Paediatric Nurse Education
Current Awareness Newsletter

July 2016
Outreach

Your Outreach Librarian can help facilitate evidence-based practise for all members of staff, as well as assisting with academic study and research. We can help with literature searching, obtaining journal articles and books, and setting up individual current awareness alerts.

Literature Searching

We provide a literature searching service for any library member. For those embarking on their own research it is advisable to book some time with one of the librarians for a 1 to 1 session where we can guide you through the process of creating a well-focused literature research and introduce you to the health databases access via NHS Evidence.

Critical Appraisal Training

We also offer one-to-one or small group training in literature searching, accessing electronic journals, and critical appraisal/Statistics. These are essential courses that teach how to interpret clinical papers.

For more information, email: katie.barnard@uhbristol.nhs.uk

Books

Books can be searched for using SWIMS our online catalogue at www.swims.nhs.uk. Books and journals that are not available on site or electronically may be requested from other locations. Please email requests to: library@uhbristol.nhs.uk
Contents

1: Tables of Contents from July’s Paediatric Nurse Education journals

2: New NICE Guidance

3: Latest relevant Systematic Reviews from the Cochrane Library

4: NHS Behind the Headlines

5: Current Awareness database articles
Tables of Contents from Nurse Education journals

The links below will take you to the full Tables of Contents.

If you require full articles please email: library@uhbristol.nhs.uk

Nurse Educator
July/August 2016, Volume 41, Issue 4

Nurse Education in Practice
July 2016, Volume 19

New NICE Guidance

Bronchiolitis in children

Reference: QS122

Latest relevant Systematic Reviews from the Cochrane Library

Inhaled nitric oxide for acute respiratory distress syndrome (ARDS) in children and adults
Fabienne Gebistorf, Oliver Karam, Jørn Wetterslev, Arash Afshari
**NHS Behind the Headlines**

**Children's plastic toys can 'harbour viruses for hours'**
**Monday Jun 27 2016**
"Plastic toys 'can harbour nasty viruses for hours, raising risk of infection'," the Mail Online reports. New research suggests that enveloped viruses, which have a protective shell, may survive on toys for up to 24 hours...

**Brain scans find differences in 'badly behaved' teen boys**
**Thursday Jun 16 2016**
"'Striking' structural differences seen in study which compared brain scans of young men with antisocial behavioural problems with their healthy peers," The Guardian reports.

**Teens who vape e-cigs 'six times more likely to smoke cigarettes'**
**Tuesday Jun 14 2016**
"Vaping is a gateway to smoking," the Mail Online reports, seriously overstating the evidence of a new US study. While the study did find teens who experimented with e-cigs were more likely to smoke "traditional" tobacco products...

---

**Current Awareness Database Articles**

If you require full articles please email: library@uhbristol.nhs.uk

**Title:** High-fidelity simulation effect on nurses' identification of deteriorating pediatric patients

**Citation:** Clinical Simulation in Nursing, Jun 2016, vol. 12, no. 6, p. 228-239, 1876-1399 (June 2016)

**Author(s):** Martin, Melanie G., Keller, Leah A., Long, Terri L., Ryan-Wenger, Nancy A.

**Abstract:** Background: We evaluated the effects of high-fidelity pediatric simulation experiences on nurses' early recognition of deterioration and patient outcomes. Method: Pediatric nurses (n = 83) participated in a 12-month quality improvement project. Results: Among 92 rapid response team/Code Blue events, 72.2% resulted in pediatric intensive care unit transfers; 84.8% of nurses' prior Pediatric Early Warning Score scores were accurate. The number of simulations that nurses completed during the study was not related to Pediatric Early Warning Score accuracy or pediatric intensive care unit transfer rates. Conclusions: Although simulations did not affect these outcomes, this is the first study to link pediatric high-fidelity simulation experiences to individual nurses' clinical decision-making practices and patient outcomes. References

