

AUGUST 07-08
2023
LONDON, UK

8TH WORLD CONGRESS ON
NURSING
AND HEALTHCARE

Hosting Organization:

Inovine Meetings LLC, 2C Pecan Hill Drive Clinton Mississippi, 39056 USA
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Day 1

Scientific Program

August 07, 2023 | Conference Hall : London

08:00-08:30 @ [Registration](#)

08:45-09:00 @ [Opening Ceremony](#)

Keynote Forum



09:00-9:30

Title : Evaluating Undergraduate Nursing Students' Assessment Skills Using Simulation in a Round Robin Pedagogical Strategy

Laly Joseph, Ann Blanton Edwards School of Nursing & Health Studies, USA



9:30-10:00

Title : Implementation and challenges on Perinatal Mental Health -Nurse Led Clinic

Jussara Brito, Clinical Nurse Specialist in Public Health, Hamad Medical Corporation, Qatar



10:00-10:30

Title : Coaching Culture-Transforming Maternal Health Care with Effective Nursing Leadership

Jacquelyn Claude, Serenity Nursing Consultant LLC, USA

Women Health Nursing | Midwifery Nursing | Paediatrics Nursing | Mental Health Nursing | Nurse Practitioner | Dental Nursing | Surgical Nursing | Cardiovascular Nursing | New Technology in Nursing Education | Public Health

Session Chair: Laly Joseph, Ann Blanton Edwards School of Nursing & Health Studies, USA

Session Co-Chair: Jussara Brito, Clinical Nurse Specialist in Public Health, Hamad Medical Corporation, Qatar

Special Session on



10:30-11:10

Title : Opioid Simulation in the Undergraduate Psychiatric Nursing Program

Jill M. Moore and Renee Bauer, Indiana State University School of Nursing, USA

Networking and Refreshments Break with Group Photo @ Foyer 11:10-11:30



11:30-11:50

Title : E-Mentoring: Partnering Graduate and Undergraduate Nursing Students

Ruth Robbio, York University, Faculty of Health, Canada



11:50-12:10

Title : Bridging the gap between art and science in the field of nursing and healthcare

Vanitha Rajakumar, Royale Hayat Hospital, Kuwait



12:10-12:30

Title : Innovating Nurse Education with AI-based adaptive learning technology - 21st Century Learning in Health Education

Werner Sperschneider, University College Absalon, Denmark

Lunch Break @ Restaurant 12:30- 13:30



13:30-13:50

Title : The Interrelationship of Polypharmacy on Functional Status and Quality of Life in the Elderly Chronic Lymphocytic Leukemia Patient

Patricia Karwan, Oncology Nurse Practitioner, Care New England, USA



13:50- 14:10

Title : The relationship between patient safety culture and the intentions of the nursing staff to report a near-miss event during the COVID-19 crisis

Nasra Idilbi, Max Stern Yezreel Valley College, Israel

Workshop Presentation



14:10-14 :40

Title : Effect of Kinesio Taping with fascial manipulation technique over superficial back fascial lines to increase range of motion

Swapnil Parmeshwar Mate, HPE UK Healthcare and Education LTD – London UK



14:40-15:00

Title : The Pandemic: From Crisis Mode to Transformation of Sustained Hybrid Clinical Course

Marianne Allen, University of Pittsburgh, School of Nursing, USA

Networking and Refreshments Break @ Foyer 15:00-15:20



15:20-15:40

Title : Evaluation of Patient Falls: A Retrospective Study

Gulcan Ciftcioglu Yalcin, Mardin Artuklu University Faculty of Health Sciences, Turkey



15:40-16:00

Title : Strengthening early intervention activities for the prevention and control of non-communicable diseases in South Africa

Richard Rasesemola, University of Johannesburg, South Africa



16:00-16:20

Title : International and national nursing labour mobility

Thomas Odumo, RockSteady Holdings Ottawa, Ontario, Canada



16:20-16:40

Title : Promoting nurse resilience to ensure quality patient care

Anat Drach-Zahavy, The Cheryl Spencer Department of Nursing, The University of Haifa, Israel

Awards & Closing Ceremony

Day-1 Ends

Day 2

August 08, 2023

Session Chair: Laly Joseph, Ann Blanton Edwards School of Nursing & Health Studies, USA

Session Co-Chair: Jussara Brito, Clinical Nurse Specialist in Public Health, Hamad Medical Corporation, Qatar



09:00-09:20

Title : Sexual and reproductive health access of persons living with bodily disability in low resource settings: An assessment of contraceptive/ family planning practices of women living with disabilities in Gusau, Zamfara state, NW Nigeria

Rabi Yunusa, Department of Global health, University of Washington, USA



09:20-09:40

Title : Telehealth Adoption: The Knowledge And Attitudes Of Ghanaians Toward Telemedicine

Maame Fosua Afrifa-Minka, Sanskriti University, School of Management, India



09:40-10:00

Title : Evaluation Of Sharp Injuries In Healthcare Professionals: A Retrospective Study

Gulcan Ciftcioglu Yalcin, Mardin Artuklu University Faculty of Health Sciences, Turkey



10:00-10:20

Title : Effect of mindfulness-based decompression therapy in alleviating psychological pain of malignant tumor patients undergoing concurrent chemoradiotherapy

Rong Li, The First Affiliated Hospital of Xi'an Jiaotong University, China

Networking and Refreshments Break @ Foyer 10:20-10:40

Poster Presentations @ Foyer 10:40-12:00

Session Chair: Laly Joseph, Ann Blanton Edwards School of Nursing & Health Studies, USA



WNC1

Title : To explore the physical and mental experience of nucleic acid collectors in a hospital during the epidemic of COVID-19

Yao Wanxia, Medical College of Xi'an Peihua University, China



WNC2

Title : Expanding coverage of basic health screening services for the prevention and control of non-communicable diseases in South Africa

Richard Rasesemola, University of Johannesburg, South Africa

Panel Discussion

Awards & Closing Ceremony

Lunch Break @ Restaurant 12:00- 13:00

Day 2

August 08, 2023

Virtual | (GMT+1) | Time in London, UK



13:00-13:20

Title : Spiritual Well-Being and Quality of Life among Cancer Patients

Candice Chang Tomas, Salma Rehabilitation Hospital, Abu Dhabi, UAE



13:20-13:40

E-BABE- Occupational stress among nurses working in emergency department of a selected hospital in UAE

Sondos Ibrahim Jarrad, Abu Dhabi, UAE



13:40-14:00

Title : Knowledge assessment of infection prevention and control practices-as part of routine care for formulation of training calendar in Nurses of superspeciality cardiac hospital

Jenita John Vaghela, ZYDUS Hospitals, Ahmedabad, India



14:00-14:20

Title : Study on the scale and structure of nursing education at China's higher education institutions

Jianlin Hou, Peking University National Center for Health Professions Education, China



14:20-14:40

Title : Proteins in urine - Possible biomarkers of endometriosis

Alenka Visnic, Clinical Hospital Center Rijeka, Clinic for Gynecology and Obstetrics, Croatia



14:40-15:00

Title : Influence of Leadership Competence of Nurse Leaders on Staff Turnover in United Arab Emirates (Capstone Study)

Fitz Gerald Camacho, Pediatric Intensive Care Unit, Mediclinic City Hospital, Dubai, UAE



15:00-15:20

Title : Internet Addiction Among Medical and Health Sciences Students in RAS- Al Khaimah, United Arab of Emirates

Fatma Magdi Ibrahim, RAK Medical & Health Science University, UAE



15:20-15:40

Title : Implementation of perinatal problem identification programme in a North West province hospital

Kelebogile Leah Manjinja, Sefako Makgatho Health Science University, South Africa

Keynote Forum



15:40-16:00

Title : Telehealth Clinical Nursing Partnership: Supporting Nursing Education to Change Practice

Mary Lou De Natale and Lisa Sabatini, University of San Francisco School of Nursing and Health Professions, USA



16:00-16:20

Title : Perinatal health literacy in Cyprus. What are the evidence?

Eleni Hadjigeorgiou, Cyprus University Of Technology, Cyprus



16:20-16:40

Title : The impact of permanent education in the adoption of healthcare-associated infections prevention at CTUs – a program developed by a consulting nurse

Natalia Fernandes Martins Ferreira, Federal University of Health Sciences of Porto Alegre, Brazil



16:40-17:00

Title : Addressing the Disparity of Awareness in the Prompt Evaluation of and Treatment of Eating Disorders in Adolescents

Deetta K. Vance, Indiana State University School of Nursing, USA



17:00-17:20

Consistency, Repetition, and Deliberate Practice are Key to Fundamental Success

Elise M. Colancecco, Moravian University, Bethlehem, USA



17:20-17:40

The definition, diagnosis and treatment of fever are against modern science in the world today! Why ?

K. M. Yacob, Marma Health Centre, kaloor, Kochi, India



17:40-18:00

Title : Humanized care in serious and critical patients

Ramona Caridad Díaz Lopez, University of Medical Sciences of the Matanzas city, Cuba



18:00-18:20

Title : How do we choose the best donor for T-cell-replete, HLA-haploidentical stem cell Transplantation

Belal alblowe, King Fahad Specialist Hospital, Saudi Arabia



18:20-18:40

Title : Prevalence of Needle Stick Injury and it's Risk Factors among Nurses Working at B.P. Koirala Institute of Health Sciences

Ram Sharan Mehta, BP Koirala Institute of Health Sciences, Nepal



18:40-19:00

Title : Improving nurse-patient Relationships through the teaching-learning Process: Improving Hospital Productivity Approach

Mahdi Yousefi, School of Health, Mashhad University of Medical Sciences, Iran

Panel Discussion

Awards, Thanks giving & Closing Ceremony





8th World Congress on

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HYBRID EVENT

KEYNOTE PRESENTATIONS
DAY 1



Laly Joseph

Ann Blanton Edwards School of Nursing & Health Studies, USA

Evaluating Undergraduate Nursing Students' Assessment Skills Using Simulation in a "Round Robin" Pedagogical Strategy

Opportunities to practice basic assessment skills are needed to help students gain confidence and competence in their clinical performance. A simulation training module was created to provide students with a three-prong approach to improve and evaluate assessment skills. The purpose of this study was to evaluate student's assessment skills (physical assessment, communication, and critical thinking) using a "round robin" strategy where students exchanged roles and performed a variety of basic nursing skills. Additionally, the following research questions were addressed: 1. Can a "round robin" pedagogical approach using simulation improve student nurses' overall assessment skills? 2. Can assessment skills be evaluated using students and instructors in real-time? 3. Are there significant improvements in assessment skill performance in the nurse role between groups based upon the timing of their participation in simulation within the semester?

207 first semester nursing students participated in a "round robin" simulation session where they engaged in assessment activities as the nurse, patient, and evaluator. Assessment information in the nurse role was compared to students that attended the training in the early versus the late groups. Findings from students who attended simulation training early in the semester showed a significant difference $\chi^2 (7, N=12) = 12.33, p < 0.028$ in physical assessment and patient education $\chi^2 (1, N=2) = 2.00, p < 0.05$ total items when compared to the late group sessions.

Simulation may be used to help fill proficiency gaps between education and practice and provide faculty a valuable evaluative tool to determine clinical competencies.

