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Scientific Meetings

11th World Congress on

Diabetes & Endocrinology

August 04-06, 2025 | Tokyo, Japan

Venue: ANA Crowne Plaza Hotel Narita

68 Hori nouchi, Orasul Narita, Prefectura Chiba 286-0107, Japan

Scientific Program

Day 1

Scientific Program

August 04, 2025 | Tokyo, Japan

08:30–08:45: Registrations

08:45–09:00: Opening Ceremony

Meeting Hall: Flor

Keynote Presentations

09:00–09:40

Title: Rejection Sensitivity, Intent to Seek Medical Help, and Gender Minority Individuals

Kellyann Garthe

University of Nevada Las Vegas, USA

09:40–10:20

Title: Integrating Artificial intelligence in Nursing Education to Facilitate Critical Thinking: Preparing a Globally Competent Graduate in the 4IR Era

Agnes Makhene

University of Johannesburg, South Africa

Session Introduction

Session Chair: Kellyann Garthe, University of Nevada Las Vegas, USA

Session Co-Chair: Agnes Makhene, University of Johannesburg, South Africa

Tracks

Nursing Education |Healthcare | International nursing Education | Leadership and Professional Development | Medical Surgical Nursing | Mental Nursing | National Health System | Nephrology Nursing|Nurse Practitioner | Nursing in Different Fields and Specialties | Nursing Informatics | Nursing Leadership | Nursing Management | Nursing Research | Cardiology Nursing | Clinical Nursing | Community and Home Health Nursing | Dental Nursing | Diabetic Nursing | Emergency Nursing | Emergency Nursing and Ambulatory Care Nursing | Emergency Nursing and Ambulatory Care Nursing | Environmental Health Nursing | Epidemiology and Community Health |Epidemiology and Community Health | Family Participatory Care| Geriatric & Pediatric Nursing | Geriatric Nursing | Global Nursing | Gynecology Nursing

Oral Presentations

10:20–10:45	**Title: Connectivity activity among nursing instructors fostering collegiality** **Pasquale Fiore** British Columbia Institute of Technology, Canada

Group Photo | Coffee Break 10:45-11:05 @ Foyer

11:05–11:35	**Title: Perceived Impact of Using Virtual Simulation as a Innovative Teaching Methodology** **Natasha Frank** **Stefanie Longo Santorsola** **Wendy Donna Chow** Humber Polytechnic, Canada
11:35–12:00	**Title: Bridging the Gap: A Cross-Sectional Insight into Patient Safety Culture among Nursing Staff in Tertiary Care** **Santhi Nair** Tata Memorial Hospital, India
12:00–12:25	**Title: Addressing the unmet needs of women with breast cancer in Mexico: a non-randomised pilot study of the digital ePRO intervention** **Victor Javier Vazquez Zamora** Instituto Mexicano Del Seguro Social, Mexico
12:25–12:50	**Title: Navigating Financial Toxicity of Cancer: A Family-Centered Perspective from Taiwan** **Chu-Hua Chung** National Taipei University of Nursing and Health Sciences, Taiwan

Lunch Break 12:50-14:00 @ Restaurant Cafe Ceres 1st floor

14:00–14:25	**Title: CIP – Clinical Immersion Programme: Approach to Enhance Nursing Clinical Practice.** **Wu Yiping** KK Women's and Children's Hospital, Singapore
14:25–14:50	**Title: On the relationship between the interdependence of nurse employment behaviors across different workplaces and the quality of inpatient care** **Wen-Yi Chen** National Taichung University of Science and Technology, Taiwan
14:50–15:15	**Title: Nurses' Perspectives On The Degree Of Missed Nursing Care In The Public Hospitals In Hail City, Kingdom Of Saudi Arabia** **Farhan Alshammari** University of Hail, Saudi Arabia

Coffee Break 15:15-15:35 @ Foyer

15:35-16:35 Poster Presentations

P001	**Title: Effect of additional instructional courses on nursing students' ability to perform breastfeeding** **Chi-hua Yang** Min-Hwei Junior College of Health Care Management, Taiwan
P002	**Title: The Effect of Blended Learning on Improving the Learning Motivation and Knowledge of Nursing Students in Interdisciplinary Developmental Care of Premature Infants: Multi-method approaches** **Lin Ya-Wen** China Medical University School of Nursing, Taiwan
P003	**Title: Empowering Oncology Nurses Through Multimodal Simulation: A Clinical Teaching Model to Prevent Chemotherapy Extravasation** **Ting-Ting Chang** National Taiwan University Hospital, Taiwan

Panel Discussion & Certificate Falicitation

Day –1 Ends

Day 2

Scientific Program

August 05, 2025 | Tokyo, Japan

08:30–08:45: Registrations

08:45–09:00: Opening Ceremony

Meeting Hall: Flor

Keynote Presentations

09:00–9:40

Title: Therapeutic Communication, a Nursing Educational Program, Implementation and Analysis, a mixed methods design

Krista Hoek

Anesthesiologist-Intensivist, Netherlands

09:40–10:20

Title: Ethical considerations for effective artificial intelligence implementation in a south african public healthcare system

Sanele E. Nene

University of Johannesburg - Doornfontein Campus, South Africa

Oral Presentations

10:20–10:45

Title: Land acknowledgments gratitude activities by nursing students.

Pasquale Fiore

British Columbia Institute of Technology, Canada

Group Photo | Coffee Break 10:45-11:05 @ Foyer

11:05–11:30

Title: Application of in situ simulation in intrahospital emergency services

José Francisco Villanueva Valverde

Universidad Internacional UNIVERSAE, Spain

11:30-12:30 Poster Presentations

P001

Title: Quiet is Care: Implementing Sound-Sensitive Strategies in Wards to Improve Patient Centered Outcomes

Ting-Ting Chang

National Taiwan University Hospital, Taiwan

P002	**Title:Strengthening Clinical Readiness and Retention: A Competency-Based Pre employment Training Program for Newly Recruited Nurses** **Yi-An Lu** National Taiwan University Hospital, Taiwan
P003	**Title: Effect of additional instructional courses on nursing students' ability to perform breastfeeding** **Chao-Chih Yu** Min-Hwei Junior College of Health Care Management, Taiwan

Panel Discussion & Certificate Falicitation
Day –2 Ends

Day 3

Scientific Program

August 06, 2025 | Virtual

Virtual Mode Zoom Meeting

(UTC +9) Time in Tokyo, Japan

08:00–08:20	**Title: Cracking the Code: Mastering Teen/Young Adult Communication for Nurses and Educators** **Kristen Vandenberg** University of Colorado Colorado Springs, USA
08:20–08:40	**Title: Serenity for the Nurse's Soul** **Kathryn Moore** Emory Healthcare, Emory Saint Joseph Hospital, USA
08:40–09:00	**Title: Bridging Minds: Enhancing Asynchronous Family Nurse Practitioner Education Through Interprofessional Collaboration** **Marguerite Lawrence** Sacred Heart University, USA
09:00–09:20	**Title: SGLT2 inhibitors and sick day rule** **F M Tanvir Alam** Internal Medicine Trainee, Health Education England, Kent Surrey Sussex Deanery, United Kingdom
09:20–09:40	**Title: A Scoping Review of the effect of inhaled drugs on the sleep quality of COPD patients** **Asuka Hashino** Kumamoto University, Japan
09:40–10:00	**Title: Construction of knowledge graph for home self-management of inflammatory bowel disease** **Yu wang** Zhengzhou university, China
10:00–10:20	**Title: Enhancing Clinical Educators' Teaching Skills Through a Diabetic Foot Care Workshop** **Hsueh-Ya Tsai** Chung Shan Medical University Hospital, Taiwan
10:20–10:40	**Title: Reducing the Incidence of Falls among Patients in Chronic Psychiatric Wards** **Su Ching-Ling** Kaohsiung Veterans General Hospital Tainan Branch, Taiwan
10:40–11:00	**Title: Climate change and its impact on child care** **Mary Anbarasi Johnson** College of Nursing, CMC Vellore, India
11:00–11:20	**Title: Interventions to enhance learning and autonomous learning abilities in nursing students: a review** **Yuanyue Ren** Zhengzhou University, China

11:20–11:40	**Title: The factors influencing active aging among older adults in china: A systematic review** **Jinglin HUANG** Department of Pulmonary and Critical Care Medicine, Peking University Shenzhen Hospital, China
11:40–12:00	**Title: Web-based sexual and reproductive health education for early and middle adolescence: a systematic review and meta-analysis** **Ruru Guo** Zhengzhou University, China
12:00–12:20	**Title: Developing Interactive E-Book Curriculum Design Using the ASSURE Model to Enhance Nurses' Competency in Troubleshooting CRRT Machine Alarms** **YI CHEN HUANG** Department of Nursing at Hungkuang University, Taiwan
12:20–12:40	**Title: Literature review on infection control education using virtual reality** **Makiko Yamamoto** Kumamoto University, Japan
12:40–13:00	**Title: Analysis of the Current Situation and Influencing Factors of the Caregiving Burnout among Family Caregivers of Disabled Elderly People: A Cross-sectional Study** **Chang Liu** Zhengzhou University, China
13:00–13:20	**Title: Risk Factors of Sarcopenia in patients undergoing peritoneal dialysis: A cross-sectional Survey** **Hongyan Li** School of Nursing, Shanghai Jiao Tong University School of Medicine, Shanghai, China
13:20–13:40	**Title: Dyadic Perspective on Family Resilience Experiences Among Elderly Peritoneal Dialysis: A Qualitative Study** **Wanying Zhao** Zheng Zhou University, China
13:40–14:00	**Title: Analysis of the Current Situation and Influencing Factors of the Thriving in Life of the Elderly in the Community: A Cross-sectional Study** **Shitong Guo** Zhengzhou University, China

Panel Discussion

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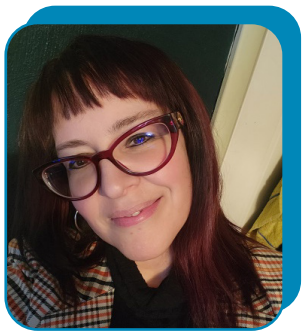
HYBRID EVENT

KEYNOTE PRESENTATIONS

DAY 1



Dr. Kellyann Garthe PhD, RN, CNE
University of Nevada Las Vegas, Kellogg Community College, Battle Creek Michigan, USA

Rejection Sensitivity, Intent to Seek Medical Help, and Gender Minority Individuals

Background: As members of a marginalized group, gender minority (GM) individuals experience rejection in healthcare experiences. Consequently, anxious and avoidant attitudes may develop toward healthcare needs and inform intent to seek medical help (ISMH). When an individual has a hyper-sensitive reaction to perceived rejection, this is termed rejection sensitivity (RS).

Purpose: The purpose of the study was to determine if the independent variable, RS, produced an effect on the dependent variable, ISMH, in GM individuals.

Methods: This correlation, cross-sectional study conceptualized the sensitized attitudes and intentions that emerge from rejection. Participant (n = 100) inclusion criteria was a) age 18 and older, b) having a gender identity that is not traditionally or consistently associated with the male or female gender assigned to the individual at birth.

Results: The multivariate linear regression was used to assess the confounding effects of chosen social determinants of health (SDOH) on the relationship of RS to ISMH.

Discussion: When compared with normative data, this study's sample demonstrated higher levels of RS and lower ISMH, overall. Remarkable aspects emerged as being worthy of ongoing future research. Notably, non-binary GM individuals reported greater health concern than binary GM individuals, especially with regards to mental health. Several SDOH were linked to less ISMH including no regular healthcare provider (HCP), uninsured, chronic anxiety, low income, Caucasian race/ethnicity, less than 26 years old, non-binary gender identity, and non-monosexual orientation.

