



Proceedings of
2nd Virtual Conference on
**PEDIATRICS & NEONATAL
HEALTH CARE**

March 19-20, 2021 (EDT)



INOVINE MEETINGS LLC

2C Pecan Hill Drive Clinton

Mississippi, 39056 USA

  +1-408-648-2233

Email: peditrics@inovineconferences.com

Website: <https://www.peditrics-conferences.com>

Scientific Program

Day -1 March 19, 2021 EDT

05:45-06:00

Opening Ceremony

Presentations



Keynote

06:00-06:30

Title: Job Satisfaction, Autonomy, and Self-Efficacy among School Nurses in Bahrain

Faten Ali A. Rahim Hassani, Ministry of Health Kingdom of Bahrain, Bahrain



06:30-06:55

Title: Mental health nursing clinical practicum during coronavirus disease 2019 (COVID-19)

Wong Wing Chi Wendy, The Open University of Hong Kong, Hong Kong



06:55-07:20

Title: Gaining Deeper Insight By Virtue Of Examining Resilience Strategies On Mental Health Sequelae Among Survivors Of Covid-19

Sampoornam. W, Dhanvantri College of Nursing, Pallakkapalayam, India



07:20-07:45

Title: A descriptive survey regarding impact of lockdown on school going children

Uma Rani Adhikari, Govt. College of Nursing, Medical College and Hospital, Kolkata, India



07:45-08:10

Title: Investigation of The Effects of Tele-health Applications on The Psychological State of Women with Breast Cancer: A Systematic Review

Ece Kaplan, University of Gaziantep, Turkey



08:10-08:45

Title: Salma Critical Care Outreach Nurse

Candice Chang Tomas, Salma Childrens Rehabilitation Hospital, UAE

08:45-08:50

Health Break



Keynote

08:50-09:20

Title: The Effect of Transcultural Educational intervention on direct care nurses

Nashat Abualhaija, College of Nursing, The University of Texas Permian Basin, USA

**Keynote****09:20-09:50****Title: Vascular Access Device Care and Management: A Comprehensive Organizational Approach**

Michele Lee Biscossi, Independent Consultant and Educator, Albany Stratton Veterans Affairs Medical Center, USA

**Keynote****09:50-10:20****Title: Passing the Baton to the Next Generation in Nursing Education**

Cheryl M. Smith, Columbus State University, Columbus, GA, USA

**Keynote****10:20-10:50****Title: The Use of Simulation Activities in Nursing to Increase Awareness of Patient Disabilities-Consideration of COVID-19 Practice Standards**

Debra Hagerly, Georgia Southern University, USA

**10:50-11:15****Title: Disaster Nursing at the Frontline: Lessons Learned From the Beirut Blast 2020**

Rana S. Abdel Malak, Healthcare consultant, Lebanon and **Zaki T. Fakhouri**, Graduate Student Arizona State University, Lebanon

11:15-11:20**Health Break****11:20-11:45****Title: An Important Risk to Prevent in the Operating Room: Pressure Injury**

Sema Konateke, University of Gaziantep, Turkey

**11:45-12:10****Title: "Left traumatized and in isolation": Second victims' experiences of Incident Reviews at specific public hospitals in Gauteng, South Africa.**

Elizabeth M Nkosi, University of Johannesburg, South Africa

**12:10-12:35****Title: Good Clinical Practices in Clinical Research: Career Opportunities for Nursing Professionals**

Bhausheeb Patil, Clinical Research Leader, UK

**12:35-13:00****Title: Pharmacology Summative Assessments in the AAS Nursing Curriculum**

Yolanda Harper-Morris, City Colleges of Chicago, USA

**13:00-13:25****Title: Maternity Nurses' Approaches to Pain Management when Caring for Women with Perinatal Substance Use**

Kalyn M. Renbarger, Ball State University, USA

**13:25-13:50****Title: Supporting a Clinical Instructor is the Foundation of Clinical Experiences**

Cynthia Felton, Valparaiso University, Indiana, USA

**13:50-14:15****Title: Automation with a Human Touch: Eliminating Nursing Practice Variation to Decrease Threats to High Risk Infusion Safety**

Ellen Noel, Virginia Mason Institute, Seattle, WA. USA



14:15-14:40

Title: Discarding my 20-Year Teaching Playbook during Covid19

Barbara M Elliott, Nipissing University, Ontario, Canada



14:40-15:05

Title: The Secret to Achieving Joy and Avoiding Burnout

Cheryl M. Smith, Columbus State University, Columbus, USA



15:05-15:30

Title: Looking at student workload Is it an issue?

Peggy Mossholder, Georgia Southern University, USA

Panel Discussion

Day -2 March 20, 2021 EDT

05:45-06:00

Opening Ceremony



06:00-06:25

Title: Fever is not a symptom in covid-19. None of the diseases require fever as its symptom

K. M. Yacob (Chief Physician), Marma Health Centre, Kerala, India



06:25-06:50

Title: Rehabilitation considerations during the COVID-19 outbreak

Anas Al ramahi SSN, Amana Health Care Hospital ,UAE



06:50-07:15

Title: Education Innovation in 2021

Tracy Roake, Danat Al Emarat Hospital, UAE



Keynote

7:15-07:45

Title: Late effects of the treatment for childhood cancer

Jelena Roganovic, University Hospital Rijeka, Croatia



07:45-08:10

Title: Emotional intelligence

Mohammad Shaban, Health Point Hospital, UAE



08:10-08:35

Title: Effects on Metacognition and Ruminative Thought Levels of Metacognition Training (D-MCT) Given to Major Depression Patients

Safiye Ozguc, Gaziantep, Turkey

11:15-11:20

Health Break



08:40-09:05

Title: Revitalizing Broken Dreams: First Year Female Student Nurses' Perceptions Regarding Their Decision to Join Nursing as a Career

PIR BUX JOKHIO, PUMHSW , Pakistan

**Keynote****09:05-09:35****Title: Technology in Education during a pandemic: friend or foe?**

Mary Estelle Bester, Georgia Southern University, USA

**09:35-10:00****Title: Impact of the pandemic on Nursing Education**

Diann Martin, The Successful Nurse-owner, USA

**10:00-10:25****Title: Importance of Developing Critical Thinking in Nursing Education**

Jeanne Churchill, Columbia University School of Nursing, USA

**10:25-11:50****Title: The Influence of a Nurse's Physical Appearance on the Perception of Competence**

Tracey Long, Arizona College of Nursing, USA

11:50-11:55**Health Break****11:55-12:20****Title: Examining Nursing Student Dropout Behavior Using Event History Analysis**

Michele L. Blackwell, School of Nursing, Franciscan Missionaries of Our Lady University, USA

**12:20-12:45****Title: Palliative nursing challenges during Covid 19: Lesson learned and recommendations**

Rajni Sharma, Mahamana Pandit Madan Mohan Malaviya Cancer Centre & Homi Bhabha Cancer Hospital, Varanasi, UP, India

**12:45-13:10****Title: Educational needs of medical sciences staff research area working in the hospitals of Ayatollah Mousavi of Zanjan and Al-Ghadir of Abhar in 2020**

Mehran tahrekhani, Department of Medical- Surgical Nursing Abhar School of Nursing, Zanjan University of Medical Sciences, Iran

**13:10-13:35****Title: Assessment of Knowledge and Practice Iodized Salt Utilization and Associated Factor among Pregnant Women in Basso Woreda, North Shoa Zone, Amhara, Ethiopia, 2020**

Sisay Shewasinad Yehualashet, College of Health Sciences, Debre Berhan University, Debre Berhan, Ethiopia

**14:00-14:25****Title: Prevalence And Suggested Causes Of Preeclampsia Among Pregnant Women Attending Antenatal Clinic In Central Hospital Warri, Delta State, Nigeria**

Juliet Alabrah, University of Port-Harcot Teaching Hospital, Rivers State of Nigeria

**14:25-14:50****Title: Demographic, Economic and cultural Predictors of Facility delivery after Antenatal Care in Enugu, Nigeria**

Nnadi Sylvia and Nwaneri Ada, University of Nigeria Nsukka, Enugu Campus, Nigeria



Video Presentation

14:50-15:15

Title: A Spirit of Awareness to Increase Student's Virtual Engagement and Competency Outcomes

Martha K Roper, Wallace State Community College, Alabama, USA

Closing Ceremony

Speaker Presentations



proceedings of

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)



KEYNOTE Day 1



Faten Ali A. Rahim Hassani

Ministry of Health, Kingdom of Bahrain

Job Satisfaction, Autonomy, and Self-Efficacy among School Nurses in Bahrain

Background: Hospitals, clinics, nursing homes, and health centres are the traditional places where nurses work, but nurses have recently started working in new areas such as government and private schools, and they play a critical role in better health outcomes in the education setting. In order to better understand these roles, this study aimed to investigate the factors affecting job satisfaction and the relationship between job satisfaction, autonomy, and self-efficacy amongst school nurses in Bahrain.

Materials and Methods: This study used a mixed-method approach involving an exploratory sequential design with a survey and subsequent one-on-one interviews. A total of 142 school nurses in Bahrain were surveyed and data were collected using structured psychometric tools to measure job satisfaction, self-efficacy, and autonomy. Demographic characteristics of participants (gender, age, nursing specialty, professional development, appointing authority, and workload/population served) were also collected to allow for further analysis. The data were analysed using descriptive and correlational statistics. Twenty-seven school nurses were subsequently recruited for interviews using a purposeful sampling procedure. The data were subjected to thematic analysis using Burnard's (1991) framework.

Results: Results from the surveys were indicative of a general high level of job satisfaction among school nurses in Bahrain. The areas which contributed most strongly to this satisfaction, by way of statistical significance, were perceptions of the standard of care provided, professional support nurses received, the manageability of assigned workloads and personal satisfaction. The data further illustrate that job autonomy has an independent and positive relationship with job satisfaction, suggesting that job autonomy causes a subsequent increase in job satisfaction. Self-efficacy, on the other hand, correlates with job satisfaction, but was statistically significant. The qualitative results found a unanimous consensus amongst school nurses that they face challenges in executing their roles. Herzberg's two-factor theory was used to demonstrate the hygiene and motivation factors related to Bahraini school nurses' job satisfaction. In this regard significant issues emerged in relation to training, standardisation of role descriptions and regulation and the need to promote health work environments.

Conclusion and Recommendations: While the findings indicate that school nurses in Bahrain are satisfied with their jobs there are a number of areas which need to be addressed to ensure that the role continues to realise its potential presently and in to the future. The findings suggest that training and education needs, regulatory professional bodies, and healthy and productive work environments are three important factors that affect the job satisfaction of school nurses in Bahrain. The study recommends a clear definition of school nurses' roles to ensure a productive and healthy working environment and also shows a need to implement appraisal modalities that will enable career growth, including remuneration and reward, thus facilitating job satisfaction and ensuring positive outcomes.

2nd Virtual Conference on

Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Biography:

Dr. Fatin Hasan is a dedicated caring healthcare professional with over 21 years of experience, working effectively as part of a multi-disciplinary team in Bahrain, in different systems and administrations. On a professional front I have held a key role in School Health specialty Strategic Plan (2014- 2021). She has a Ph.D. in Nursing from the Royal College of Surgeons in Ireland, Dublin. The first premiere specialty in the Gulf with a 14-year track record of high impact social responsibility programs.

fatengov@gmail.com

Notes:

Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)



Nashat Abualhaija

The University of Texas Permian Basin, USA

The Effect of Transcultural Educational intervention on direct care nurses

Background: Cultural competence in healthcare is capturing momentum in the United States. It is projected that minorities' numbers will continue to grow. Nevertheless, their morbidity and mortality rates are still robust.

Purpose: To evaluate the effectiveness of a transcultural education on nurses' cultural competence.

Theoretical Framework: Campinha-Bacote's framework the Process of Cultural Competence in the Delivery of Healthcare Services guided the study.

Methods: A cross-sectional, quasi-experimental design was used to evaluate effectiveness of education on nurses' cultural competence.