Biography:

Dr. Laly Joseph is the Dean & Professor at Ann Blanton Edwards School of Nursing & Health Studies, USA. She is a versatile & experienced educator, a change agent, and a skilled clinician with more than 29 years in academia & health care. Her previous positions include Associate Director, Assistant Professor, RN-MSN Program Director, Administrative Nursing Supervisor, Director of Education, United Nations Delegate, & currently as a Distinguished Fellow & Practitioner of the National Academies of Practice, AACN Project Director on the Nursing Workforce Diversity Program 1.5 mil Grant, Sigma's Alpha Beta Mu Chapter President & International Nursing Consultant in India and Malaysia.



Jussara Brito

Clinical Nurse Specialist in Public Health, AWH, Hamad Medical Corporation, Qatar:
Salwa Al Rawaili, AWH AEDON, Tamara Al Shadafat AWH EDON OBGyn Division

Implementation and challenges on Perinatal Mental Health -Nurse Led Clinic

In July 2020, AWH implemented the first HMC Perinatal mental health clinic. The main objective was to establish an integrated patient-centered care for all women leading to a better health and wellbeing. The Clinic was run by a clinical nurse specialist. The service offers screening and triage assessment, diagnoses, follow-up, and management of PMADs in alignment with national health strategy to improve maternal-child health and wellness. From August 2020 to July 2021, 1,012 women from 48 countries were screened for anxiety and depression (Fig 1). 85% were screened antenatally and 25% postnatally. From the initial screening, 278 women (27.5%) had scores ≥ 3 for anxiety and 276 (27.3%) for depression. Further screening of these women by the CNS showed 44 (15.9%) women presented with score more than 10 for depression and 37 (13.3%) had score over 10 for Anxiety. It is worth highlighting that the most common cause (92%) of referrals for women presenting with sadness and excessive worries was the absence of mother/family during delivery. Our incidence rate for anxiety and depression were 15.9% and 13.3%, respectively; comparable to international incidence rates of between 7% and 20% in high income.

Key words: Integrated care, perinatal mental health, screening tools, PMAD's

Biography:

Jussara da Silva Brito detain has Degree in Nursing (UFSM/Brazil), Master's in public health (ENSP/FIOCRUZ/Brazil) and Clinical Health Coach Certify (2021 IOWA Chronic Care Consortium). She is a Clinical Nurse Specialist in Public Health with more than 30 years of experience in Obstetrics, Gynaecology and Tropical diseases. In the last 4 years she is developing two specifics projects at Al Wakra Hospital, Qatar: Implementation of Perinatal mental Health services and Implementation of strategies to obtain a Baby Friendly hospital Initiative (BFHI).



Jacquelyn Claude
Serenity Nursing Consultant, LLC, USA

Coaching Culture-Transforming Maternal Health Care with Effective Nursing Leadership

In the classroom, nurses are taught how to be great clinicians. But developing into leaders that are capable of inspiring others and creating positive transformation takes more than just technical competence. It requires the skills to build trust amongst teams, strategize for success, lead by example, and create positive change while inspiring others.

Transformational Nurse Leadership combines technical nursing knowledge, leadership skills, and interpersonal relationships to create an environment that enables people to work together in harmony to achieve goals.

At its heart, transformational nurse leadership is about relationships—building trust and understanding with colleagues, and empowering those they lead while encouraging their development and growth. By creating an environment that encourages collaboration, innovation, and personal responsibility, nurse leaders can drive change within their organizations while helping others reach their full potential. Better nurse leadership translates into improved patient outcomes.

Based on evidence-based research, the strategies shared in this workshop will bridge the gap between textbook leadership courses and the real-world work environment. Ideal for experienced and new nurse leaders alike, this workshop embodies the knowledge for nurses to deliver evidence-based maternal health care focusing on couplet care, skin-to skin contact and astute labor and delivery nurses.

Biography:

Jacquelyn Claude, MSPH, BSN, RN is a nursing staff consultant, nurse manager, healthcare transformation strategist and public health advocate on a mission to impact communities everywhere through the power of nurses.

Leveraging 20+ years of clinical expertise, an undeniable passion for people and sharp strategic insight, she is a sought-after leader who is looking to change how nurses are developed, healthcare is delivered and communities are treated. Jacqueline's passion for improving healthcare access and outcomes for underserved populations is evident in all her work, from providing patient-centered care to developing innovative, nurse-led solutions that meet the needs of vulnerable populations.



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HYBRID EVENT

WORKSHOP PRESENTATION
DAY 1



Swapnil Parmeshwar Mate

HPE UK Healthcare and Education LTD – London UK

Effect of Kinesio Taping with fascial manipulation technique over superficial back fascial lines to increase range of motion

Effect of kinesio taping application with the fascia manipulation technique on the superficial back fascia line over the hamstring fascia to increase the range of motion Superficial Back Line is one of the first line dissected and research over the fascia as a connective tissue. The Superficial Back Line (SBL) connects and protects the entire posterior surface of the body like a carapace from the bottom of the foot to the top of the head in two pieces – toes to knees, and knees to eyebrow. Strain, tension (good and bad), trauma, and movement tend to be passed through the structure along these fascial lines of transmission leading to soft tissue mal-alignment of the connective tissue resulting in somatic and mechanical dysfunction. A forward bend with the knees straight links and challenges all the tracks and stations of the Superficial Back Line. Kinesio Taping application of fascia manipulation technique helps in correction and realignment of the collagen fiber found predominantly in the fascia system responsible for tensile strength and force transmission. Research and collected clinical data pre and post KT application over the hamstring fascia suggest its effectiveness of kinesio taping application in realigning the fascia system in the superficial back line to increase range of motion thereby secondarily improving force transmission and proprioception.

Biography:

Dr. Swapnil Mate is Clinical and Sports Physical therapist In India and Head Instructor of HPE UK Healthcare and Education Ltd, based in London – UK. Completed his graduation from Topiwala National Medical College in Mumbai and Advance physical therapy rehabilitation from London, He has been a part of London Olympic 2012 with the Indian Shooting team and has been associated with various sports teams and association in India. He is currently an EC member of Indian Association of physiotherapy (IAP). He is Certified Kinesio taping Practitioner (CKTP) from Kinesio University, KTAIUSA.



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HYBRID EVENT

SPEAKER PRESENTATIONS
DAY 1



Opioid Simulation in the Undergraduate Psychiatric Nursing Program

Jill M. Moore and Renee Bauer

Indiana State University School of Nursing, USA

Background: Actor simulation has proven to be an attractive and intensifying method for health care education. Researchers at a Midwestern University explored this avenue for junior level nursing students in the 338 Psychiatric Nursing Undergraduate Course. The study was conducted to investigate perceptions and preferences regarding the use of opioid seeking patients (actors) in a clinical simulation for psychiatric nursing students. This experience used an actor simulating a “drug seeking patient” who was both persistent and verbally combative. It was also theorized that using a live actor would challenge students while exposing them to real life situations.

Method: A cross-sectional, mixed method study immersing 83 undergraduate students (student nurses) in a hospital simulation was conducted. Pre- and post-test items were administered with the goal of testing the knowledge of students regarding opiates. Questionnaires (reflective journals) were additionally administered to assess personal, environmental, and experiential attitudes regarding pre and post-simulation with live actors.

Results: The students scored higher in their post-test regarding opioid addictions. They preferred in person simulation as they felt this was more “real world” reflective. They enjoyed watching their peers interact and voiced even though they were aware of the simulation not being real- they became immersed in the action.

Conclusion: Students valued this experience and they commented that it was indeed better than using a manikin. For the most part, scores on the pre-post opioid quiz improved and the responses to the open-ended questions demonstrated thoughtful reflection. The majority thought it was a worthwhile learning experience.

Biography:

Jill Moore is a professor with over 15 years of nursing and nursing education experience. She is the executive director for the ISU SON. Her research interests include student success, policy, and higher education.

Renee Bauer is a professor with over 25 years of psychiatric nursing experience. She is the external relationships coordinator at the ISU SON. Her research interests include multi-generational education, prayer, and themed housing.



E-Mentoring: Partnering Graduate and Undergraduate Nursing Students

Ruth Robbio

York University, Faculty of Health, Toronto, Canada

This pre-post interventional mixed methods pilot study was inspired by Robbio's (2018) PhD work on e-mentoring as a socialization strategy for new graduate nurses (NGNs). Robbio's doctoral study confirmed the difficulties NGNs face during their transition to professional practice and provides evidence that there is a clear need to support their transition. This difficult transition was compounded during pandemic times where nursing students' academic and clinical placement supports were limited, and staff nurse preceptors and mentors are burned out, with some staff nurses leaving the profession, hence making for an even more difficult transition.

This educational initiative explores e-mentoring as a socialization strategy for 4th year nursing students who will soon transition into professional practice. The intervention is a 3-month e-mentoring program partnering graduate (n=10) and undergraduate nursing students (n=10) in a 1:1 online mentoring relationship. The program proposes to augment psychosocial support systems and well-being and provide opportunities for professional networking, debriefing and career support.

The e-mentoring program will contribute to the systemic development of e-learning and experiential education within the curriculum. The intervention will explicitly advance the Sustainable Development Goal of "Quality Education" by helping students to acquire knowledge and skills needed to support health and global citizenship. This program will also advance the Sustainable Development Goal of "Good Health and Well-being" and "Partnerships for Student Success." Overall, the e-mentoring program will assist in minimizing the effects of the limited academic, clinical, and social supports during the pandemic that may have adverse effects for years to come.

Biography:

Dr Ruth Robbio has extensive mentoring research experience. Her doctoral research study was on "E-mentoring as a socialization strategy for new graduate nurse role transition and workplace adjustment" University of Toronto, Bloomberg Faculty of Nursing. Dr. Robbio is an Assistant Professor at York University and has vast teaching experience. She was recognized by York University for guiding, mentoring, and engaging peer tutors and promoting a Peer Tutoring Program. She was also acknowledged by York University for her leadership with Faculty Mentoring Circles: <https://yfile.news.yorku.ca/2021/05/16/school-of-nursing-creates-new-approach-to-mentorship/> She is currently leading the study: E-Mentoring: Partnering Graduate and Undergraduate Nursing Students at York University.