Keywords: *Rejection sensitivity, Gender identity, Gender minority*

Biography:

Kellyann Garthe, PhD, RN, CNE has been a nurse educator across the United States for over twenty years. Her nursing practice background is in acute care, oncology, and Hospice. Kellyann received her BSN from Western Michigan University, MSN from University of Central Florida, and PhD in Nursing from University of Nevada, Las Vegas. Currently, Dr. Garthe teaches at Kellogg Community College in Battle Creek, Michigan where she is inspired by her amazing students every day.

Prof. Agnes Makhene PhD, MCur, BCur (Ed et Adm), RM, RN
University of Johannesburg, South Africa

Integrating Artificial intelligence in Nursing Education to Facilitate Critical Thinking: Preparing a Globally Competent Graduate in the 4IR Era

Nursing education and curriculum developers need to look at teaching strategies and integration of artificial intelligence modalities that improves technical patient care abilities, decision-making, and interpersonal and communication skills. Artificial intelligence can be used to deal with challenging topics like end-of-life concerns, serious disease, and cultural sensitivity. Data literacy, technology literacy, systems thinking, critical thinking, genomics and AI algorithms, ethical implications of AI, and analysis and consequences of massive data sets are among the courses that research advises adding to the nursing curriculum to integrate nursing informatics. Even while nurses can perform these tasks without AI, emerging AI clinical tools provide the advantage of quickly analyzing vast amounts of data and automating the adjustment of risk assessments to produce forecasts that are more accurate. Artificial intelligence (AI) has the potential to revolutionize nursing in all its facets, including administration, clinical care, education, and policy. The possible effects of artificial intelligence (AI) health technologies (AIHTs) on nursing in general and nursing education in particular are being studied by researchers more and more. A scoping review was undertaken following Arkey and O'Malley's (2205) steps that include with identifying the research question, identifying relevant studies, study selection, charting the data and collating, summarising and reporting the results. Literature search included studies published from April 2020 to April 2024. The databases of Cumulative Index to Nursing and Allied Health Literature, Embase, PsycINFO, Cochrane Database of Systematic Reviews, Cochrane Central, Education Resources Information Center, Scopus, Web of Science, and Proquest were searched using a recognized scoping review methodology. To find pertinent grey literature, a focused website search was conducted in addition to using these electronic resources. Two reviewers independently reviewed the full-text studies and abstracts according to predetermined inclusion and exclusion criteria. Included content covered AI-powered digital health technology and nursing education. A systematic form was used to chart the data, and it was then narratively described into categories. Even though technology and nursing are closely related in the practice of nursing, the technology that supports the provision of care must uphold and reinforce the compassionate ideals that nurses uphold. It is imperative that nurses and nursing students start considering the potential effects of AIHTs on nurse-patient interactions as well as communication styles among patients, caregivers, and other interprofessional team members.

The reform of professional practice and curricula concentrating on intrapersonal and interpersonal intelligence with attitudes that respect human abilities would ensure nursing's place/role in a world dominated by technology and technological advancement. Studies found that when compared to traditional teaching methods, the knowledge-based chatbot system improved students' academic achievement, critical thinking, and learning satisfaction. Using a knowledge-based chatbot system can help students become more adept at critical thinking. These results are in line with other research on the use of knowledge-based

chatbots in educational settings. For instance, Goksu (2016) created a knowledge-based chatbot system to assist eighth-grade students in their sex education classes and discovered that it helped the students make conclusions in various contexts. As a result, it improved their critical thinking skills, and compared to pupils receiving traditional instruction, they performed better academically. Many academics have previously stated that nursing courses that use a combination of situations and advice in their learning style might enhance their students' critical thinking skills (Hwang & Chang, 2020; Hwang & Chang, 2021).

Biography:

Prof Agnes Makhene is an associate professor in the Department of Nursing at the University of Johannesburg where she is teaching the postgraduate diploma in nursing education. She holds a PhD in nursing education. Her research interest is in the facilitation of critical thinking, decolonization of the curriculum and social justice in nursing education. Prof Agnes has vast experience in clinical practice, curriculum development and teaching in higher education. She has presented papers at several international conferences. She has served for 10 years as a board member of the South African Nursing Council, being a deputy chairperson of the Education Committee and a chairperson of the Professional Conduct Committee. She has published articles in peer reviewed journals and has authored two book chapters. Furthermore, she has supervised to completion 23 master's and 4 PhD students. She has served as an external examiner for master's dissertations and PhD theses.

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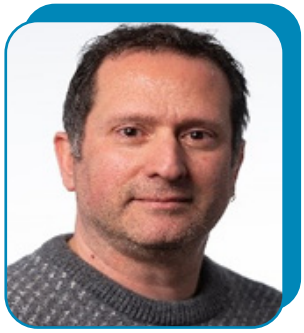
HYBRID EVENT

SPEAKER PRESENTATIONS

DAY 1



Dr. Pasquale Fiore

Doctor of Osteopathic Manual Practitioner (EU), Grad Cert. Ed., M.Sc. Health Adm., B.Sc.N., RN, Canada

Connectivity activity among nursing instructors fostering collegiality

British Columbia Institute of Technology (BCIT), British Columbia, Canada. Nursing instructors are dedicated to their students' success; we discuss what we can do to improve our class activities and provide guidance to new faculty. In the last 5 years, BCIT has experienced increased numbers of faculty in the Nursing Department with a mandate to graduate more students to respond to healthcare system shortages. At this same time how can we build collegiality among instructors in this dynamic growth? Do we know each other? The literature discusses the challenges of developing collegiality among instructors, as well as some possible solutions. The idea was to break this isolation for the term 1 team, fostering a sense of community by developing a connectivity activity among peers. This opportunity allows faculty to come together online by TEAMS and convey with a guest speaker, an expert in a specific nursing field of practice. The guest speaker is usually a nurse working in a dedicated field, passionate enough to share their interest in a 30-minute presentation. Faculty will then have the next 30 minutes to share their perspective, increasing knowledge and learning from colleagues' experiences. This activity is held twice in our 12-week term. The only rule is to not discuss students' issues; the focus is on the faculty and fostering collegiality.

Biography:

Pasquale is a Registered Nurse specialized in psychiatry. He has worked in many clinical areas such as medical-surgical units, psychiatry, respiratory care, community nursing, and as a MediVac nurse with the Northern Quebec community of Puvirnituq. Pasquale has also worked in management as a nursing coordinator for several nursing homes, as the Director of Health Care Program and as a Regional Nursing Director for the private sector of education. He has been working as a nursing instructor for the past 19 years and teaches nursing students in year 1 at the British Columbia Institute of Technology (BCIT).

Prof. Natasha Frank, Stefanie Santorsola, Wendy Chow
Humber Polytechnic, Toronto, Ontario, Canada

Perceived Impact of Using Virtual Simulation as a Innovative Teaching Methodology

Virtual simulations can be useful in various contexts as it permits student learners to model different scenarios and see how different critical thinking decision would play out in a safe environment. It allows students to assess their own performance, analyze the choices they made in the scenario and how their decision can impact patient quality. Students entering nursing have long been struggling with finding a way to enhance their foundational knowledge, skills and judgement in an environment that does minimal harm to the patient yet maximizes their ability to test out their knowledge and abilities. Virtual simulation can be a useful tool to help bridge that gap and provide the safety net to students to apply their theoretical knowledge and test out their boundaries and challenge their critical thinking capabilities. The safety provided in a simulation allows the student to 'safely' fail and learn from their mistakes by providing them the courage to make and correct their errors. While traditional methods of simulation delivery in small groups have been proven to be beneficial in allowing students to critically think, it may not meet the needs of all learners and allow for the safety of failure. The low stress learning platform can help to build on their confidence and lower stress in clinical decision making without judgment and/or evaluation.

Utilizing clinical partners/instructors, in conjunction with faculty, throughout the virtual simulation process has also created and strengthened our clinical partnerships due to their involvement with the debriefing process along with their invaluable clinical insights from their current clinical practice.

Biography:

Natasha Frank is a professor in Practical Nursing and Bachelor of Science in Nursing programs in the Faculty of Health Science and Wellness at Humber Polytechnic. She started her nursing career in the Pediatric Intensive Care Unit where she had the opportunity to care for critically ill patients requiring ventilation support. She is a certified Diabetes Educator and worked with newly diagnosed diabetes patients and their families for educational needs, support and ongoing management. While gaining many valuable skills in the PICU, she found a passion in health promotion and prevention and decided to focus on upstream approaches to healthcare and improving patient outcomes.

Stefanie Santorsola is a nursing professor teaching across the various nursing and personal support worker programs in the Faculty of Health Sciences and Wellness at Humber College. Since starting her career as a registered nurse almost 30 years ago, she has worked in various healthcare settings where she has had the opportunity of working with a variety of clients, situations, and environments. Her journey in nursing has been profoundly shaped by her unwavering passion for health promotion, education, patient care and advocacy. She believes in the importance of continuous learning to stay abreast of the latest evidence-based practices and advancements in healthcare with a focus in advancing nursing practice and improving patient outcomes. Her teaching philosophy revolves around student-centered learning in cultivating a deep appreciation for the nursing profession by empowering students to become lifelong learners, critical thinkers, and advocates for quality patient care.

Wendy Chow is passionate about teaching and mentoring the next generation of nursing professionals. Wendy teaches a variety of courses including nursing theory, health assessment and has developed innovative teaching methods that integrate different learning modalities. Throughout her career, Wendy has been actively involved in professional development and scholarly activities, contributing to numerous conferences and publications. She has been recognized for her leadership and innovation in nursing education, receiving awards from Humber Polytechnic, University of Toronto and Canadian Network for Innovation in Education.

Wendy is a dedicated member of the nursing community, participating in various committees and holding professional affiliations, including membership in the Sigma Theta Tau Honors Society of Nursing and the Registered Nurses Association of Ontario. Wendy's committee work and leadership in both internal and external roles underscore her commitment to advancing the nursing profession and improving healthcare education and outcomes.

Dr. Shanti Nair*, Shweta Gagh
Tata Memorial Hospital, India

Bridging the Gap: A Cross-Sectional Insight into Patient Safety Culture among Nursing Staff in Tertiary Care

Introduction: Patient safety, defined as the prevention of harm to patients, is a global priority in healthcare. It relies on a culture of safety, continuous learning from errors, and proactive systems to reduce adverse events. Nurses, being the primary caregivers in hospitals, play a vital role in ensuring patient safety.

Objectives: This study aimed to assess patient safety behavior among nursing professionals in a tertiary care semi-government hospital and to identify strengths and areas needing improvement within the patient safety culture.

Materials and Methods: A descriptive cross-sectional study was conducted among150 nursing professionals between June and August 2024. Participants included both clinical and administrative nursing staff. Data were collected using a structured, validated questionnaire consisting of 45 items related to various dimensions of patient safety. Only 133 completed the questioner. A five-point Likert scale was used, and responses were analyzed to identify safety strengths and areas for improvement. The overall patient safety grade was considered the outcome variable.

Results: The response rate was 88.67%. The majority of respondents were female (87.5%) and aged 30–40 years (61%). Over half (51.1%) had more than 10 years of experience. Although 61.7% believed the hospital promotes a safety-friendly work environment, only 36% rated the overall patient safety as “very good” or above. A high percentage (81%) feared punitive actions for errors, and 74.5% were afraid to speak up about safety concerns. Teamwork across departments was rated positively by only 56%, and 80% felt understaffed. The prevalence of patient safety behavior was found to be 51.4%.

Conclusion: The study reveals a moderate level of patient safety behavior among nurses, with significant barriers such as fear of blame, inadequate staffing, and lack of structured safety systems. There is a critical need for systemic improvements and fostering a non-punitive safety culture to enhance patient care quality in such settings.