Results: Data was gathered conveniently from 44 nurses. There was a statistically significance in the mean gain scores for participants' cultural knowledge, desire, and total cultural competence scores. Hypothesis 1 was not supported due to unreliability of the awareness subscale, $\alpha = .088$. Hypothesis 2 was supported, the intervention improved nurses' cultural knowledge. A one-sample, one-tailed t-test was conducted on the revised knowledge, ($M = 0.49$, $SD = 0.65$) was > 0 , $t(43) = 4.96$, $p < .001$ with a large effect size, Cohen's $d = 0.75$. Hypothesis 3 was supported. The intervention improved cultural desire, mean gain score ($M = 0.16$, $SD = 0.37$) was > 0 , $t(43) = 2.94$, $p = .003$ with a medium effect size, Cohen's $d = 0.43$. Hypothesis 4 was supported. The intervention improved total cultural competence scores, ($M = 0.31$, $SD = 0.41$) was > 0 , $t(43) = 5.01$, $p < .001$ with a large effect size, Cohen's $d = 0.76$. Hypothesis 5 was not supported. Participants' demographics failed to predict cultural competence ($F(7, 33) = 0.59$, $p = .76$) with an $R^2 = 0.11$.

Conclusion: Results emphasized a need to integrate transcultural education in nursing. Pedagogies like didactics can improve cultural knowledge, desire, and competence. Future studies can explore cultural skills, awareness, and encounters by adding experiential component.

Biography:

Dr. NashatAbualhaija, PhD, RN is an associate professor of Nursing at the University of Texas Permian Basin (UTPB). He received his B.S.N from UAB in 1997, MSN from the University of Phoenix in 2005 and PhD from Barry University in 2017. His work experience include acute care nursing and nursing leadership. Dr. Abualhaija's research foci are vulnerable population's health, cultural competence among healthcare professionals, leaders and systems, cultural competence among nursing students and faculty and student-centeredness and active learning approaches in nursing. Dr. Abualhaija serves as chair for the Assessment & Evaluation Committee and a member in the (Curriculum Development Committee, Faculty Senate, Research Advisory Committee and General Education Oversight Committee) at UTPB.

nashhappy2@msn.com



Michele Lee Biscossi

Albany Stratton Veterans Affairs Medical Center, USA

Vascular Access Device Care and Management: A Comprehensive Organizational Approach

Statement of the Problem: Infusion Nurses Society asserts that a comprehensive organizational approach to vascular access device (VAD) care and management is imperative to ensure safe and efficacious patient care. It is essential that each organization (1) develops policies and procedures to align VAD care and management with recognized standards of practice; (2) integrates unique aspects of organization-selected VAD care products into policies and procedures and establishes expectations for adherence to these organizational directives; (3) develops a framework for gathering and analyzing clinical data related to patient outcomes for VAD care and management; (4) utilizes quality outcome data to facilitate evidence-based best practices within the organization; and (5) evaluates and facilitates educational programming to validate clinician competency.

Biography:

Michele Biscossi, ACNP-BC, MS, RN, CNL, VA-BC is an Acute Care Nurse Practitioner and a Clinical Nurse Leader within Surgical Service and Interventional Radiology and Vascular Access at the Albany Stratton VA Medical Center in Albany, New York. She is twice master's prepared (first MS was a double major in nursing education and as a clinical nurse specialist in critical care). Michele has worked as adjunct nursing faculty at Excelsior College in Albany, NY and at the Sage Colleges in Troy, NY. She is widely published on vascular access and infusion therapy as well as pain management and venous thromboembolic prevention and treatment. She is an active member of AVA and INS and has served on the National Board of Directors for AVA, The AVA Foundation, and for the NCOE for INS. She is three times nationally board certified. She is published in international peer review journals. She presents nationally and internationally to disseminate emerging evidence and promote translation of evidence into practice.

Michele@Biscossi.com



Cheryl M. Smith

Columbus State University, Columbus, USA

Passing the Baton to the Next Generation in Nursing Education

Many current work environments in healthcare are composed of five generations in the workforce: Traditionists (1928-1945), Baby boomers (1946-1964), Generation X (1965-1980), Millennials (1981-1997), and Generation Z (1997- present). Each generation is influenced by the prevailing economic, social, and cultural conditions of that generation, which contribute to the unique characteristics. This multigenerational workforce contains a diversity of attitudes, beliefs, and work habits that need to be taken into consideration when building relationships and provide opportunities for creativity and learning from one another. Potential misunderstandings regarding generational values and work ethics can contribute to conflict.

Understanding similarities and strengths of each diverse generation will help the nurse educator develop teaching/ learning strategies to meet the learning needs of each generation of nursing student. Nurse leaders will develop both individual and organization strategies to build relationships with the multigenerational workforce. Achieving a healthy work/learning environment takes teamwork and collaboration which comes from understanding the identity, strengths, and differences of each generation. Positive outcomes from working with colleagues and students from multiple generations include:

1. Diversity of viewpoints
2. Ability to learn from colleagues and students with varying experiences (from clinical to technological)
3. Wisdom from those with experience
4. Energy of the younger generation
5. Challenges in learning together

This presentation will look at the five generations found in the healthcare work environment as well as the nursing classroom. The major social and political events and technology advancements that occurred during that generation will be discussed as well as approaches to communication and teaching/learning strategies needed to educate the current generation of students.

Biography:

Cheryl Smith has been a nurse educator for 30 years and has taught extensively in the online environment (and a baby boomer). She has presented at numerous national and international conferences on the pedagogies of online learning that promote student engagement and positive student outcomes. She is a proponent of putting the student at the center of their own learning in a stress-free environment which results in improved student learning.

smith_cheryl6@columbusstate.edu



Debra Hagerty

Georgia Southern University, USA

The Use of Simulation Activities in Nursing to Increase Awareness of Patient Disabilities-Consideration of COVID-19 Practice Standards

This presentation will discuss methods of active learning and engagement of students to increase their knowledge of disabilities across the lifespan. Through the use of simulation equipment, students participated in experiences that simulated a disability or common impairment. Stations were set up with consideration of social distancing, and COVID-19 precautions. Students utilizing a checklist of each station activities, simulated all disabilities successfully. Participants experienced the disabilities including but not limited to each of the following categories: Kyphosis, Hemiplegia, Knee Pain, Arthritis, Tremors, Hearing Impairments, Tinnitus, COPD, Back Pain and ocular disorders such as glaucoma, Retinitis pigmentosa, Retinopathy. Participation occurred both in-person and via Zoom presentation. The collaboration of student activity chapters, The Institute for Healthcare Improvement and Omicron Delta Kappa leadership honor society supported this training venture. Active engagement of learning is a tenant of best practices for college education. This activity used authentic learning activities, simulations and student controlled of participation. Story telling facilitated this simulation experience.

Biography:

Associate Professor of Nursing at Georgia Southern University, Adjunct at Boise State University. Clinical Coordinator of Senior Leadership students' practicum placement. Previously, I was a Director of Nursing Services in skilled subacute facilities and a consultant to many rehabilitation and subacute facilities for over 30 years. I have been recognized with the Nightingale Award for Long Term Care and Rehabilitation Nursing award given annually to one nurse in the State of Michigan. I graduated from the University of Michigan with a BS in Zoology and Sociology, an ABSN and MSN in Gerontological Nursing/Administration from Case Western Reserve University and I received a Doctor of Nursing Practice degree from Oakland University. I am a licensed Social Worker. I have been involved in the Georgia Nurse Educators Association for 9 years, the American Nurses Association and serve as President for a Nursing Home Board in the local community. I am President of the Georgia Directors of Nurse Administrators called GADONA. I am active in NADONA and present nationally and Internationally for a number of nursing and other professional organizations.

dhagerty@georgiasouthern.edu

proceedings of
**2nd Virtual Conference on
Pediatrics & Neonatal Health Care**

March 19-20, 2021 (EDT)



**Scientific Tracks & Abstracts
Day 1**

Mental health nursing clinical practicum during coronavirus disease 2019 (COVID-19)

Wong Wing Chi Wendy

The Open University of Hong Kong, HKSAR

The Higher Diploma of Mental Health Nursing is a part-time programme. After complete this programme, Enrolled nurse (Psychiatric) will convert to Registered Nurse (Psychiatric) in Hong Kong. Students should complete a 32-week clinical practicum in various specialties of mental health units, before register in Nursing Council of Hong Kong. Due to COVID-19 pandemic, all face-to-face teaching and clinical practicum were suspended. Clinical practicum was changed to alternative learning methods. These methods aimed to ensure registered nurse's competences of students.

Biography:



Dr Wendy W. C. Wong is the Associate Professor (School of Nursing and Health Studies) of The Open University of Hong Kong. She is a Registered Nurse and Registered Psychiatric Nurse. She had worked in various clinical areas, including emergency unit and psychiatric unit before joining the university. Her research interests include mental health nursing education and caregivers' needs.

wcwong@ouhk.edu.hk

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Gaining Deeper Insight By Virtue Of Examining Resilience Strategies On Mental Health Sequelae Among Survivors Of Covid-19

Sampoornam W

Dhanvantri College of Nursing, India

Context: A recent survey by the Indian Psychiatric Society indicated a twenty percent increase in mental illnesses in the country since the coronavirus outbreak.

Methods: After obtaining written informed consent, survivors of COVID-19 who fulfilled the inclusion criteria was recruited and enrolled in the study at selected community areas, Namakkal, India. The total sample size was 60 survivors of COVID-19. Study subjects were assigned randomly to either experimental arm (n=30) or control arm (n=30). All 100 subjects were interviewed before intervention by assessing background variables. Mental Health Sequelae was measured by Hamilton Anxiety Rating Scale, Beck's Depression Inventory & Clinically Administered PTSD Scale (CAPS) in experimental arm & control arm. Experimental arm received resilience strategies & control arm received standard methods of care. Resilience Strategies incorporates the focus on finding trustworthy and compassionate individuals who validate the feelings, which will support the skill, capacity to recover from difficult life events. The resilience strategies were rendered on weekly basis for the period of 1 month. Posttest was conducted by using the same assessment techniques in experimental arm & control arm.

Results: Paired t test value within the experimental arm (pretest and posttest) showed statistical significance ($t=8.85$) among survivors of COVID-19. Paired t test value within the control arm (pretest and posttest) depicted quite statistical non significance ($t=2.00$) among survivors of COVID-19. Unpaired t test value (between experimental and control arm) showed statistical significance ($t=7.23$). It indicates that there was statistically significant difference between the arms. Based on posttest mental health sequelae mean scores (Mean=6.14), experimental arm showed reduced mental health sequelae compared with control arm posttest mental health sequelae mean scores (Mean=7.16).

Conclusion: The study findings revealed that administration of resilience strategies were significant in reducing mental health sequelae among survivors of COVID-19.

Biography:



Professor Sampoornam was born in India. She earned a bachelor's degree in nursing from the Tamil Nadu Dr. M.G.R. Medical University, Chennai, India, Master's Degree in psychiatric nursing from the same university. She was awarded PhD in nursing from Saveetha University, Chennai, India. She also earned a Master's Degree in Counseling & Psychotherapy from Tamil Nadu Open University. Currently she is a professor in Dhanvantri College of Nursing, Namakkal, India. She has organized various conferences and workshops in Malaysia and Dubai. Madam has published 77 scientific papers in national and international journals. She presides as an editor in American Journal of Nursing Science (on tenure basis), Australian Journal of Science & Technology, Chinese Journal of Medical Research & European Journal of Pharmaceutical and Medical Research. She is a recognized PhD Guide under The Tamil Nadu Dr. M.G.R. Medical University, Chennai. She is the life time member of TNAI.

sampoornamwebster@yahoo.in

A descriptive survey regarding impact of lockdown on school going children

Uma Rani Adhikari

Govt. College of Nursing, Medical College and Hospital, Kolkata, India

Background: On 11th March 2020, the World Health Organization declared COVID-19 as a global pandemic. In India, according to Ministry of Home Affairs the school and colleges are shut and online classes started from March 2020. So, the social mixing of the participants was blocked. The decision is anticipated to have detrimental effects on children's physical and mental health. As healthcare personnel, we would like to understand the effects of lockdown on children, to protect them from the harmful effects, if any.