Bridging the gap between art and science in the field of nursing and healthcare

Vanitha Rajakumar

Chief Nursing Manager, Royale Hayat Hospital, Kuwait

INTRODUCTION

- Throughout history, leaders in the profession of nursing have grappled with the separation, integration, and synergy of the art and science of the discipline.
- Writings of nurse scholars such as Peplau (1988) explain the beauty of both the art and the science to provide a holistic lens to describe the complexity of nursing care. Carper's (1978) description of the values and beliefs for professional practice expanded our understanding of empirical and aesthetic ways of knowing.
- Science, as a way of knowing, serves as a basis to advance nursing practice necessary to continue the service of human health needs (Grace & Zumstein-Shaha, 2019).
- This perspective is encompassed in the four nursing metaparadigm concepts of health, person, environment, and nurse. Empirical knowledge informs professional practice not only from the common understanding of scientific systematic assessments and observations, but also the subjective experiences of persons and the meaning they attach to these events (Carper, 1978).
- Nurses use their heads and their hearts. Each day, they utilize critical thinking to make sound judgments and select the best care solutions for their patients.
- Nursing is both an art and a science – and in this field, one can't exist without the other.
- Development of Nursing Art and Science
- Scientific Revolution
- In 17th the and 18th centaury (Age of Reason) was generated
- The philosophical movement known as French Enlightenment
- It was search to understand, control, and manipulate nature through rational, empirical means
- Revaluation changes in physics and astronomy

French Enlightenment

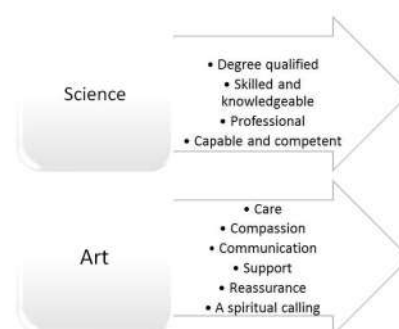
- The science of 17th century was based on a new method of inquiry
- It involved mathematical deception of nature and the analytic method of reasoning
- The Enlightenment project aimed of civilizing all, of implementing its ideal of social betterment through the power of reason
- It based on beliefs in the universal superiority of the knowledge and values (Watson science and culture)
- Two way of thinking in art
- Once concerning the cultural production of knowledge
- The art of living (for men to be pursuit of

freedom through rational as “doers” or “thinkers”

- Separation of art and science occurred in the educational structure that emerged in the Enlightenment with rise of modern profession
- Knowledge has two dimensions of art and science within universities and faculties
- Both art and science worked completely independently
- Search for human perfectibility was major issue which linked to a philosophy of humanism
- The human subject was deemed to be male
- Art and Science in a Modern Nursing
- The nature of modern art and science has evolved through influenced by Florence Nightingale ideas which rely on the Florence Nightingale school of thought

Florence Nightingale School of Thought

- The contrast of Nightingale work in Crimean war and public was known as “Ministering Angel”
- Nursing known as a female vocation based on Enlightenment ideal of the womanly virtues and
- Exercise of womanly arts through the care of the sick
- Nightingale described nursing as the “Finest of the Fine Art”
- Nightingale training program started at St. Thomas Hospital, London, 1860



SCIENCE OF NURSING

- “Nursing is a legitimate scientific discipline rooted in theory, ongoing research and evidence. We take evidence and implement it to improve quality and to improve nursing practice,”
- Nurses study complicated scientific concepts, theories and hands-on methodology to understand the complexities of the human body.
- Beyond the hard sciences, nurses must also be proficient in the technology used throughout healthcare facilities. “Nursing is a completely different profession from a hundred years ago,” Sargent explains. “It’s incredibly reliant on technology, and nurses are expected to understand all of it — everything from infusion pumps to traction devices, ventilators to fall alarms and now, electronic health records.”
- While nursing is steeped in evidence based-practice, scientific concepts and technical know-how, it’s important to note that all of these elements can come together only under the careful application of a knowledgeable nurse
- It’s the human element that brings science into practice — and that’s what makes the art of nursing come alive.

ART OF NURSING

- Nurses must master a plethora of information about the human body. It’s the manner in which they apply this expertise that can be considered the “art of nursing.” Without the art of the application, the knowledge

and expertise of a nurse is all but useless.

- Other times, the art of nursing is seen through a creativity in the application of nursing procedures.
- The art of nursing can also be a balancing act.
- The art of application makes nursing holistic, taking the entire person and unique medical scenario into consideration.
- <https://www.healthcarenowradio.com/nursing-practice-the-intersection-of-art-and-science/>
- <https://www.css.edu/about/blog/the-critical-role-of-a-nurse-bridging-the-gap-between-art-science/>



Innovating Nurse Education with AI-based adaptive learning technology - 21st Century Learning in Health Education

Werner Sperschneider

University College Absalon, Denmark

Statement of the Problem: NurseEd (Nurse Education) is a 4-years innovative research and development project, forming a new didactic design for 21st century nursing education, based on the digital learning platform Rhapsode™. By accelerating theory learning, nursing becomes more differentiated and practice-oriented by releasing more time for capability teaching in the Sim- Lab.

Methodology & Theoretical Orientation: Based on state-of-the-art research in digital learning tools we do apply a data-driven approach to adjust the path and pace of learning, thus enabling delivery of personalized learning at scale.

Upscaling and implementation steps are integrated in the methodology, and the last iteration targets full cohort after proof of concept (N = 1100) by the end of 2023.

Findings: This paper will present first results after two year of research in didactics, software adjustment, teaching experiments, qualitative and quantitative evaluation. Students have a hard time understanding the intent of the adaptive technology, but they accept and learn to appreciate it over time and take it on surprisingly quickly after initial rejection.

Conclusion & Significance: The vision is to create a new and innovative didactic approach that integrates virtual and physical learning environments in order to train many more, and more skilled nurses - including:

- create more efficient knowledge acquisition
- increase the professional performance level
- provide more individually tailored teaching
- provide better support for students with weak study skills
- reduce dropouts + achieve higher grading average

Biography:

Werner Sperschneider has his expertise is research & development as well as innovation management. His particular focus is on the use of adaptive learning technology in health education and continued education. In addition, Werner is concerned with patient and user involvement in transversal activity and intervention projects that lead to empowerment. He is associated with the research environment The local healthcare system.



The Interrelationship of Polypharmacy on Functional Status and Quality of Life in the Elderly Chronic Lymphocytic Leukemia Patient

Patricia Karwan

Oncology Nurse Practitioner, Care New England, USA

The purpose of this descriptive correlational study was to examine how the number of medications taken on a daily basis by elderly Chronic Lymphocytic Leukemia (CLL) patients is related to their functional status and quality of life. No previous studies have been identified that have explored this relationship. Sixty four elderly CLL patients completed a one time, descriptive, survey. This study examined five key areas. Functional status was measured using the Lawton IADL scale. Quality of life was measured using the Quality Life Scale. There was significant and positive relationships in the two medications groups. In the group where patients were taking 3 to 5 medications, the functional status scores were associated with higher quality of life scores. The last group of patients taking more than 5 medications had a similar positive relationship. Overall, while the results were positive and significant, it appears that medications do affect the functional status and the quality of life in elderly CLL patients. There was a statistical significance and positive relationship with patients taking 3 - 5 medications, and patients taking greater than 5 medications. Functional status scores were associated with higher quality of life. This research study will contribute to the limited knowledge about the interactive effects of polypharmacy on the functional status and quality of life in the elderly CLL patients. Early assessment of the patient functional baseline leads to better patient care.

Biography:

Patricia Karwan is An Adult Oncology Nurse Practitioner for Women and Infants Hospital at Care New England Health System. She is an Advanced Lecturer at Rhode Island College School of Nursing where she teaches graduate level Nursing. She received her Master's in Nursing from Wayne State University in Michigan and completed her DNP from Sacred Heart University in Connecticut. She is a member of the Oncology Nursing Society, Advanced Practice Society for Hematology and Oncology as well as a member of the Mu Delta Chapter of Sigma Theta Tau. She is a peer reviewer for Harborside Press on Oncology and Hematology Patients.



The relationship between patient safety culture and the intentions of the nursing staff to report a near-miss event during the COVID-19 crisis

Nasra Idilbi

Department of Nursing, Max Stern Yezreel Valley College, Emek Yezreel, Israel

Reporting a near-miss event has been associated with better patient safety culture. We examined the relationship between patient safety culture and nurses' intention to report a near-miss during the Covid-19 epidemic, and factors predicting that intention. This mixed-methods study was conducted in a tertiary medical center during the 3rd and 4th COVID-19 waves in 2020-2021 among 199 nurses working in Covid-dedicated departments. Mean perception of patient safety culture was low overall. Whereas 77.4% of nurses intended to report a near-miss, only 20.1% actually did. Five factors predicted nurses' intention to report a near-miss event; the model explains 20% of the variance. poor departmental organization can adversely affect the intention to report a near-miss event. Organizational learning, teamwork between hospital departments, transfers between departments and departmental disorganization can affect intention to report a near-miss and adversely affect patient safety culture during a health crisis.

Biography:

Nasra Idilbi(PhD) is a senior lecturer in the Department of Nursing at Emek Jezreel College and also the Nursing Research Coordinator at the Galilee Medical Center. She has published more than 15 papers in reputed journals.



The Pandemic: From Crisis Mode to Transformation of Sustained Hybrid Clinical Course

Marianne Allen

University of Pittsburgh, School of Nursing, USA

Before the Covid-19 pandemic, the Baccalaureate maternity clinical course format included in-hospital clinical days, one simulation day, community clinical site visit, and an EBP project. In March 2020, the pandemic changed clinical to exclusively remote instruction for the remainder of the semester. Faculty developed remote instruction with student self-directed offerings in a variety of modalities including online lectures, recorded and interactive presentations, website reviews, case studies, videos, and written assignments. During the 2020-2021 academic year, nursing students were permitted to return to clinical sites; however, the number of students on nursing units was reduced to half of the previous year. Students alternated hospital clinical with remote clinical, using a variety of educational modalities. Community agencies remained closed to students.

During the 2021-2022 academic year, hospitals permitted the pre-covid number of students on the units, the community agencies accepted students, and the hybrid clinical model was implemented. Impacts of Covid-19 on nursing education provided opportunities to change undergraduate clinical course structure from hospital/community clinical to a sustained hybrid model, including small-group hospital clinicals and faculty-facilitated remote clinicals with real-time and recorded presentations; independent review of written materials, videos, case studies, web site reviews; simulations; individual and group EBP projects/presentations; and group discussions. Remote clinical days held prior to mid-terms that each accounted for seven hours of clinical instruction included the topics of Labor and Delivery, Postpartum-Newborn, and Community Clinical. This hybrid model of clinical instruction successfully met course objectives, demonstrated adult learning principles, and was positively received by students and faculty.

Biography:

Dr. Marianne Allen is an assistant professor at the University of Pittsburgh and a perinatal clinical nurse specialist. She promotes quality and safety of health care through nursing research and evidence-based practice, nursing education, and collaboration with faculty and colleagues. She was integral in developing the initial response to undergraduate education to remote learning due to the Covid-19 pandemic, and a leader in maternity clinical course transformation from hospital clinical to an interactive hybrid model of remote, individual, and in-person clinical education. Her clinical interests include maternal role attainment, breastfeeding, perinatal bereavement, postpartum depression, and term and late preterm infants.

Dr. Geraldine Maurer, an assistant professor at the University of Pittsburgh School of Nursing, has over 45 years of experience in obstetrics, with most of her work focused on high-risk maternity patients. She has been an educator working with BSN students for the past 20 years and a family nurse practitioner. During COVID, clinical restrictions on education for nursing students and limitations on in-hospital opportunities necessitated redesign of our clinical maternity course. Our redesigned educational format included use of mixed media options combined with hospital clinical to include components that met educational objectives for undergraduate students with the best outcomes.



Evaluation of Patient Falls: A Retrospective Study

Gulcan Ciftcioglu Yalcin

Mardin Artuklu University Faculty of Health Sciences, Turkey

Providing a safe environment in hospitals is important to protect the patient from secondary injuries. Accidental falls are among the most common causes of secondary injuries. This study was conducted to evaluate the fall risks of hospitalized patients in Mardin provincial hospitals. The study was evaluated in 10 hospitals of a province affiliated to the Ministry of Health. The fall status of patients hospitalized in Mardin Provincial Hospitals between July 2018 and March 2023 was evaluated retrospectively. It was determined that a total of 140 patient reports were made on these dates. When the records are examined, it is thought that it is due to facility origin, patient origin and lack of health personnel. Most patient-induced falls are in children. Therefore, it has been reported that the causes related to the patient and their relatives are mostly caused by maternal neglect. Among the reasons arising from the facility; it was seen that the floor was slippery and the bed rails did not open. When these reasons were examined, it was seen that most of the falls were preventable. On the other hand, it was seen that the health personnel gave information to the doctor after the fall and gave training to the patients and their relatives about falling. It was determined that the most cases of falls were in the pediatric service, physical therapy and palliative services. As a result, most cases of falls are pediatric patients. Because nearly most falls are preventable, healthcare professionals need to assess the risks of falls and take action.