Biography:

Phd in Management
MBA in Hospital Administration
MBA in Hospital Health care Services
Masters in psychology and spiritual health
Oncology specialization
Published many research articles
Speaker in National and international conferences
Working for Tata Memorial Hospital, Mumbai, India

Vázquez Zamora VJ [2*], Contreras Sánchez SE [1], Doubova SV[1], Martinez Vega IP [1], Grajales Álvarez R[1], Villalobos Valencia R[1], Dip Borunda AK[1], Lio Mondragón L[1], Martínez Pineda WJ[1], Nuñez Cerrillo JG[2], Huerta López AD[2], Zalapa Velázquez R[2], Mendoza Ortiz V[2], Montiel Jarquín AJ[2], García Galicia A[2], Talamantes Gómez EI[3], Sánchez Reyes R[3], Aguirre Gómez J[3], Ayala Anzures ME[3], Zapata Tarrés M[4], Monroy A[5], H. Leslie H[6]

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[5] Department of Oncology, Hospital General de México Dr Eduardo Liceaga, Mexico City, Mexico
[6] Division of Prevention Science, University of California, San Francisco, San Francisco, California, USA

Addressing the unmet needs of women with breast cancer in Mexico: A non-randomised pilot study of the digital ePRO intervention

The incidence of breast cancer has increased in Mexico in the past 60 years, and the cancer treatment typically involves a combination of local and systemic treatments whose side effects can negatively impact a patient's physical and emotional health and quality of life, potentially interrupting cancer treatment and decreasing the patient's chances of survival. Patient-reported outcome measures (PROs) have been developed to guide patient-centred care by aligning health services with patients' values. Electronic PRO (ePRO) interventions have been proposed to facilitate patient-centred cancer care.

Objectives: The Mexican Institute of Social Security (IMSS) provides healthcare to over 70 million people. In 2022, IMSS treated 71 000 women for breast cancer. Nearly all women treated for breast cancer at IMSS reported at least one unmet supportive care need, including health systems and information needs as well as psychological, physical, sexuality and patient care needs. To address the supportive care needs of women with breast cancer at IMSS, we designed an intervention combining a responsive web application registry to capture symptoms and supportive care needs with proactive follow-up by nurses guided by predefined clinical algorithms.

Methods: We conducted a multimethod non-randomised pilot study from August 2023 to February 2024 within the oncology services of three IMSS hospitals. We used a pre-test/ post-test design for quantitative assessment of the intervention's effect on patients' supportive care needs and quality of life. Women between 20 and 75 years diagnosed with stage I–III breast cancer who: have started neoadjuvant or adjuvant treatment with chemotherapy or radiotherapy within the past 2 weeks; have access to the ePRO application internet via mobile phone, computer, or tablet. On this platform were entered weekly symptoms report asked

about the presence and severity of 20 symptoms commonly experienced by women with breast cancer during neoadjuvant and adjuvant chemo and radiotherapy. In addition, the ePRO application also inquired about characteristics that help define the severity of these symptoms as mild, moderate, or severe. Nurses received immediate automatic alerts by email and followed-up with patients by telephone within 5–20 min to provide information or non-pharmacological guidance.

Results: 50 women agreed to participate; the mean age was 53.4 years with 60% completing secondary schooling. 44% had clinical stage III, 40% had clinical stage II and the mean time since diagnosis was 39.5 weeks. Half received CT, and another half received RT. Local recurrence in the breast was observed in only 6% of patients. There were 203 website visits per IP address per month. Overall adherence to weekly symptom reporting was 76.3%, half of the participants had an adherence rate of 70% or higher. The median time nurses took to respond to moderate or severe alerts during business hours was 13 min, with an IQR of 8–20.5 min. All participants completed the 4-week assessment, the median number of supportive care needs decreased significantly from baseline to 4-week assessment: 11 versus 3, difference −8.

Conclusion: The present study identified multiple benefits of the ePRO intervention perceived by women and health professionals and encouraging preliminary results related to high retention rate, decrease in the supportive care needs, and breast symptoms and increase in global quality of life, justifying further RCT. The study also revealed several barriers to successful ePRO implementation at individual, intervention and institutional levels and suggested improvements to the randomized controlled trial protocol methods.

Biography:

Dr. Vazquez-Zamora graduated in 2006 as a surgeon and midwife from Benemerita Universidad Autonoma de Puebla, studied Internal Medicine at the same University and later graduated as a doctor specializing in Radiation Oncology from National Autonomous University of Mexico. Completed fellowship in radiosurgery at University Hospital from Geneva, Switzerland. Since 2013 is in charge of head and neck cancer and central nervous system tumours, gynecological cancer and the radiocurgery clinic.

Chu-Hua Chung[1*], Shiuyu C. Katie Lee[1], Chun-Liang Lai[2], Yen-Shen Lu[3], Chiao Lo[3]

[1] National Taipei University of Nursing and Health Sciences, Taipei, Taiwan
[2] Buddhist Dalin Tzu Chi General Hospital, Chiayi, Taiwan
[3] National Taiwan University Hospital, Taipei, Taiwan

Navigating Financial Toxicity of Cancer: A Family-Centered Perspective from Taiwan

Cancer treatment often brings substantial financial strain, significantly affecting patients and their families around the world. In Taiwan, although the public health insurance system provides coverage for standard cancer treatment, treatment for advanced or recurrent cancer often requires large out-of-pocket expenses, placing tremendous financial and mental pressure on families. This qualitative study recruited 23 participants, including individuals diagnosed with lung or breast cancer and their family caregivers. Participants were recruited through purposive sampling and interviewed in-depth. Findings revealed that financial difficulties extended beyond individual struggles, profoundly influencing family dynamics. Spouses often needed to reduce work hours or alter employment, adult children assumed financial responsibilities, and elderly parents became primary caregivers. Participants described internal conflicts between seeking optimal treatments and the fear of financially burdening their loved ones. Families frequently faced challenges interpreting insurance policies, making collective treatment decisions, and balancing competing financial and caregiving demands. However, family relationships emerged as crucial resources in facing these challenges. Coping strategies included redistributing familial roles, pooling financial resources, actively seeking external support, and collectively engaging in emotional and spiritual care. The findings underscore financial toxicity as a shared family experience in cancer care, highlighting an urgent need for comprehensive support systems that integrate both patient and family perspectives to address the economic and psychosocial impacts of cancer.

Biography:

Chu-Hua Chung is a clinical nursing instructor at a medical center and a doctoral student at the National Taipei University of Nursing and Health Sciences. Her research focuses on cancer care and symptom management, with a strong interest in improving supportive care strategies for patients and families.

Wu Yiping
KK Women's and Children's Hospital, 229899, Singapore

CIP – Clinical Immersion Programme: Approach to Enhance Nursing Clinical Practice

Nursing requires integrating robust theoretical knowledge with practical expertise to deliver effective clinical care. However, observations of registered nurses returning from Advanced Diploma post-graduate studies have highlighted a need for greater confidence in applying advanced skill sets. To address this gap, the Clinical Immersion Programme (CIP) was developed to enhance competencies in history-taking, health assessment, clinical judgment for early identification of patient deterioration, and timely care escalation to ensure patient safety. The CIP was meticulously designed through a collaborative effort between physicians and Advanced Practice Nurses (APNs), utilizing a variety of teaching modalities, including face-toface health assessment sessions, lectures, case-based discussions, and bedside teaching. To strengthen clinical reasoning, participants engaged in case log writing, while assessments such as mini-clinical evaluation exercises (mini-CEXes) and pre- and post-course multiple-choice questions (MCQs) were employed to validate learning outcomes. Program efficacy was further assessed via an end-program evaluation survey. 215 nurses completed the CIP, with the post-course MCQ pass rate significantly improving from 52% to 83%, indicating substantial knowledge acquisition. Additionally, 96% of participants reported that the program enhanced their professional capabilities, and 88% expressed greater confidence in utilizing advanced skills in clinical practice. A focus group survey with 64 trained nurses provided additional insights into the program's impact. Among respondents, 84% reported a more robust understanding of patients' clinical conditions, 74% felt more confident discussing cases with physicians, and 70% indicated improved ability to mentor junior nurses. These advancements also contributed to heightened job satisfaction among participants. CIP has successfully delivered eight cohorts, fostering the development of nurses into advanced practice professionals. Noteworthy achievements include nine graduates receiving the Patient Safety Award, eight pursuing the Masterof Nursing program, and CIP being honored with the prestigious AM.EI Golden Apple Award – Programme Excellence 2021.

Biography:

Yiping completed her Master of Nursing at the National University of Singapore in 2015. As an Advanced Practice Nurse specializing in Gynaecology, she is dedicated to patient safety and exceptional care. With 20 years of nursing experience, her excellence has been recognized with accolades such as seven Patient Safety Awards, the SingHealth Quality Service Award (Gold), the KKH Service Quality Award, the Ministry of Health Nurse's Merit Award, and the RiSE Partner in Education Award. Passionate about inter-professional education, Yiping takes pride in mentoring future APNs as the APN Intern Lead, fostering growth and advancing advanced practice nursing.

Prof. Wen-Yi Chen
Department of Senior Citizen Service Management, National Taichung University of Science and Technology, Taichung, 40343 Taiwan

On the relationship between the interdependence of nurse employment behaviors across different workplaces and the quality of inpatient care

This study examines the relationship between the interdependence of nurse employment behaviors across various workplaces and the quality of inpatient care, with particular attention to the critical issue of nearly 40% of Taiwanese nurses expressing reluctance to join the nursing workforce. This reluctance contributes to the persistent shortage of nurses in hospitals, which in turn negatively impacts inpatient care quality.

Methods and Materials: Dynamic connectedness network analysis was employed to assess the interdependence within the nurse employment network across hospitals, clinics, nursing homes, other medical care institutions, and non-nursing labor markets. Annual data on nurse employment in these workplaces, as well as inpatient care quality, were sourced from multiple open databases administrated by the Ministry of Health and Welfare in Taiwan. The study covered the period from 1998 to 2022, resulting in 25 annual observations for analysis.

Results: The findings suggest that nurse employment in hospitals, other medical care institutions, and non-nursing labor markets (clinics and nursing homes) acts as a net transmitter (receiver) of employment flows. Furthermore, a higher degree of interdependence within the nurse employment network is associated with a decline in inpatient care quality. Specifically, the analysis confirmed the beneficial effects of hospital nurse employment and the detrimental impact of nurses' reluctance to join the workforce on inpatient care quality.

Conclusion: These results highlight the importance of increasing hospital nurse employment and providing incentives for nurses who have left the profession to reenter the workforce, in order to enhance inpatient care quality.

Biography:

Wen-Yi Chen is a professor of health economics at National Taichung University of Science and Technology in Taiwan. He holds a PhD in Applied Economics from Oregon State University. With over 60 publications in renowned journals, his current research explores the impact of population aging on the effectiveness of nurse workforce policies.

Prof, Farhan Alshammari*, Dr Ebaa Felemban
College of Nursing, University of Hail, Saudi Arabia
College of Nursing, King Abdulaziz university, Jeddah, Saudi Arbia

Nurses' Perspectives On The Degree Of Missed Nursing Care In The Public Hospitals In Hail City, Kingdom Of Saudi Arabia

Background: Literature suggests that merely omitting nursing care can put patients in danger and that avoiding these omissions potentially prevents deaths in hospitals.

Objective: This study aimed to determine the perspective on the degree of missed nursing care among hospital nurses as it relates to their demographic profile.

Method: A quantitative comparative research design was employed in this study. The study was conducted in the public hospitals in Hail City, Kingdom of Saudi Arabia. The study participants were 317 staff nurses, chosen through a simple random sampling, from the public hospitals of Hail City.

Results: The overall mean of the participants' reported scores was "never missed" at 4.62. Statistically significant results were found in terms of the number of children (0.001), years of experience (0.004), unit of assignment (0.001), and the level of satisfaction with the profession (0.001). All other variables such as gender, age, marital status, and shift were found insignificant, where all of the p-values were more than 0.05.

Conclusion: Nurses who had more children, a greater lack of experience, were assigned to a complex unit, and were less satisfied in the profession were more likely to miss nursing care. As such, these errors can compromise the outcomes of nursing care in hospitals.

