

11th Global Summit on

NURSING EDUCATION & HEALTH CARE



JULY 01-02, 2024 | TORONTO, CANADA

Hosting Organization:

Inovine Meetings LLC, 2C Pecan Hill Drive Clinton Mississippi, 39056 USA
Phone: +1-408-648-2233 | E-mail: contact@inovineconferences.com

Day 1

Scientific Program

July 01, 2024 Conferece Hall : Hall-A

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

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

Keynote Forum



09:00-09:40

Title: Creating a Culture of Caring to Promote Engagement and Meaningful Learning in Distance Nursing Education

Julie Harrison-Swartz, University of North Carolina Pembroke, USA



09:40-10:20

Title: Perceived Lack of Care by Academic Leaders: When Faculty and Staff Feel Devalued: Insights from Jean Watson's Theory on Caring

Jennifer Jones-Locklear, Pembroke McKenzie-Elliott School of Nursing, USA

Tracks : Nursing Education | Clinical Nursing | Mental Health Nursing | Types of Nursing Education | Surgical Nursing | Health Care

Session Chair: **Jennifer Jones-Locklear**, Pembroke McKenzie-Elliott School of Nursing, USA



10:20-10:45

Title: Perceived Lack of Care by Academic Leaders: When Faculty and Staff Feel Devalued: Insights from Jean Watson's Theory on Caring

Mary Kozub, University of North Carolina at Pembroke McKenzie-Elliott School of Nursing, USA

Group Photo & Networking & Refreshments10:45-11:05 @ Foyer



11:05-11:30

Title : Stronger Together: RN and RPN Collaborative Practice

Alicia E Jones, University Health Network, Canada



11:30-11:55

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

Kellyann Garthe, Institution: Kellogg Community College, Battle Creek, USA



11:55-12:20

Title : Change Your Genes – Change Your Life: Epigenetics of Longevity

Kenneth R. Pelletier, University of California School of Medicine, San Francisco, USA



12:20-12:45

The Impact Of Ai On The Costs And Resource Distribution Of The Healthcare Industry

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

Lunch Break 12:45-13:45 @Restaurant

Poster Presentations 13:45-16:20



13:45-14:05

Title: Critical thinking in clinical teaching and learning to eliminate cognitive bias and enhance the development of clinical judgment skills

Agnes Makhene, University of Johannesburg. Johannesburg, South Africa



14:05-14:25

Title: Unveiling the Cutting-Edge Developments in Nursing Education and Primary Health Care

Thomas Odumo, RockSteady Holdings Canada Inc

Panel Discussion & Certificate Falcitation

Day -1 Ends

Day 2

July 02, 2024

Virtual mode zoom meeting | (GMT-4) | Time in Toronto, ON, Canada



09:00-09:20

Title: Burnout and Turnover Intention as Correlates of Quality of Nursing Wo

Abigail Garcie Reyes, Holy Angel University, Philippines



09:20-10:00

Title Empathy Levels Across Nursing Students: A Cross-Sectional Study

Mazzoleni Beatrice and Diego Lopane, Department of Biomedical Sciences, Humanitas University, Pieve Emanuele, Italy



10:00-10:20

Title: A Multidisciplinary Ventilator Weaning and Education Impact on ICU Ventilator Days and LOS

Elvira Solis, Mount Sinai Hospital, USA



10:20-10:40

Students's Perception of Peer Assisted Learning and Seminar Methods in Nursing Education: A Comparative Study -2022

Hind Beheiry, Faculty of Medicine, International University of Africa, Suan



10:40-11:00

Title : Perception of exposure to negative manifestations in interpersonal relationships at nurses' clinical workplaces in Slovakia

Hana Padysakova & Jana Rottková & Zuzana Slezáková, Slovak Medical University in Bratislava Slovak Republic



11:00-11:20

Title : Perception of exposure to negative manifestations in interpersonal relationships at nurses' clinical workplaces in Slovakia

Zuzana Slezáková & Jana Rottkova, Slovak Medical University in Bratislava Slovak Republic



11:20-11:40

Title : Providing safe nursing care in Slovakia

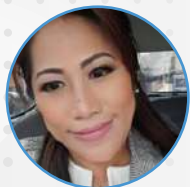
Jana Rottková, Slovak Medical University in Bratislava Slovak Republic



11:40-12:00

Title: Successful experience in nursing education using Team-Based Learning in undergraduate and postgraduate courses