Methods: Through purposive sampling technique 100 school students were recruited for online (Google form) survey during Oct-Nov 2020. School children between 6-18 years were enrolled for the survey after an Ethics committee approval and consent for the survey.

Results: 36% children had increased appetite whereas 12% reported a decrease in appetite during COVID-19 lockdown. Few (9%) students reported long sleeping hours (12-14 hours / day) and majority (61%) of the participants expressed spending their leisure time watching TV. Most of them (89%) missed the school; 53% participants felt loneliness and 74% missed outdoor games. 60% also reported the concepts to be unclear in online classes. 46% parents reported behavioral changes of their children like irritability (31%), getting angeriness (36%) and temper tantrum (13%) during COVID-19 lockdown. 99% had basic knowledge on COVID-19 and its preventive behaviors but 37% didn't want to wear mask, 30% were not maintaining social (physical) distancing and 10% were not washing their hands regularly. Many participants expressed their quality of life, quality of study, health and mental health condition deteriorated during lockdown than the pre COVID situation. Parents and school teachers' better involvement with the school children mainly during this period of lockdown might be an effective recommendation.

Biography:



Dr. Adhikari has diverse nursing background in clinical & nursing education. 20 years of experience, out of which 5 years clinical, 15 years are teaching in college of nursing & 5 years of administrative experience in college of Nursing. She is efficient in cardiac, renal nursing and nursing research. She has wide research experience and guiding for M.Sc. & Ph.D. Nursing research project and presented many scientific papers in different National & International Conferences. She also published many articles in indexed peer review journals. She is an editorial board member of two indexed national journals and reviewer of three international journals. She is a resource person for different Nursing workshop, seminar & conferences in state, national, and international level. She is a master trainer of HIV/AIDS GFATM Project, Bioethics and LaQshya program and Board of studies member under the WBUHS.

w2uma@yahoo.com

Notes:

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Investigation of The Effects of Tele-health Applications on The Psychological State of Women with Breast Cancer: A Systematic Review

Ece Kaplan, Zeynep Koc, Derya Tanriverdi
University of Gaziantep, Turkey

Statement of the Problem: Breast cancer, which is the most frequently diagnosed cancer among women in the world and has the highest mortality rate, may result in the loss of the breast, which is the symbol of the woman's identity, femininity and sexuality, as well as the benefits of being diagnosed with cancer. The loss of the body part, which is so important for the woman, causes important mental problems. The purpose of this study is to determine the evidence-based information and results about the effects of telehealth practices on the psychological conditions of women with breast cancer. Methodology & Theoretical Orientation: The research process was carried out using PRISMA guidelines. "Telemedicine", "telehealth", "web-based therapy" published in English in Pub Med, PsycINFO, Medline, Science Direct, Scopus, Web of Sciences and Cochrane databases between 01.01.2015-31.12.2019. With the keywords "telepsychiatry", "online therapy" and "breast cancer"; Randomized controlled trials with available abstract and full text were reviewed. As a result of the evaluations, the research was completed with 16 studies meeting the research criteria. Findings: It was found that 37.5% of the studies examining telehealth practices in women with breast cancer reduce fatigue; In 33.3%, cancer did not affect the fear of relapse/ recurrence; It reduced the depressive symptoms and the severity of depression and increased the quality of life in 31.25%; It reduces distress in 25%; It improved cognitive functions in 18.75%; It reduced anxiety and sleep disorder, insomnia severity, psychological strengthening and sleep quality in 12.5%; In 6.25%, it was determined that it reduced pain, nausea, numbness of hands and feet, hair loss, intrusive thoughts, increased physical and psychological health, functionality, optimism and control over the future, positive mood and life appreciation, drug and psychology harmony. Conclusion & Significance: It can be said that telehealth practices are effective on the psychological conditions of women with breast cancer. In this sense, it is recommended to expand the use of telehealth practices, which can save time and cost, are accessible and easily applicable by nurses, to improve the psychological status of women with breast cancer, and further studies are recommended.

Biography:



The researchers, was born in Turkey in 1989. She graduated from Çukurova University School of Health, Department of Nursing in 2012. The researcher worked as a nurse in various hospitals in 2012-2015. The researcher completed his master's degree in Gaziantep University Obstetrics and Gynecology Nursing Master Program in 2015. She started her doctorate education in Gaziantep University Institute of Health Sciences Nursing USA in 2017 and earned a Research Assistant in Gaziantep University Faculty of Health Sciences, Obstetrics and Gynecology Nursing USA in the same year. The researcher has 3 articles in national and international journals, papers in 13 different congresses, and 9 courses she attended and received certificates. She is also a member of the Turkish Nurses Association and the Women's Health Nursing Association.

ecekaplan_106@hotmail.com

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Salma Critical Care Outreach Nurse

Candice Chang Tomas

Salma Children's Rehabilitation Hospital, UAE

Introduction: Healthcare facilities are looking into deploying dedicated outreach team to provide critical care without delay. A rapid response system is designed to address medical emergencies timely, which is patient focused to prevent deterioration, death or serious adverse events. It is a simple concept of having a highly skilled intensive care, unit-trained nurse to respond and support clinicians in the recognition and management of the deteriorating patient. When a patient demonstrates signs of imminent clinical deterioration based on the PEWS and MEWS algorithm and the level of risk based on patient's respiratory rate, SPO2, Respiratory, Blood pressure, heart rate, temperature, AVPU, total score and nurse/family concern, Salma Critical Care Outreach Nurse is summoned at bedside to immediately assess and coordinate with Physician and TDT team as to the immediate treatment to prevent deterioration, minimized acute out transfer to tertiary facility and even death. Being a long-term care/rehabilitation facility, patients imminently requires management of critical illness. More often than not, patients are left with the care of untrained staff who may not be able to recognize significant changes in vital signs or abnormal values; adding up to the understaffing problem in Nursing. Comparison has been done by several studies, noting that patients in a ward have the highest mortality. Suboptimal treatment is common and is associated with worse outcomes. Unfortunately, findings had been attributed that mortality occurs as a result of variation in care rather than changes within the patient's condition. Junior Staff Nurses fail to recognize and appreciate clinical urgency of any critical situation which often could lead deterioration before ICU admission or could even lead to death. There are many factors which can be cited such as inadequate supervision, poor organization, communication gaps, continuity of care, nurse: patient ratio and staff training. Patients who had experienced long periods without immediate intervention done underwent "failure to rescue." Some studies had cited that medical patients have often sustained up to 72 hours of physiological instability. Analysis done as cited by Welch and Subbe in their article had noted that as of 1000 deaths in 10 hospitals concluded that 52 death would have had a 50% or greater chance of being prevented, although it is noteworthy that most of these preventable deaths were in elderly, frail patients judged to have had a life expectancy of less than 12 months. SCCON initiative bypasses hospital hierarchies. It enhances the role of the TDT during the pre-arrest period, utilizing the PEWS and MEWS criteria based on deranged critical values or concern among the Nursing staff and Family. This initiative highlights the importance of having a coordinated system of avoiding failure to rescue patients timely and consistently.

Objectives: Salma Critical Care Outreach Nurse is to provide immediate support to Licensed Nursing staffs who lack confidence and knowledge to detect and provide quick action and intervention to sick patients before they deteriorate and worsen which could potentially lead to acute transfers and death if no intervention is provided during the early hours of illness.

Methods:

- a). FOCUS PDCA was done to look at the opportunity to improve the process.
- b). Meeting with Senior Nursing Team was done to discuss the pilot study of the initiative.
- c). SCCON activation: Afferent arm – PEWS/MEWS criteria
Efferent arm – Responsive arm – SCCON mobile no. thru station speed dial. Activation of SCCON by bedside staff at any time PEWS/ MEWS criteria are met.
- D). SCCON guideline and flowchart development
- E). SCCON guideline and flowchart education among staffs
- F). SCCON initiative introduction in the clinical management meeting
- G). SCCON pilot study facility wide
- H) SCCON pilot study evaluation among staffs
- I) Data gathering and review of impact of the initiative – Acute out and Code Blue 3 months before and after the initiative launch.
- J). SCCON critical care module workshop for all rotating team leaders.

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Results: Rate of Code Blue per 1000 patient days had dropped from 5.65% to 0% immediately within a month. Rate of unplanned transfers immediately dropped from 11% to 8%

Discussion: SCCON operates to support a culture of patient safety. Considering that we are a small Long Term Care Rehabilitation Hospital in Abu Dhabi, The Nursing Department had initiated the performance improvement project on patient safety. It still rests on important components to ensure its success; organizational culture, Transdisciplinary involvement/commitment, smooth and open collaborative communication, Expertise and teamwork. Every person in the organization must be aware of the significant role of the SCCON, the design of the initiative and the role of Primary Care Nurse in the TDT.

Transdisciplinary coordination and teamwork are enhanced as disciplines work together to improve patient outcomes and can experience the valuable contribution of each member. SCCON debriefing among nursing teams can help Primary care nurse reflect on performance. Positive reinforcement for a job well done and boosting of staff morale could highly impact the quality of care rendered among sick patients within the organization. Empowerment of the nursing leaders and team in handling critically ill patients back to wellness continuum subsequently enhance patient/ family trusts among healthcare team. Overcoming barriers and avert failure to rescue events, proactive rounding of the SCCON among all patients every shift and coordinating plan of care among TDT definitely increases patient clinical outcome. With the widespread use of the MEWs/PEWs scoring system plus the proactive rounding of the SCCON every shift and the increase accessibility to summon SCCON when the independent function of the primary care nurse has been exhausted, it is indeed a positive experience and leverages surveillance and monitoring hospital wide during the early warning hours and manages early clinical deterioration. Nurses do play a vital role in recognizing clinical deterioration and participating in proactive assessments on patients at risk for deterioration. Alarm limits are part of daily bedside routine safety measures which could be added to interventions in addressing gaps of failure to recognize changes in vital signs.

Conclusion: SCCON initiative at Salma Children's Rehabilitation Hospital reported significant improvement in clinical outcomes for the past 3 months since its launch in the month of Nov 2020. The best available evidence is the improvement in clinical standards audit, Code Blue Percentage, Percentage of Acute out/ unplanned transfers prior to its launch and after it was launched. End of life issues however might be a dilemma for SCCON staffs wherein the chance of positive outcome is minimal. End of life care policy covers all pertinent information and resource that an SCCON could refer to when confronted with this clinical dilemma

Biography:



Candice C. Tomas, MANc, RN, BSN is an experienced Nursing Administrator for the past 20 years of her 25 years Nursing career. She is currently working as a Nurse Manager with a demonstrated history of working in the healthcare industry. She had previously worked as Director of Nursing and as Assistant Chief Nursing Officer in Riyadh, KSA for 13 years. Adept in Nursing leadership, Nursing Management and with rich clinical expertise in Long Term Ventilator, Oncology Nursing, Critical Care, Telemetry, Medical High Dependency have become the foundation of her nursing practice. She is likewise keen on engaging herself in various Quality improvement projects that would address gaps/ variances which could impact patient safety. She is passionate about public speaking, mentoring, Evidence Based Practice and consistently inclined to achieve service excellence through safe care delivery. She believes that to be an effective leader, it would mean balancing your own network, maintain authenticity and sincerity in all your dealings in life. Her professional mantra is "Leadership is a privilege and not a right, I must earn in the arena of action."

candice_ch20@yahoo.com

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Disaster Nursing at the Frontline: Lessons Learned From the Beirut Blast 2020

Rana S. Abdel Malak, Healthcare consultant, Lebanon

Zaki T. Fakhouri, Graduate Student Arizona State University, Lebanon

Background: The Beirut port blast on August 4th shredded the city to pieces and aggravated the conditions of an already fragile population undergoing civil uprising, a deteriorating socio-economic crisis, and the COVID-19 pandemic. 204 people were dead, more than 7,500 injured, and 300,000 were homeless. The explosion severely damaged vital health infrastructure and services. Experts considered it as one of the largest non-nuclear explosions in history. Our purpose is to describe disaster nursing response to the Beirut Blast in one of the closest to the scene tertiary healthcare centers and present lessons learned for better national resilient response.

Methodology: This paper will adopt United Nations' disaster management case study framework to explore challenges, strengths, and recommendations.