**Title:** What Registered Nurses Do and Do Not in the Management of Pediatric Peripheral Venous Catheters and Guidelines: Unpacking the Outcomes of Computer Reminders.
Citation: Worldviews on evidence-based nursing / Sigma Theta Tau International, Honor Society of Nursing, Jun 2016, vol. 13, no. 3, p. 207-215, 1741-6787 (June 2016)

Author(s): Eldh, Ann Catrine, Tollne, AnnaMaria, Förberg, Ulrika, Wallin, Lars

Abstract: Clinical practical guidelines (CPGs) may enhance evidence-based practice, but require implementation. Computer reminders have previously shown various effects in supporting implementation; in a concomitant study, we found no effect on complications in peripheral venous catheters (PVCs) or registered nurses' (RNs) adherence to a CPG in pediatric care. Yet, there is a need to determine how reminders operate in particular contexts. To depict if, in what context, and how computer reminders regarding evidence-based management of PVC in pediatric care are applied according to RNs' actions and experience. Qualitative data from nonparticipant observations and interviews with 18 RNs in four intervention units at a pediatric hospital were analyzed with content analysis. Attention given to the computer reminders varied; the RNs noticed them in units where there was an agreement about the management and recording of PVCs, but not elsewhere. Rather, computer reminders did not facilitate adherence to the PVC-CPG where the CPG was not acknowledged from the start. RNs who knew how to manage PVCs had peer support and received additional reminders, which suggested that the computer reminders added to the significance of PVCs in pediatric care. While the computer reminders alone did not support CPG implementation, they further increased the attention to PVCs in contexts where there was a readiness to change along with a supportive culture. We suggest further studies tailoring implementation strategies to include electronic means if there is a beneficial context. © 2016 Sigma Theta Tau International.

Title: Can a sustainability and health scenario provide a realistic challenge to student nurses and provoke changes in practice? An evaluation of a training intervention.

Citation: Nursing & health sciences, Jun 2016, vol. 18, no. 2, p. 256-261, 1442-2018 (June 2016)

Author(s): Grose, J, Richardson, J

Abstract: Climate change and limited natural resources will impact on the sustainable supply and disposal of materials used in health care. Healthcare students need opportunities to reflect on the ecological footprint of health services to mitigate against negative effects on service delivery. In order to raise awareness of these issues, there is a need for evidence-based teaching tools which are relevant and meaningful to nursing practice. An evidence-based sustainability skills teaching session was delivered to 293 nursing students from child and adult health disciplines. Following the sessions, evaluation sheets were distributed to the participants, of which 290 responded. The majority of nurses valued both the delivery and the content of the training and some were motivated to complete further study. The evaluation provided valuable information on how to deliver sustainability education and important insights into where more information and support was needed in order to change practice. Embedding sustainability teaching in skill sessions appears to be a realistic way of informing and motivating learners to consider current and best practice. Following training, further evaluation of practice-based behaviour is needed. © 2015 Wiley Publishing Asia Pty Ltd.

Title: 'Knowing the Places of Care': How Nurses Facilitate Transition of Children with Complex Health Care Needs from Hospital to Home
**Citation:** Issues in Comprehensive Pediatric Nursing, Jun 2016, vol. 39, no. 2, p. 139-153, 0146-0862 (June 1, 2016)

**Author(s):** Carter, Bernie, Bray, Lucy, Sanders, Caroline, Van Miert, Clare, Hunt, Anne, Moore, Andrew

**Abstract:** The number of children with complex health care needs continues to rise and they often have prolonged hospital stays with their discharge home being delayed by a range of factors. These delays occur despite the fact that, except in extraordinary circumstances, a child's home is the most appropriate place for them to receive long-term care. The aim of this qualitative interview-based study was to explore the work of nurses whose main role is supporting children and families move from an institutional place of care to long-term care within the family home. Analysis of interview transcripts was collaborative, interpretive, and thematic. A total of 46 participants (9 nurses and 37 local stakeholders) engaged in the study. Findings reflect the ways in which the nurses facilitated transition of children with complex needs from hospital to home and the journeys the nurses took to develop the skills, knowledge, and networks needed to support this transition. 'Knowing the places of care' was fundamental to the success of the nurses' work. As the nurses' knowledge of the places (and processes) of care deepened, they were better able to act as informed guides to families and other professionals and to improve care. The nurses' practice was driven by the belief that the place where care occurs matters. Home was seen as a transformative and sustaining place where caring practices could become incorporated into an environment in which the family could exist and be nurtured together. References