Lara Mabelle Milfont Boeckmann Department of Nursing, Faculty of Health Sciences. University of Brasília – UnB. Brasília-DF. CEP: 70910-900. Brazil



12:00-12:20

Title : CANCER BIOMARKERS

Karen A Cabiloque, Klinika Karena Aesthetics and Regenerative Clinic, University of San Agustin, Philippines

Panel Discussion

Thanks giving & Closing Ceremony





11th Global Summit on

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HYBRID EVENT

KEYNOTE PRESENTATIONS
DAY 1



Julie Harrison-Swartz

University of North Carolina Pembroke, Pembroke, USA

Creating a Culture of Caring to Promote Engagement and Meaningful Learning in Distance Nursing Education

When the COVID-19 pandemic began in Spring 2020, many nursing programs had to quickly transition from face-to-face courses to courses that were completely online. The instructor-student relationship changed greatly. Both students and educators were forced to adapt to a new normal in which social distancing and physical separation were part of daily life. Cognitive and behavior engagement became even more important respective to the student's willingness to remain engaged in the online environment and maintain emotional engagement (EE.) Students are said to be emotionally engaged in learning when they can interact with others while completing tasks and when EE exists, a meaningful relationship between student and instructor affects the entire academic environment.

This nurse educator sought ways to promote emotional engagement through the online learning environment that included social presence, cognitive presence, and teaching presence. At the center of this overlapping model is the learning environment however at the core of this strategy is caring. This nurse educator found that for students to feel cared for in the online learning environment, social, cognitive, and teaching presence must be felt. Without these, the student may not be willing to remain engaged in meaningful learning. This presentation will discuss the importance of ensuring a caring presence in the online learning environment and the benefits that were found during the COVID-19 pandemic.

Biography:

Julie Harrison-Swartz, DNP, MSN, RN, FNP-BC is the Post-Licensure Program Director and Assistant Professor at the University of North Carolina-Pembroke. She is also a Board-Certified Family Nurse Practitioner. Dr. Harrison-Swartz has been a Registered Nurse since 1991 and earned her Bachelor of Science in Nursing (BSN) from University of South Alabama, Master of Science in Nursing (MSN) with a specialty in Nursing Education and Doctor of Nursing Practice (DNP)/FNP from George Mason University in Fairfax, Virginia. She is currently pursuing a PhD in Nursing Education from Liberty University in Lynchburg, Virginia. Dr. Harrison-Swartz's research interest includes diversity in nursing education, designing, and delivering effective online nursing education courses to promote engagement and meaningful learning, mental health issues of military service members and Veterans, and rural healthcare.



Jennifer Jones-Locklear

University of North Carolina at Pembroke McKenzie-Elliott School of Nursing, USA

Perceived Lack of Care by Academic Leaders: When Faculty and Staff Feel Devalued: Insights from Jean Watson's Theory on Caring

The dynamics of the relationships that exist among academic leadership, staff, and faculty are essential to creating a positive and encouraging work environment. Nonetheless, ongoing worries are raised about the alleged lack of compassion and understanding demonstrated by academic administrators toward faculty and staff. In academic settings, compassionate leadership plays a critical role in fostering a sense of worth, encouragement, and authority among faculty and staff. However, difficulties continue, with faculty and staff regularly reporting feelings of loneliness and disappointment because they feel that the leadership is ignoring and/or retaliating against them. This alleged lack of compassion and understanding shows up in a number of ways, such as poor guidance and support for career advancement and decision-making, as well as a disregard for issues related to wellbeing and work-life harmony.

This presentation explores the ways in which academic leadership's lack of emotional support, nurturing, and acknowledgment contributes to faculty and staff's feelings of demotivation and underappreciation. Anecdotal insights gathered from informal discussions spanning numerous years of interactions with faculty and staff members help in exploring root causes to understand the disconnect between faculty, staff, and leadership. Furthermore, it aims to shed light on the adverse effects of deficient caring and unempathetic leadership on morale, job satisfaction, retention, and overall institutional climate. Understanding these implications is pivotal for instigating positive organizational transformations and fostering a culture of care within academic settings.

Academic institutions should endeavor to establish inclusive, loving, and supportive cultures that promote personal and professional development by recognizing and resolving the concerns raised by faculty and staff on the lack of empathy and compassion in leadership. By applying the insights from caring theory to their leadership practices, educational institutions can enhance their environment and foster a culture of empowerment, trust, and well-being.