Findings: The major challenges faced by nurses identified in this case study included the following: (1) inadequate level of preparedness to operate in massive surge capacity; (2) issues related to nurses' roles in disasters. (3) post disaster stress, and (4) lack of proper national/ first responder mitigation measures. Major areas of strength witnessed were: (1) nurse resilience and group solidarity (2) elevated sense of ethical and professional obligation, and decision making.

Conclusion & Significance: Although large disaster-related literature exists, the voice of the nurses on the frontline during these disasters is mostly missing. This paper intends to bring to the forefront the experience of nursing responders who were practicing amidst a chaos of apocalyptic proportions in the minutes following the Beirut explosion and days after that. Implementing national mitigation efforts play a crucial role in building resilient cities. Such mitigation efforts must be formulated by taking a multi-stakeholder and multi-agency collaborative approach to governance. Establishing a proper governance framework allows for better preparedness, response, and recovery efforts when facing disasters. Areas for future research and building a more resilient disaster nursing practice are proposed.

Biography:



Rana Abdel Malak, Ph.D is based in Beirut with a long standing experience in clinical and executive leadership in acute care nursing; Board certified as nurse executive advanced level and Ph.D. holder from the University of Texas. Her research focus is clinical leadership and followership in professional nursing. She works since 2011 in healthcare consulting in the Middle East and is an international appraiser with the American Nurse Center Credentialing Center. She has a particular passion for nursing leadership development with a diversified portfolio as a nurse leader coach. Recipient of many awards namely the Buie Presidential Scholarship for Doctoral Studies. Dr. Abdel Malak will be presenting first-hand experience and nursing disaster response to the Beirut Blast from the closest tertiary point of care to the explosion scene; considered one of the deadliest non-nuclear explosion in history.

rana.abdelmalak@gmail.com



Zaki Fakhouri is a current Masters student pursuing a degree in Emergency Management and Homeland Security at Arizona State University. His current course studies focus on hazards governance and resiliency within several contexts from policy creation to in-field application. He holds a bachelor's degree in Sports Management from the University of Illinois at Urbana-Champaign with experience in aquatics management.

zaki.fakhouri@gmail.com

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

An Important Risk to Prevent in the Operating Room: Pressure Injury

Sema Konateke

University of Gaziantep, Turkey

Pressure injury is a global problem that needs to be prevented and treated, as it significantly increases healthcare costs, requires a long treatment process and prolongs hospital stay. Pressure injuries negatively affect the quality of life by causing pain, social isolation and job losses. Surgery is an important risk for pressure injury. Pressure injuries that develop within the first 48-72 hours after surgery are considered to be due to surgery. Exposure of the patient to pressure and friction force in carrying or positioning procedures, prolongation of the operation time depending on the type of surgery, deterioration of sensory perception with the effect of anesthesia are the risk factors that cause pressure injury during surgery. In addition, individual specific risk factors also increase the risk of pressure injury due to surgery. Low or high body mass index, advanced age, comorbid diseases, malnutrition are individual risk factors that should be evaluated before surgery. Evidence-based developed guidelines for the prevention of pressure injuries due to surgery recommend those; healthcare professionals, use of appropriate auxiliary tools while positioning the patient during surgery, use of support surfaces on the operating table, support of the areas under pressure, cutting contact of the heel with the operating table evenly distribute the pressure to the whole body. Due to the general condition of the patient and the surgical procedures to be performed, it may be overlooked that the patient has a risk of pressure injury during surgery. Health professionals in the operating room should be trained on this issue and records should be kept appropriately. Operating room nurses should take into account the individual risk factors of the patient, should be careful about pressure injuries that may develop during surgery, should make regular control of the skin and prevent risk with evidence-based nursing interventions.

Biography:



The researcher was born in Turkey in 1993. She graduated from Erciyes University School of Health, Department of Nursing in 2016. The researcher worked as a nurse in 2017-2018. The researcher completed his master's degree in Sivas Cumhuriyet University Surgical Nursing Master Program in 2019. The researcher is a doctoral student in the Department of Nursing at Gaziantep University. The researcher is interested in intraoperative care, intensive care, emergency care, wound care, etc. She does many studies on these issues.

s.hazirbulan00@gmail.com

Notes:

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

“Left traumatized and in isolation”: Second victims’ experiences of Incident Reviews at specific public hospitals in Gauteng, South Africa.

Elizabeth M Nkosi

University of Johannesburg, SA

Statement of the Problem: Adverse events are inevitable in healthcare. Following these events, the patients is the first victim while the healthcare professional becomes the second victims. These second victims often experience unusual feelings of self-blame and personal accountability making them vulnerable to emotional distress. The hospital leadership routinely conducts incident reviews to determine the facts, institute factors that contributed to the events, finding out what modifications are needed and ensuring the provision of support to the involved healthcare professionals following such events. However, some reviewers do not adhere to the principles of a just culture and a system approach thus directing the focus of the review on the second victims. This conduct results in a life changing experience that leaves a permanent scar on the person as well as a vicious circle of emotional distress, anxiety and self-doubt. The purpose of this study is to describe the second victims’ experiences of incident reviews at specific public hospitals. Methodology & Theoretical Orientation: A qualitative and contextual research design was used to explore and describe the experiences of second victims (n=13). Using the storytelling methodology of Smith and Liehr, the participants told the stories of their experiences. The semi structured interviews were digitally recorded and transcribed verbatim. Findings: The participants experienced the incident reviews negatively; stating being traumatised, verbally attacked and being blamed by reviewers during these sessions. Conclusion & Significance: Second victims require guidance in identifying their shortcomings that led to events, to learn and reduce the recurrence. However, hospital leadership does not recognise this. Recommendations are made for hospital leadership to create environment in which the reviews are conducted in a clear, consistent manner without judging, punishing nor blaming. Identification of the care provided, and lessons thereof could update facility improvement.

Biography:



Mrs Elizabeth Malefu Nkosi is a lecturer for the Final year Undergraduate, and Second year Post- basic students at the University of Johannesburg, South Africa. She has 30 years of Clinical Management experience, and six years of teaching experience. She obtained her Master’s Degree in 2017 at the University of Johannesburg with a study entitled: Experiences of nurses who were involved in nurse related adverse events in a public hospital in Gauteng, South Africa. She is busy with her PhD studies in Nursing Management for completion in August 2021.

elizabethn@uj.ac.za

Notes:

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Good Clinical Practices in Clinical Research: Career Opportunities for Nursing Professionals

Bhausaheb Patil

Clinical Research Leader, UK

Clinical Research is a branch of healthcare science which determines the safety & effectiveness of medications, medical devices, diagnostic products and treatment regimens intended for human use. Such medications; once approved by regulatory agencies after a successful clinical research; are used for prevention, treatment, diagnosis or for relieving symptoms of a disease. Clinical research should not be considered same as clinical practice. In clinical practice; medical practitioners use established treatments (already approved and available in the market), while in clinical research; we need to collect evidence to establish a safer and efficacious treatment. The branch of Clinical Research is very fascinating, ever growing. With ongoing advances in medical sciences and technology; this is becoming more interesting. The field has tremendous scope for nursing professional to contribute in this rapidly growing field and be part of future clinical research programs for the diseases; where effective treatment is still unavailable. During my presentation; I look forward to discussing clinical research field and the different regulatory guidelines that we need to follow to ensure the clinical research is done with the highest ethical standards and; patient safety is given the top priority, while data integrity is kept at the center of everything is done to ensure end product is safe for wider use. Whole world is experiencing COVID-19 crisis and the challenges it has brought to everyone. However, it also brings an opportunity and I am hoping to show this other side through my talk to the attendees. I also look forward to discussing the opportunities that are available in this field for nursing professionals. I will contribute what I learned in the past 25 years in local and global environment across all continents with a hope that it will make you better equipped and prepare a better clinical research professional.

Biography:



Bhausaheb Patil has a humble career journey in Clinical Research from a local to global role to promote patient safety, data integrity and regulatory compliance and to bring new medicines to the patients faster and safer. He has worked in variety of clinical research functions such as Clinical Monitoring, Clinical Operations & Project/ Financial/Resource/Quality Management & Risk Based Monitoring approach and also a seasoned manager at mid-to-senior levels within clinical research industry. Bhausaheb's 25 years of experience working on various roles has helped him to get a deeper insight of Productivity, Delivery and Quality; key drivers associated with Clinical Research Industry across Asia, Europe and American markets. He is currently based in the UK and believes; despite experience of all these years working directly with pharmaceutical companies, Investigators & hospitals, he is still hungry to learn and acquire new skills to contribute further to the world of clinical research.

<https://www.linkedin.com/in/bhausahebpatil/>

Notes:

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Pharmacology Summative Assessments in the AAS Nursing Curriculum

Yolanda Harper-Morris

City Colleges of Chicago, USA

Statement of the problem: The City of Chicago Associate Applied Science (AAS) nursing program curriculum does not offer a pharmacology course. In preparation for student's success on the National Council Licensure Examination Registered Nurse exam (NCLEX-RN), nursing faculty adopted web-based pharmacology contents, to provide additional support and to assist students in learning the concepts of pharmacology throughout the curriculum. At the end of the two-year program, the student's knowledge of pharmacology was assessed by administering two examinations: ATI-RN Pharmacology exam and ATI RN Comprehensive Predictor exam. If the students are passing the ATI Comprehensive Predictor exam which incorporates pharmacology, is it necessary to administer the additional ATI RN Pharmacology examination.

Purpose: The purpose of this research is to identify the effectiveness and relevance of administering both examinations to assess the student's knowledge of pharmacology content at the end of the nursing program.

Methodology and Procedure: Nursing faculty participated in a one-hour meeting to discuss two cohort group scores of the two pharmacology summative assessments, read an excerpt and reviewed a video on summative assessment. A quantitative study was utilized to analyze the data. **Findings:** The results of the post aggregated scores identified that the ATI RN pharmacology exam scores had no significant effect on the student's performance on the pharmacology content on the ATI RN Comprehensive Predictor examination. There were two cohorts consisting of 37 students in the spring and 41 students in the fall semester. Both cohorts scored higher on the pharmacology content of the ATI RN Comprehensive Predictor examination.

Discussions: Faculty addressed two questions: Does the ATI RN Pharmacology examination provide an accurate assessment of the learned content? Do the ATI RN Pharmacology results correlate with the students' performance on the ATI RN Comprehensive Predictor examination?

Conclusion and Significance: The ATI RN Pharmacology examination results may not reflect student's knowledge of the content because the exam does not count toward program completion. Recommendations were to use the ATI RN pharmacology exam as a graded item or omit it as an additional assessment.

Biography:



Yolanda Harper-Morris is a Full Professor of nursing with twenty years of teaching in Associate Degree Nursing programs. She has participated in establishing and maintaining accreditation for nursing programs. The twenty years of working as a critical care nurse has played an important role in teaching many levels of medical surgical courses. Her focus is on research and evaluating courses to improve measuring program outcomes. Angela Dade is an Associate Professor of nursing at Malcom X College (MXC) She obtained her undergraduate BSN from the U of M. She has an MSN from North Park University and is certified as an Adult Nurse Practitioner. Prof Dade has been teaching at MXC as an educator for 14 years, she taught Medical-Surgical, and OB. Her focus is to teach assessment skills and critical thinking utilizing the nursing process. With 40 years of combined nursing experience working in ER, CSU, and 14yrs as an ANP-C, Prof Dade brings a wealth of knowledge for the students learning experience.

yharper-morris@ccc.edu

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Maternity Nurses' Approaches to Pain Management when Caring for Women with Perinatal Substance Use

Kalyn M. Renbarger
Ball State University, USA

Statement of the Problem: Providing effective pain management for women with substance use disorders in the perinatal period can present a clinical challenge. This study was conducted to identify approaches to pain management that maternity nurses use with this population.

Design: A secondary analysis of data drawn from a qualitative descriptive study that examined the development of trust between maternity nurses and women with substance use disorders in the perinatal period was conducted.

Setting: Women with substance use disorder were recruited from a maternal treatment center in the Midwest and maternity nurses were recruited from a local Midwestern Chapter of the Association of Women's Health, Obstetric, and Neonatal Nurses (AWHONN).