---

**Title:** Improving and validating children's nurses communication skills with standardized patients in end of life care.

**Citation:** Journal of child health care : for professionals working with children in the hospital and community, Jun 2016, vol. 20, no. 2, p. 145-152, 1741-2889 (June 2016)

**Author(s):** Kenny, Gerard, Cargil, Jamie, Hamilton, Catherine, Sales, Rachel

**Abstract:** Children's nurse education is experiencing increases in recruitment targets at the same time that clinical placements are decreasing. With regard to end-of-life care, it is has become a challenge to ensure that all students come into contact with a satisfactory range of experience as part of the requirement for competency at the point of registration. The aim of our study was to find out if students at the end of their course were able to use communication skills acquired in their three years of training and adapt and transfer them to a specific palliative care context even if they had never worked in that area of care. Focus groups were conducted after the simulations which explored the students' experiences of being involved in the scenarios. Four themes emerged that students identified either inhibited or enabled their communication skills, which included anxiety and fear, the need for professional props, the experience of it being real and feeling empowered. © The Author(s) 2014.

---

**Title:** Working With Children in Families With Parental Substance Abuse: Nurses’ Experiences and Complexity in Relationships.

**Citation:** Journal of psychosocial nursing and mental health services, Jun 2016, vol. 54, no. 6, p. 38-44, 0279-3695 (June 1, 2016)
Author(s): Wallström, Rebecca, Persson, Renée Ståleborg, Salzmann-Erikson, Martin

Abstract: Children who grow up in families with parental substance abuse are exposed to increased risk of developing a variety of disorders. As nurses encounter these children, it is important for them to be supportive. The aim of the current study was to describe nurses' experiences and reflections regarding their work with children in families with parental substance abuse. A qualitative descriptive approach was adopted. Seven nurses were interviewed, and data were analyzed using inductive content analysis. The results were presented in four categories: (a) nurses' responsibilities; (b) identification of children's social network; (c) ethical concerns; and (d) assessment and evaluation of children's behavior. Nurses' preventive work and intervention in dysfunctional families may have direct consequences on children's present and future development and well-being. [Journal of Psychosocial Nursing and Mental Health Services, 54(6), 38-44.] Copyright 2016, SLACK Incorporated.

Full Text: Available from ProQuest in Journal of Psychosocial Nursing and Mental Health Services

Title: Storyboarding as an aid to learning about death in children's nursing.

Citation: Nursing children and young people, Jun 2016, vol. 28, no. 5, p. 16-21, 2046-2344 (June 8, 2016)

Author(s): Dexter, Yvonne

Abstract: The sudden or anticipated death of a child is one of the most challenging and unique experiences that children's nursing students will encounter in practice. There is evidence to suggest that the effect this can have on a practitioner can affect quality of care. Although education for nurses about dealing with death has been studied, there is limited research into the education of those working with dying children and how effective it is in preparing them to deal with the situation. This deficit presents those involved in children's nurse education with a significant challenge and an opportunity to be innovative. This article examines the use of storyboarding as a creative teaching tool to enable children's nursing students to reflect on their experiences of working with children and families in death situations. The wider implications for the use of this technique in practice and education are considered.

Title: Usefulness of 360 degree evaluation in evaluating nursing students in Iran.