Biography:

Jennifer Jones-Locklear, PhD, RN is the Director of Pre-Licensure Programs and Associate Professor for the McKenzie-Elliott School of Nursing at the University of North Carolina Pembroke. She has 27 years nursing experience. She brings with her varied nursing experiences and leadership skills. She is committed to health care equity and the needs of vulnerable populations and fostering collective and individual empowerment. She has presented internationally regarding topics related to using art-based andragogy to enhance teaching and learning. Additionally, she has presented on the topic of empowerment to varied populations and Community Resilience and Care for Individuals in Rural Health Settings.



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Mary Kozub, PhD, RN, is an assistant professor of nursing and the Interim Director of the newly emerging DNP program in population health in the McKenzie-Elliot School of Nursing at the University of North Carolina at Pembroke. Her experience has strong roots in psychiatric/mental health nursing, community-based nursing, and holistic nursing. She has extensive case management experience, and has worked with rural populations, community based forensic care and with families. She has a PhD in sociocultural anthropology, with an emphasis on nursing culture and medical anthropology which guides her approach to care.



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HYBRID EVENT

SPEAKER PRESENTATIONS
DAY 1



Perceived Lack of Care by Academic Leaders: When Faculty and Staff Feel Devalued: Insights from Jean Watson's Theory on Caring

Jennifer Jones-Locklear, PhD, MSN/ED., RN¹ and Mary Kozub, PhD, RN²
University of North Carolina at Pembroke McKenzie-Elliott School of Nursing, NC 28372, USA

The dynamics of the relationships that exist among academic leadership, staff, and faculty are essential to creating a positive and encouraging work environment. Nonetheless, ongoing worries are raised about the alleged lack of compassion and understanding demonstrated by academic administrators toward faculty and staff. In academic settings, compassionate leadership plays a critical role in fostering a sense of worth, encouragement, and authority among faculty and staff. However, difficulties continue, with faculty and staff regularly reporting feelings of loneliness and disappointment because they feel that the leadership is ignoring and/or retaliating against them. This alleged lack of compassion and understanding shows up in a number of ways, such as poor guidance and support for career advancement and decision-making, as well as a disregard for issues related to wellbeing and work-life harmony.

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Stronger Together: RN and RPN Collaborative Practice

Alicia E Jones

University Health Network, Canada

In health care is essential as it strengthens the relationship among teams and enhances an integrative work platform. Registered Nurses (RNs) and Registered Practical Nurses (RPNs) work together across different care settings in a supportive role that enhances patient outcomes, job satisfaction, and retention. Nursing stands as the largest healthcare profession in the nation, boasting nearly 4.2 million nurse's nationwide (Statistics Canada, 2022). In Canada, nurses constitute the largest segment of regulated health professionals, comprising approximately half of the total health workforce. However, globally, there has been a shortage of nurses attributed to burnout, physical injuries, and job dissatisfaction (Statistics Canada, 2022). To address the nursing shortage, several healthcare services have adopted the nursing skilled-mix model, facilitating collaboration between RNs and RPNs. At NHU (pseudonym), over the last six years, this practice model has been utilized to adequately staff nurses on Specialized Acute Care (SAC) units. Nonetheless, no formal study has been conducted to explore the experience of RNs and RPNs regarding collaborative practice. Qualitative Action Research (AR) was conducted to comprehend challenges and pinpoint effective strategies for strengthening collaborative practice among RNs and RPNs. Phase 1 findings from participating RNs and RPNs revealed the necessity for broader discussions involving nursing leadership staff in Phase 2. There were clear indications of knowledge gaps regarding scope of practice, disparities in assignments and professional development opportunities for RPNs resulted in ethical dilemmas, power imbalance between RNs, and RPNs regarding autonomy and the need for organizational leadership to take accountability to devise effective collaborative strategies were some of the major barriers to collaborative practice. In summary, improving collaborative practice among RNs and RPNs demands a comprehensive strategy involving organizational leaders, nurse managers, and frontline staff. This approach encompasses the implementation of evidence-based frameworks, the provision of support to RNs, RPNs and nurse managers.

Keywords: collaborative practice, scope of practice, knowledge gap, nursing skilled-mix, evidence-based framework

Biography:

Alicia Jones is a Registered Nurse (RN) with a PhD in Education from Northeastern University located in Boston, United States. Her Dissertation in practice focused on RNs and RPNs Collaborative Practice. In 2015, she completed a Masters in Nursing at York University in Toronto, Canada and occupied various leadership roles, where she has influenced nursing practice. One typical role is as a Faculty Advisor at the Toronto Metropolitan University, where she guide fourth year student nurses as they preparing for independent practice. As a researcher, Alicia continues to work on nursing research which aim to enhance the nursing profession.