Methods: Ten women from the residential treatment center and 15 nurses from AWHONN were asked describe positive, negative, and typical interactions they had with the other group and identify factors that either helped or hindered the formation of trust. In the course of the interviews, 5 of the women and 9 of the nurses described interactions centered on pain management. This information provided data for the secondary analysis focused pain management interactions and was summarized using content analysis.

Results: Findings revealed that maternity nurses used five approaches to pain management: (a) promoting non-opioid pain management strategies, (b) trying to give pain medications on time, (c) doubting or judging women, (d) withholding, delaying, or resisting giving pain medications, and (e) responding to women's hostility.

Conclusion: Maternity nurses should be familiar with pain management guidelines for this population, confront biases related to substance use during pregnancy, and receive training in the management of aggressive behaviors by persons receiving maternity care.

Biography:



Kalyn Renbarger, PhD, RN is an Assistant Professor of Nursing at Ball State University. Her research interests include the healthcare experiences of pregnant and postpartum women with substance use disorders and maternal mental health for under-resourced women. Through her research she strives to improve health care for women with mental health concerns by reducing stigma and improving access to care. Her research for this study was funded by the International Society of Psychiatric Nurses (ISPN) through the Joyce Fitzpatrick Research Grant.

krenbarger@bsu.edu

Notes:

Supporting a Clinical Instructor is the Foundation of Clinical Experiences

Cynthia Felton

Valparaiso University, Valparaiso, Indiana ,USA

To ensure the best possible clinical experiences for nursing students, the clinical instructor (CI) must be well prepared. A literature search was performed, university clinical coordinators across the Midwest were consulted and students were surveyed to determine the best preparation needed. Clinical Instructor preparation needs to include three areas: university support of the CI, CI support of the students and CI partnership with the facility. University support of the CI is found in the college of nursing's teaching philosophy and objectives. The principles of adult learning need to be applied to clinical interactions between student and CI. Support from faculty and clinical coordinators is paramount and must be available in real time. Support of the student requires the CI to be a role model and to establish professional relationships with individual students in the facility. CI partnership with the facility requires proficiency in related clinical skills, advocacy for the students and professional relationships with the nurse manager. Full support of the clinical instructor throughout the semester is the foundation for the best student clinical experiences.

Biography:



After becoming clinically competent in critical care nursing, Cynthia Felton started teaching critical care concepts as a hospital educator, in an Associated Degree program and then as a clinical instructor at Valparaiso University. In 2006, she established the clinical coordinator role and have since developed an education model for our Clinical Instructors.

Cynthia.Felton@valpo.edu

Notes:

Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Automation with a Human Touch: Eliminating Nursing Practice Variation to Decrease Threats to High Risk Infusion Safety

Ellen Noel

Virginia Mason Institute, Seattle, WA. USA

Significance: The Institute for Safe Medication Practice states high risk infusions bear a heightened risk of significant patient harm. Intravenous infusion administration is a frequently occurring, error prone event. Advancements in smart pump technology and the electronic medical record have contributed to reductions in administration errors, yet technology alone cannot mitigate all defects.

Design: Technological limitations were apparent to a multidisciplinary inpatient healthcare team during retrospective review of internally reported infusion events. Event analysis showed substantial variations in RN administration practices despite a well- established electronic medical record, smart pump technology, and evidence- based policies. Baseline analysis revealed a mean defect frequency of one reported event occurring every nine days. Urgent redesign and RN retraining of high-risk infusion administration was necessary. Process redesign focused on critical safety elements with administration precision and observed reliability requirements. The target condition specified budget neutral, inflow retraining of 527 inpatient RNs' within ninety days.

Methods: Root cause analysis of infusion errors was performed. Defects were sorted into "defect families." with pareto analysis showing 84% of defects occurring during infusion administration. Additional analysis identified five best practice steps that if not followed threatened safety. Two Clinical Nurse Specialists were trained in an established job instruction method prior to simulated design. The method allowed of simplified rapid training, in flow competency demonstration and observable results.

Outcomes: Ninety day follow up showed 98% of nursing staff completed initial training with 90% of all trained RNs completing observational skill validation. Eight-month post analysis confirmed a 75% reduction in reported infusion events.

Conclusion: Targeted root cause analysis and scripted, standardized training positively impacts changes in nursing practice patterns.

Implications for Practice: Practice simplification improves resource training efficiency. Job instruction techniques that leverage tactile, visual and auditory learning through repeat back methods can positively impact organizational outcomes.

Biography:



Ellen Noel MN, RN, CPHQ is a quality systems leader, lean healthcare expert, innovation facilitator and senior advisor with Virginia Mason Institute. She is recognized as an experienced clinician, coach and mentor with a demonstrated history of successfully supporting people in their hospital & health care transformations. Highly skilled in deployment and sustainment of quality improvement efforts using a unified management approach to improve structures and processes. Ellen's strong ability to lead stakeholder groups through thinking routines empowers and inspire teams to produce measurable results.

ellen.noel@virginiamason.org

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Discarding my 20-Year Teaching Playbook during Covid 19

Barbara M Elliott

Nipissing University, North Bay, Ontario, Canada

Over the past 20 years, through continuous education and professional development opportunities, I have scripted a teaching-learning playbook – a book that has been instrumental in guiding my day to day instructional practices. This playbook, however, was not overly relatable when the world was upended by the ruthlessness of Covid-19. As a professor who teaches nurses by distance, I was not forced to switch my course delivery method because of the pandemic. In fact, unlike many other university professors, my teaching continued with little to no interruption during the early weeks of Covid-19. I continued to teach my courses using my typical and trustworthy tactics. As the effects of the pandemic became more extreme, I could sense a change in my students who were not only students, but also nurses working the front lines. While I was accustomed to working with students requiring additional support as they learned course concepts or crafted assessments, I felt ill-equipped to help students navigate a pandemic. As student concerns were voiced, I was forced to stop and think - to think about how I could help. I felt a yearning to help my students succeed in their courses but most importantly, survive the pandemic. This presentation highlights my experiences as a nursing professor during the Covid-19 pandemic and how these experiences have forever altered my teaching-learning playbook.

Biography:



Dr. Barbara Elliott teaches in the RPN to BScN Blended Learning Program within the School of Nursing at Nipissing University. Her research interests include fostering NCLEX success, faculty mentorship strategies and interprofessional collaboration. She is author of a provincial workshop 'Clinical Teaching: A Workshop for Health Science Instructors.' She is also a member of the Institutional Research Grant Committee at Nipissing University, a reviewer for the Canadian Association of Schools of Nursing (CASN) and an International Registered Nurse Examination Item Writer for The National Council of State Boards of Nursing.

barbarae@nipissingu.ca

Notes:

2nd Virtual Conference on

Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

The Secret to Achieving Joy and Avoiding Burnout

Cheryl M. Smith, RN, MSN, EdD, FNP

Columbus State University, Columbus, GA, USA

Joy in the workplace makes a difference for nurses and nurse educators. Research shows when healthcare professionals experience joy, good things follow. Joy will contribute to not only positive emotions, but also to patient safety and quality care (Lucien Leape Institute, 2013). Joy in work is an essential resource for the enterprise of healing (Hertel, 2019) and learning, and occurs when all team members, no matter their role, find meaning and purpose in what they do. Burnout and lack of joy are challenges for nurse educators. Nurse faculty face high job expectations associated with teaching, service, and research, heavy workloads, and life balance issues. The educator shortage also places strain on nursing faculty and is associated with feelings of hopelessness and difficulties in dealing with work, or in doing one's job effectively (Owens, 2017). Educator burnout affects the lives of students, educators, and instructors and contributes to the growing nurse educator shortage. Loss of joy is more than a personal issue; it is an organizational issue. The Institute for Healthcare Improvement (IHI) Framework for Improving Joy in Work describes joy as being more than absence of burnout or a concern of individual wellness; it is created by the system and occurs across healthcare organization (2017). A healthy practice/work environment that is supportive and collaborative must be nurtured by leaders in health care organizations and educational institutions.

Biography:



Cheryl Smith has been a nurse educator for 30 years and has taught extensively in the online environment. She has presented at numerous national and international conferences on the pedagogies of online learning that promote student engagement and positive student outcomes. She is a proponent of putting the student at the center of their own learning in a stress-free environment which results in improved student learning.

smith_cheryl6@columbusstate.edu

Notes:

Looking at Student Workload – Is it an issue?

Peggy Mossholder

Georgia Southern University, USA

Background: The Carnegie Unit defines one semester unit of credit as equal to a minimum of three hours of work per week for a semester (Silva, et al., 2015). With an increase of on-line courses, there seems to be more activities and out of class assignments. Students complain of excess work outside of class. When a student is over extended they tend to do the work to get it done, grades may be in jeopardy, and all nursing schools have concerns regarding NCLEX pass rates. In the process of planning a consolidation of two nursing programs, this was a time to identify the best approaches.

Objective: To analyze the workload of a cohort and develop a tool to guide course content planning for faculty use.

Methods: Data collection from one cohort of students (#168), faculty (#20), and documents such as syllabus of each course. A chart of data collected was formulated and requested faculty to confirm accuracy of the analysis.

Results: Over a semester, the cohort was assigned 82 hours/week additional outside assignment (AOA) leaving only 34 hours of free study. Using the 2 plus 1 tool, they should be allowed 35 hours/week of AOA and 68 hours/week of free study time.

Conclusion: The importance of collaboration among all course coordinators was critical to allow the student adequate time to study and perhaps do AOA with consideration and thought rather than to check it off as done.

Biography:



Peggy Mossholder has practiced as an RN for 30 years, primarily in end of life care. Completed a masters and PhD in nursing education to maintain as an academic professional. Both thesis and dissertation were focused on end of life topic. The dissertation was the Transformation of nursing student attitudes toward care of the dying. An interest in student learning and general practices of teaching is an interest as well. Have maintained a faculty role in nursing for 17 years, the teaching experience expands from pharmacology, Adult care, undergraduate research, and pathophysiology to an elective course on palliative care nursing.

mmossholder@georgiasouthern.edu

Notes:

proceedings of

**2nd Virtual Conference on
Pediatrics & Neonatal Health Care**

March 19-20, 2021 (EDT)

**KEYNOTE
Day 2**



Jelena Roganovic

University Hospital Rijeka, Croatia

Late effects of the treatment for childhood cancer

During the past decades, a tremendous improvement has been made in the treatment of pediatric cancer, with more than 80% of children being cured in most developed countries. However, aggressive antitumor therapy mostly responsible for this survival rate can also produce adverse long-term health-related outcomes, referred to as late effects. Late effects can manifest years after completion of cancer treatment. It is estimated that more than 60% of pediatric cancer survivors develop at least one chronic condition and almost 30% experience serious or life-threatening complications during adulthood. The common late effects of childhood cancer encompass several broad domains including growth and development, organ function, reproductive capacity and health of offspring, secondary malignancies, and psychosocial sequelae. Late effects can be anticipated based on therapeutic interventions, but the magnitude of risk and the manifestations in an individual survivor are influenced by numerous factors which are tumor-related, treatment-related and host-related. Any organ system can potentially be affected. Late effects also contribute to the excess risk of premature death. Relapse remains the most frequent cause of death, followed by cause-specific mortality from subsequent primary neoplasms, and cardiac and pulmonary toxicity. Childhood cancer survivorship is a national public health priority. Long-term follow-up care has taken place in a variety of settings: primary care clinics (pediatrics, internal medicine, family practice), pediatric and adult oncology clinics, and specialized long-term follow-up clinics. To facilitate survivor and provider access to appropriate follow-up care, compendium of exposure- and risk-based health surveillance recommendations has been developed, including guidelines, health links and comprehensive reviews.