Keywords: Nurses, Missed Care, Patient safety, Public Hospital

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POSTER PRESENTATIONS

DAY 1

Chao-Chih Yu, Chi-hua Yang
Min-Hwei Junior College of Health Care Management, Taiwan

Effect of additional instructional courses on nursing students' ability to perform breastfeeding

Breastfeeding offers multiple benefits for both babies and mothers, the Taiwanese government and society are actively promoting measures related to breastfeeding, with nursing professionals playing a crucial role in this process. They utilize their expertise and skills to assist mothers in successfully breastfeeding. However, there are obvious deficiencies in the theoretical knowledge, skills, and problem-solving abilities related to breastfeeding within classroom instruction, which greatly impacts the capacity of nursing personnel to promote breastfeeding effectively. Therefore, this study aims to invite international lactation consultants to provide additional guidance and skills practise to students who are taking obstetric nursing and obstetric experimental courses during weekends, followed by pre- and post-tests to explore the impact of this supplementary instruction on nursing students' ability to perform breastfeeding. This study uses a sample of 42 fourth-year students from a five-year nursing program in southern Taiwan to assess the impact of additional weekend courses on nursing students' breastfeeding abilities. The research includes pre- and post-tests for analysis. The collected data were analyzed using SPSS 23 for Windows 11. The results indicated a significant difference between the pre-test and post-test scores (t-value=-9.423, significance= .000). After this additional courses and guidance during weekends, program was significantly effective in assisting students to improving their knowledge of breastfeeding. All students met the intended goal of the program obtained growth with scores. It provided a model for student nurses to improve their breastfeeding program.

Key words: Breastfeeding, Nursing, Teaching

Biography:

1. Chao-chih Yu has completed his MD at 1996 from National Defense Medical Center. Now she is a teacher at Min-Hwei Junior College of Health Care Management.

2. Chi-hua Yang has completed his MD at 2004 from Kaohsiung Medical University School of Nursing. Now she teaching obstetric nursing at Min-Hwei Junior College of Health Care Management.

Lin Ya-Wen, PhD, RN[1]*, Tzeng Ya-Ling, PhD, RN[1], Lin Ming-Hung , PhD, MS[2]

[1]School of Nursing, China Medical University, Taichung 406040, Taiwan
[2]Department of Pharmacy and Master Program, Tajen University, Pintung 90741, Taiwan

The Effect of Blended Learning on Improving the Learning Motivation and Knowledge of Nursing Students in Interdisciplinary Developmental Care of Premature Infants: Multi-method approaches

With rapid technological advancements and the emergence of new infectious diseases, nursing education faces increasing challenges. Traditional teaching methods often fail to meet learners' needs or stimulate motivation. This study applied the ARCS (Attention, Relevance, Confidence, Satisfaction) learning motivation model to develop an interdisciplinary course on the developmental care of preterm infants. A blended learning model was designed, integrating knowledge from various healthcare professionals, including physicians, pharmacists, nutritionists, therapists, nurses, and social workers. Using a randomized repeated-measures design, 78 nursing students were assigned to either a blended learning group or a paper-based group. Pretests, immediate posttests, and two-week follow-up tests assessed learning motivation and knowledge acquisition. Results showed the blended learning group had significantly higher scores in both ARCS motivation and developmental care knowledge. Qualitative interviews further revealed that students gained a deeper understanding of interdisciplinary collaboration and clinical application. The findings support the use of blended learning in nursing education, offering a practical and effective strategy for enhancing student motivation and preparing them for complex clinical environments.

Key words: Developmental Care of Preterm Infants, Nursing Education, Interdisciplinary Education, ARCS Learning Motivation, Nursing Students

Biography:

Lin Ya Wen received her Ph.D. from China Medical University and currently serves as an Assistant Professor in the Department of Nursing at China Medical University. Her research interests include developmental care for preterm infants, care for high-risk pregnancies, and pediatric acute and critical care. Dr. Lin is committed to advancing maternal and child health through clinical research, interdisciplinary collaboration, and innovative nursing education.

Ting-Ting Chang
RN, Department of Nursing, National Taiwan University Hospital, Taiwan

Empowering Oncology Nurses Through Multimodal Simulation: A Clinical Teaching Model to Prevent Chemotherapy Extravasation

Chemotherapy extravasation is a serious complication that jeopardizes patient safety and treatment efficacy. In our unit, an ovarian cancer patient developed cervicothoracic swelling due to extravasation at a Port-A catheter site, highlighting critical gaps in nursing practice. To prevent chemotherapy extravasation by strengthening nurses' competency in port care through a structured, multimodal, simulation-based education program. Root cause analysis identified deficiencies in nurses' knowledge of port care, lack of simulation resources, and absence of standardized. reinforcement regarding non-blood-return scenarios. We implemented a four-step clinical teaching.

Model: Pre-intervention assessment using quizzes and skill evaluations. Multimodal training combining visual aids (infographics, posters), auditory input (case discussions), tactile simulation (port models), and scenario-based drills. Environmental cues including station-based reminder tools to reinforce best practices. Post-intervention evaluation of knowledge and technical performance. A total of 24 nurses participated. Data were collected before and after the intervention. Nurses' port care knowledge improved from 78.7% to 91.2%. Since the intervention, the unit has reported zero extravasation incidents through April 2025.

Conclusion: This simulation-integrated, multimodal teaching model significantly enhanced nursing performance and eliminated chemotherapy extravasation events. The project demonstrates how immersive, differentiated education rooted in clinical needs can drive measurable improvements in oncology care and patient safety.

Keywords: Chemotherapy extravasation, Port-A catheter, Oncology nursing, Multimodal learning, Nursing education, Patient safety

Biography:

I am a clinical nurse with over 20 years of experience across emergency care, intensive care, and oncology chemotherapy units. As a nursing educator, I am committed to advancing care quality, strengthening clinical competence, and ensuring patient safety. With a passion for bridging practice and education, I actively mentor new nurses and promote sustainable nursing development.

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KEYNOTE PRESENTATIONS

DAY 2

Dr. MD. Krista Hoek
Anesthesiologist-Intensivist, PhD candidate, Department of Anaesthesiology
LUMC, Leiden, Netherlands

Therapeutic Communication, a Nursing Educational Program, Implementation and Analysis, a mixed methods design

Introduction: Hospital admission can be stressful, compromising patients' autonomy and well-being. Effective training in communication skills is crucial for delivering patient-centered care. This study evaluates a therapeutic communication training program for nurses in acute admission wards. The program includes e-learning on therapeutic communication concepts, followed by a VR patient-embodied experience that helps nurses understand the patient perspective. The one-day training emphasizes rapid rapport techniques and hypnotic language through experiential learning and practical exercises, aiming to enhance communication skills and improve patient care.

Methods: Using Kirkpatrick's training evaluation model, this prospective study employed a convergent mixed-methods design with qualitative and quantitative data. Qualitative data were gathered through fieldwork, individual, and focus group interviews. Quantitative data were collected via questionnaires assessing the first two levels of Kirkpatrick's model.

Results: Thematic analysis identified five main themes, indicating high satisfaction with the training, strong applicability to practice, and enhanced communication techniques. Participants reported improvements in pain assessment and positive changes in team dynamics. Quantitative analysis showed high satisfaction, with ratings of 4.7 out of 5 for recommending the course and meeting expectations. The likelihood of applying the training in daily practice was rated at 4.2 out of 5, reflecting slightly lower confidence in implementation. Both qualitative and quantitative findings were in alignment, confirming the effectiveness of the training according to Kirkpatrick's first two levels of evaluation.

Conclusion: This study demonstrates the feasibility and acceptance of implementing therapeutic communication training, incorporating patient-embodied VR, among nurses in acute admission wards. The results suggest that this approach can effectively enhance communication skills, contributing to improved patient care in acute settings.

Biography:

Krista Hoek earned her medical degree at the Université Sorbonne in Paris, France in 2016. She pursued her medical specialization as an anesthesiologist-intensivist in Leiden, the Netherlands, specializing in education and communication within anesthesiology and intensive care. Hoek's research focuses on the use of Virtual Reality as an educational tool to enhance communication skills. Her main research interests include the learning and implementation of therapeutic communication and team communication in crisis resource management. With extensive experience in the development, implementation, and evaluation of nurse education communication

programs, Hoek has led numerous research projects that bridge the gap between theory and practice. Her academic interests are interdisciplinary, and she has presented at various international conferences such as the International Conference on Computer Supported Education, the European Society of Intensive Care Medicine, and the International Conference on Communication in Healthcare, among others. Additionally, she has been involved in various projects funded at both the national and regional levels. In 2021, she received a grant from Tech for Future (TFF) to collaborate with Saxion University on the development of a VR training platform for anaesthesiologist-intensivists. Furthermore, she is a member of Euro XR, the European Network for Virtual Reality, Augmented Reality, and Mixed Reality, and serves on the Scientific Committee.

Sanele E. Nene, PhD
University of Johannesburg - Doornfontein Campus, South Africa

Ethical Considerations For Effective Artificial Intelligence Implementation in a South African Public Healthcare System

Background: It is now clear that Artificial intelligence (AI) is inevitable for the South African healthcare system as it has proven to improve patients' outcomes and cutting costs for public hospitals, especially where it is used at a larger scale. However, there are ethical challenges that hinders the propelling of the uptake of AI in a South African public healthcare system.

Objectives: This study aimed to explore and describe the ethical considerations for effective implementation of AI in a South African Public healthcare system.

Design and Method: A qualitative, exploratory, descriptive and contextual research design and a descriptive phenomenological approach were employed in this study. Six phases were followed to conduct the study from a public hospital in Gauteng, South Africa. Semi-structured interviews and focus groups were used to collect data from the operational managers and a thematic data analysis method was used. The researcher observed and upheld trustworthiness and ethical principles throughout the study to sustain integrity of the study.

Findings and Conclusion: This study culminated to the following four themes; 1) lack of trust and reliability in AI, 2) concerns on privacy, security and bias in AI, 3) Accountability and transparency in AI, and 4) future considerations of AI ethics. AI is the future of healthcare which should be carefully navigated for effective implementation by ensuring that its implementation is trustworthy, and it is upholding the applicable ethical principles.

Advocacy Message: The South Africa public healthcare system leaders should be cautious by ensuring that the implementation of every AI programme is ethical and not compromising the quality of patient care and the integrity of the health users.

Keywords: Ethical considerations, Artificial intelligence, Implementation, Public hospitals.

Biography:

Dr. Sanele Enock Nene is a Senior Lecturer in the Faculty of Health Sciences at University of Johannesburg and holds a Masters degree in Nursing Management and a Doctor of Philosophy degree in Business Leadership which he did with University of Johannesburg. His thesis delved on the implementation of AI in South African public hospitals to improve the quality of healthcare system. He has published 14 peer reviewed articles and three book chapters with reputable national and international journals. He has supervised nine masters students to completion and is currently supervising seven masters and four PhD students. He is a renowned leadership and management expert and an internationally recognized speaker who has presented numerous papers in scientific local and international platforms; in Singapore, Dubai, France, Germany and Italy to count the few. Dr Sanele Nene is the founder and chairperson of Sanele Enock The Brand Non-Profit Organization, a youth mentoring and coaching organization which is empowering youth in South Africa and in Namibia.