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

Kellyann Garthe

Kellogg Community College, Battle Creek, Michigan, USA

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

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

Methods: This correlation, cross-sectional study conceptualized the sensitized attitudes and intentions that emerge from rejection using an adopted version of Levy, Ayduk, and Downey's (2001) RS Model. Participant (n = 100) inclusion criteria was a) age 18 and older, b) having a gender identity that is not traditionally or consistently associated with the male or female gender assigned to the individual at birth.

Results: The multivariate linear regression, enter and hierarchical modeling process was used to assess the confounding effects of chosen social determinants of health (SDOH) on the relationship of RS to ISMH. While SDOH clusters, chronic anxiety, and gender identity were found to be statistically significant, the model failed to demonstrate that RS predicts ISMH when controlling for demographic and health related variables.

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

Keywords: Rejection sensitivity, Gender identity, Gender minority

Biography:

Kellyann Garthe, PhD, RN, CNE has been a nurse educator across the United States for over twenty years. Her nursing practice background is in acute care, oncology, and Hospice. She has taught at the Associate's, Bachelor's, and Graduate level of nursing education. Currently, Dr. Garthe teaches at Kellogg Community College in Battle Creek, Michigan where she is inspired by her amazing students every day.



Change Your Genes – Change Your Life: Epigenetics of Longevity

Kenneth R. Pelletier

Clinical Professor of Medicine
Department of Medicine
Department of Family & Community Medicine
Department of Psychiatry
University of California School of Medicine, San Francisco
United States of America

Biology is no longer destiny. Our DNA doesn't determine our health and disease prospects, as geneticists once believed. According to the new science of epigenetics, the vast majority of our genes are fluid and dynamic—and their expression is shaped by what we think and what we do. Our genetic profile may signal an inherited vulnerability to a disease, but our choices and behaviors determine whether these genes will be switched on or off. Each of us can influence our genes to create optimal health and longevity. Dr. Pelletier will discuss the latest epigenetic research, including progress on the \$101 Million X Prize, and share timely media coverage including details of the "Blue Zone" communities around the world and its potential impact on science. He will also cite the cutting-edge technologies that will forever change the landscape of optimal aging and longevity. We encourage you to attend and to engage with Dr. Pelletier in learning how to incorporate these new findings into your own lives.

Learning Objectives:

- Differentiate generics vs epigenetics.
- Apply practical, evidence-based epigenetic assays in practice.
- Determine "personalized nutrition" based on latest data.

Biography:

Kenneth R. Pelletier, PhD, MD is a Clinical Professor of Medicine, Department of Medicine; Department of Family and Community Medicine; and Department of Psychiatry at the University of California School of Medicine, San Francisco (UCSF). At the UCSF School of Medicine, he is Director of the Corporate Health Improvement Program (CHIP) which is a research program between CHIP and 15 of the Fortune 500 corporations including Apple, Cisco, American Airlines, IBM, Dow, Prudential, Cummins, Ford, NASA, and Pepsico. He also serves as a Vice President with American Specialty Health (ASH).



The impact of ai on the costs and resource distribution of the healthcare industry

Maame Fosua Afrifa-Minka

Sanskriti University, School of Management, Mathura 281401, Uttar Pradesh, India

Artificial intelligence (AI) has emerged as a transformative technology on the subject of healthcare. The contemporary healthcare system faces substantial demanding situations, which include soaring fees and constrained sources. This review aims to assess the capacity and impact of AI on healthcare spending and resource distribution. Moreover, it examines how AI can effectively tackle these troubles by lowering costs, enhancing performance, and elevating the quality of care. Additionally, the review explores the limitations to integrating AI into healthcare, including privacy concerns biases, and the necessity for professional management of AI structures. Ultimately, the paper concludes with a complete evaluation of the way AI can minimize healthcare expenses and allocate resources optimally, resulting in stepped-forward effectiveness and patient effects. Importantly, this literature assessment gives precious insights to policymakers, healthcare vendors, and stakeholders, guiding them on the superior usage of the technology to enhance healthcare delivery by way of harnessing the ability and benefits related to AI implementation in the area of healthcare costs and resource distribution.