Citation: Korean journal of medical education, Jun 2016, vol. 28, no. 2, p. 195-200, 2005-7288 (June 2016)

Author(s): Sadeghi, Tabandeh, Loripoor, Marzeyeh

Abstract: This study aimed to evaluate the clinical nursing students using 360 degree evaluation. In this descriptive cross-sectional study that conducted between September 2014 and February 2015, 28 students who were selected by census from those who were passing the last semester of the Nursing BSc program in Rafsanjan University of Medical Sciences. Data collection tools included demographic questionnaire and students' evaluation questionnaire, to evaluate "professional behavior" and "clinical skills" in pediatric ward. Every student got evaluated from clinical instructor,
students, peers, clinical nurses, and children's mothers' point of view. Data analysis was done with descriptive and analytic statistics test including Pearson coefficient using SPSS version 18.0. The evaluation mean scores were as following: students, 89.74±6.17; peers, 94.12±6.87; children’s mothers, 92.87±6.21; clinical instructor, 84.01±8.81; and the nurses, 94.87±6.35. The results showed a significant correlation between evaluation scores of peers, clinical instructor and self-evaluation (Pearson coefficient, p<0.001), but the correlation between the nurses’ evaluation score and that of the clinical instructor was not significant (Pearson coefficient, p=0.052). 360 Degree evaluation can provide additional useful information on student performance and evaluation of different perspectives of care. The use of this method is recommended for clinical evaluation of nursing students.

Title: Where Is the Nursing?: Baccalaureate Nursing Students' Perceptions of Nontraditional Child Health Clinical Placements.

Citation: The Journal of nursing education, Jun 2016, vol. 55, no. 6, p. 349-352, 1938-2421 (June 1, 2016)

Author(s): Studnicka, Katie, O’Brien, Karen

Abstract: Nursing students tend to look forward to their child health clinical placement in a hospital setting. However, there has been a shift away from hospital experiences to nontraditional community settings. When students are notified that the clinical settings are in the community, they often are disappointed. However, on completion of the placement, students' preconceptions about the community setting often have been changed positively. This qualitative study using focus groups explored the pre- and postperceptions of nursing students in nontraditional clinical placements. The overarching theme was Where Is the Nursing? This theme was underpinned by subthemes of the value of the placement and role (expectations and self-identification as a nurse). Participants were able to identify key aspects of nursing (e.g., communication, building relationships), but many of the students did not view these as nursing skills. In addition, some participants had difficulty identifying their roles as nurses. [J Nurs Educ. 2016;55(6):349-352.]. Copyright 2016, SLACK Incorporated.

Full Text: Available from ProQuest in Journal of Nursing Education

Upcoming Lunchtime Drop-in Sessions

The Library and Information Service provides free specialist information skills training for all UHBristol staff and students. To book a place, email: library@uhbristol.nhs.uk

If you’re unable to attend we also provide one-to-one or small group sessions. Contact library@uhbristol.nhs.uk or katie.barnard@uhbristol.nhs.uk to arrange a session.

<table>
<thead>
<tr>
<th>July (1pm)</th>
<th>August (12pm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tue 5th</td>
<td>Tue 2nd</td>
</tr>
<tr>
<td>Wed 13th</td>
<td>Wed 10th</td>
</tr>
<tr>
<td>Thurs 21st</td>
<td>Thurs 18th</td>
</tr>
<tr>
<td>Fri 29th</td>
<td>Fri 26th</td>
</tr>
</tbody>
</table>

- Critical Appraisal
- Statistics
- Information resources
- Literature Searching
- Critical Appraisal
- Statistics
- Information resources
- Literature Searching
The Library
Level 5
Education Centre
University Hospitals Bristol

Staffed: 8.00 am—17.00 pm, Monday to Friday
Swipe Access: 7.00 am—23.00pm, 7 days a week

Contact the Paediatrics Outreach Librarian:

katie.barnard@uhbristol.nhs.uk

www.uhbristol.nhs.uk/for-clinicians/
library-and-information-service