Biography:

Dr Roganovic is the Full Professor of Pediatrics and the Chair of Pediatrics, School of Medicine University of Rijeka, the Head of the Division of Hematology and Oncology, and the Head of the Department of Pediatrics, Clinical Hospital Centre Rijeka. At the national level, she contributes to the improvement of cure rate of children with cancer, and is interacting with regulatory bodies and parent groups. Dr Roganovic is a certified member of many national and international pediatric hematological and oncological societies. She is the author of more than 350 publications, abstracts and proceedings and several book chapters. She serves as a reviewer and editorial board member for number of journals. Dr Roganovic received several awards, including Patients' Choice Award Winner for 2015-2020, City of Rijeka Annual Award for outstanding contribution to the lives of children with cancer and the humanization of hospital care, and University of Rijeka Foundation Award for the contribution in biomedical and biotechnical sciences.

roganovic.kb@crimail.com



Mary Estelle Bester

Assistant Professor, Georgia Southern University, USA

Technology in Education during a pandemic: friend or foe?

Background: The Covid-19 pandemic required sudden changes for students, educators, teaching, and learning strategies. The Spring 2020 semester will be written in history books as the watershed in higher education. Suddenly we had to find alternatives for what was believed to be the only way to train health care workers like nurses, being face-to-face classes, and hands-on training at the bedside.

The role of technology pre-pandemic: Technology has not been a stranger in Nursing Education. Software applications with virtual and digital patients to learn assessment and clinical problem-solving and reasoning strategies have been available for some time. In the classroom, various Learning Management Systems (LMS) have been implemented. These LMS allowed for more flexibility for the student in selecting learning strategies, highlighting importing information allowing diverse assessment strategies, and promoting peer-to-peer discussions. However, it soon became evident a smooth transition requires different skillsets of both student and educator.

Significance of the presentation: This presentation addresses the challenges the author encountered during the transition process. Through examples, real-life experiences and solutions from an educator and student perspective are provided. Covid-19 experiences forced educators to think differently. Valuable lessons learned, will enable us to see flexibility and adaptations in a positive light, rather than arguing how it impacted negatively on learning experiences and outcomes.

Biography:

After a 20- year career in Nursing Education at a University in South-Africa, the presenter spent 11 years at a hospital in Saudi-Arabia in Nursing Practice & Quality. Moving to the USA in 2016, she is since August 2017 employed at the School of Nursing at a University in Georgia. The use of technology in enhancing teaching and learning has been an interest and passion throughout her long nursing career!

mbester@georgiasouthern.edu

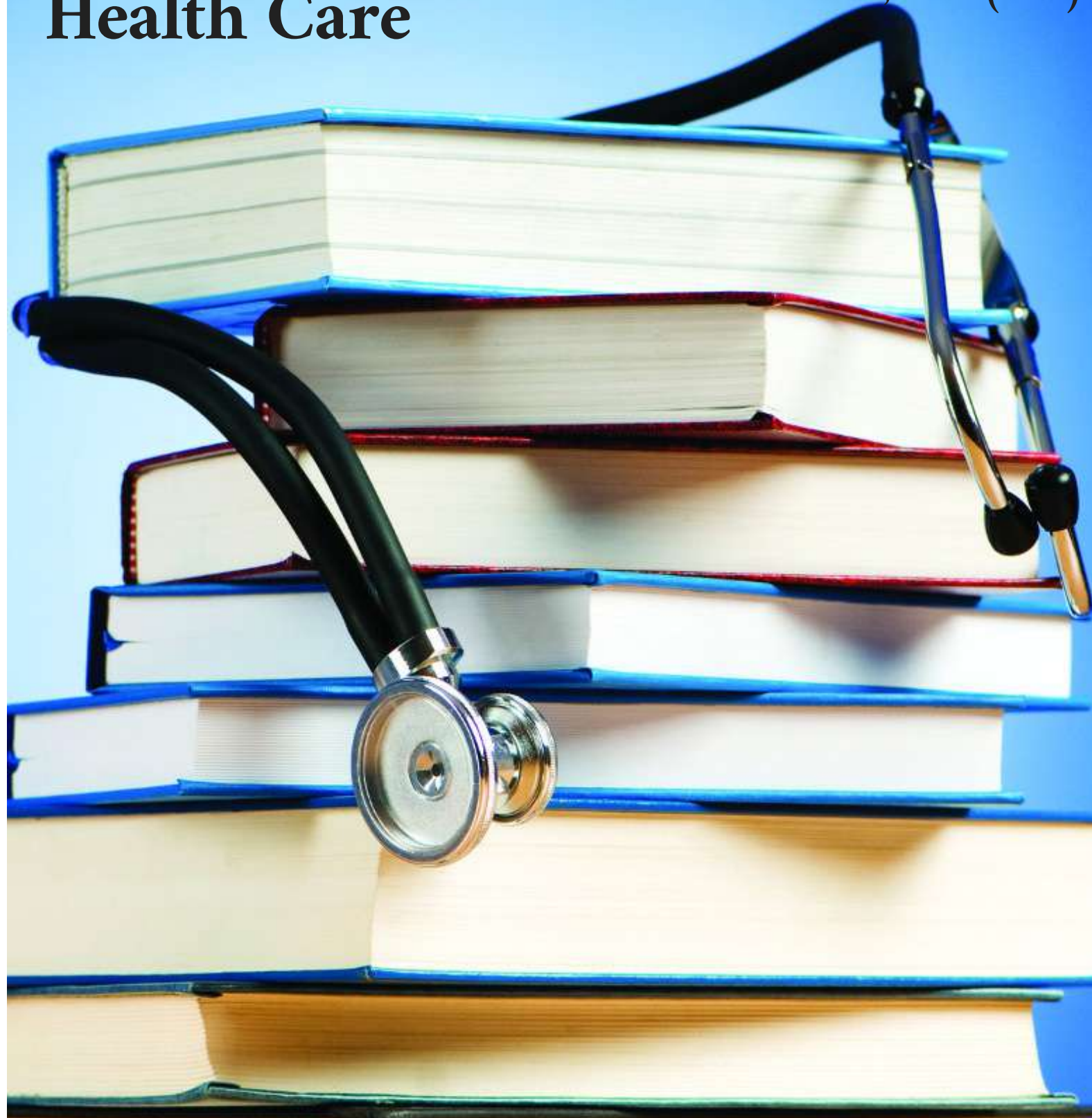
Notes:

proceedings of

2nd Virtual Conference on

Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)



Scientific Tracks & Abstracts

Day 2

March 19-20, 2021 (EDT)

Fever is not a symptom in covid-19. None of the diseases require fever as its symptom

K. M. Yacob

Marma Health Centre, Kochi, Kerala, India

We have been hearing for centuries that 'fever is not a disease but a symptom'. Physicians say that fever is a symptom of diseases like flu to cancer. The conservative fever definition, diagnosis, and treatments are based on fever as a symptom. All the studies related to fever as a symptom of a disease have been done without knowing the Purpose of the temperature of fever is. Without knowing the Purpose of the temperature of fever, how can fever included in the symptom definition? Temperature between 38 to 41 o centigrade can be symptom of a disease? Most of the diseases may not have a fever. Sometimes it disappears. Then, is fever a symptom of which disease? Symptom Definition is the only parameter necessary for a Symptom. As with any or all other definitions, symptom definition should describe the symptom scientifically. If it cannot describe clearly, there is no use of a symptom definition. A symptom is a departure from normal function or feeling which is noticed only by a patient, indicating the presence of disease or abnormality. One cannot be understood directly the temperature is elevated in the hypothalamus. A mechanical device is necessary to measure elevated temperature in the hypothalamus. In symptom definition, fever definition can't be found. The elevation of body temperature is not included in symptom definition.

Biography:



A practicing physician in the field of healthcare in the state of Kerala in India for the last 30 years and very much interested in basic research. My interest is spread across the fever, inflammation and back pain. I am a writer. I already printed and published nine books on these subjects. I wrote hundreds of articles in various magazines. After scientific studies, we have developed 8000 affirmative cross checking questions. It can explain all queries related to fever.

yacobkm@gmail.com

Notes:

Rehabilitation considerations during the COVID-19 outbreak

Anas Al ramahi SSN

Amana Health Care Hospital ,UAE

In March 2020 the World Health Organization (WHO) declared the outbreak of a novel coronavirus disease (COVID-19), caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), to be a pandemic. Across the Region of the Americas all countries and territories have reported cases of COVID-19. WHO, PAHO and public health authorities around the world are taking action to contain the spread of COVID-19 and manage its impact. While most people develop mild or uncomplicated forms of COVID-19, it is estimated that approximately 14% are associated with severe acute respiratory infection (SARI) and may require hospitalization and oxygen support, and 5% require admission to an intensive care unit (ICU).¹ Early reports from China indicate median (IQR) ICU lengths of stay for patients admitted with COVID-19 of 8.0 (4.0–12.0)² and 8.0 (4.0–11.0)³ days. Rehabilitation improves the health outcomes of patients with severe cases of COVID-19 and benefits health services through: – Optimizing health and functioning outcomes: Rehabilitation may reduce complications associated with admission to an ICU, such as post intensive care syndrome (PICS);⁴ it aims to optimize a patient's recovery and reduce the experience of disability. Rehabilitation interventions can help address many consequences of severe COVID-19, including physical, cognitive, and swallow impairments, and provide psychosocial support. Older patients, and those with pre-existing health conditions, may be more vulnerable to the effects of severe illness, and rehabilitation can be particularly beneficial for maintaining their prior levels of independence. – Facilitating early discharge: Where there is high demand for hospital beds, patients may need to be discharged more rapidly than ordinarily. Rehabilitation is particularly important in preparing patients for discharge, coordinating complex discharges, and in ensuring continuity of care. – Reducing the risk of readmission: Rehabilitation helps to ensure patients do not deteriorate following discharge and require readmission, which is critical in the context of hospital bed shortages.

Biography:



AnasAlramahi is a highly experienced ICCU nurse who after 7 years working in ICU, CCU , LTVU in Jordan and UAE become Senior staff nurse in Amana healthcare hospital UAE , Anas has a passion for promotion of evidence based , quality care ,Anas current role In Amana is Shows evidence of up to date evidence based practise and practical expertise amongst interdisciplinary team to enhance quality of service and staff development , Presents/delivers training within team and facility and where appropriate conference nationally or internationally

Anas.alramahe@gmail.com

Notes:

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Education Innovation in 2021

Tracy Roake

Danat Al Emarat Hospital, UAE

The intention of this presentation is to provide the participants with an overview of how Danat Al Emarat Hospital Education department successfully established, adapted and continued their mandatory education for Clinicians, Allied health staff and Student/intern activities during a global pandemic. This presentation will describe the journey to establishing mandatory training programs in a busy women and children's hospital while creating affective communication pathways and appreciation for a variety of training and education activities for a multi-professional team, during a global pandemic. The presentation will aim to knowledge share and highlight the different processes and the importance of continuing education in all event with subtle adaptation and recommendation during Covid-19 pandemic.

Biography:



Dr Tracy Roake is an advanced midwife and general nurse. She is currently the Head of Education and Student Affairs at Danat Al Emarat Hospital, Abu Dhabi. Dr Tracy has been awarded aDBA, MBA, M.Sc. Healthcare management degree, and has a Master of Applied business research; she is a qualified hypnobirthing instructor and has a diploma in Aromatherapy, Herbalist, Reflexology and Naturopathy. She is a BLS, NRP and PROMPT instructor. She has a great passion for midwifery and pioneered all the first private hospital water births in KZN, South Africa. She is also a facility member of the PROMPT foundation in the United Kingdom.

tracy.roake@danatalemarat.ae

Notes:

Emotional intelligence

Mohammad Shaban

Health Point Hospital, UAE

Background: Emotional intelligence has been widely accepted in the literature as part of nursing work, however the contribution of emotional intelligence in the nursing context requires further study.

Aim: This paper consider the value of emotional intelligence to nursingpresent an analysis of the emotional intelligence and descriptive correlational design with patients, nursing colleagues, and multidisciplinary team, and.

Method: A descriptive, observational and correlational study of nurses in there working area. Three variables were measured: emotional intelligence, coping styles (the Questionnaire for Dealing with Stress) and satisfaction with nurses own learning (Satisfaction and Self-Confidence in up to date knowledge and skills).

Results: Emotional intelligence plays an important part in forming successful human relationships. It's important in establishing therapeutic nurse–patient relationships but carries the risk of ‘burnout’ if prolonged or intense. To prevent this, nurses need to adopt strategies to protect their health. The potential value of emotional intelligence in this emotional work is an issue that still needs to be explored.

