



Proceedings of

3rd Virtual Conference on NURSING EDUCATION AND HEALTH CARE

September 24-25, 2021 (EDT)



INOVINE MEETINGS LLC

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EDT
TimingsLocal
Timings

04:45-05:00

Opening Ceremony

Oral Presentations

05:00-05:20

Title: Does fever increase or decrease blood circulation?
[K. M. Yacob \(Chief Physician\), Marma Health Centre, Kerala, India](#)



05:20-05:40

Title: Health of the brain, & emotions during COVID-19 pandemic: Connections and implications in children with disabilities
[Kalliopi Megari, Aristotle University of Thessaloniki, Greece](#)



05:40-06:00

Title: Australian nursing educators' perspectives on education and training to promote older people's oral health
[Vandana Bhagat, Centre for Rural Health, University of Tasmania, Australia](#)

Poster Presentation

06:00-06:20

Title: Predictive relevance of biochemical indicators to incontinence-associated dermatitis in critically ill patients
[Liou Shu-Fang, Taichung Veterans General Hospital, Taichung Taiwan, Republic of China](#)

Oral Presentations

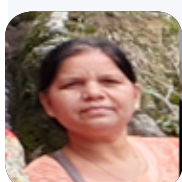
06:20-06:40

Title: Taking the simulation lab to the student for practical VeinTraining using an ultra low-fidelity individual simulator
[Sarah Phillips, VeinTrain Limited, UK](#)



06:40-07:00

Title: Workplace violence in Emergency Department
[Eman Ramadan & Mohammad Adel Naser, Mubadala Health Network - AMANA Healthcare, UAE](#)



07:00-07:20

Title: A Study To Assess The Knowledge Of Nursing Students Towards -Covid-19 During The Outbreak In Haryana At College Of Nursing Pt. B D Sharma Pgims Rohtak
[Sambharwal Shakuntla Devi, College of Nursing, Pt. B.D.Sharma, PGIMS, Rohtak, India](#)



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SCIENTIFIC TRACKS & ABSTRACTS

Day 2

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safe learning environment. Our decision not to return to the physical classroom was the correct strategy as the first larger group day coincided with the closure of a London emergency department due to 80 staff forced into

Biography:



Founding MD and qualified (MA) organisation/role consultant. A former ED Nurse, corporate nurse, simulation trainer/centre lead, published author on clinical skills training of venepuncture and cannulation – Editor and chapter author – Education and Training. National lead on competency for venepuncture and cannulation.

sarah@veintrain.co.uk

Notes:

NURSING EDUCATION AND HEALTH CARE

September 24-25, 2021 (EDT)

Taking the simulation lab to the student for practical VeinTraining using an ultra low-fidelity individual simulator

Sarah Phillips

International Society for the Psychoanalytic Study of Organisations VeinTrain Limited, Shareholder Olberon Ltd, UK

Background: In March 2020 the UK went into lockdown, along with many parts of the globe. Contracts cancelled along classrooms, meeting rooms and universities closed. However, teaching did not have to stop. The flatpack vein system won a showcase in Qatar at The World Innovation Summit for Health (2018) as an innovation that could affect healthcare globally. This is due to the fact that there is a 69% failure rate on the most commonly performed skill in healthcare. The flatpack vein individual simulator offered a simple solution, reaching individuals directly wherever they were, with practical training. While airlines had stopped taking humans, the veins were permitted to fly over to Africa and the UAE. The reach was truly global, but the question remained around how to deliver a full curriculum remotely. Demand was there due to a healthcare global crisis so there was a danger of poor/ no training for these skills which have significant failure rates. (69%) Delivery began using LIVE online while simultaneously a team built an e-learning platform. The outcome was successful, reaching nearly 750 learners during March 2020 to June 2021. Domestic and exports continue, with Ireland being the latest Halo Centre expective 200 units until 2022.

Objectives: To demonstrate the reach and effectiveness of online and sharing the benefits and challenges of practical online LIVE and e-learning education for the most commonly performed invasive skills in healthcare – venepuncture/venipuncture/phlebotomy, cannulation and IV Therapy and Train the Trainer courses.

Methods: A solution focused approach was adopted to ensure education and training did not stop due to the pandemic. Qualitative and quantitative feedback was captured, as well as reviewing the videos to reflect on effectiveness and flow of training. Interviews with delegates were also recorded, some who had previously undertaken a classroom based training and now online to offer comparison.

Results: A total reach of 407 delegates using the system were reached since March to September 2020. 47 delegates attended LIVE online practical and theory skills training from June to September were delivered. In groups of 3 to 8 Maximum over 10 full days via zoom plus 46 individual coaching/consulting sessions. Delegates attended from Dubai, Nigeria, South Africa, Ireland, England, Scotland. Five Halo centres took on 360 vein simulators to local deliver virtually or face to face with the option to upgrade to the linked online certified curriculum or unit add-ons. The feedback for all modes of delivery were positive, including reports of competency the day after the LIVE course and preferable to classroom teaching. Since the trial the roll out has seen nearly double the use at 750 users of the system or LIVE online or e-learning.

Discussion and Conclusions: The move to online arrived abruptly and while various elements of the flatpack system had been adopted and tested, it had yet to be taken up on a larger scale and with independent applicants. The LIVE session was tested in March and the review period in re-launch in June. An international team of three were recruited from Nottingham University Masters programmes. One completing her Masters in Education Technology has been particularly helpful in ensuring content was effective using technology. We knew that the live online sessions biggest risk was losing the learners due to tech issues or their comprehension of using tech affecting confidence, thereby being counter-productive. The novice was of particular concern compared to Train the Trainers who were already competent. Similarly, offering a remote e-learning option would be without live coaching, but had the benefit of large scale roll out over a longer access in any time zone however the new e-learning platform we have been able to build in LIVE workshops. Hours of video footage captured over years had to be edited plus course content re-written at a rapid pace in order for the key practical elements achieved. However, feedback has been incredible, high scoring on quantitative and excellent qualitative rich comments. Live course problems were a success, with problems arising due to IT and delegate lack of understanding of online etiquette rather than problems being able to follow practical instruction and coaching. Indeed, the camera and screen with eight veins in one space made coaching easier and aided learner understanding from the group members. Spending time in the beginning and making moderators available all day to keep the classroom space ensured a positive group experience and a