Biography:

Gulcan Ciftcioglu Yalcin has completed his PhD at the age of 38 years from İstanbul University-Cerrahpaşa and postdoctoral studies from Mardin Artuklu University Faculty of Health sciences. She is the director of internship commission at university. She has published more than 12 articles in well-known journals and serves as a reputation member referee. She worked voluntarily in many social responsibility projects. Turkish Nurses Association still continues its representation in Mardin. She worked as a quality director and educational nurse at the hospital for approximately 8 years. She worked as the assistant principal at the nursing school for 18 months.



Strengthening early intervention activities for the prevention and control of non-communicable diseases in South Africa

Richard Rasesemola

University of Johannesburg, Faculty of Health Science, Johannesburg, South Africa

In Africa, South Africa is one of the countries suffering the most with the burden of disease related to non-communicable diseases (NCDs), with 51% or 254,700 deaths directly linked to NCDs in 2022. The United Kingdom reported less than 30% of deaths from NCDs during the same period. In South Africa, these deaths occur despite the availability of NCD National Targets as well as guidelines in a form of policies and strategies for the management of NCDs. A mixed methods research study was conducted to analyse policies for prevention and control of NCDs, describe the current public health policy priorities in South Africa, and to explore evidence of collaboration in the formulation and implementation of NCDs prevention and control policies in South Africa. The results revealed that although prevention of NCDs is among top priorities for the policymakers in South Africa, lack of collaboration with key stakeholders in policy formulation and implementation, and lack of resources in some areas leads to missed opportunities for early prevention and control of NCDs in the country. Therefore, a strategy for strengthening early intervention plans and activities to help the government accelerate the prevention and control of NCDs in South Africa was developed.

Biography:

Richard Rasesemola is a Critical Care Specialist (Adult) and holds a PhD. He is currently employed as a lecturer in the Department of Nursing at the University of Johannesburg. He is also an undergraduate programme coordinator for the Bachelor of Nursing Degree. He has published 4 research articles with 3 more articles under review.



International and national nursing labour mobility

Thomas Odumo

RockSteady Holdings Ottawa, Ontario, Canada

This paper examines the issue of nurse immigration from both an international and national perspective in the Canadian context. Nurse labour mobility is also examined from the perspective of the nurses themselves that is sometimes not taken into account in the discussion of this topic. As well, it will discuss ethical issues for consideration in the cross-border of nurses. The discussion draws upon a literary review, including the professional experience of the formulation of federal Government of Canada's initiatives to address this matter. While this issue was already growing in importance prior to the advent of COVID-19, it was greatly accelerated in response to the pandemic. This paper examines the salient features of issues discussed in this paper that have gained importance in the post-COVID-19 era and this paper proposes a framework for arriving at a solution that balances the interest of all stakeholders.

Biography:

Thomas holds a BComm degree from the University of Nairobi and a CPA designation. He immigrated to Canada in 1997 and earned another CPA designation "summa cum laude" in 2004. He was awarded a Plaque of Commendation by the Prime Minister of Canada for his quality of work in advising on health policy Cabinet Documents from financial and policy perspectives. One of the areas he advised on was on the opening up of the Canadian medical profession to greater participation by internationally educated doctors and nurses. He's MD of RockSteady Holdings that represents international medical companies among other interests.



Promoting nurse resilience to ensure quality patient care

Anat Drach-Zahavy

The Cheryl Spencer Department of Nursing, The University of Haifa, Israel

Despite the IOM's influential report 'to-err-is-human,' patient quality care has only modestly improved over the last three decades. Current strategies to promote quality care are initiated by hospital management, and focus on training, enforcing compliance, and reporting errors and near misses, and learning from them. There is a need for self-starting, future-focused, and change-oriented initiatives to improve nursing safety, particularly by focusing on nurses' resilience. This study aimed to identify the cognitive and behavioral strategies for improving patient safety that differentiate between low and higher resilience nurses; and to examine the effects of resilience and proactivity on nurses' success in assuring patients' safety. The study employed a mixed-methods design. Qualitative part included interviews with 24 nurses; quantitative section employed a multi-source (101 nurses and ~3 of their patients) and multi-methods (questionnaires, patients' interviews) data collection strategy. Findings revealed skepticism, anticipation, and proactivity as essential strategies differentiating nurses with low or high resilience. Regression analyzes indicated that nurses' proactivity is influenced by their personal resilience and their perceptions of social capital. Furthermore, nurses' proactivity was related to patient safety only when adherence to procedures was perceived to be low rather than high. The findings imply that resilience is vital in promoting patients' safety. To foster proactivity, managers need to foster resilience and social capital at work. It is particularly important for managers to consider the dilemma between adhering to procedures and being proactive and how they can be facilitated simultaneously. Practical implications to promote skepticism, anticipation and proactivity will be discussed.

Biography:

Anat Drach-Zahavy is a full professor of psychology at the Department of Nursing and the director of its resilience research center. She received her PhD from the Department of Industrial Engineering and Management at the Technion - Israel Institute of Technology. In her research, she focuses on the promotion of personal and organizational resilience in healthcare, including leadership and teamwork practices that promote patient-centered care, patient safety, and nurses' health and well-being. She has presented her work in important conferences and published more than 100 chapters and papers and in reputed journals.



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SPEAKER PRESENTATIONS
DAY 2



Sexual and reproductive health access of persons living with bodily disability in low resource settings: An assessment of contraceptive/ family planning practices of women living with disabilities in Gusau, Zamfara state, NW Nigeria

Rabi Yunusa

Department of Global health, University of Washington, USA

Statement of the Problem: Persons living with disabilities (PLWD) continue to experience hardship in accessing Sexual and Reproductive Health (SRH) services despite numerous global declarations that guarantee universal right to access the same range, quality, and standard of free or affordable SRH services without discrimination. In NW Nigeria, PLWD often occupy marginalized low socioeconomic spaces in society and often considered as afterthought for policy decisions compared to their able-bodied counterparts. Study aims to understand the family planning practice and needs of PLWD in Gusau, NW Nigeria.

Methodology: We conducted and analyzed qualitative data from 8 in-depth interviews and 10 focus group discussions examining the experience in access and use of contraceptive/ family planning methods by male and female PLWD.

Findings: Most married female PLWD identified as active users of modern contraceptives; however, unmarried female PLWD reported lower access and use despite having similar needs. Contraceptive methods like withdrawal and male condom use were the commonest methods among all male PLWD. Rationale for the use of contraceptives include limitation of family size due to economic hardship; while Disability-related reasons for not using contraceptives included need for more children to assist with family income, and healthcare centers not disability mobility friendly.

Conclusion & Recommendations: Multi-faceted approaches within health systems and communities including disability friendly health facilities design that recognize and address the multiple layers of barriers faced by PLWD are needed to improve access among this marginalized group. Policymakers should do more to engage and economically empower PLWD.

Key Words: Women, Reproductive Health, Disability, Qualitative research, Contraception.

Biography:

Rabi Yunusa is a Physician and an Assistant Professor in the departments of Health Systems and Population Health, and Global Health at the University of Washington, Seattle, USA. Her research and work focus on the negative role of bias and stigma on the health of marginalized people living in resource limited settings. Rabi collaborates with communities and organizations in the USA and Nigeria in bringing Equity, Antiracism and Social Justice lens in all her activities.



Telehealth Adoption: The Knowledge And Attitudes Of Ghanaians Toward Telemedicine

Maame Fosua Afrifa-Minka

Sanskriti University, School of Management, India

Background: Telemedicine has become a preferred option in delivering healthcare considering the increase in population and the emergence of infectious diseases. Technology has provided a means of remotely attending to a large number of patients. In the African health sector, telemedicine is yet to be largely utilized and has become imperative to investigate the knowledge and attitudes of the people who are to utilize it. This study, therefore, assessed the knowledge and attitude of Ghanaians toward telemedicine adoption in Ghana.

Materials and Methods: A self-designed questionnaire after an extensive literature review was used as a tool for data collection. By convenience sampling, 315 persons participated in this study. The data collected were summarised and analyzed using Excel 2019.

Results: More than half (53.02%) of the participants had used telemedicine before and 77.07% contributed that the concept of telemedicine wasn't vague. 75.56% of the participants were willing to pay for telemedicine applications. More than half (52.38%) strongly agreed that telemedicine eliminates waiting time and 66.35% strongly agreed that it saves travelling time. 26.98% were neutral on telemedicine risking their privacy and 28.25% strongly agreed that telemedicine may expose their medical records to unauthorized persons.

Conclusions: The findings of this study indicated that participants had adequate knowledge and a positive attitude toward telemedicine adoption. They knew the benefits of telemedicine such as being faster than hospital visits, time-saving and economical. They were however sceptical about whether telemedicine would be able to protect their privacy and also their medical records from unauthorized persons.

Biography:

Maame Fosua Afrifa-Minka completed her MBA in Healthcare Management as a gold medalist at 29 years from Sanskriti University and currently pursuing PhD in Healthcare Management from the same university. She is a licensed diagnostic radiographer and has practised in reputable hospitals in Ghana which is her country of origin.



Evaluation Of Sharp Injuries In Healthcare Professionals: A Retrospective Study

Gulcan Ciftcioglu Yalcin

Mardin Artuklu University Faculty of Health Sciences, Turkey

Healthcare workers may be exposed to injuries in their work areas. The high risk of injury by contaminated sharps and sharps during the delivery of health care services reduces the motivation of the health workers and causes them to experience workforce losses. The aim of this study is to examine the exposure of nurses, midwives and other health workers, who constitute an important group among health workers, to sharp and stab wounds. The study was evaluated in 10 hospitals of a province affiliated to the Ministry of Health. Exposure to cutting edge injuries of healthcare workers working in Mardin Provincial Hospitals between July 2018 and March 2023 was evaluated retrospectively. A total of 449 stab wounds have been reported. Nurses, midwives, cleaning staff and anesthesia technicians are the most common reported sharps injuries. Injuries were mostly superficial injuries. When the causes of injury in the nurse group were examined, it was most frequently found in the emergency room, operating room, intensive care units and blood collection services.

In this study, it was observed that sharp and stab wounds occurred at high rates. It was observed that nurses from occupational groups were exposed to injury more frequently, the injury was more common in the emergency room, and the injury associated with needle tip exposure was the most common. These results show that the development of the medical equipment used during the work of the nurse group in order to be safe and continuous education in this regard are important.

Biography:

Gulcan Ciftcioglu Yalcin has completed his PhD at the age of 38 years from İstanbul University-Cerrahpaşa and postdoctoral studies from Mardin Artuklu University Faculty of Health sciences. She is the director of internship commission at university. She has published more than 12 articles in well-known journals and serves as a reputation member referee. She worked voluntarily in many social responsibility projects. Turkish Nurses Association still continues its representation in Mardin. She worked as a quality director and educational nurse at the hospital for approximately 8 years. She worked as the assistant principal at the nursing school for 18 months.