Conclusions: Analysis of the literature suggests that the modern demands of nursing draw on the skills of emotional intelligence to meet the needs of direct patient care and co-operative negotiations with the multidisciplinary team. EI can be further understood as the aptitude to combine emotion with intelligence, utilizing emotions as a means to support problem solving and other stress management. The significance of this needs to be recognized in nurse education. Nonetheless, emotional intelligence cannot be developed quickly enough through interpersonal skills training and therefore it is essential that nurse educators create assessment strategies that will identify emotional intelligence at recruitment.

Biography:



I have MSc in Leadership in Health professions Education, and Bachelor in Nursing in 2003. My nursing journey exceeding 17 years in many hospitals in Middle East and different positions (RN, Charge nurse, Nursing supervisor, Life support coordinator and Clinical educator), I notice that nurses are the heart of hospital which keep the hospital active and proactive. Without nurses efforts there will be continuity in medical progress and treatment progress. That required to keep the nurses updated always with the recent knowledge and practice. That lead to enhance the treatment plan and improve multidisciplinary efforts of care giver.

mohd_shaban1981@yahoo.com

Notes:

Effects on Metacognition and Ruminative Thought Levels of Metacognition Training (D-MCT) Given to Major Depression Patients

Safiye Ozguç (PhD, Lecturer) and Derya Tanrıverdi (Ph.D, Professor)

Gaziantep, Turkey

Statement of the Problem: Major depressive disorder is a common mental health problem that affects millions of people worldwide, with frequent negative effects on people's quality of life. Therefore, it is important to treat the problem effectively. Methodology & Theoretical Orientation: Research is carried out in the pretest-posttest and randomize experimental design to detect effect of metacognitive training applied on metacognition and ruminative thought levels. Total of 62 patients diagnosed with depression, including 32 experimental and 30 control groups, compose the sample of the study. The data were collected by 'Metacognition Questionnaire (MCQ-30)' and 'Ruminative Thought Style Questionnaire (RTSQ)'. Metacognition training was applied once a week as a group training as a total of 8 sessions. Findings: In the pre-test, no significant difference was observed in the experimental and control groups in terms of the mean scores of MCQ and RTSQ. In the post-test, it was determined that the mean scores of MCQ and RTSQ were significantly decreased in the experimental group compared to the control group. Conclusion & Significance: Metacognitive training has been found to be effective in treating depression. It has been determined that metccognitive training is effective in decreasing the pathological metacognitions and ruminative thought levels of the patients. In the treatment of depression, it is recommended that metacognitive training be considered as a component of depression treatment.

Biography:



Safiye Özgüç, Gaziantep University Faculty of Health Sciences, Dr. She works as a lecturer. She deals with current issues in mental health and psychiatric nursing she. Derya Tanrıverdi works as a professor at Gaziantep University Faculty of Health Sciences. It strives to enrich the application areas of mental health and psychiatric nursing.

safiyekarakoyun@hotmail.com

Notes:

2nd Virtual Conference on Pediatrics & Neonatal Health Care

March 19-20, 2021 (EDT)

Revitalizing Broken Dreams: First Year Female Student Nurses' Perceptions Regarding Their Decision to Join Nursing as a Career

Pir Bux Jokhio, Pumhsw
Pakistan

Background: Nursing is a dynamic profession. On the other hand, due to its poor social image, it is not regarded as a first career choice. Nurses' poor social image converts into a big challenge as the country is facing chronic nurses' shortage and retention issues. Both problems warrant devising policies to increase students' enrollment in nursing programs. Therefore, it is very necessary to explore nursing students' perceptions regarding their decision to choose nursing as a career.

Methodology: A qualitative descriptive study was employed which included a convenience sampling and a focus group discussion method to collect the data. Data were analyzed through thematic content analysis procedure. Two group discussions were arranged with 08 participants in each group. All the participants (16) were freshly enrolled in the first year (04-year) Bachelors' of Science in Nursing (session: 2018-19) at a Nursing Institute located in a female Medical University of Sindh Province.

Results: One main theme 'nursing as an opportunity to fulfill broken dreams' and four supporting themes as 'broken dreams; nursing as a way to continue your education; feeling as a nursing student and nursing as my destiny' were unearthed.

Conclusion: Student nurses are demotivated because their first dream remained unfulfilled. It is their confidence in themselves and curiosity to continue their education (that they stood up and decided to join nursing) to revitalize their broken dreams. A big opportunity falls on the shoulders of the Institute specially and teaching faculty, in general, to continuously support student nurses as they reenergize themselves to grow as professional and ethical nurse practitioners in the coming days

Biography:



My name is PIR BUX JOKHIO, assistant professor Nursing at Begum Bilqess Sultana, Institute of Nursing, Peoples University of Medical & Health Sciences for women Nawabshah, SBA Pakistan.

pjokhyo@pumhs.edu.pk

Notes:

Importance of Developing Critical Thinking in Nursing Education

Jeanne Churchill

Columbia University School of Nursing, USA

To be critical means to question, make sense of and analyze. Being critical one examines his or her own thinking and thinking of others (Facione, P.A., 1990). As early as 1932, the NLN recognized critical thinking as being an important concept for nursing education. Nurses confront complex problems and decisions on a daily basis that require critical thinking in order to identify patient needs, problem solve and make appropriate clinical decisions (Yelderune, B., Ozkahraman, S. & Karabudak, S.S., 2011). Critical thinking is especially vital as nurses face an increase in ethical and moral dilemmas with advancements in health care. As educators it is important we recognize learning is a lifelong process and there are essential elements of critical thinking and factors which influence the students' ability to develop their critical thinking skills. When developing a nursing curriculum which integrates this knowledge and skill, it is important nurses and nursing students be taught HOW to think rather than WHAT to think. Case studies, concept maps, reflective narratives and student based clinical rounds are methods that help the student improve their ability to think critically (Chan, Z.C.Y., 2013). By providing these tools to enhance their cognitive skills of analyzing, reasoning and transforming knowledge, students achieve the critical thinking abilities essential for learning professional accountability and providing safe and comprehensive nursing care.

Biography:



Dr. Jeanne Churchill is an Assistant Professor and Pediatric Course Director for the Master's Direct Entry program at Columbia University. She is a Pediatric Nurse Practitioner and worked in Pediatric Endocrinology before becoming a faculty member at Columbia. Jeanne has been teaching at Columbia for the past 18 years and has been recognized by the university for her excellence in teaching. Two of her interests in nursing education has been the use of Reflective Narratives and techniques to improve nursing students' critical thinking skills.

jnc37@columbia.edu

Notes:

The Influence of a Nurse's Physical Appearance on the Perception of Competence

Tracey Long

Arizona College of Nursing, USA

Statement of the Problem: The image of the professional nurse has changed throughout history. The general public regards nurses as the most trusted profession for decades. With the growing obesity trends in the United States, nurses no longer represent the traditional healthy role model. Nurses often are hesitant to educate patients about healthy habits when they are obese themselves. The study question seeks to know if the nurse's physical appearance influences a patient's perception about the nurse's competence.

Methodology & Theoretical Orientation: The study was a phenomenological qualitative survey with patient populations in Central and South America and the United States sampled in clinics.

Findings: There is a generational and cultural effect on the perception of the image of a nurse as a healthy role model. Central and South Americans didn't view obesity as a negative feature in their nurse but did view facial piercings and tattoos as distracting. Americans were less trusting of an obese nurse but not negatively impacted by a nurse with facial piercings or tattoos. The older generation in any country perceived nurses as more competent if they were of an ideal weight and didn't have facial piercing or tattoos. Patients in the countries surveyed all preferred a nurse who didn't smoke.

Conclusion & Significance: Nurses need to be aware of their physical appearance and the influence it may have on their perceived competence in the eyes of their patient.

Biography:



Dr. Tracey Long has been an RN for 34 years and has worked in critical care nursing. She works in primary care and endocrinology as a Family Nurse Practitioner and as a health coach. She earned her BSN from BYU, a master's degree in Public Health, a MSN in Advanced Practice Nursing, and a PhD in Nursing education and leadership. She is also an adjunct Professor of Nursing for Arizona College of Nursing. She teaches online courses in diabetes, critical care, Medical Spanish, emergency preparation and genealogy. One of her favorite activities is taking nurses and nursing students internationally to offer free medical clinics to underserved communities. As an author she has written three children's health books, three books on family history, and published articles on cultural competency training. With her college sweetheart they have 6 children who teach her what's really important in life.

longforhome@gmail.com

Notes:

Examining Nursing Student Dropout Behavior Using Event History Analysis

Michele L. Blackwell

School of Nursing, Franciscan Missionaries of Our Lady University, USA

Background: National nursing shortages, declining enrollment, and high rates of attrition pose significant concerns for undergraduate nursing programs.

Objective: This study examined student-level data to identify factors that predict student departure from an undergraduate nursing program. The following research questions guided this study: 1) Which student-level variables predict nursing student dropout risks over time? 2) Which student-level variables predict nursing student retention over time? and 3) When are nursing students most likely to drop out?

Methods: The methodological approach was event history analysis, a form of linear regression that measures the likelihood of an event (nursing student dropout) at a particular time (semesters in the nursing program), based on covariate factors. Variables included age at admission, race/ethnicity, gender, pre-nursing GPA, grade in the pre-requisite pathophysiology course, and entrance exam score. Time-varying regressors included semester-specific GPA and financial aid status. Data analysis revealed a significant dropout risk associated with older age at admission, lower entrance exam scores, lower pre-nursing GPA, and lower grades (C or lower) in the pathophysiology course.

Results: In models including the time-varying regressors, only semester-specific GPA achieved statistical significance in predicting dropout risk. In both unadjusted and adjusted models, students of Color were more likely to drop out than White students, with Asian students being at highest risk. Financial aid presented a complex effect on dropout risk, with conflicting predictions for different semesters. When coded as a dichotomous variable, some financial aid decreased overall dropout risk compared with no aid. Students were most likely to drop out in the first semester of the 5-semester clinical program.

Conclusion: The study institution can use these results to inform decisions on retention efforts aimed at first-semester students, increased efforts for scholarships, and potential curricular changes in the pathophysiology course

Biography:



Dr. Blackwell has been an RN for 24 years. She is an assistant professor at Franciscan Missionaries of Our Lady University School of Nursing, where she has taught for 13 years. She has extensive experience in teaching across the curriculum in both classroom and clinical settings, as well as curricular development and student retention program development. As a nurse educator and undergraduate retention coordinator, her personal experience with nursing student dropout drives her passion for finding ways to improve the educational experience and success for nursing students.

Michele.Blackwell@franu.edu

Notes:

Palliative nursing challenges during Covid19 : Lesson learned and recommendations

Rajni Sharma

Mahamana Pandit Madan Mohan Malaviya Cancer Centre & Homi Bhabha Cancer Hospital, Varanasi, U.P., India

With the healthcare system revolution in Saudi Arabia and the high turnover rate among nursing staff, new grad Saudi Nurses are considered one of the most important resources to achieve the targeted staffing plan. Putting in the mind the key role new nursing graduates play in maintaining the future nursing workforce, developing a healthy environment that may protect new graduate nurses from burnout is important. The novice newly hired nurses are considered one of the challenges to their employers. These include being unready to perform core generic nursing skills and having a difficulty to bridge the gap between their classroom experiences to real-life clinical practice. In relation to that, studies showed that burnout among new graduate nurses is troubling. 66% of new graduates experienced severe burnout, primarily related to negative workplace conditions. Facilitating the role transition for newly hired novice nurses from student's role to a professional nurse role in a healthy learning environment is a big challenge for nursing leaders in Saudi Arabia to prevent their burnout, retain them, and maintain patient safety. Through this study we will explore the effect of RN Residency program on the smooth transition for the newly hired novice nurses, retaining them, and improving their confidence and competence level. Quasi experimental study design was used to the selected consecutive sample from the RN residents from batch 1 and 2 at King Saud Medical City, Saudi Arabia. Data will be collected by using the turnover rate key performance indicator and the Casey-Fink Graduate Nurse Experience Survey (revised). This study will be guided by the Kirkpatrick Evaluation Framework (figure 1). This framework shows Kirkpatrick's model is based on four levels of evaluation, where each level builds on the previous level.