Keywords: AI, healthcare costs, resource allocation, optimization

Biography:

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



Critical thinking in clinical teaching and learning to eliminate cognitive bias and enhance the development of clinical judgment skills

Agnes Makhene

University of Johannesburg. Johannesburg. South Africa

Integrating critical thinking in clinical teaching and learning to enhance development of clinical judgment skills in nursing education for global competence is important. The development of clinical judgement is dependent on critical thinking and clinical decision-making skills. Critical thinking involves using collection of information, analysis, inference, interpretation, evaluation and synthesising, using clinical reasoning which entails application of critical thinking, nursing knowledge and intuition. Clinical judgement is observed outcomes of critical thinking and decision making. The purpose of this paper is to explore and describe how critical thinking can be integrated into clinical teaching and learning to eliminate cognitive bias and enhance clinical judgment skills of nursing students. An exploratory, descriptive, qualitative design was used. Non-probability purposive sampling method was used to draw the sample of ten preceptors (n=10). This sample was appropriate for this study as they gave rich and in-depth information on how critical thinking can be integrated in clinical teaching to develop students' clinical judgment. Sample size was determined by data saturation. Thematic data analysis method was used. Lincoln and Guba's strategies were employed to ensure trustworthiness of the study and ethical considerations were observed. The findings were that nurse educators must educate for cultural competence and compassion, identify biases in decision-making, including teaching about de-biasing. Teaching strategies such as flipped classroom, think-pair-share, progressive case studies, Socratic inquiry, argumentation should be used to facilitating critical thinking including application of critical thinking dispositions of intellectual humility and perseverance, open-mindedness, self-awareness, delaying judgement and self-reflection to enhance clinical judgement skills.

Key words: Critical thinking, clinical judgement, bias

Biography:

Prof Agnes Makhene is an associate professor in the Department of Nursing at the University of Johannesburg. She holds a PhD in nursing education. Her research interest is in critical thinking and facilitation thereof. She has published articles in peer reviewed journals. Furthermore she has supervised to completion 18 masters and 3 PhD students.



Unveiling the Cutting-Edge Developments in Nursing Education and Primary Health Care

Thomas Odumo

Gerson Lehrman Group, Canada

This presentation explores the dynamic landscape of nursing education and primary health care, delving into key advancements that shape the future of healthcare practices. Emphasizing technological integration, personalized learning, and interprofessional collaboration, the talk aims to provide valuable insights into preparing nursing professionals for the challenges of modern healthcare.

By focusing on telehealth, cultural competence, and mental health education, the presentation addresses the evolving needs of patients and communities. The potential impact of these developments on improving patient outcomes and fostering a resilient healthcare workforce will be discussed, offering a comprehensive view of the transformative trends in nursing education and primary health care.

Biography:

Thomas holds a BComm. degree from the University of Nairobi, Kenya 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 health 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 the Managing Director of RockSteady Holdings Canada Inc. that represents international medical companies among other interests.



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SPEAKER PRESENTATIONS
DAY 2



Burnout and Turnover Intention as Correlates of Quality of Nursing Work Life

Abigail Garcie Reyes
Holy Angel University, Philippines

This study is focused on assessing the level of burnout, turnover intention, and quality of nursing work life of registered nurses in Philippines. Moreover, it determined the relationship between the quality of nursing work life and burnout and turnover intention.

A descriptive-correlational research design was utilized, and respondents were recruited (N=128) through convenience sampling. Frequency distribution was used to describe the nurses' level of burnout, turnover intention, and the level of QNWL. Pearson product-moment correlation coefficient (Pearson r) was used to determine the relationship between QNWL and burnout level and between QNWL and turnover intention.

For the results of the study, the staff nurses' overall burnout level is moderate (a low level of emotional exhaustion and depersonalization and a high level of personal achievement). Moreover, nurses are likely to leave (unlikely to leave the nursing profession; likely to leave their institution and has the intention to leave in the next 6 months), while the overall QNWL of the respondents is at a moderate level. Additionally, there is a significant relationship between staff nurses' QNWL and their level of burnout; staff nurses who have more responsibilities at home and work are more likely to be burnout. Lastly, there is a negative correlation between the QNWL of the nurses and their intention to leave their profession, the institution; and in the next 6 months. Staff nurses who have lower levels of QNWL are likely to plan to leave their profession and hospital in the future.

As a conclusion, QNWL has been found to be related to nurses' level of burnout and turnover intention, thus it can be an essential focus in improving the recruitment and retention programs of hospital nurses.