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SPEAKER PRESENTATIONS

DAY 2

Pasquale Fiore
Doctor of Osteopathic Manual Practitioner (EU), Grad Cert. Ed., M.Sc. Health Adm., B.Sc.N., RN, Canada

Land acknowledgments gratitude activities by nursing students

British Columbia Institute of Technology (BCIT), British Columbia, Canada. In Canada, September 30th is the National Day of Truth and Reconciliation. A day to honor and work to reconcile Canada's First Peoples colonization experience. Committing to this national responsibility, BCIT explores meaningfully nursing students' understanding of how Indigenous communities have suffered negatively from Colonialism. We highlight Indigenous stewardship of the environment, which preserves land, water, and resources we benefit from daily. At the beginning of each class, a land acknowledgment is offered. To echo the inspiring work of various authors, we worked on an extra layer of commitment, learning, and self-investment among nursing students and faculty when stating land acknowledgment, we have developed with our students an activity for them to choose how they would like to offer their gratitude in class opening session. Students would be divided in 4 group, brainstorming the type of activities they would like to participate in the land acknowledgment and provide gratitude to our Indigenous people. Once they have written their ideas, the instructor collects these activities suggested by the students, and the official list would be sent to all the nursing students of the group. As an outcome, we notice more meaningful and rich discussions since we have empowered students to decide how they would participate and be truly part of offering gratitude as a community of active learners, this result was even reflected in a positive appreciation on the faculty evaluation.

Biography:

Pasquale is a Registered Nurse specialized in psychiatry. He has worked in many clinical areas such as medical-surgical units, psychiatry, respiratory care, community nursing, and as a MediVac nurse with the Northern Quebec community of Puvirnituq. Pasquale has also worked in management as a nursing coordinator for several nursing homes, as the Director of Health Care Program and as a Regional Nursing Director for the private sector of education. He is been working as a nursing instructor for the past 19 years and teaches nursing students in year 1 at the British Columbia Institute of Technology (BCIT).

Dr. José Francisco Villanueva Valverde
Head of the Education Department, Red de Servicios de Salud, Instituto Nacional de Seguros, Costa Rica
LATAM Director of Nursing at the Universae International University, España, Costa Rica

Application of in situ simulation in intrahospital emergency services

In situ clinical simulation within emergency services is a training approach conducted directly in real clinical settings, using actual medical equipment and familiar work environments. This method is designed to enhance healthcare professionals' competencies while reinforcing a strong culture of patient safety.

Unlike traditional simulation, which typically takes place in controlled environments or specialized labs, **in situ** simulation provides a more realistic and immersive experience. This authenticity helps bridge the gap between theory and practice, allowing healthcare teams to apply what they learn in real-time, under conditions closely resembling their daily clinical context. Moreover, it encourages effective communication and teamwork—both essential components of safe and efficient patient care.

Despite its advantages, **in situ** simulation poses certain challenges. These include variability in how simulations are designed and implemented, limited time due to clinical workload, and constraints related to staffing and resources. However, the integration of emerging technologies, such as virtual and augmented reality, offers promising opportunities to enhance the quality and engagement of simulation-based education.

Ultimately, **in situ** clinical simulation stands out as a valuable tool for strengthening both technical and non-technical skills in real-world healthcare environments. Its broader implementation holds the potential to significantly reduce morbidity and mortality by improving the preparedness and responsiveness of healthcare teams in critical situations.

Biography:

José Francisco Villanueva Valverde completed his master's degree at the age of 25. He is currently the Head of the Education Department at the Trauma Hospital and 24 Health Centers in Costa Rica, within the Red de Servicios de Salud (Health Services Network) of the Instituto Nacional de Seguros (National Insurance Institute). He is also the LATAM Director of Nursing at the Universae International University from Spain, and also Supervisor of the UH International Training Center, accredited by the American Heart Association. He is currently a facilitator of Basic Emergency Care for the World Health Organization.

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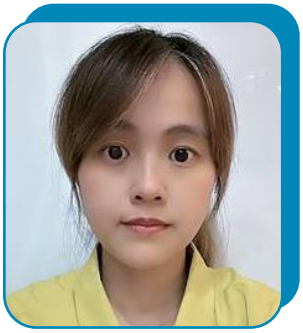

Ting-Ting Chang
Registered Nurse, Department of Nursing, National Taiwan University Hospital, Taipei, Taiwan

Quiet is Care: Implementing Sound-Sensitive Strategies in Wards to Improve Patient Centered Outcomes

Hospital ward noise is a frequently overlooked factor that can significantly impact patient satisfaction, sleep quality, stress levels, and staff performance. In early 2023, a general ward at a medical center in Taiwan recorded low scores in patient satisfaction surveys, with "quietness of the environment" identified as the lowest-rated domain (76.9%). To address this, a multidisciplinary team launched a sound-sensitive improvement project. After identifying key noise sources, interventions were implemented across four domains: human voices, equipment alarms, environmental sounds, and policy gaps. Key strategies included preadmission education, environmental signage, staff training on communication etiquette, equipment noise control, and the elimination of non-essential nighttime audio sources. Noise levels and patient perceptions were measured before and after the intervention. The highest recorded noise level at the nurses' station dropped from 112 dB to 56.3 dB—a 55.7% reduction. Patient satisfaction with environmental quietness improved from 76.9% to 83.9%. This project demonstrates that a targeted, sound-aware, multimodal strategy can significantly enhance inpatient experience and foster a healing-oriented care environment. These methods are feasible, scalable, and suitable for replication in general wards to support patient-centered outcomes.

Keywords: Noise Reduction, Patient-Centered Care, Inpatient Satisfaction, Multimodal Intervention, Nursing Education

Biography:

Ting-Ting Chang is a registered nurse at National Taiwan University Hospital with over 20 years of clinical experience in emergency, intensive care, and oncology nursing. She is passionate about nursing education, patient safety, and advancing clinical competency through simulation based training.

Ting-Ting Chang[1], Yi-An Lu[2*], Chiung-Hsuan Huang[2]
[1]RN, Department of Nursing, National Taiwan University Hospital
[2] RN, Head Nurse, Department of Nursing, National Taiwan University Hospital

Strengthening Clinical Readiness and Retention: A Competency-Based Preemployment Training Program for Newly Recruited Nurses

Newly recruited nurses often face challenges related to clinical competency and role adaptation, which can lead to decreased retention and compromised patient safety. This study aimed to develop and evaluate a competency-based pre-employment training program designed to enhance clinical readiness, professional confidence, and retention among novice nurses assigned to acute and critical care units. A design was conducted in a medical center in Taiwan. The research subjects are new nurses from February 1, 2024, to December 31, 2024. The program included core clinical skills, scenario-based simulations, and specialty-specific training. Effectiveness was measured using self-developed course evaluation surveys, satisfaction ratings, and follow-up retention data three months post-training. The results showed high participant satisfaction (98.4%) and strong agreement regarding the program's relevance to clinical practice (98.8%). The retention rate in the ICU setting increased from 75.3% to 82.1% compared to the previous year. Participants reported improved clinical confidence and a greater sense of professional identity. This study demonstrates that a competency-based, modular training program can effectively bridge the gap between education and practice, supporting novice nurses' integration into the workforce. Institutions are encouraged to adopt such targeted programs to improve staff development, reduce turnover, and strengthen healthcare workforce sustainability.

Keywords: Nursing education, Clinical competency, Retention, Workforce development, Competency-based training

Biography:

Both of them have more than 25 years of work experience. Ting-ting Zhang is a specialist nurse, working in the ophthalmology ward. Yi-an Lu and Qiong-xuan Huang are both nursing supervisors, working in the internal medicine intensive care unit and the pediatric surgery ward, respectively. They not only work diligently in clinical care but also step by step promote reforms in the field of new nurse education, making education and training more than just a procedural requirement but a start of actual support and encouragement.

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VIRTUAL SPEAKER PRESENTATIONS

DAY 3

Dr. Kristen Vandenberg DNP, PMHNP-BC
University of Colorado Colorado Springs, USA

Mastering Teen/Young Adult Communication for Nurses and Educators

In the fast-moving world of teen/young adult talk, it is essential for professionals who work with these individuals to be up to date on modern slang – in some cases, there are new meanings every school year. The slang of today's youth is not just a quick interim from which they will grow; rather, it serves as an evolving instrument that accurately reflects their culture and interaction. Understanding this specialized linguistic space can increase communication and trust and help strengthen clinical comprehension between adolescents and nurses/educators.

The goal of this presentation is to provide tools that professionals can use immediately to decipher what teens/young adults are trying to communicate using slang. We will consider where and what meanings popular slang terms come from, how they are used in social environments, and their mental/ emotional implications.

The session will show attendees what teenage/young adult slang talks about broader social issues like identity, peer pressure, and mental health. The session will also explore the communication hurdles and opportunities that can occur when working with professionals unfamiliar with this growing terminology. When nurses and educators decode those expressions, they begin to understand the individuals better, fostering more meaningful interactions with them.

Biography:

Dr. Vandenberg earned her Bachelor of Science in Nursing from the University of Virginia and her Master of Science in Nursing Education from Mercer University. She furthered her education with a post-master's certification as a Family Nurse Practitioner (FNP) and Psychiatric Mental Health Nurse Practitioner (PMHNP), along with a Doctorate in Nursing Practice (DNP) from the University of Tennessee.

Currently, Dr. Vandenberg serves as the Option Coordinator for the Psychiatric Mental Health Nurse Practitioner (PMHNP) program at the University of Colorado Colorado Springs. In addition, she runs her private practice, New Beginnings Mental Health, in Vail, Colorado, where she provides comprehensive care to patients of all ages.

Kathryn Moore
Emory Healthcare, Emory Saint Joseph Hospital, USA

Serenity for the Nurse's Soul

When nurses have their well-being compromised, they may find themselves at the mercy of time to support their emotional and physical healing. Over the last 18 months we have found that when given adequate tools and training, as well as a multi-sensory healing environment designed to reduce stress, recharge energy, and increase productivity, our nurses reported an overall reduction in stress and fatigue.

Background: Nurses often work through emotional stress without taking the time to heal themselves after an unexpected crisis or traumatic event. Knowing they have a place and opportunity to release some of that emotion helps to promote a sense of well-being. Based on Orem's Self Care Theory there often can be a deficit in self-care that is triggered by a condition or an unexpected event.

Method: Using the Code Lavender benchmark, we amended the program to meet the needs of our unit by purposefully providing personalized care to all our staff, including the 20 nurses.

Results: In the first 5 months, 97.9% of users report an increase in their emotional mood between entering and exiting the room. Now at 18 months usage, we show a 98% increase.

Conclusion: Before receiving the grant, we had used (C.B.D.)a cabinet, box, and drawer for Code Lavender supplies based on a 100% reply from nursing staff that they felt stress/burnout had increased after the COVID-19 pandemic. The improvement in emotional stress with the use of a Serenity Room overwhelmingly supported the research presented by Mileski, et.al (2024), and our hypothesis regarding training and the provision of a restoration space.

Biography:

Kathryn started her healthcare career as a dental hygienist in terminal pediatrics at St. Jude Children's Research Hospital. She later joined the US Public Health Service as a medical/dental consultant for 19 years while still practicing pedodontics. After returning to the US from South Africa, she went to grad school to get a degree in Human Services (specialty: Health Promotion). Kathryn completed her BSN from Chamberlain College of Nursing in 2014 and joined the Emory family in 2015, where she started working in the CVOR. In 2018, Kathryn was commissioned as a Faith Community Nurse (FCN) and completed the CDC Diabetes Education Certification, and both the FCN Navigator and the FCN Wellness Coach Program. Her cardiovascular career includes working as a circulator in heart surgeries, working as a staff nurse in sports cardiology, and working as an FCN Wellness Coach for patients who have had heart procedures or specific new heart-related diagnoses. In 2020, she received her certification from Emory's Healthcare Ethics Leadership Academy after having advanced as Emory's Ethics Nurse Liaison in 2018. She has presented ethical topics for Emory Nurse Leadership, Emory School of Nursing Students, the Emory Nurse Residents, and the Chamberlain Clinical Nursing students, she is a member of the American Society for Bioethics and Humanities, Nurse's Christian Fellowship, Georgia Nurses Association, the Preventive Cardiovascular Nurses Association, and the American Nurses Association (ANA), where she has served last year as a partner in the revision of the ANA Code of Ethics.

