



Abstract G37 Figure 2 Process of presenting at the nursing journal club (n = 18)

framework.⁴ A predetermined rubric guided marking. Post competition, with ethics committee approval (HREC-33167), all hospital nurses received an anonymous online survey invitation. Demographic, Likert scale and freeform information was collected. Questions elicited attitudes and perceived barriers or facilitators to JC. Freeform data was themed. Survey completers could provide separate details to win a voucher.

Results Compared to the previous year there was a significant increase in JC attendance (2013 mean = 22 vs. 2012 mean=10, t-test $p = 0.00001$). Full online survey responses were received from 289/1674 (response rate 17.3%) of sent invitations (non-attendees $n = 224$, attendees $n = 65$ (18 presenters)).

Overall, attendees reported JC had a positive impact on their professional engagement, as shown in Figure 1. Presenters rated highly the JC format as it developed skills and increased JC confidence, as shown in Figure 2. Freeform themes indicated issues of time, session location, JC advertising and increased topic variety.

Conclusion A competition format can increase nurses JC engagement and participation. Further work is required to establish applicability of this format to other settings.

REFERENCES

- Harris J, Kearley K, Heneghan C, *et al.* Are journal clubs effective in supporting evidence-based decision making? A systematic review. *BEME Guide No. 16. Med Teacher* 2011;**33**:9–23.
- Swift G. How to make journal clubs interesting. *Adv Psychiatr Treat.* 2004;**10**:67–72.
- Silversides A. Journal clubs: A forum for discussion and professional development. *Can Nurse* 2011;**107**:18–23.
- Schwartz MD, Dowell D, Aperi J, Kalet AL. Improving journal club presentations, or, I can present that paper in under 10 minutes. *Evid Based Med.* 2007; **12**:66–8.

G38(P) EVALUATING A SERVICE TO SUPPORT MENTORS AND MENTORING IN STUDENT HEALTH VISITOR EDUCATION

SL Wolstenholme. *Community Services, Sheffield Childrens Hospital Foundation Trust, Sheffield, UK*

10.1136/archdiscchild-2015-308599.38

The government believes early intervention, ensuring families get the best start, will help to build a strong and stable society (DH 2011). The Implementation Plan 2011–15 (DH 2011) detailed the need to invest in a robust health visiting service, by increasing health visitor numbers by 50%. One key deliverable was increased training places delivered by Higher Educational

Institutions and supported by Practice Teachers in the community setting. To facilitate the extra training places for students, the Nursing and Midwifery Council (NMC 2011) produced guidance in utilising mentors, usually involved in pre-registration student nurse training, to work alongside the Practice Teachers in educating health visitor students.

This project involved participants in a process of inquiry to evaluate a service delivered by Practice Teachers, to support mentors and mentoring in Student Health Visitor education. Consideration of Stringer and Genat (2004) Look, Think and Act approach to Action Research led to the development of the research plan. A purposive sample of Practice Teachers, Student Practice Teachers and mentors participated. Data was collated through semi structured interviews, transcribed verbatim and analysed utilising a framework analysis approach.

The key findings were a positive evaluation of the support for mentors through supervision sessions, the lack of support around preparation of the mentors, the lack of support from management and the importance of support from team members. Failing students were seen as problematic. Willingness and an interest in education were crucial mentor attributes and future training was seen to lie with Practice Teachers and not mentors. Recommendation for practice highlighted the work that Practice Teachers and managers need to undertake in developing group supervision sessions, determining the future roles of Practice Teachers and mentors, evaluating the mentor training sessions and considering systems to support mentors with failing students.