Biography:

Abigail Reyes is working as an educator for the past 6 years and she is the Senior Clinical Resource Nurse of one of the rehabilitation hospital in the UAE. She is very committed in learning, she acquired her Master of Science in Nursing last September 2023 and currently taking up Doctorate degree (Doctor of Philosophy in Nursing education Leadership and Management) in Holy Angel University, Philippines.



Empathy Levels Across Nursing Students: A Cross-Sectional Study

**Diego Lopane¹, Alessandra Dacomi¹, Daniela Cattani¹, Chiara Coldani¹,
Giuseppina Tomaiuolo¹, Stefano Mancin¹ & Beatrice Mazzoleni¹**

¹Department of Biomedical Sciences, Humanitas University, Pieve Emanuele, Milan, Italy

Background and aim This study is situated within the current critical context concerning the rise in dropout rates from nursing courses at Italian universities. Empathy is fundamental for effective communication between healthcare professionals and patients (4), and is considered an essential care outcome in the nursing profession (5). Factors influencing empathy development can lead to the formulation of measures to be implemented during training or in the workplace (6). Hence, in the presence of low empathy levels among students, it might be necessary to integrate empathy, emotional intelligence, and interprofessional competencies more deeply in university healthcare professionals' educational processes (3) to strengthen this crucial dimension. Evaluating different levels of empathy could indeed be vital in reducing burnout and compassion fatigue (2). This study aims to investigate empathy levels among nursing students in their first, second, and third years at the Humanitas University (Italy) Nursing School.

Methods Designed as a cross-sectional study, the Italian-validated Balanced Emotional Empathy Scale (BEES) will be used for an assessment to measure empathy levels. The research envisages a description of the sample based on the demographics of the participants, considering age, academic year, gender, previous educational background, exam status, grade point average, percentage of class attendance, OSCE scores (1), socio-economic background, geographical and cultural origin and work/volunteer experiences.

Results A detailed multivariate analysis is planned to examine the cumulative effect of these factors on empathy. Statistical methods will be employed for the comparative analysis of BEES scores among various student groups.

Considerations and future perspectives This cross-sectional study provides a snapshot of empathy differences across various years of nursing study; another aim will be to lay the groundwork for a subsequent longitudinal study with the same cohort to explore the relationship between empathy levels and dropout in nursing education.

Biography:

Diego Lopane has completed his bachelor's degree in nursing at the age of 22 years from Università degli Studi di Milano (Italy) and later, at the age of 29 years, another bachelor's degree in Osteopathy from Istituto Superiore di Osteopatia and, at the age of 32 years, a Master of Science degree in Osteopathy from Buckinghamshire New University. Currently he is studying at the second year of Master of Science in Nursing at Humanitas University (Italy).



A Multidisciplinary Ventilator Weaning and Education Impact on ICU Ventilator Days and LOS

Elvira Solis

Mount Sinai Hospital, New York, USA

Mechanical ventilation is an essential treatment in the Intensive Care Unit (ICU) setting; however, extended use is associated with increased ICU length of stay (LOS) and can lead to complications such as hospital-acquired conditions and delayed tracheostomy placement (Papazian, 2020), (Gunther, 2021) & (Haribhai & Mahboobi, 2022). Spontaneous Awake Trial (SAT) to wean patients off sedatives, and Spontaneous Breathing Trial (SBT) to trial patients breathing independently; protocols can reduce the length of mechanical ventilation by weaning the patient off the ventilator (Matays & Ryan, 2024). On our unit, standard practice ventilator weaning was unstructured and dependent on a single provider's decision versus a multidisciplinary approach, which likely contributed to extended ventilator use. This quality improvement study aimed to demonstrate the effectiveness of a newly structured SAT/SBT Protocol on ICU ventilator duration, ICU length of stay (LOS), and improved SAT/SBT documentation.

Keywords: SAT, SBT, Mechanical Ventilation Weaning Trial, Effects on Prolonged Mechanical Ventilation

Biography:

Elvira Solis has completed her Master's Degree in Nursing Education 2017 from Walden University, USA. She practiced her profession as Clinical Nurse Provider in Mount Sinai Health System, Queens New York and Part Time Nursing Professor in The Brooklyn Hospital, New York. She received multiple awards and distinction throughout her career as Nurse Preceptor, Nurse Education, Nursing Leader and Nurse of Distinction Award. She presented multiple abstracts in California and New York City.