When not working in matters of the heart, Kathryn shares her passion in matters of self-care. Kathryn has had the privilege of presenting posters on this subject at 4 conferences in the last 3 years, with the most recent in August at the Georgia Nurses Association. She has shared on this subject starting as early as 2018 when introducing Code Lavender to her Emory Healthcare Family, and each year since has discussed this subject matter during Nurses Month. She has tied her passions together and shares her belief that “self-care is part of the art of caring for the heart”.This year, Kathryn is the 2025 New Knowledge, Innovation, and Improvements Award winner for Emory Saint Joseph's Hospital.

Marguerite Lawrence, DNP, FNP-BC, PHCNS-BC, MA
Sacred Heart University, United States

Bridging Minds: Enhancing Asynchronous Family Nurse Practitioner Education through Interprofessional Collaboration

Purpose: The study examined the learning outcomes of an on-campus residency, noting the various instructions from a Physician Assistant and Nurse Practitioner program as well as Male Urogenital Teaching Associates (MUTA) and Gynecologic Teaching Associates (GTA) teaching in a graduate level nurse practitioner program.

Background: Professional organizations across the nation and globe emphasize the significance of interprofessional education (IPE) in preparing students for effective collaborative practice. According to the World Health Organization IPE occurs "when two or more professions learn about, from, and with each other". The Institute of Medicine's interprofessional learning continuum model underscores the necessity for IPE to commence during foundational (undergraduate) education and intensify during graduate education.

The Health Professions Accreditors Collaborative (HPAC) are advocating for IPE Icurriculum to foster student mastery of interprofessional core competencies. Moreover, with the increasing prevalence of online graduate programs and the shift to online delivery, it is crucial to identify methods to ensure that all students have access to IPE opportunities, regardless of the program delivery mode.

As noted above, the shift from traditional Family Nurse Practitioner (FNP) nursing education to online and asynchronous learning has been driven by several factors, most notably the COVID-19 pandemic, which necessitated rapid adaptation to remote learning environments. This transition is reshaping the landscape of graduate nursing education, emphasizing flexibility, accessibility, and technological integration. Offering IPE in an online learning environment has the potential to overcome geographical and programmatic barriers, such as scheduling conflicts, by bringing students together for collaborative learning activities.

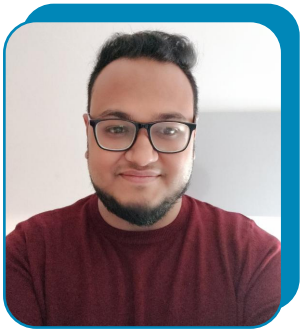
To mitigate the issues of decreased opportunities of IPE in the asynchronous platform, many graduate nursing programs are adopting blended approaches, incorporating both synchronous (required on campus residency days) and asynchronous elements to enhance interaction and provide real-time feedback while maintaining the flexibility that asynchronous learning offers.

Methods and Results: Two cohorts (first semester N=10 and final semester N=20) of FNP students at a small, private university in the northeastern U.S. were assessed following a one and two day on-ground residency. Eight quantitative questions using a five-point Likert scale and two qualitative questions were used to assess student's response to the questions regarding instructors, meeting course objectives, engaging with the faculty and interaction with peers. Descriptive statistics were used with a Fisher's exact test.

One hundred percent of students noted meeting the learning objective of suture skills presentation and of the EKG Review course by a physician assistant. One hundred percent responded meeting the learning objectives by the MUTA and GTA instructors. An overall response of 75 % and 90% noting meeting learning objectives from the NP instructors.

Conclusion: Healthcare has transitioned to a collaborative model. Offering Interprofessional Education (IPE) for graduate students is crucial to prepare them for real-world experiences and enhance their collaborative skills. To ensure that all students have access to IPE, faculty can consider requiring an on-campus component for those enrolled in online programs. Participants in our study indicated that the residency IPE met the learning objectives and possibly deepened their appreciation of the role of interprofessional collaboration in providing quality healthcare.

Key Words: Family Nurse Practitioner Program, Asynchronous learning, Interprofessional collaboration



F M Tanvir Alam* Zarin Tasnim Parisa
[1]Internal Medicine Trainee, Health Education England, Kent Surrey Sussex Deanery, United Kingdom
[2] Clinical Fellow, Medway Maritime Hospital, Kent, United Kingdom

SGLT2 inhibitors and sick day rule

Sodium–glucose cotransporter 2 (SGLT2) inhibitors are a class of oral antidiabetic agents primarily used in the management of type 2 diabetes mellitus (T2DM), with expanding roles in heart failure (HF) and early chronic kidney disease (CKD) with proteinuria. These agents improve glycaemic control by promoting urinary glucose excretion, which leads to notable clinical benefits such as a reduction in HbA1c levels, weight loss, and lowered blood pressure. Additionally, SGLT2 inhibitors have demonstrated cardioprotective effects and are increasingly recognised for their role in reducing hospitalisations in chronic HF and slowing the progression of renal disease.

Despite their advantages, SGLT2 inhibitors are associated with several adverse effects, including an increased risk of genital infections, urinary tract infections (UTIs), and rare but serious complications such as diabetic ketoacidosis (DKA), bone fractures, lower limb amputations, and Fournier's gangrene. To mitigate risks during periods of acute illness, the 'sick day rule' is advised, recommending temporary discontinuation of SGLT2 inhibitors to reduce the risk of DKA and renal impairment. Clinicians should educate patients on when to withhold therapy and ensure prompt resumption once stable. Overall, SGLT2 inhibitors offer multifaceted benefits but require cautious use, especially during intercurrent illness.

Biography: -

Dr F M Tanvir Alam completed Medical school in Bangladesh and obtained an MBBS degree. Following his MBBS, he passed the licensing exam in the UK and achieved GMC registration. Afterwards, he entered a Training programme in the UK to further develop his career.

Dr Zarin Tasnim Parisa completed her MBBS from Dhaka Medical College, Dhaka, Bangladesh. She worked as an assistant registrar in Diabetes and Endocrinology at the Diabetic Research Institute in Bangladesh. Afterwards, she pursued her career in the UK by achieving GMC Registration and started working as a Clinical Fellow in Medicine in the UK.

Asuka Hashino, Makiko Yamamoto*
Kumamoto University, Japan

A Scoping Review of the effect of inhaled drugs on the sleep quality of COPD patients

Approximately half of patients with chronic obstructive pulmonary disease (COPD) have sleep disorders and tend to have poor sleep quality. We conducted a scoping review of the effects of bronchodilators, which are the basic treatment for COPD, on sleep quality.

Using the keywords “COPD”, “sleep quality” and “inhalation”, we conducted a search of original research papers in Scopus and the Japanese Medical Abstracts Society Web Edition. As a result of the search, four documents were extracted.

All four were two-group comparative studies, and three of them used the Pittsburgh Sleep Quality Index (PSQI) to evaluate sleep quality, but one used the visual analogue scale (VAS). COPD patients with sleep disorders are more likely to experience symptom improvement with LAMA + long-acting β2-agonist (LABA) administration than with LAMA/inhaled corticosteroid (ICS) administration, and COPD patients who are inhaling ICS/LABA/LAMA and have decreased sleep quality patients who are taking ICS/LABA/LAMA inhalers have poorer symptom improvement than those who are not, inhaling LABA improves arterial oxygen saturation during sleep but has no effect on sleep quality, and short-acting muscarinic antagonist (SAMA) inhalation significantly improves mean nocturnal SaO2 and sleep quality. In these previous studies, the details of inhaler usage and use conditions, and inhalation technique errors were not described in detail. For COPD patients, many of whom are elderly, the use of multiple inhalation devices and the techniques involved can be complex, and it may be difficult to maintain the correct posture, breathing, and technique. It is also necessary to verify the extent to which inhalation technique errors affect the results.

Biography:

Asuka Hashino has completed a master's program of Hiroshima University graduate school. She is the assistant professor at Department of nursing, Faculty of life Sciences, Kumamoto University in Japan. She is conducting research on observational studies of stress in COPD patients and nursing education for understanding patients with chronic diseases.

Yu Wang
Zhengzhou University School of Nursing and Health, Henan Province 450001, China

Construction of knowledge graph for home self-management of inflammatory bowel disease

Objectives: To construct a knowledge map of inflammatory bowel disease (IBD) self-management by reorganizing the knowledge of a large number of dispersed entities in authoritative sources at a fine-grained level.

Methods: Firstly, Chinese and English guidelines, professional databases and association websites were systematically searched by literature research method, and the relevant guidelines were taken as the source of data; secondly, entities and relationships related to IBD self-management were extracted from them by a combination of manual annotation and computerized processing, and finally, the Neo4j graph database was used to store the data, and the dual-channel updating mechanism was set up.

Results: A total of 320 entities,85 relationships and 591 ternary groups were constructed, forming a knowledge network covering disease knowledge, monitoring tools, symptom coping, etc. The knowledge graph supports fine-grained query and visualization interaction. Conclusion: The IBD self-management knowledge graph constructed in this study effectively solves the problem of knowledge fragmentation, optimizes the allocation of patients' cognitive resources through effective correlation and dynamic filtering, and provides a systematic tool for improving self-management effectiveness. In the future, it can be combined with question and answer system, causal reasoning model and multimodal data to further promote the intelligent development of personalized health management.

Keywords: Inflammatory bowel disease,self-management, Health education, Knowledge mapping

Biography:

I am a second-year master's student from the School of Nursing and Health at Zhengzhou University. My supervisor is Associate Professor Xue Pan, and my research focuses on nursing informatics and community public health.

Hsueh-Ya Tsai
[1]Department of Nursing, Chung Shan Medical University Hospital, Taichung, Taiwan
[2]Adjunct Lecturer in the Department of Nursing at Chung Shan Medical University, Taichung, Taiwan
[3]PhD Student in the School of Nursing at Hungkuang University, Taichung, Taiwan

Enhancing Clinical Educators' Teaching Skills Through a Diabetic Foot Care Workshop

Diabetes is one of the most common chronic diseases in Taiwan. When patients are stabilized and preparing for discharge, insufficient health education by nursing staff on post-discharge diabetic foot care can lead to poor self-care and repeated hospitalizations. Therefore, it is crucial for nurses to learn proper diabetic foot discharge education, especially considering that most diabetic patients are elderly. Due to potential memory decline, it becomes even more necessary to provide thorough education on diabetic foot care before discharge. This can help reduce the frequency of hospital readmissions and prevent other complications. To achieve this, it is essential to equip clinical educators with diabetic foot teaching skills so they can, in turn, train new clinical staff, fostering a cycle of mutual teaching and learning. In 2023, through the Clinical Educator Training Program—"Diabetic Foot Care: Teaching and Learning Workshop," a "patient-centered" clinical care approach was emphasized. The workshop included group exercises, discussions, and interactive feedback to teach participants diabetic foot care techniques for in-hospital treatment, wound care, and post discharge education. The experiential learning activities were divided into two groups: Group A: Wound dressing selection for diabetic foot care. Group B: Practice of diabetic foot care techniques. The goal was to apply these learning outcomes to clinical practice, providing better care for diabetic foot patients. The results showed that the clinical educators' pre-test average score on diabetic foot knowledge was 36.47. After hands-on group exercises, their post-test scores reached 100, achieving the workshop's teaching objectives. The hands-on practice also boosted participants' confidence in handling clinical scenarios. Additionally, course satisfaction reached 100%.

Keywords: Diabetic Foot, Clinical Educators, Teaching Skills

Biography:

Hsueh-Ya Tsai is the head nurse at a medical center in Taichung City, Taiwan, with over 20 years of clinical nursing experience. Her professional background includes internal and external medicine nursing, long-term care, and administrative management. She holds several certifications, including emergency care, smokingcessation education, disability assessment, organ coordination, and advanced nursing. Tsai is also a nursing lecturer, has a clinical patent, and has published an article in an SCI journal. She continues to serve in the fields of health education and teaching.