Effect of mindfulness-based decompression therapy in alleviating psychological pain of malignant tumor patients undergoing concurrent chemoradiotherapy

Rong Li

The First Affiliated Hospital of Xi'an Jiaotong University, China

To explore the effect of mindfulness-based decompression therapy (MBSR) on alleviating the psychological pain of malignant tumor patients undergoing concurrent chemoradiotherapy. 120 patients with malignant tumor treated in the department of oncology of a university affiliated hospital in Xi'an were selected and divided into observation group and control group. After intervention, the observation group decreased more obviously, and there was a significant difference between the two groups ($P < 0.05$). The pain degree in both groups was moderate, and the pain degree in both groups changed slightly after intervention, but there was significant difference between the observation group and the control group ($P < 0.05$). Compared with before intervention, both groups were significantly lower after intervention, with statistical significance ($P < 0.05$). There was no significant difference between the two groups before intervention ($P > 0.05$), but the decrease was more obvious in the observation group after intervention, there was significant difference between the two groups ($P < 0.05$). At the end of 8 weeks after MBSR intervention, the expression levels of CD3+, CD4+, CD8+, NK cells and interleukin-6 in observation group were significantly increased, while the expression level of cortisol was significantly decreased ($P < 0.05$). The comparison of indexes between the two groups was also significant ($P < 0.05$). Mindfulness decompression can significantly relieve the psychological pain, improve the anxiety and depression, and improve the quality of life of malignant tumor patients with concurrent chemoradiotherapy.

Biography:

Li Rong, female, member of the Communist Party of China, nurse in charge, bachelor's degree from Xi'an Medical College. National palliative care specialist nurse, provincial cancer specialist nurse. On behalf of the hospital, she has repeatedly taught palliative care and oncology knowledge and practice at national academic conferences. She is currently a member of the Palliative Care Committee and the Brachytherapy Committee of the Shaanxi Anti-Cancer Association; Member of Radiology Committee of Shaanxi Preventive Medicine Association; Member of the Medical Humanities Committee and Nuclear Medicine Committee of Shaanxi Health Care Association. She main research directions: palliative care, humanistic nursing, symptom management and nursing of tumor patients.



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VIRTUAL PRESENTATIONS
DAY 2



Spiritual Well-Being and Quality of Life among Cancer Patients

Candice Chang Tomas

Salma Rehabilitation Hospital Abu Dhabi, UAE

It's often claimed that a person's quality of life depends on how they view themselves as a whole. A person's holistic health is not totally covered by their physical and psychological well-being, but it does include their spiritual needs. Spirituality is a phenomenon that can affect a person's health-disease process and coping techniques to illness, as is well documented. Explore the significance of this component in terms of a person's holistic existence. This alone merits attention and concentration. Among cancer patients, spiritual wellbeing is related to patient quality of life. These patients' health coping techniques have been significantly impacted by the worry connected with the diagnosis and prognosis of the condition. (Betty, F.2013). Cancer is a crippling illness that negatively affects a person's outlook on life. The majority of those afflicted by it experience its significant impacts not only in their physical but also in their mental aspects, such as emotions of extreme worry and fear of the future. It has undoubtedly had an impact on society's usual way of life. Once this disease is identified, patients frequently experience a loss of purpose in their existence. Their need for spiritual support and coping is impacted by this health catastrophe. Patients' only hope depends mostly on their strong faith and spirituality because the intensity of intrusive therapies, the associated costs, and the fear of death are so overpowering. When determining what makes up the preferred clinical endpoint for a health-related intervention, quality of life is a crucial anchor to consider. (Chan et al, 2012). Because it has such a big impact on someone's quality of life, spiritual well-being is seen as a multi-dimensional subject that has to be examined. Lack of spiritual wellbeing may cause one to lose hope. Since it has remained difficult for the healthcare team, especially nurses, to care for these patients holistically, it is unfortunate that healthcare professionals who are required to look at and care for patients from a holistic point of view frequently fail to meet spiritual requirements of patients. (Rassouli et al 2015).

To answer this, a descriptive correlational study was done which included total of 120 patients diagnosed with Cancer and were patients of San Juan De Dios Hospital. Participants were asked to answer the SWB (Spiritual Well-Being Scale) and CARES- SF (Cancer Rehabilitation Evaluation System- Short Form) questionnaires to assess their level of Spiritual Well-Being and Quality of Life and its correlation to their demographics.

The study explored Spiritual Well-Being's subscales which are the religious subscale and the existential subscale. Results showed that the religious well-being of the respondents obtained a mean score of 56.36+4.91. This meant that the respondents have a positive view of one's relationship with God. Furthermore, the existential well-being of the respondents obtained a mean score of 53.23+5.62, which indicates that respondents have high level of life satisfaction with one's life and a clear sense of purpose. Overall, the spiritual well-being of the respondents is high with a mean score of 109.58+9.51.

As for the Quality of life, the subgroups obtained "not at all" with lowest mean total score on marital (0.26+1.09) and sexual (0.026+1.04), and the highest mean total score on miscellaneous (1.78+2.1). Overall CARES score is 4.42+5.19. This can be interpreted based on the norm of the tool used that the higher the severity of CARES score obtained, there is diminished quality of life among the respondents.

The correlation between spiritual well-being and CARES revealed a weak and adverse association with:

- a. Religious well-being ($r=-0.28$, $p=0.002$)
- b. Existential happiness ($r = -0.353$, $p = 0.000$)
- c. Overall Spiritual Well-Being ($r=-0.353$, $p=0.000$)

The respondents' spiritual health decreased as total CARES severity increased.

There is a considerable positive and low association between the following factors when it comes to the relationships between demographics, spiritual well-being, and quality of life:

Subscale for Age and Medical Interaction ($r=0.304$, $p0.001$). The severity of the medical contact subscale increased with age, which means that as respondents aged, they had a harder time identifying problems with the subscale. Cancer Stage and Physical Subscale had a correlation coefficient of ($r=0.234$, $p=0.010$), which can be translated as: the more advanced the cancer stage, the more severe the Physical Subscale. The more restrictions respondents found in the CARES-SF Physical subscale areas as the condition advanced. Gender and the Psychosocial Subscale, however, have a weak and significant inverse association for Gender, Education, and Marital Status ($r=-0.224$, $p=0.014$). In comparison to male respondents, female respondents scored higher on the psychosocial subscale. The top three issues raised by female respondents were "worried about being fired" ($M=5.00$, $SD=0.00$), "difficult to ask time off for treatments" ($M=4.50$, $SD=0.71$), and "often feeling stressed" ($M=3.56$, $SD= 0.96$).

According to the gender and various subscale correlation ($r=-0.228$, $p=0.012$), female respondents score higher on the various subscale than male respondents. The top issue among females is still "difficulty of finding a job" ($M=4.00$, $SD=0.41$).

According to the Education and Marital subscale ($r=-0.345$, $p=0.000$), the severity of the marital subscale increased with respondents' lower educational attainment levels. Regarding the Education and Other subscale ($r=-0.184$, $p=0.045$). The severity of the miscellaneous subscale increases with decreased educational attainment. Similar to that, there is a strong positive association and a weak relationship between:

For Education, existential well-being, religious well-being, and overall spiritual well-being ($r=0.297$, $p=0.001$), respectively. Higher levels of education are associated with better religious, existential, and total spiritual well-being in respondents. This indicated that respondents' degree of education was associated with a favorable perception of their relationship with God, a better level of life happiness, and a strong sense of purpose.

There was little correlation found between the variables for work status, religious well-being ($r=0.2$, $p=0.028$), existential well-being ($r=0.237$, $p=0.009$), and overall spiritual well-being ($r=0.251$, $p=0.006$).

There is a substantial inverse relationship and a weak correlation for cancer stage between:

Cancer stage, religious well-being, and existential well-being ($r=-0.209$, $p=0.022$ and $r=-0.249$, $p=0.006$). Cancer stage and general spiritual well-being have a negative correlation ($r=-0.23$, $p=0.012$). Additionally, there is little correlation between the two factors.

Age, gender, religion, employment position, length of cancer, cancer kind, and stage were not significantly correlated with spiritual well-being, quality of life (as measured by Global CARES), or education ($p>0.05$), but they were significantly correlated with one other.

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Biography:

As a nurse manager/nursing leader with a proven history of 26 years of fruitful employment in the healthcare industry, I am an accomplished and devoted healthcare administrator and leader. In addition to my numerous leadership positions in nursing administration as I moved up the clinical ladder progressively, one highlight of my career was when I had worked as a Director of nursing in Riyadh, Saudi Arabia, for 13 years and likewise in leading Salma's Nursing Department to JCI accreditation.

Adept in nursing management and leadership, with rich clinical experience in long-term ventilation, oncology, critical care, telemetry, and medical high dependency. I am also passionate about programs that focus on quality improvement.

I place a high importance in providing excellent and sincere patient care by developing a highly motivated workforce. I am adamant that a strong commitment to treating patients with empathy and the consistent use of patient safety processes are key components of delivering high-quality treatment.

I am passionate about Public speaking, mentoring, Evidence Based Practice and achieving service excellence.

My life principle is that, to be an effective leader, it would mean balancing your own network, maintaining authenticity and sincerity in dealings with people around you, be it your superior, colleague, subordinate and most especially patients and families.



E-BABE- Occupational stress among nurses working in emergency department of a selected hospital in UAE.

Sondos Ibrahim Jarrad

Abu Dhabi, UAE

Background: There is a growing global awareness towards handling occupational stress at work and using certain coping strategies to overcome stressful events and reducing physical and psychological changes due to stress at work. This study was aiming to explore the level of occupational stress among nursing population working in emergency department (ED) of a selected hospital in Amman, Jordan.

Method: Study used a Quantitative descriptive research approach using a cross sectional study design.

Results: The level of the occupational stress among ED nurses was moderate on the ENSS with mean score of (130.09 35.878 SD).

Conclusion There was a moderate level of occupational stress and high level of coping strategies among ED nurses.

Biography:

Sondos Jarrad, RN, BSN, MSN, works as the clinical resource nurse for outpatient and radiation Oncology Department and formally as the Emergency Department Clinical resource Nurse. She has conducted and the led so many EBP "evidence based projects". She has participated in many national and international conferences as a speaker. She has over than 13 years of experience in emergency and trauma medicine and is a member of the AHA "American Heart Association" as BLS and ACLS instructor. She has earned her bachelor of science degree from the University of Sharjah, UAE and her Master of Science in nursing from RAK medical and Health sciences university, UAE .



Knowledge assessment of infection prevention and control practices-as part of routine care for formulation of training calendar in Nurses of superspeciality cardiac hospital.

Jenita John Vaghela

ZYDUS Hospitals, Ahmedabad -Gujarat India

Background: Infection prevention and control practices are key components of routine care and quality standard which is essential for the wellbeing & safety of the patients, staff and visitors in hospital's environment. Improving knowledge is the only way to improve compliance of infection control practices.

Objectives: The aim of this study was to examine/assess Nurses' Knowledge & evaluate their routine care practice regarding infection prevention and control practices to formulate the training calendar.