Students's Perception of Peer Assisted Learning and Seminar Methods in Nursing Education: A Comparative Study -2022

Hind Beheiry^{1*}, Fatima Alzahra Galgam¹, Nahla Elradhi Mohammed², Nadia Mamoun Amin³, Jebreldar Abuanja Nimer⁴

¹Associate Professor of Physiology, Faculty of Medicine, International University of Africa, Suan.

¹Assistant Professor of Pediatric Nursing , Faculty of Nusring, International University of Africa, Suan.

²Assistant Professor of Community Health Nursing , Faculty of Nusring, International University of Africa, Suan.

³Assistant Professor of Pediatric Nursing , Faculty of Nusring, International University of Africa, Suan.

⁴Associate Professor of Community Health Nursing , Faculty of Nusring, International University of Africa, Suan.

Background Innovative health professional educational methods have been practiced since 2016 at the Faculty of Nursing Sciences at the International University of Africa (IUA), Sudan. Curriculum reform, Problem-based and Team-based Learning, Concepts of Accreditation, and Self-Study in Nursing Education, in addition to Preceptorship, Professionalism, and Critical Care are applied. Peer Assisted Learning is of substantial interest.

Aim: This study aimed to compare the perception of nursing students in Peer Assisted Learning to Seminar methods in paediatric nursing.

Methods: A descriptive cross-sectional analytic design was adopted. Ninety students, in semester seven paediatric nursing course at Faculty of Nursing 2020, IUA, were enrolled. A semi-structured, self-administered questionnaire was used to collect the perception of the students. SPSS version 23 was used to analyse the data which was then expressed in frequencies and percentages, mean, weighted mean, and SD. qualitative data were analysed, and key themes were identified.

Results: the findings of this study showed that the perception of the students was greater in Peer Assisted Learning than Seminar in the key domains: 85% of students reported a positive perception in development of learning - teaching skills with mean score of 4.30, 52% in collaboration and interaction with mean score of 4.27. 58% in learning environment with mean score of 4.40. Students perceived Peer Assisted Learning as a more effective and favourable method for paediatric nursing in their comments in terms of improving their learning-teaching skills. self-confidence, self- reflection, communication and demonstration skills, and motivating, enjoyable learning environment.

Conclusions: Peer Assisted Learning had remarkable benefits as teaching / learning method comparing to Seminar among paediatric nursing students. It could be incorporated in the nursing curriculum.

Keywords: Peer Assisted Learning, Seminar, Paediatric Nursing, Students' Perception

Biography:

I am Dr. Hind Beheiry an Associate Professor of Human Physiology with extensive experience in teaching and leadership in medical education. I hold a Ph.D., M.Sc. in Human Physiology, and MBBS from the University of Khartoum and a master's in Health Profession Education MHPE from Gezira University. I have also been a Fellow of the Royal College of Physicians FRCP-London since 2023. I hold a certificate from the Harvard Medical School-Global Clinical Scholars Research Training Program (HMS-GCSRT) Clinical Trials Concentration 2024. I have PGD in research methods and medical ethics. I am a member of the Pan-African Hypertension Management Guidelines Development Committee 2024. I have a solid research background, and good academic and community services and initiatives in Hypertension, Breast Cancer Campaigns, and HIV/AIDS, in Sudan. I am currently the Director of the Educational Development and Research Centre at the International University of Africa, Sudan, and have served with successful administrative and leadership work as the Deputy Dean of the Faculty of Medicine and the Dean of the Faculty of Nursing Sciences at the International University of Africa (IUA), Sudan.



Perception of exposure to negative manifestations in interpersonal relationships at nurses' clinical workplaces in Slovakia

Hana Padyšáková, Zuzana Slezáková, *Jana Rottková

Faculty of Nursing and Professional Health Studies
Slovak Medical University in Bratislava
Slovak Republic