Su Ching-Ling[1]* Fang Mei-Ching[2]
Kaohsiung Veterans General Hospital Tainan Branch, Taiwan[1]
Show Chwan Memorial Hospital, Taiwan [2]

Reducing the Incidence of Falls among Patients in Chronic Psychiatric Wards

Preventing patient falls" is one of the hospital's patient safety goals. In 2021, the incidence rate of falls in the chronic psychiatric ward was 0.07%, an increase of more than three times, which seriously harmed patients' physical and mental health. In June 2021, a quality control circle was established to brainstorm many creative projects.

1. Staff have insufficient awareness of fall prevention:

a. To creating posters and videos about fall prevention.

b. AR somatosensory interactive game-style “fall prevention”

c. Organizing fall prevention experiential camps.

2. To help patients with lower limb weakness and instability in gait: Organizing lower limb strength training courses.

3. Increase the prevent fall mechanism of the ward environment:

a. Installing real-time fixed surveillance cameras.

b. Using dummy nurses to accompany patients.

c. Installing motion sensing lights

d. Affixing fluorescent stickers on commode chairs.

e. Using walking aids for patients.

f. Equipping public restrooms with non-slip flooring in and repairing tiles.

g. Replacing lobby seating with sturdy, connected chairs.

After the improvement, the fall incidence rate was 0.03%. In the process, we materialized and applied the concepts in life, such as combining plush dolls and human models to create dummy nurses who soothe the emotions of dementia patients. Installing real-time fixed surveillance cameras to reduce the defensiveness of patients with schizophrenia and reduce the feeling of being monitored.

At present, we simplify the medicines one by one to second- or third-generation antipsychotics, treating osteoporosis elderly people, add multimedia video to the previous lower limb strength training courses. and continued tracking until September 2024, with the fall incidence rate being 0.035%.

The quality control circle activity has won numerous awards and has been praised by colleagues The most important thing is to protect patient safety and maintain results.

Keywords: Chronic psychiatric ward, Preventing patient falls

Biography:

In 2008, Su Ching-Ling graduated from the clinical care group of the Institute of Nursing in the form of an on-the-job class, with a master's degree. and has been engaged in clinical nursing for more than 30 years. Currently serving as Deputy Head of Nursing in psychiatric ward, teaching staff and interns. I am very passionate about nursing work and academic publications, and I look forward to having more contact with and publishing academic reports.

Mary Anbarasi Johnson
Professor and Head, Pediatric Nursing Department, College of Nursing, CMC Vellore, India

Climate change and its impact on child care

Climate change is one of the most significant global challenges of the 21st century, with far-reaching impacts on ecosystems, economies, and human health. Among the most vulnerable populations are children, who face both direct and indirect consequences of a changing climate. These include increased exposure to extreme weather events, such as heatwaves, floods, and storms, as well as shifts in disease patterns and air quality deterioration. Furthermore, the psychological impacts of climate anxiety and displacement due to environmental disasters can severely affect children's well-being and development. Children are also disproportionately affected by the long-term socioeconomic consequences of climate change, as many live in communities that are highly vulnerable to environmental changes. This abstract explores the multifaceted effects of climate change on children, emphasizing their heightened vulnerability, the intergenerational dimensions of the crisis, and the urgent need for climate justice and adaptation strategies to safeguard children's health, rights, and futures. Addressing climate change is not only an environmental imperative but also a critical child protection issue that requires comprehensive global action and policy reform to ensure a livable world for future generations.

Biography:

I am Mary Anbarasi Johnson working as a professor and Head in pediatric nursing department ,CMC Vellore.I worked as Clinical Nurse Specialist in PICU for a year and as Assist Professor in USA for two years.US faculty &friends went out of their ways to help me.I also worked as Assit.Director of Nursing,in Saudi Arabia Defence Sector, (Kamis Mushayt Armed Forces Hospitals for the Southern Saudi Arabia Region) ,I have learnt much about military from the excellent and amicable team there . I have served in CMC Vellore as Deputy Nurisng Superintendent for staff training and quality assurance,NABH Co-ordination, HICC -coordination etc. I have been CMC Instituitional research board member for more than 4 years. CMC gave me opportunity to be secretary for the HICC (Hospital Infection Control Commiittee)secretary for a term.CMC gave me opportunity to be Master trainer for International Projects like GFATM ,IMNCI at national level aswell national projects like ICMR Infection control ,Child Sexual Abuse Protection ,OSCE by Dr.MGR Medical university aswell Diabetic of Educators programme etc. It also gave me opportunity to be examiner or paper setter for various levels of nursing students for 6 universities and inspector for Dr.MGR Medical University .I am very much interested in reviewing articles.I have published in 70 national , international journals and presented in around 30 national and international conferences. I have also contributed for 5 book chapters and published two books . I have completed "Lean Six Sigma -Academy Europe ,green ,yellow and black belt in Saudi. NGO "INSO" had awarded me aswell ,I am thankful to them aswell thankful to SAS society for giving me the fellow membership with them(FSASS) .I am given opportunity to be the chief editor for a book on "Trends in Engineering, Management and Arts" and editor for two " Management books".I recently received "Life Achiemement Award " by the SAHEI ,The Best Faculty award and Best Administrative Officer Award was also bestowed this year by Coimbatore academy, India. My alma mater helped me to get "Presidents Gold Medal for standing first in the university for Bsc (N) programme.CMC research guidance has given me opportunity to be speaker at many international conferneces aswell to be advisory member or editorial member or executive editor or reviewer in more than 80 international journals and Chief Editor for two Indexed International Journal.I am also conferred with the European Anexas Excellence Award and Ramicento International 's –" Icon of the Year Award " , "Asia Pacific Nurse Specialist " and "Leadership Excellence Award 2024

" recently.Eudoxia Royal Golden Assembly's(US) FRAIL membership was given in 2024 aswell the "Royal Golden -Best Academician Award " was bestowed by them in 2024.I extend my sincere thanks to them.

I give all thanks to Lord Jesus Christ who is the reason for my living .I am indepted to my family ,teahcers and friends for their encouragement and support particularly to CMC Vellore ,"my alma mater " I am also thankful to Kamis Mushayt Armed Forces Hospital ,Saudi & US institutions (St.Joseph Regional Medical Center, Rhode Island Hospital, TPC, CON) which have mentored me ,helped me to grow from nowhere, a disadvantaged beginning to contribute my best possible to my people around. God bless all those who sacrificially helped me.

All GOLORY to OUR LORD JESUS CHRIST ALONE

Yuanyue ren
Zhengzhou University, China

Interventions to enhance learning and autonomous learning abilities in nursing students: A review

Developing learning and autonomous learning abilities is crucial for nursing students in preparation for their future careers. Nevertheless, current nursing education frequently encounters challenges like low student engagement and inadequate autonomous learning abilities, which impact the quality of nursing professionals. This review summarizes the research progress regarding the interventions that enhance the learning and autonomous learning abilities of nursing students. The interventions are classified into four main types: student-centered teaching methods, technology-assisted teaching methods, psychologically supported teaching methods, and practice-oriented teaching interventions. Student-centered methods, such as flipped classrooms, problem-based learning (PBL), case-based learning (CBL), and cooperative group learning, emphasized active student participation and peer cooperation. Technology-assisted methods, like blended learning and virtual reality, make use of digital tools to offer flexible and immersive learning experiences. Psychologically supported methods, including mindfulness training and coaching techniques, focus on improving students' self-management and motivation. Practice-oriented interventions, for instance, the utilization of learning logs, mini-clinical evaluation exercise (Mini-CEX), the CDIO teaching model, and integrated teaching, aim to enhance clinical skills and autonomous learning through practical applications. This review emphasizes the efficacy of these interventions and indicates that a combination of multiple strategies could provide comprehensive support for nursing education. Future research is needed to explore the application of these interventions in various educational settings to optimize teaching practices and better prepare nursing students for their professional roles.

Biography:

Yuanyue Ren is a second-year Master's student in Nursing at the School of Nursing and Health, Zhengzhou University. She holds a Bachelor of Nursing degree. Her research focuses on nursing education. Address: School of Nursing and Health, Zhengzhou University, No. 101 Science Avenue, High-Tech Zone, Zhengzhou City, Henan Province, China.

Jinglin HUANG, Shuang LIU, Jing ZHANG
Department of Pulmonary and Critical Care Medicine, Peking University Shenzhen Hospital, Shenzhen, Guangdong, China

A study on the health care service needs of community patients with Multiple Chronic Conditions in hospital association service mode: a scoping review

Objective: This scoping review synthesizes research on healthcare needs among older adults (≥60 years) with multiple chronic conditions (MCC) under China's hospital-community association service model.

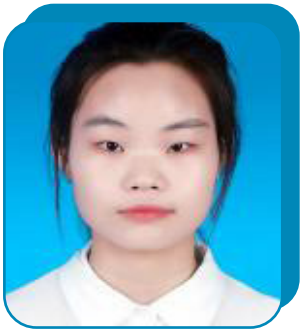
Methods: In February 2025, seven databases (PubMed, Ovid Medline, Web of Science, Embase, CBM, CNKI, Wanfang) were searched for studies published from database inception to March 2025. Guided by JBI methodology, we integrated global evidence on MCC community health service needs. Dual independent screening, standardized data extraction, and descriptive analysis were employed to compare research paradigms, methods, and key findings.

Results: Fourteen studies were included: 9 (64.3%) post-2020 publications. Most used RCTs (n=6) or cross-sectional designs (n=5), emphasizing healthcare behavior patterns (e.g., referrals, resource allocation). All studies focused on adults aged ≥60; 8 were China-based (urban-only). Compared to developed regions, developing countries prioritized barriers to community care access.Cross-sectional data revealed lower self-reported health issues but higher outpatient/emergency utilization in developing contexts.

Conclusions: Research on MCC healthcare needs under China's integrated service model is emerging but limited. Current evidence highlights disparities in care access and service utilization between urban/rural and developed/developing settings. Further studies should address geographic and socioeconomic heterogeneities to optimize MCC stratified management. Policymakers require robust evidence to align resource allocation with unmet needs, particularly in under served regions.

Biography:

Jinglin Huang is now a nurse practitioner at Peking University Shenzhen Hospital. She received her Master of Science in Nursing from Lanzhou University in 2024, with a research focus on geriatric nursing. She has published two core Chinese scientific and technical articles.



Ruru Guo
Zhengzhou University, China

Web-based sexual and reproductive health education for early and middle adolescence: a systematic review and meta-analysis

Sexual and reproductive health (SRH) education is essential during early and middle adolescence, a critical developmental stage characterized by substantial physiological, psychological, and social transitions. With the advancement of Internet technologies, web-based SRH education has become increasingly prevalent due to its cost-effectiveness, adaptability, and capacity for diverse delivery methods. However, there remains a paucity of targeted evidence evaluating its effectiveness in this age group. This systematic review and meta-analysis, conducted according to PRISMA guidelines and registered with PROSPERO (CRD42023400504), aimed to assess the impact of web-based SRH education on knowledge, attitudes, self-efficacy, and behavior among early and middle adolescents. A comprehensive search of PubMed and Web of Science databases from inception to October 2023 yielded eleven studies encompassing 7,876 participants. The quality of included studies was evaluated using the Cochrane Risk of Bias Tool. Data were extracted and cross-verified through a two-step process. Pooled results indicated a moderate effect on SRH knowledge (SMD = 0.59), a small effect on attitudes (SMD = 0.16), and a moderate impact on sexual behavior (OR = 0.75), while no significant improvement was found in self-efficacy. Comparative effectiveness between web-based and traditional face-to-face education remained inconclusive due to limited studies and methodological heterogeneity. This review demonstrates the potential benefits of web-based SRH education in enhancing adolescent knowledge and behavioral intentions. Nevertheless, the high risk of bias and inconsistency in outcome measures limit the generalizability of findings. Future research should adopt standardized reporting practices and evaluate cost-effectiveness to support the development of evidence-based digital interventions in adolescent SRH education.

Key Words: Early and middle adolescence, Sexual and reproductive health education, Web-based interventions, Review, Meta-analysis.