Methods: The study has been conducted at a 450 bed- NABH –accredited superspeciality cardiac hospital in India with established Infection control policies and practices within time frame of 3 month. Total 186 nurses from different area of hospital were included in the study. Knowledge was assessed via questionnaires divided into 10 different categories. One score has been allocated to each right answer & zero to the wrong answer and results were tabulated as percentage.

Results: We have divided questionnaires' in 10 categories and results are evaluated for each category. In this we get excellent (>90%) in three categories, good (80%-90%) in six category and in one category we get average (70%-80%). The category in which we get average is Isolation precaution. In Area wise evaluation we get excellent in pediatric medical ICU, good in four area adult and pediatric surgical ICU and average in general wards. We also evaluated result according to experience of nursing staff but no significant difference evaluated.

Conclusion: In our study we have got average knowledge for isolation precaution in intensive care units and average knowledge in all category in general wards. So next training calendar focus isolation precaution topic for ICU staff and for all topics for general wards staff. This type of study is important parameter for forming training calendar of focus group and topic of training.

Biography:

Jenita John Vaghela working as an Infection control practisnor in the zydus hospitals, ahmedabad. Total 14 yrs experience in the nursing and Infection control & prevention department. I hava passed RN RM and post basic bsc nursing running. I have completed BBA and MBA IN FINANACE too. Winner of national nursing championship and quiz competition. Presented scientific poster in the 6th world nursing congress which was held at Itely, Rome. Many scientific presenattion done at national level and award winner.



Study on the scale and structure of nursing education at China's higher education institutions

Jianlin Hou

Peking University National Center for Health Professions Education, China

Objectives To analyze and evaluate the scale and structure of nursing education at China's higher education institutions, provide research evidences for the assessment and improvement of nursing educational relevant policies. Methods Descriptive analysis were used to analyze national data on nursing education in China. Indicators that were analyzed included number of institutions and their composition and distribution, number of nursing students and graduates and their tendency of change. Results Between 2014 and 2019, the number of nursing students rose from 0.78 million to 1.07 million, of which the percentage of bachelor student decreased, the percentage of junior college students, master students and doctoral students significantly increased. In the same period, the number of nursing graduates increased from 219 thousand to 323 thousand. In 2019, a majority (83.3%) of nursing graduates were junior college graduates. Master and doctorate nursing graduates only totaled 1744 and 34, respectively. The widening inter-region disparity of nursing educational intuitions was notable. Conclusions The scale of nursing education in China was expanding although it was still necessary to optimize the structure of education. Furthermore, the overall quality of education and regional distribution should be improved.

Biography:

Jianlin Hou, PhD, MA, MSPH. Dr. Hou is an associate research professor of National Center for Health Professions Education Development, Peking University. His education background is sociology and health policy management. His research interest is health professional education and human resources for health, such as nursing education, transformative learning, global health education, geriatric medical education. He has published more than 100 articles and has been serving as an editorial board member of several journals.



Proteins in urine - Possible biomarkers of endometriosis

Alenka Višnić¹, Gordana Čanadi Jurešić², Robert Domitrović², Marko Klarić¹, Tina Sušanj Šepić¹, Dubravko Barišić³

¹ Clinical Hospital Center Rijeka, Clinic for Gynecology and Obstetrics, Rijeka, Croatia.

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Endometriosis is a chronic gynaecological inflammatory disease characterised by the appearance and swelling of the endometrium outside the uterine cavity. The etiopathogenesis of endometriosis has yet to be fully elucidated. Several pathological reactions occur in the pathogenesis of endometriosis. Pathological processes that occur during the development of endometriosis are cell invasion, pro-inflammatory activation of the immune system, and vascular, antioxidant, proliferative and adhesion reactions. It is believed that the pathological responses in endometriosis and the expressed proteins act synergistically on each other, thus promoting disease development. There is a possibility that the consequence of these reactions is the increased production of proteins that are excreted in the urine. Proteins in urine were analysed by chromatography and mass spectrometry (LC-MS/MS). Out of 700 detected proteins in urine, we identified 32 proteins whose concentrations were statistically significantly different in the endometriosis group (N=16) compared to the control group (N=16). The discovered proteins are classified according to their primary function, such as invasion, migration, proliferation, proteolysis, cell adhesion, reactions in the circulatory system and participation in immune responses. For all mentioned proteins, the difference in concentration between the tested groups is statistically significant, $p < 0.005$. The study's findings complement the known pathogenesis of endometriosis and shed light on the progression of the disease. Patients with endometriosis excrete proteins in their urine that could play a role in the development of the disease and serve as biomarkers for diagnosis. However, identifying one or more proteins that are specific enough and can serve as biomarkers for endometriosis is a challenge and a necessity that would facilitate the diagnosis.



Influence of Leadership Competence of Nurse Leaders on Staff Turnover in United Arab Emirates (Capstone Study)

Fitz Gerald Camacho

Pediatric Intensive Care Unit Mediclinic City Hospital, Dubai, UAE

It was traditionally thought that nurses played a key part in the functioning of society. Despite this, there has been a significant uptick in the number of registered nurses quitting their jobs or the profession entirely, not just in the United Arab Emirates but also in other parts of the globe.

The purpose of this research is to determine whether or not the leadership abilities of nurse leaders are a contributing factor to the growing incidence of nurse turnover in the United Arab Emirates. To accomplish the study's main objective, descriptive and causal methods will be used. This research uses the Inductive Process of reasoning and is grounded on the interpretivism philosophy. According to the respondent's understanding and assessment of the link between leadership competence and nurse turnover in the United Arab Emirates, the gathered results are based. The research selected twelve (12) nurse leaders who fit the standards for nurse leaders in any healthcare setting in the United Arab Emirates using the approach of purposive sampling. The studies are done in a cross-sectional fashion. The author chose the participants and collected the data at a particular time point. To acquire the required empirical data, a researcher-created interview schedule is used.

According to study results using thematic analysis, resignations among registered nurses in the United Arab Emirates are multifactorial. This involves a lack of leadership competencies on the part of the leadership. Leadership competencies has a substantial impact on why nurses quit their jobs. In the study's conclusion, numerous suggestions are made for these reasons.

Biography:

Fitz Gerald Camacho is currently working as Manager of Pediatric Intensive Care Unit and Pediatric Acute Care Services at Mediclinic City Hospital, Dubai, United Arab Emirates. Mediclinic Middle East is part of Mediclinic International, a diversified global private healthcare services group, with divisions in Switzerland, South Africa, Namibia, United Kingdom and United Arab Emirates.

Fitz has completed his Master of Arts in Nursing, Major in Administration at the Philippine Women's University and currently taking his second master's degree (Master of Business Administration in Healthcare Management at York St. John University, United Kingdom). He obtained his Bachelor of Science in Nursing at the University of the Immaculate Conception, Philippines where he was awarded as Cum Laude (with High Distinction). He also completed his post-graduate certification in healthcare leadership at Duke University. He is an expert in cardiac pediatric intensive care as most of his experiences is devoted in taking care of the children in critical area. At the start of his career, he was already engaged in clinical teaching in St. Augustine School of Nursing, Philippines. He has worked as a Clinical Resource Nurse in Salma Children's Rehabilitation Hospital, United Arab Emirates. He also managed the Clinical Education Department of REEM Hospital, Abu Dhabi, United Arab Emirates.



Internet Addiction Among Medical and Health Sciences Students in RAS- Al Khaimah, United Arab of Emirates.

Fatma Magdi Ibrahim

RAK Medical & Health Science University, UAE

Internet has become an essential element of the life of a medical student. The global significance of internet addiction among medical students is increasing, and the growing negative impact on physical, psychosocial, and academic performance is concerning. The aim of the study was to assess the prevalence of Internet Addiction and its associated risk factors among undergraduate medical and health sciences students in Ras Al Khaimah, United Arab of Emirates. Tools has been divided into two parts, the first of which comprises sociodemographic questions, the second is Young's 20-item Internet Addiction Scale (YIAT 20). Results revealed that seventy-five percent of the students surveyed (75% were female), and more than half (64.1%) were between the ages of 20 and 25. In terms of internet usage, 45%, 29.1%, and 6.6% of the students, respectively, had moderate, mild, and severe levels of internet addiction, while 19.4% had normal levels of internet usage with a mean of 48.98 ± 20.57 . Following that, there was a significant relationship between age, father's work, using the internet for education, social media, amusement, gaming, and shopping, and internet addiction. The study unfolds that internet addiction in the majority of the medical students is a dark reality that requires timely remedial action. The internet addiction among students should be given more attention and a comprehensive program for students should be prepared to increase awareness of the internet addiction, to detect students at risk before it becomes pathological. The students will have to be educated in safe and healthy practices for internet use.

Biography:

Dr. Fatma is assistant professor of community health nursing in RAK Medical & Health Science University UAE, she has completed her PhD in 2019 at Mansoura University, Egypt. She is the class coordinator for BSN year4 students. She has published more than 9 papers in reputed journals and has been serving as a reviewer in different journals.



Implementation of perinatal problem identification programme in a North West province hospital

Kelebogile Leah Manjinja

Sefako Makgatho Health Science University, South Africa

Appropriate implementation of solutions emanating from perinatal problem identification programme (PPIP) improves the quality of perinatal care, leading to the reduction of perinatal morbidity and mortality rates due to avoidable factors. Professional nurses working at the hospital under study, despite their attendance of neonatal mortality meetings twice a month, seemed to have limited understanding of PPIP. The significance of such meetings, as evidenced by persistent high avoidable morbidity and mortality rates in 2018, led to exploration and description of PPIP for the improvement of quality care. Professional nurses participated in an exploratory, descriptive and contextual qualitative study. Data was collected using interview guide, audio tape recorder and field notes. The interview guide was pre-tested with one focus group interview. A thematic analysis method was used to analyze transcribed interviews, audio tape recorders and field notes. Trustworthiness were maintained throughout the study. The following themes emerged from analyzed data pertaining to professional nurse's perceptions regarding the implementation of PPIP, inadequate commitment of operational managers, inconsistent attendance of perinatal audit meetings, lack of institutional support and established interprofessional teams to drive PPIP implementation. Professional nurses limited supportive environment in particular affect their implementation of PPIP.

Biography:

Kelebogile Leah Manjinja is a nurse educator at the University of Pretoria, South Africa. She is a clinical facilitator for midwifery students at the institution. She is a 42 year old, PhD candidate at the University of South Africa. The focus of her studies are on midwifery and neonatal nursing science, specifically neonatal nursing. She presented her study on more than 5 conferences, striving for publication of her work.



Telehealth Clinical Nursing Partnership: Supporting Nursing Education to Change Practice

Mary Lou De Natale, EdD, RN, PHN, CNL (Primary Author)

Lisa Sabatini, DNP, MSN, BSN, RN, PHN, CNML (Secondary Author)

University of San Francisco School of Nursing and Health Professions, CA 94117

Globally the health care crisis of Covid-19 presented nursing education to seek opportunities in the community to support outcomes for nursing competencies and practice in nursing. The use of Telehealth nursing was to utilize a new model for case management for clients in a rural Health Care System and provided clinical teaching and learning opportunities inclusive of: geriatric and mental health assessments, support for disease management, health teaching on medications management and social support. The impact of Telehealth was that nursing students were guided by teamwork and professionalism for connections for clients and the social determinants of health. Though the initial contact was initiated using the virtual Zoom, the nursing students communicated on their cell phones, and in later semesters made home visits to clients in case management teams. Their work supported the triple aim in health care (quality, client experience, and the health care costs). Further, the Telehealth clinical supported the nursing BSN Standards of Practice for nursing regarding: assessments, communication, teamwork, documentation, professionalism and respect for those aging in the community. The call to action in Telehealth was to support client's referrals and provide resources for the clients for continued care. Nursing students were the workforce that helped to make the Telehealth clinical successful during Covid-19. This partnership continues to address inequities in health care, lack of access for nutrition, housing, and transportation services and increases the need for education in the rural community.

