-graduate qualification. Those people doing the post-graduate course have preceptors to guide them through their early days and in this article Therese Jarnulf, from the University of Gävle in Sweden, led a team of researchers looking into how preceptorship worked for this group of people. The researchers interviewed nine district nurses from seven primary-health-care units in Sweden. The theme of

'fluctuating between transferring knowledge and striving for reflective learning,' emerged from the interviews. The researchers concluded that "given the current learning outcomes for clinical practice education at the postgraduate level, district nurses need to be more influenced by perception focused on reflective learning."

You can read the abstract of this article [here](#).

Safer and better in Baltimore

Source: BMC Medical Education

In a nutshell: Many people take an interest in improving things; simultaneously making the world a better place and annoying those of us who prefer a quiet life. In nursing this often takes the form of improving patients' safety and quality-improvement projects. In this study Kelly T. Gleason, from Johns Hopkins University in Baltimore, led a team of researchers examining the effectiveness of The Fuld Fellows Programme which provides selected nursing undergraduates with a foundation in the science of patient safety, quality improvement and leadership through coursework and a mentored experience working on a quality-improvement project. The study found that the programme improved the nurses' competence in teamwork, communication, managing risk, "human environment," recognising and responding to risk and culture. Compared to students who had not been on the course those who had taken it were better at change and systems thinking.

You can read the whole of this article [here](#).

Flipped classrooms and patient safety

Source: Nurse Education Today

In a nutshell: In the flipped classroom students do their background reading before rather than after lectures so they arrive for the latter ready to learn more, and in greater depth. In this study Young Man Kim, (presumably his father is Old Man Kim) from Yonsei University in Korea, led a team of researchers looking into the effectiveness of a patient-safety course using the flipped-classroom approach. The researchers found that there was a significant improvement in the students' attitudes, skills and knowledge after having taken the course.

You can see the abstract of this article [here](#).

What do nurses learn when they go abroad?

Source: Nurse Education Today

In a nutshell: Liminal means on the edge or border. In this study Debra A. Morgan, from Northumbria University, examines the liminality experienced by nursing students when they go abroad to study. Debra Morgan interviewed 20 student nurses about their experiences studying abroad and four main themes emerged from the interviews:

- Experiencing a different reality
- Active sense-making
- Being with others
- Being changed and transformed

Debra Morgan found that study abroad was experienced as the liminal space in which learning occurred. “Students experienced liminality in this space and the process of learning was triggered by disjuncture. Students took responsibility for learning and undertook active sense-making activities to gain insight. Students struggled to make sense of troublesome experiences, and remained in a stuck place until resolution of troublesome-ness enabled students to cross a threshold into understanding... Students experienced change and transformation as a result of the learning that had occurred, and a postliminal state was attained when troublesome-ness was resolved and students had re-integrated into their usual reality.”

You can read the abstract of this article [here](#).

How do foreign teachers cope in New Zealand?

Source: Nurse Education Today

In a nutshell: The UK isn't the only country in the world which imports nurses from overseas. They do the same thing in New Zealand and in this study Reen Skaria, from the Southern Institute of Technology, led a team of researchers who asked them how they felt about coming to New Zealand to work as nurse educators. The researchers found that the foreign nurse educators initially experienced a sense of non-belonging in New Zealand, while their separation from their homeland and migration to a new country resulted in a sense of disorientation. “Integration was the preferred method of adaptation to New Zealand among the study participants. However, they wanted to choose which aspects of the new culture they would adopt and to what extent they would adapt.”

You can read the abstract of this article [here](#).

Pharmacy Education

Teaching pharmacists how to communicate

Source: BMC Medical Education

In a nutshell: Now that getting an appointment with a GP is only marginally less difficult than getting an audience with the Pope many people go and see a pharmacist for medical advice. In this study Hye Kyung Jin, from Ewha Womans [sic] University in Korea, led a team of researchers investigating the effectiveness of a course designed to help trainee pharmacists with their communication skills and patient counselling. The training session included lectures, small group work, role play, videos, and feedback from tutors. The students' self-assessment of their communication skills, attitudes towards the communication course, and confidence levels showed significant improvement after the course and nearly all (96.7%) of the students said they thought it was necessary to have a "pharmacy communication curriculum." A third said the course was helpful for effective communication with patients and 31.7% said it was helpful for effective communication with other healthcare professionals. Role-playing was the students' preferred method of learning.

You can read the whole of this article [here](#).