The lack of nurses in the workplace, their turnover and migration is a serious problem of the Slovak healthcare system and requires an examination of the possible causes. The perception of negative manifestations in the interpersonal relationships of nurses, some workplaces, may be the reason of the persistent inability to stabilize the personnel structure. We analyzed negative manifestations defined as aggressive behavior with the aim of intentionally harming, intimidating, threatening, or humiliating another nurse with a tendency to repeat, with the inability to defend oneself in the form of slander, humiliation, intimidation, up to abuse and physical attacks. We used a standardized NAQ-R questionnaire (The Negative Acts Questionnaire – Revised). We contacted nurses from partner organizations who take care of adult patients in outpatient and institutional health care to find out the prevalence of perceptions of negative manifestations in nurses' mutual relationships. We found the highest score of negative phenomena in individual categories of nurses: beginners working in three-shifts schedules, with 1st degree of higher education and in the operating room section. The analysis of the answers in the individual items of the scale according to the factor classification confirmed a statistically significant prevalence of negative phenomena in relation to the workload factor: working conditions, work stress and workload. The negative phenomena caused by the person followed. The selection of respondents was deliberate because the results found will contribute to the innovation of professional training and further education of nurses in courses organized by our university with an emphasis on supporting the mental health of nurses and communication culture. Another application is in the implementation of workshops for partner hospitals involved in the study. Nurses can provide high-quality and safe nursing care only if they have created appropriate conditions. A favorable working climate without negative phenomena is an important element of company culture.

Biography:

Jana Rottkova has completed her PhD. at the age of 30 years from Trnava's University. She is the vice-dean of Department for further education of health care professionals at Slovak medical university in Bratislava. She has published 5 papers in reputed journals, 7 books, textbooks and has been serving as an editorial board member of reputed.



Successful experience in nursing education using Team-Based Learning in undergraduate and postgraduate courses

Lara Mabelle Milfont Boeckmann

Department of Nursing, Faculty of Health Sciences. University of Brasília – UnB. Brasília-DF. CEP: 70910-900. Brazil

Introduction: Team-Based Learning (TBL) is a student-centered, tutor-directed teaching method. TBL is considered an active teaching methodology and has demonstrated innovative results compared to traditional methodologies. Although there is international research on the use of TBL, in Brazil, gaps are evident regarding its results. **Methodology:** This was an experience report of the teaching experience of using TBL in the areas of women's health and patient safety in undergraduate and postgraduate nursing courses at the University of Brasília, Brazil. **Results:** Between 2018 and 2023, TBL was used in eleven undergraduate and five postgraduate nursing classes, totaling 550 students. The TBL stages applied were: 1- Individual preparation of students at home with study material provided by the teacher; 2- In the classroom, students carried out an individual assessment; 3- After the particular evaluation, students in groups of 3 to 5 discussed the same questions; 4- After a break, the teacher gave a problem situation for the groups to debate and solve; 5- Students were then offered feedback on the solutions found; 5: At the end, peer evaluation was carried out. **Discussion:** In TBL students are held individually responsible for their preparation and contribution to team performance. Students receive immediate feedback on their performance and assignments are designed to promote learning. In the teacher's perception, there was greater student motivation adding the development of skills related to communication, leadership, and teamwork. It was found that learning managed by the student contributed to professional preparation with a focus on problem-solving individually and in groups. **Conclusion:** From the teaching experience using TBL, the contribution of active methodologies to a significant teaching-learning process stood out.

Keywords: Education, Nursing, Students, Communication, Leadership.

Biography:

Lara Mabelle Milfont Boeckmann has completed his PhD in 2016 from University of Brasilia, UnB, Brazil. He holds a Sandwich Doctorate from the University College London (UCL) em 2015. Programme: Visiting Research. Institute of Epidemiology and Health Care. London- England- UK. She is an Assistant Professor in the Department of Nursing. She teaches and researches in the area of women's health, patient safety and active teaching methodologies. She has published more than 36 papers in reputed journals.



CANCER BIOMARKERS

Karen A Cabiloque

Klinika Karena Aesthetics and Regenerative Clinic, University of San Agustin, Philippines

Cancer biomarkers are biological molecules produced by the body or tumor in a person with cancer. Biomarker testing helps characterize alterations in the tumor. Biomarkers can be DNA, RNA, protein or metabolic profiles that are specific to the tumor.

In the past, patients with a particular cancer type all received the same treatment but research has shown that tumors have unique features, even within the same cancer type. Now, physicians are increasingly using cancer biomarkers to gain more information about a patient's tumor to predict the treatment that is most likely to work against their unique cancer.

Biomarker testing has revolutionized cancer treatment for many types. Once we have identified a key biomarker and determine what is driving tumor growth, we are able to develop treatment strategies that specifically target the tumor abnormality and ultimately improve patient outcomes.

At present, we are just at the beginning of precision medicine. In the next few years, we will be more and more in depth in characterization of tumors, advance and personalize cancer medicine, identify optimal treatment choices and improve outcomes for patients.

KEYWORDS: Biomarkers, Tumor, Outcomes, Tumor Abnormality, Precision Medicine

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