Biography:



Dr. Rajni Sharma currently works at Mahamana Pandit Madan Mohan Malaviya Cancer Centre, Varanasi (Level 1 Cancer Hospital) under Department of Atomic Energy, India. Dr. Rajni has 10 year of Clinical and academic Experience, She does research in Medical Science Oncology and Evidence based practice. She is Eminent Speaker and Educator & has presented and published her research work at various National, International and Worldwide platforms.

rajnisharma429@gmail.com

Notes:

Educational needs of medical sciences staff research area working in the hospitals of Ayatollah Mousavi of Zanjan and Al-Ghadir of Abhar in 2020

Mehran Tahrekhani

Zanjan University of Medical Sciences, Iran

Introduction: Education acts as a backbone to improve the level of knowledge and to bring about behavioral change and acquaintance with different areas of research is impossible but through education. This study aims to investigate the educational needs of research area for the medical sciences staff working in two hospitals of Ayatollah Mousavi of Zanjan and Al-Ghadir of Abhar in 2020.

Methods: This is a descriptive cross-sectional study conducted on non-faculty staff members of Ayatollah Mousavi Hospital in Zanjan and Al-Ghadir hospital in Abhar. In this study, a researcher-made questionnaire including two sections of demographic information and educational needs was used. Questionnaires were systematically and randomly distributed among nurses, medical and paramedical (except nurses) and administrative groups and data were analyzed in SPSS software.

Result: 433 people participated in this study, of which 90 (20.8%) were men and 343 (79.2%) were women with mean age of 33.78 ± 7.55 and work experience of 9.34 ± 7.21 . The highest educational need of both hospitals was associated with the improvement of specialized English language level of the research staff (68.5%) and the lowest was the design of posters for accepted papers from congresses and conferences (39.8%).

Conclusion: Identifying educational needs in various areas of research and prioritizing it among hospital medical sciences staff in addition to reducing resource waste, leads to the production of required knowledge and promotion of community health level. Health workers, including hospital medical sciences staff can utilize this study as a guide for medical sciences staff training needs assessment calls and acquaintance with various areas of research.

Key words: Education, research, staff, hospital, medical sciences

Biography:



Mehran Tahrekhani: Master of Nursing, Clinical Research Development Center of Ayatollah Mousavi Hospital, Zanjan University of Medical Sciences, Zanjan, Iran

Mehran.tahrekhani@gmail.com

Notes:

Assessment of Knowledge and Practice Iodized Salt Utilization and Associated Factor among Pregnant Women in Basso Woreda, North Shoa Zone, Amhara, Ethiopia, 2020

Sisay Shewasinad Yehualashet

DebreBerhan University, DebreBerhan, Ethiopia

Introduction: Iodine deficiency in pregnant women defined as a median of urinary iodine excretion of less than 150µg/L in pregnant women. When pregnant women are lack of iodine utilization, the fetus will not produce enough thyroxin, causing intrauterine growth retardation, which could lead to fetal loss that includes miscarriages, stillbirths and premature deliveries. The survived infants born from such mothers may also have severe mental problems such as congenital anomalies, speech and hearing impairment and cretinism. Therefore the objective of this study is to assess the knowledge and practice of iodized salt utilization and associated factor among pregnant women in Basso woreda, Ethiopia, 2020

Method: A community-based cross –sectional study design was conduct among 457 pregnant women in Basso woreda. The data process and analysis was done using a statically package for social science (SPSS). Finally, statistical significance was disclosed at $P < 0.05$ at 95% CI to identify determinant factors of knowledge and utilization of iodized salt.

Result: About 57.8% pregnant women had poor knowledge on iodized salt utilization and 38.3% pregnant women had poor practice on iodized salt utilization. Most of the household 409(89.5%) were found (≥ 15 ppm) test result of salt Parts Per Million (PPM) in their home.

Conclusions: The knowledge and practice status of pregnant women towards iodized salt utilizations were low, which was 42.2% and 61.7% respectively. In this study, ethnicity, income and level education, were identified as factor affecting the knowledge and practice status of iodized salt utilizations of the pregnant women. Depending on the finding of the result policy maker should review their program which used to upgrade the level of iodized salt utilization practice and level of knowledge on iodine on the community especially pregnant women.

Key words: knowledge, utilization, practice, salt, pregnancy, Ethiopia

Biography:



Sisay Shewasinad Yehualashet -(Assistant Professor, MSc on pediatrics and child health nursing, BSc Nurse)

|Department of nursing , College of Health Sciences, Debre Berhan University, Debre Berhan.

sisyehu@gmail.com

Notes:

Prevalence And Suggested Causes Of Preeclampsia Among Pregnant Women Attending Antenatal Clinic In Central Hospital Warri, Delta State, Nigeria

Juliet Alabrah

University of Port-Harcot Teaching Hospital, Rivers State of Nigeria

Preeclampsia is a hypertensive disease of pregnant women, which accounts as one of the leading causes of maternal mortality in Africa. This study investigated the prevalence and suggested causes of preeclampsia among pregnant women who attended antenatal clinic in Central Hospital Warri, Delta State, Nigeria. The study aimed at assessing the prevalence of preeclampsia and its associated factors among pregnant women. The specific objectives of the study were to determine the overall prevalence of this disease among pregnant women who attended antenatal clinic, and to juxtapose the causes of this disease with socio demographic factors, obstetrical characteristics and clinical characteristics of subjects. The study adopted a descriptive cross-sectional approach, using a purposive sampling technique to examine 200 pregnant women in the study. The data collected were coded, tabulated and analyzed with the help of computer software SPSS version 20.0 and Microsoft Excel 2013. The results showed high prevalence (12.0%) of preeclampsia in the study, and revealed the major causes of preeclampsia to be history of high blood pressure prior to pregnancy, family history with preeclampsia, obesity, diabetes mellitus, kidney related problems, poor nutrition prior and during pregnancy amongst other things. Based on the findings, the study suggested that it is important for public health practitioners to increase awareness to educate pregnant women, young women as well as mothers on preeclampsia in order to reduce the burden of maternal mortality.

Biography:



Born on March 14th 1980 into a Christian monogamous home, Juliet Alabrah is an academic enthusiast and has so many academic qualifications in her name. She is a certified Registered Nurse from Delta State School of Nursing Warri, a certified Midwife from Delta State school of Midwifery, Sapele, a safety expert from the Nigeria Institute of Safety Professional Ogunu, Delta State. She has certificate in Basic and Advanced Cardiovascular life support from the Advanced Resuscitation Academy Port Harcourt, Rivers State. She triples also as a Registered Pediatric Nurse from the prestigious University of Port Harcourt, Rivers State. With her unquenchable desire for education, she's currently a final year student of Nursing Administration at Saint Monica University, Cameroon and in few months' time, she would be commencing studies with Kaaf University Accra, Ghana for a Bachelor of Nursing Science Degree. Her goal in life is to put smile on people's face.

julietavwerosuo@gmail.com

Notes:

Demographic, Economic and cultural Predictors of Facility delivery after Antenatal Care in Enugu, Nigeria

Nnadi Sylvia and Nwaneri Ada

University of Nigeria Nsukka, Enugu Campus, Nigeria

Nigeria is still struggling with high maternal mortality, (which is under reported) despite efforts to improve maternal health services. An estimated 40,000 pregnant women died in Nigeria in 2013 with 576 maternal deaths per 100,000 live births. Closely related to maternal mortality are fetal deaths. An increase in the proportion of deliveries in a health facility, where equipment are readily available with a Skilled Birth Attendant (SBA) has been identified as a key strategy to reduce maternal and newborn morbidity and mortality in developing countries. Despite the slight progress made on ANC utilization, skilled delivery care utilization in Nigeria is still far below any acceptable standards with a NDHS report showing that 61% received ANC, whereas only 36% delivered in a facility with 38% assisted by a SBA. This brings up the question “Why is skilled delivery care low in most sub-Saharan countries of which Nigeria is one, despite high antenatal attendance?” The purpose of this study is to determine the Demographic, Economic and Cultural Predictors of Facility delivery after Antenatal attendance. Methodology: The design was a descriptive survey. Sample size was four hundred and one (401) mothers who came to the immunization clinic, with children not older than 9 months of age, from three selected hospitals. A researcher developed questionnaire was used for data collection. Data was analyzed using percentages, mean and standard deviation and Chi square was used to test for association between variables. This was done with the aid of SPSS version 20. The findings showed demographic predictors to be age, marital status, and educational level. The economic predictors were employment type and income level, while cultural predictor was joint decision making by couples. In conclusion, there are strong demographic, economic and cultural predictors of facility delivery in Enugu which needs to be addressed if maternal and infant morbidity and mortality is to be overcome. Recommendations made include education of the girl child to improve facility delivery.

Biography:



NNADI, SYLVIAN. has completed her Master's degree in Maternal and Child Health Nursing from the University of Nigeria Nsukka, Enugu Campus. She is also a Registered Nurse and Midwife with a BSc in Nursing. She is a Senior Nurse Tutor and researcher who has been actively involved in organizing seminars and workshops in her home country.

sylviaugbor2@gmail.com

Notes:

A Spirit of Awareness to Increase Student's Virtual Engagement and Competency Outcomes

Martha K Roper

Wallace State Community College, Alabama, USA

Today's healthcare demands challenge nurse educators to engage and prepare learners as functioning members of a dynamic healthcare team. With the transition to online and virtual learning, research supports the utilization of innovative strategies to increase student engagement and competency mastery. The purpose of this project is to increase virtual student engagement and mastery of concepts needed for safe delivery of patient-centered care. Monthly topics were based on national awareness months, precedence of disease, curriculum correlation, and recognized holidays (i.e., Halloween/Holiday Dress Attire) On remote class days, students were encouraged to wear a specific color t-shirt to support each awareness month. A slide show was created and then reviewed in the online session. It included statistics and symptoms of the disease, Healthy People 2030 Goals, and National Patient Safety Goals that would be applicable when caring for each diagnosis. A Patient Safety Goal Challenge was also included to encourage the student's application of the concepts and competencies. Students eagerly participated and conveyed the activity increased positivity, morale, and thus engagement. Students also felt more aware of Healthy People 2030 Goals, National Patient Safety Goals, and application of goals into clinical practice. In summary, the findings supported the efficacy of using monthly awareness topics to increase student's virtual engagement and mastery of competencies needed for safe clinical practice.

Biography:



Martha K Roper is a graduate of Samford University, where she earned her Master of Science in Nursing Education. Mrs. Roper is a veteran nursing instructor with over 10 years of teaching experience and over 12 years of clinical nursing experience. Mrs. Roper is a National League for Nursing Certified Nurse Educator. She currently serves as the Nominations Committee Chair for the Alabama League of Nursing, and on the American Association of Retired Persons Nurse Volunteer Leadership Team

katie.roper@wallacestate.edu

Notes:

INDEX

Anas Al ramahi SSN	32	Michele L. Blackwell	39
Barbara M Elliott	24	Michele Lee Biscossi	6
Bhausahab Patil	19	Mohammad Shaban	34
Candice Chang Tomas	14	Nashat Abualhaija	5
Cheryl M. Smith	7	Nnadi Sylvia	44
Cheryl M. Smith	25	Peggy Mossholder	26
Cynthia Felton	22	Pir Bux Jokhio	36
Debra Hagerty	8	Rajni Sharma	40
Ece Kaplan	13	Rana S. Abdel Malak	16
Elizabeth M Nkosi	18	SafiyeÖzgüç	35
Faten Ali A. RahimHassani	3	Sampoornam W	11
Jeanne Churchill	37	Sema Konateke	17
Jelena Roganovic	28	Sisay Shewasinad Yehualashet	42
Juliet Alabrah	43	Ellen Noel	23
K. M. Yacob	31	Tracey Long	38
Kalyn M. Renbarger	21	Tracy Roake	33
Martha K Roper	45	Uma Rani Adhikari	12
Mary Estelle Bester	29	Wong Wing Chi Wendy	10
Mehran Tahrekhani	41	Yolanda Harper-Morris	20