Biography:

Dr. Mary Lou De Natale is nurse, educator, and researcher with advocacy in working with the homeless in clinical partnerships in education for 30 years. She is a Professor at USF in the School of Nursing and Health Professions.

Dr. Lisa Sabatini is a nurse, educator, and clinical provider with a focus in public health for 20 years. She is an Assistant Professor at USF in the School of Nursing and Health Professions.

Additionally:

Dr. Mary Lou De Natale worked with Dr. Lisa Sabatini to complete the leadership and clinical practicum work for nursing students in Telehealth from March 2020 to present. They have both supported the University of San Francisco School of Nursing and Health Professionals (SONHP) developing the partnership to include as well: pre-licensure MSN, Public Health, Behavioral Health, and the DNP Nurse Practitioners.



Perinatal health literacy in Cyprus. What are the evidence?

Eleni Hadjigeorgiou

Cyprus University Of Technology , Cyprus

Background: Perinatal health literacy is very important because they potentially help couples make the right decisions during pregnancy, childbirth, and the postpartum period, which has a direct effect on the mother's and neonate's health. In Cyprus, the culture of 'childbirth and parenting classes' has not been previously explored.

Methods: An ethnographic study design approach was employed, with an overt non-participant observation by the researcher of 19 classes in total. The participants included pregnant women and their partners, who attended childbirth and parenting classes. Data were taken collectively from semi-structured telephone interviews of the women who completed the classes and the researcher's field notes and reflective diary. Analysis of data was carried out by inductive content analysis.

Findings: Four main thematic categories emerged from data analysis: 1) Views and opinions about the course, 2) Important perinatal topics, 3) Usefulness and reasons for attending the course and 4) The journey of learning. Parents and parents-to-be need more in-depth information and practical training on neonatal care, via the use of various pedagogical approaches.

Conclusion: The importance of antenatal classes is not appropriately promoted in Cyprus. Policy makers in Cyprus should implement a standardised curriculum within the framework of the national health system. The role of the midwife in perinatal education is imperative.

Keywords: perinatal, antenatal classes, parenthood, childbirth, pregnancy, education

Biography:

Dr Eleni Hadjigeorgiou is an Assistant Professor, Midwifery Care, Director of the MSc programme in Midwifery at the Department of Nursing, Faculty of Health science, Cyprus University of Technology. She was a representative of Midwifery in local, European and International level. She has an extensive and robust teaching experience in midwifery and in running nursing educational programmes in master's degree level and at undergraduate level. She coordinates educational programmes and research projects in Midwifery. Her research focus on normal birth, childbirth rights and perinatal health literacy, perinatal mental health.



The impact of permanent education in the adoption of healthcare-associated infections prevention at CTUs – a program developed by a consulting nurse

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Universidade Federal de Ciências da Saúde de Porto Alegre, Faculdade de Desenvolvimento do Rio Grande do Sul, Pontífica Universidade Católica do Rio Grande do Sul, Brazil

The healthcare-associated infections (HAIs) are those acquired during some healthcare procedure, and currently represent a national and global public health problem as they increase hospital morbidity and mortality, prolong hospitalization, and increase care costs. Furthermore, they negatively impact patient's safety and the quality of the healthcare services. In order to reduce the incidence and impact of HAIs in health services, numerous evidence-based prevention and control practices are being developed. The objective of this report is to describe educational actions carried out in two Rio Grande do Sul Hospitals, in order to prevent HAIs and correlate them with rates of adherence to prevention bundles. The Permanent Education was based on a training matrix. This matrix was elaborated together with the nursing leaders of the ICUs, customizing it by patient's needs and prioritizing the issues that must be dealt. The training took place with an average of one day of training every 20 days, with theoretical and practical activities on the topics covered. Permanent Education is essential in the context of progressive and continuous improvement of the healthcare team, impacting on the quality of the care itself. It was noted that there was a significant improvement in the months following the educational actions, which perpetuated in the two subsequent months. However, by the third month after the intervention a reduction in adherence was observed. This data points out the necessity for periodic educational actions with different methodologies, in order to maintain an optimal plateau of adherence, and, at the same time, improve the care. Over given timeline, goals of a Physiotherapist are more easily attainable under shorter span of time.

Biography:

¹Natália Fernandes Martins Ferreira completed her graduation at the age of 26 at the Federal University of Health Sciences in Porto Alegre (UFCSPA). Specialist in Critical Adult at Grupo Hospitalar Conceição in 2018. She is studying for a Masters in Health Management at UFCSPA, is an Intensive Care Nurse at the HNV ICU, and Consultant Nurse at IMPROVE.

²Joscelaine Lopes completed her graduation at the Faculty of Development of Rio Grande do Sul in Porto Alegre (FADERGS) in 2019. Postgraduate nursing in ICU and management of intensive care for critically ill patients in 2021. She is an Intensive Care Nurse at the AESC ICU.

³Gisele Baldez Piccoli completed her graduation at the Pontifical Catholic University of Rio Grande do Sul (PUCRS) in 2005. Specialist in Intensive care nursing at Unisinos in 2006 and Health Management at Public Health School in 2015. She is Consultant Nurse at IMPROVE.



Addressing the Disparity of Awareness in the Prompt Evaluation of and Treatment of Eating Disorders in Adolescents

Deetta K. Vance

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Eating disorders encompass a severe disturbance in eating behaviors, as well as emotional responses and thoughts resulting in unhealthy weight loss or gain. Most patients afflicted with eating disorders are diagnosed with a combination of anorexia, bulimia, and binge-eating. In adolescents, bullying in schools, body image disturbance, genetic predisposition, and other mental illnesses including anxiety, depression, and obsessive-compulsive disorder leads to eating disorder development. Gaining access to care for early intervention and specialized care referral for disordered eating behaviors is essential in improving nutritional status, lowering the risk of suicide, and other comorbidities developing such as cardiovascular disease, pulmonary disease, and metabolic disorders. However, there are challenges that exist for accessing care for all adolescents, but specifically people of color and patients who have public insurance.

Nurse Practitioners (NPs) serve a unique role in health care in the way that gaps in care are often addressed through increasing provider availability. The pursuit of continuing education is a cornerstone and duty of the role of an NP. Being culturally aware of the impacts of socioeconomic status, race, ethnicity, and insurance providers on these affected adolescents goes hand in hand with seeking to improve knowledge. Goals that accompany the pursuit of a post-master's certificate in mental health include increasing access to care for all adolescents impacted by eating disorders, but especially those of color and with insurance that is not readily accepted by the scarce treatment facilities with any availability for treatment. As the prevalence of eating disorders and the correlating disparity has grown among various racial and ethnic groups, it is the charge of nurse practitioners to work to reduce this gap in care, increase awareness in fellow providers, and train new nurse practitioners in the evaluation and management of eating disorders.

Biography:

Dr. Deetta K. Vance completed her Family Nurse Practitioner degree at Indiana State University and her Doctor of Nursing Practice from the University of Alabama. She is an Associate Professor in the School of Nursing at Indiana State and has served the community in a variety of practice fields including palliative medicine, school-based care, urgent care, and occupational health, as well as volunteering in the local community to provide physicals to underserved youth.



Consistency, Repetition, and Deliberate Practice are Key to Fundamental Success

Elise M. Colancecco

Moravian University, Bethlehem, PA, USA

Strong fundamental knowledge lays the foundation for clinical practice and the development of clinical judgment. The skills lab holds the 'space' for the growth of clinical knowledge and skills into clinical application and clinical judgment. The teaching plan implemented stemmed from the theories of scaffolding and Tanner's Clinical Judgment Model. Concepts (e.g., medication administration, oxygenation, etc.) were intentionally introduced and then revisited over the semester to allow scaffolding to occur. Over a 15 week traditional undergraduate nursing fundamental course, the scaffolding of fundamental concepts was implemented over multiple modules. During this clinical course, students rotated through the lab in groups for a total of six rotations. The first two rotations consisted of larger groups with the goal of skill introduction and general practice. For the next three rotations, students reported to the skills lab for three different modules. During each module, the students (n = 8) met with the same clinical instructor and practiced already learned skills within differing clinical contexts. Modules included a combination of simulated experiences including virtual, low fidelity, and/or high fidelity simulations. The four components of Tanner's clinical judgment model the student-instructor discussion during pre-brief and debrief. This communication solidified accurate understanding of the clinical situation and correct clinical actions required thus promoting the development of clinical judgment. Overall, the implementation of scaffolding activities throughout the semester promoted knowledge retention and a deeper understanding and application of the concepts across multiple contexts.

Biography:

Elise Colancecco is a register nurse who earned her BSN in 2004, and her PhD in 2019 from the Pennsylvania State University. She has practiced in acute, step-down, and critical care specialties within the areas of orthopedics, trauma, and neurology. Elise has been a nurse educator for over 10 years. Her goal is to develop competent, empathetic nurses ready to enter the profession. Research areas include work-life balance, professional grief, burnout/resilience, and nursing education.



The definition, diagnosis and treatment of fever are against modern science in the world today! Why?

K. M. Yacob

Marma Health Centre, kaloor, Kochi, Kerala, India

There is no uniform definition, test, or treatment for fever alone. Today, the diagnosis and treatment of fever are similar to the diagnosis and treatment of its opposite, destructive hyperthermia. The essence of today's fever treatment is fever can be cured by using fever-creating substances. No science or technology exists anywhere in the world that claims to cure fever with fever-causing substances. A claim to cure fever by using fever-creating substances is not called a treatment. It is a murderous attempt.

1. The current definition of fever is against modern science.

The current definition of fever is usually only a elevated body temperature above 100.4°F (38°C). It is not a scientific definition. Elevating the temperature is an action like walking and sitting.

In many medical books, we can see different types of fever definitions^{5,6}.

It is against modern science to give different definitions for one thing (fever). A single criterion for a definition is not found in the current definition of fever.

The definition of fever does not even say why the temperature is elevated. Because it is not known what the temperature of the fever is, modern science has not investigated what our immune system does with the heat energy of fever.

The definition of fever is the basis of fever.

If the definition of fever is wrong, the diagnosis and treatment based on it will be wrong.

In modern science, no one can make a true definition, diagnosis, or treatment of fever without knowing the basics of fever. If made, it would be fundamentally against modern science.

The seriousness and danger of the definition of fever is recognized when the diagnosis and treatment of fever is not based on the current definition of fever.

Today, Fever is not tested according to the definition of fever. Today, hyperthermia is called fever.

A thermometer is a temperature-measuring device, not a fever-measuring device.

Conservative fever definition, diagnoses and treatment has no relation with what is happened in fever. The basic elements necessary for a scientific definition, diagnoses and treatment are not provided in conservative fever definition, diagnoses and treatment. It should be revised according to what is happening in fever.

A new fever definition, diagnosis, and treatment have been created according to modern science without any room for doubts and complaints.