Biography:

Ruru Guo is a postgraduate researcher in community and public health nursing, with a focus on promoting the health and well-being of children and adolescents. Her current work centers on sexual and reproductive health education interventions for early adolescents aged 10–13. Through a systematic review and meta-analysis, she has demonstrated the effectiveness of web-based interventions in improving knowledge and behavioral outcomes. Her research integrates evidence-based practice and youth-centered approaches, aiming to inform future community health strategies and enhance adolescent health promotion through digital innovation.

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[2] Nursing Doctoral Student, Hung Kuang University, Taichung, Taiwan

Developing Interactive E-Book Curriculum Design Using the ASSURE Model to Enhance Nurses' Competency in Troubleshooting CRRT Machine Alarms

This study applied the ASSURE model to create online e-book teaching materials aimed at improving clinical nurses' ability to troubleshoot CRRT machine alarms. By integrating multimedia and interactive communication, the materials stimulated multiple senses and promoted self-directed learning.

The ASSURE-based plan included: assessing ICU nurses with over one year of CRRT experience, setting goals to enhance alarm-handling skills, developing interactive materials using concept mapping, testing content quality, offering laptops for practice with immediate feedback, and evaluating outcomes through knowledge tests and satisfaction surveys. Results showed significant improvement in pre- and post-test scores, with a satisfaction score of 4.67. Additionally, 93.02% of participants supported extending this method to other clinical care topics.

This study highlights the potential of interactive e-books for improving clinical education, recommending needs assessments, diversified materials, and mobile-friendly designs to support repeated learning and improve outcomes.

Biography:

Yi Chen Huang is currently pursuing a PhD in Nursing at Taiwan's Hung Kuang University of Technology. She serves as the Nursing Supervisor at Changhua Christian Hospital, overseeing operations related to intensive care units.

Makiko Yamamoto*, Asuka Hashino
Department of Nursing, Faculty of Life Sciences, Kumamoto University, Japan

Literature review on infection control education using virtual reality

In recent years, infection control education using virtual reality (VR) has garnered attention as a useful tool for promoting infection prevention measures. However, the effective methods and outcomes of VR-based infection control education remain unclear.

Objective: This study aims to organize the methods and effects of infection control education utilizing VR and to derive insights for the development of educational programs that promote infection Prevention behaviours.

Methods: A literature search was conducted using PubMed, Ichushi-Web, and CiNii with the keywords "VR," "infection control," and "education." Articles that did not focus on infection control Education using VR were excluded. The selected articles were analysed based on author, Publication year, region, participants, objectives, research methods, and results.

Results: A total of 115 articles were identified, of which 11 met the inclusion criteria (9 in English and 2 in Japanese). Two studies targeted healthcare professionals (physicians and nurses), one targeted Physicians and students, and eight targeted students. The content of VR interventions included Activities such as visualizing hand hygiene practices and contamination scenarios, tackling various infection control scenarios in virtual environments, and integrating VR experiences into Programs with preparatory tasks or simulation exercises. Reported effects included enhanced Knowledge of infection control, improved skills in donning and doffing personal protective Equipment (PPE), and increased awareness of infection control among students. For healthcare Professionals, the studies highlighted the recall of appropriate hand hygiene timing and changes in hand hygiene practices as outcomes of VR-based education.

Discussion: VR-based infection control education has been reported to effectively promote knowledge, skills, and attitudes toward infection control. However, most studies focused on students, with limited application in clinical settings. Given the potential of VR-integrated education to motivate infection prevention, further investigation is needed to evaluate its impact on infection prevention behaviors in clinical environments.

Key Words: Nursing education, infection control, virtual reality, infection prevention behaviour

Biography:

Department of Nursing, Faculty of Life Sciences, Kumamoto University Assistant Professor, Nurse, Public Health Nurse, Master of Nursing, Doctor of Nursing. Research focuses on nursing education methods based on self-regulated learning theory and infection control programs for elderly care facilities using virtual reality. This project is supported by JSPS Grant-in-Aid for Scientific Research 24K20279.

Chang Liu
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Analysis of the Current Situation and Influencing Factors of the Caregiving Burnout among Family Caregivers of Disabled Elderly People: A Cross-sectional Study

Objective: To analyze and explore the status and influencing factors of caregiving burnout among family caregivers of disabled elderly people.

Methods: A total of 216 family caregivers of disabled elderly people who met the inclusion criteria in 5 communities in Henan Province were selected by convenience sampling method from April to May 2025. The General Information Questionnaire, Barthel Index Scale, Social Support Scale, Positive Aspects of Caregiver Scale, and Family Caregiver Burnout Scale were used.

Results: There were four types of burnout symptoms in the family caregivers of disabled elderly people: zero burnout group 38 cases(17.6%), low burnout group 129 cases(59.7±), moderate burnout group 43 cases(19.9±)and high burnout group 6 cases (2.8±). The total score of social support was 36.23±7.51, the total score of positive aspects of caregiver was 27.14±6.14, the total score of family caregiving consequences was 48.68±2.94 and scores for two 12-items short form health survey (SF-12) dimensions were PCS 43.17±8.17, MCS 47.57±10.45. Age, self-assessed health status, daily hours of care, duration of care, Bathel Index, social support, living with disabled elderly people, quality of life and positive feeling of caregivers, and cognitive status were independent influences on caregiving burnout among family caregivers ($p<0.05$).

Conclusion: Targeted interventions should be provided to family caregivers according to different categories of influencing factors in order to reduce their level of caregiving burnout.

Keywords: Disabled elderly people, Caregiving burnout, Family caregivers, Status, Influencing factor

Biography:

My name is Chang Liu, a 24-year-old female master's student at the School of Nursing and Health of Zhengzhou University, where I also earned my bachelor's degree. Under the supervision of Prof. Peng Wang, my research focuses on Community and Geriatric Nursing.

Hongyan Li[1,2*], Yaqing Zhang[2], Xiaotian Zhang[1], Yuanhua Zheng[3]

[1]School of Nursing, Shanghai Jiao Tong University School of Medicine, 200025, China

[2]School of Nursing, Jiangxi Medical College, Nanchang University, 330006, China

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Risk Factors of Sarcopenia in patients undergoing peritoneal dialysis: A cross-sectional survey

Sarcopenia is one of the common complications of peritoneal dialysis (PD). Physical activity is one of the important factors resulting in sarcopenia. However, previous studies rarely considered the impact of physical activity on sarcopenia in PD patients. Therefore, this study will explore the influencing factors of sarcopenia in PD patients based on physical activity and clinical follow-up data. This study was a cross-sectional survey conducted from February 2023 to February 2024among PD patients in a tertiary hospital in eastern China. Routine dialysis monitoring indicators of patients and their participation in physical activity (using the Chinese version of the Low Physical Activity Questionnaire) were collected. The study aimed to investigate the risk factors for the prevalence of PD-related sarcopenia. The diagnosis of sarcopenia was based on the Asian Working Group for Sarcopenia 2019. Binary logistic regression analysis was used to explore the influencing factors of sarcopenia. A total of 830 patients were recruited, and 643 completed the survey. The average age was 48.04±12.77 years. Among them, 81 patients had sarcopenia, with a prevalence rate of 12.60%. There were 22 patients with severe sarcopenia, with a prevalence rate of 3.42%, accounting for 27.16% of the sarcopenia cases. Binary Logistic regression showed that the risk factors for PD sarcopenia were age (OR=1.043, 95%CI 1.015-1.074, P<0.01), BMI(OR=0.614, 95%CI 0.541-0.689, P<0.01) and parathyroid hormone (OR=3.198, P<0.01). 95%CI 1.808-5.690, P<0.01), comorbidities index (OR=1.303, 95%CI 0.992-1.685, P=0.05), total consumption of PA in one week (OR=0.987, 95%CI 0.975-0.998, P<0.05). The prevalence rate of sarcopenia is relatively high among PD patients. Its occurrence is influenced by old age, low BMI, more comorbidities, high parathyroid hormone, and low levels of physical activity. Clinical nurses should emphasize on the early screening of sarcopenia, strengthen education on nutrition and exercise to prevent and treat the occurrence of sarcopenia.

Keywords: Cross-sectional study; Peritoneal dialysis; Prevalence rate; Risk factor; Sarcopenia

Biography:

Hongyan Li is a doctoral student majoring in nursing at Shanghai Jiao Tong University. With 21 years of experience in nursing education and clinical nursing research, she is currently an associate professor at the School of Nursing, Nanchang University. She has published over 30 academic papers and presided over one project funded by the National Natural Science Foundation of China.

Wanying Zhao
Zhengzhou University School of Nursing and Health, Henan Province 450001, China

Dyadic Perspective on Family Resilience Experiences Among Elderly Peritoneal Dialysis: A Qualitative Study

Objective: To explore family resilience experiences in elderly peritoneal dialysis patients and their caregivers, identifying protective and hindering factors in family-ecosystem interactions.

Methods: Qualitative interviews with 22 patient caregiver pairs, using Walsh's resilience framework. Data were analyzed via Colaizzi's method to examine dyadic adaptation processes.

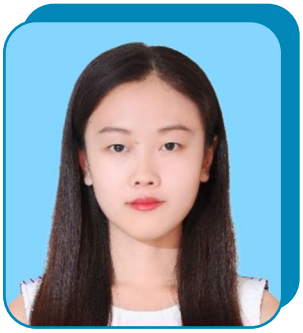
Results: Through content analysis, we identified three themes: 1) Shared beliefs countered medical uncertainties but triggered caregiver anxiety. 2) Role flexibility and home environment adjustments maintained family function, yet gaps in social support increased stress. 3) Emotional bonds strengthened resilience, while stigma and poor communication caused tension. Clinician trust and peer support were vital; policy gaps and caregiving challenges hindered resilience.

Conclusion: Family resilience involves dynamic interactions between dyads and ecosystems, requiring alignment of cognition, emotion, and action. Interventions should focus on family empowerment, healthcare continuity, and peer networks to improve outcomes.

Keywords: Dyadic perspective; Family resilience; Peritoneal dialysis; Elderly

Biography:

I am Zhao Wanying, a second-year postgraduate student at the School of Nursing and Health, Zhengzhou University. Under the supervision of Prof. Xin Wang, my research focuses on clinical nursing.



Shitong Guo
Zhengzhou University School of Nursing and Health, Henan Province 450001, China

Analysis of the Current Situation and Influencing Factors of the Thriving in Life of the Elderly in the Community: A Cross-sectional Study

Objective: To investigate the status and influencing factor of the thriving in life of the elderly in the community.

Methods: A convenience sample of older adults from six Henan Province communities was recruited during April-May 2025. The General Information Questionnaire, Measurement Tool of Thriving in Life, Basic Psychological Needs Scale, Perceived Social Support Scale and Index of Well-being Scale were used to investigate.

Results: A total of 290 questionnaires were sent out, and 276 valid questionnaires were collected, with an effective recovery rate of 95.17%. The average item score for thriving in life of the elderly was 3.10±0.53. The thriving in life score was above the middle level. Total scores were 80.30±12.69 for basic psychological needs, 55.46±12.08 for perceived social support, and 9.33±2.26 for well-being. Age, self-assessed health status, average monthly household income, participation in social activities, basic psychological needs, perceived social support and index of well-being were the independent influencing factors of thriving in life of the elderly ($P<0.05$).

Conclusion: The thriving in life score was above the middle level. Multi-dimensional intervention measures need to be taken to solve problems in aspects such as physiology, psychology, social support and economy, so as to enhance the thriving in life of the elderly.

Keywords: Old people, Thriving in life, Basic psychological needs, Perceived social support, Index of well-being

Biography:

My name is Shitong Guo, a 26-year-old female master's student at the School of Nursing and Health of Zhengzhou University, where I also earned my bachelor's degree. Under the supervision of Prof. Peng Wang, my research focuses on Community and Geriatric Nursing.

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