Biography:

A practicing physician in the field of healthcare in the state of Kerala in India for the last 35 years and very much interested in basic research. My interest is spread across the fever, inflammation and back pain. I am a writer. I already printed and published Ten books on these subjects. I wrote hundreds of articles in various magazines.

After scientific studies, we have developed 8000 affirmative cross checking questions. It can explain all queries related to fever.



Humanized care in serious and critical patients

PhD Ramona Caridad Díaz López

University of Medical Sciences of the Matanzas city, Cuba.

The humanized care began to reborn during the years 70, and it is in that moment when the university professor "Margaret Jean Harman Watson", begins to elaborate his theory of the human care. At the present time it resurges from a humanistic perspective and transforms into a challenge for the professionals of health, because it becomes necessary the rescue of the human, spiritual aspect and transpersonal, in the clinical practice. The cares humanized in serious patients or critics begin in the reception in services of Emergencies and they continue in the Units of Intensive Cares. Objective: to determine the knowledge on the care humanized in the serious and critical patient. Method: Was carried out an analytic study, in UTI, of the University Clinical Surgical Hospital "Faustino Pérez", Matanzas. Cuba. The analysis unit was composed by 50 nurses. To the group was applied an Instrument of Mensuration of Knowledge, designed and validated to the effect that allowed to discern the application of cares humanized in critical patients. Results: It was verified difficulties in the application of the humanized care in patients in critical states, and attention from a holistic perspective, besides being verified deficiencies in the interpretation correction and registration of the hemogasometric values, the formation of endogenous water and the insensitive losses. Other elements were the lack of the professionals' of the ICU empathy, and scarce performance in the critical patient's. The study allowed the visualization of the humanistic boarding and integrative that the serious and critical patients require.



How do we choose the best donor for T-cell-replete, HLA-haploidentical stem cell Transplantation

Belal abloue

Clinical Nurse Coordinator Hematology and Bone Marrow Transplantation King Fahad Specialist Hospital – Dammam, Saudi Arabia

In haploidentical stem cell transplantations (haplo-SCT), nearly the majority of the patients have one or more than one donor. A key issue in the haplo-SCT setting is how we can search or choose the best donor. Donor selection can significantly impact the incidences of acute and chronic graft-versus-host disease, transplant-related mortality, disease relapse, complication event, and graft rejection in addition to overall survival. Currently, for patients that require transplantation, but have no matched related or unrelated donors with matching human leukocyte antigen (HLA), the HLA-haploidentical SCT (haplo-SCT) approach is an attractive option, however, Many haploidentical SCT protocols have been successfully established, with promising clinical outcomes, due to improved understanding of the mechanisms underlying the HLA barriers and how to overcome them, , several approaches are available for T-cell replete (TCR) transplantation, including anti-thymocyte globulin (ATG)-based protocols or post-transplantation cyclophosphamide (PT/Cy)

In this topic, we will focus on the factors associated with transplant outcomes and we will summarize the effects of the primary factors, including locus of HLA-mismatch . Donor-Specific Antibodies (DSA): the studies found that the DSA was associated with an increased risk of graft failure after transplantation. Donor Age: younger donors are preferred in unmanipulated haplo-SCT, with ATG or PT/Cy. Gender: in unmanipulated haplo-SCT with ATG or with PT/Cy transplants from male donors were associated with significantly less NRM and better survival. Blood Group: ABO compatibility should be considered when selecting the best donor in haplo-SCT ,should be ABO compatible, a minor ABO mismatch, and a major ABO mismatch. CMV status: donor and recipient CMV serostatus should be considered when choosing the best donor in unmanipulated haplo-SCT, particularly when patients receive haplo-SCT with PT/Cy. Family relationship: Family relationships should be considered in unmanipulated haplo-SCT . NIMA and NIPA : NIMA mismatching should be incorporated into the algorithm for selecting donors in unmanipulated haplo-SCT with ATG. The order of donor eligibility is first NIMA mismatches and second NIPA mismatches.

The Clinical Nurse Coordinator of Bone Marrow Transplant (BMT) along with the primary physician are responsible for the evaluation and preparation of patients for Hematopoietic Stem Cell (HSC) transplantation, and cellular therapies and they must Do their best to choose the best donor for haploidentical transplantation depending on updated criteria to achieve the best transplant outcome.



Prevalence of Needle Stick Injury and it's Risk Factors among Nurses Working at B.P. Koirala Institute of Health Sciences

Ram Sharan Mehta

BP Koirala Institute of Health Sciences, Nepal

Health professionals who are exposed to needles in their clinical activities are at high risk of acquiring a needle stick injury which may lead to a serious or fatal infection with blood borne pathogens. The objectives of the study were to assess the prevalence and it's risk factors of needle stick injury among nurses and to find out the association between socio-demographic variables with risk factors of needle stick injury among nurses. A descriptive cross-sectional research design was used to conduct study among 102 nurses. Population proportionate simple random sampling technique was used for the selection of the sample. Self-administered questionnaire was used to assess the prevalence of needle stick injury and it's risk factors among nurses. Descriptive and inferential statistics were used for the data analysis. The mean age of the respondents was 27 years. Forty nine percentages of the respondents had prevalence of needle stick injury within last one year and 79.4% had experienced needle stick injury during entire nursing career. There was a significant association between age and working area with needle stick injury at 0.05 level of significance. The half of the respondents had prevalence of needle stick injury within last one year. The most common contributing factors of the prevalence of needle stick injury were practice of recapping needle after use and unsafe contact with body fluids. The age of nurses and their working wards/units were significantly associated with occurrence of needle stick injuries.

Biography:

I have completed his PhD from Tribhuvan University I have served as chief, college of nursing from 2014 to 2016 for two years and Programme Coordinator of M.Sc. Nursing (PG Nursing Programme) for four years (2013-2016). At present I am the Professor in Medical-Surgical Nursing Department. My specialization subject is medical surgical nursing Trainer of various workshops and training within and outside the institute. Involved as Member of various committees like, Entrance Committee, Coordinator anti-raging rapid response team, Quality control committee of BPKIHS, and actively involved in various research activities and research guide of M.Sc. Nursing & B.Sc. Nursing Students. At Present I am involved in teaching B.Sc. Nursing and M. Sc Nursing students at B.P. Koirala Institute of Health Sciences.



Improving nurse-patient Relationships through the teaching-learning Process: Improving Hospital Productivity Approach

Mahdi Yousefi

School of Health, Mashhad University of Medical Sciences

Non-clinical patient expectations based on the World Health Organization's report, which has 8 dimensions. One of the most important dimensions is introducing healthcare staff to patients. Due to some cultural challenges and issues in developing countries, the self-introduction of nurses and doctors to patients is rare or implemented in a non-standard way. The present study was conducted using an action research method in the Imam Reza Hospital complex in Mashhad, with over 1000 beds and more than 2000 nursing staff. This research was conducted in four steps: problem identification, stakeholder analysis, and primary advocacy-seeking (step one), study, design, and planning (step two), participation in implementation and implementation requirements (step three), and implementation, evaluation, feedback, and sustainability (step four). The main interventions included using benchmarking systems, using methods to promote standard behaviors, and creating a positive competitive environment. The study findings showed that at the start of the intervention, about 45% of nurses introduced themselves to patients in various wards in a standard manner. After implementing the intervention in the first and second years, this percentage reached 60% and 80%, respectively. A significant part of hospital activities' effectiveness alongside clinical or technical quality indicators is related to hospitals' responsiveness to non-clinical service recipients' expectations. The major quality indicators for non-clinical services are affected by the initial actions and behaviors of healthcare staff during patient communication. Proper and standard communication with patients can enhance other responsiveness-related indicators.

Biography:

Mehdi Yousefi has been a faculty member of Mashhad University of Medical Sciences (MUMS) for 12 years. He is an associate professor in health economics. He has experience as a chief executive manager in a big hospital with 1000 beds in Iran and now he is the head of the research and development center for policymaking at MUMS. In addition, He is the head of the productivity committee of MUMS. He has published more than 50 papers in reputed journals.



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A qualitative study on the physical and mental experience of nucleic acid collectors in a hospital during COVID-19 epidemic

Yao Wanxia

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Objective To explore the physical and mental experience of nucleic acid collectors in a hospital during the epidemic of COVID-19, and to provide reference and theoretical basis for epidemic prevention and control and better protection of the physical and mental health of nucleic acid collectors. Methods Using the phenomenological research method, 15 nucleic acid collectors working in Shenzhen Samii Medical Center from June 15 to June 30, 2021 were interviewed in a semi-structured in-depth way and observed at the nucleic acid testing site. The Colaizzi seven-step analysis was made to read, code and classify the data, and then specifically analyze and refine the main parts to get the final theme. Results The physical and mental feelings of nucleic acid collectors in a hospital in Shenzhen were mainly extracted from four themes: historical mission, which cannot be shirked; maximum protection, safety first; fear and tension, body discomfort; making full use of every minute to keep physical strength. Conclusions Nucleic acid collectors in a hospital of Shenzhen are highly aware of and have a strong sense of honor, but they often suffer from shoulder pain, dizziness, headache and other uncomfot as well as various psychological and physical reactions due to the heavy load of nucleic acid collection work. Thus, they need not only material support and care, but also more psychological guidance and help

Key words: Diagnostic techniques, respiratory system; Contact tracing; Nasopharyngeal swab; Nucleic acid collector; Hospital; Coronavirus disease 2019 (COVID-19); Physical and mental experience; Qualitative research.

Biography:

YaoWanxia has completed her PhD at the age of 47 years from Xi'an Jiaotong University of Medicine. She works as nurse in First affiliated hospital of Xi'an Jiaotong University as the director of Medical information management office. She works as professor in Xi'an Peihua University and Shenzhen Sami International Medical Center also. She has published more than 100 papers in reputed journals and has been serving as an editorial board member of reputed journal. She has reviewed more than 1000 manuscripts every year in all the world.



Expanding coverage of basic health screening services for the prevention and control of non-communicable diseases in South Africa.

Richard Rasesemola

University of Johannesburg, Faculty of Health Sciences, Johannesburg, South Africa

Political, economic, and land restriction policies by the apartheid government were used in South Africa to structure society according to race. The majority of black people were placed far from many resources with poor access to transportation and limited access to appropriate healthcare. To this date, there is still differences in access to healthcare and health outcomes between white and black people, with the latter being the worst off. To reverse this, efforts for the prevention and control of NCDs require access, without discrimination, to basic health promotion services in various settings. A qualitative document analysis was done among purposefully selected policies for prevention and control of NCDs in South Africa to explore the inclusion of social determinants of health and health inequalities in their implementation plans and activities. Despite literature indicating that inequalities in health requires policies that address the origins of forces which introduce, facilitate, and reinforce the emergence and sedimentation of various forms of inequalities, the results indicated that the South African policies for prevention and control of NCDs do not sufficiently incorporate social determinants of health and health inequalities in their implementation plans and activities. Therefore, a strategy that would assist the government to ensure the availability of and access to health-promoting services for the prevention and control of NCDs in the country was developed. The strategy also has a potential to ensure timely referral and treatment systems that do not lead to financial hardships for those who use such services.

Biography:

Richard Rasesemola is a Critical Care Specialist (Adult) and holds a PhD. He is currently employed as a lecturer in the Department of Nursing at the University of Johannesburg. He is also an undergraduate programme coordinator for the Bachelor of Nursing Degree. He has published 4 research articles with 3 more articles under review.

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