G39(P) THE ROLE OF SIMBABY® IN ADVANCING UNDERGRADUATE NURSING AND MEDICAL EDUCATION

¹B McNaughten, ²D Corkin, ²P Cardwell, ³D O'Donoghue. ¹Neonatal Unit, Royal Jubilee Maternity Hospital, Belfast, UK; ²Childrens Nursing – School of Nursing and Midwifery, Queen's University Belfast, Belfast, UK; ³Royal Belfast Hospital for Sick Children, Queen's University Belfast, Belfast, UK

10.1136/archdiscchild-2015-308599.39

Aims Since inception in 2006 an Inter-professional Education (IPE) project has become embedded within Children's Nursing and Medical Curricula at an internationally recognised university. Inter-professional high-fidelity simulation teaching using SimBaby® has been developed to provide an integrated approach to student learning and highlights the importance of teamwork, mutual respect and understanding of the roles of other professionals. It aims to assist students in developing the fundamental knowledge and skills required to assess and manage

children presenting with common medical emergencies while enhancing student's use of clinical tools such as the SBAR framework.

Methods Fourth year Medical students, undertaking their Child Healthcare module, alongside third year children's nursing students, each participate in a simulated scenario based on a common paediatric emergency. The student group are observed by both facilitators and their peers, who provide constructive feedback on aspects of performance including patient safety, situational awareness, communication, clinical skills and decision making.

Results Students were invited to complete a validated questionnaire composed of Likert-scales to determine their reactions to the simulated learning experience. Focus groups were used to further explore these experiences. The results suggest that students evaluate this learning activity very positively and have stated that they value the opportunity to exercise clinical judgement and decision making skills without endangering the child. Other comments have included:

'I think we should have much more exposure to SimBaby training'

'SimBaby is a very useful, practical and memorable learning tool'.

A recent evaluation revealed that 94% of paediatric trainees who helped facilitate at SimBaby® felt it had improved their teaching skills, whilst 82% stated that this project had enhanced their ability to provide constructive feedback. To-date this SimBaby® project has achieved two prestigious prizes, a University Teaching Award in 2008 and a Research award (2009).

Conclusion SimBaby® is an important initiative within a portfolio of IPE projects, providing a highly valued learning opportunity for both medical and nursing students and those healthcare professionals involved in facilitating the sessions.

G40(P) OVERSEAS ELECTIVES, EXPENSIVE HOLIDAYS OR VALUABLE LEARNING EXPERIENCES, A REFLECTIVE EVALUATION

EP Carson, S Stronge. *School of Nursing and Midwifery, Queens University, Belfast, UK*

10.1136/archdischild-2015-308599.40

Aim To identify the knowledge and skills pre-registration nursing and midwifery students develop whilst engaging in an overseas elective placement

Methods As a multicultural society the UK provides many opportunities to care for people from diverse backgrounds, thus, developing cultural sensitivity is an important aspect of pre-registration nurse education in the UK. To this end one of the Nursing and Midwifery Council essential skills clusters states that 'People can trust a newly qualified graduate nurse to engage with them and their family or carers within their cultural environments in an acceptant and anti-discriminatory manner free from harassment and exploitation'.¹ It has been suggested that an overseas elective placement can assist in the development of cultural knowledge and sensitivity² although the literature addressing this issue is sparse. Given the costs an overseas elective can incur one must therefore consider the value of such a placement as it could be argued that these skills can be developed here in the UK. In beginning to address this question a reflective evaluation of the teachers facilitating the elective placements and the students who embarked on overseas elective placements to 3 African countries was carried out, with a view

to identifying the wider skills and knowledge an overseas elective placement can provide for pre-registration nursing and midwifery students.

Results The on-going evaluation indicates that students were more aware of the cultural differences in both the care delivered and the healthcare systems following the placement however what was also apparent was the development of other important skills including self-awareness; communication; organisational and time management skills; risk management; reflection and decision making skills.

Conclusion Anecdotal evaluation suggests that an overseas elective, whilst costly, does provide valuable and diverse learning opportunities, beyond just the development of cultural knowledge and sensitivity, for pre-registration nursing and midwifery students. This said, further more formal evaluation and research is required.

REFERENCES

- 1 Green BF, Johansson I, Rosser M, *et al.* Studying abroad: a multiple case study of nursing students international experiences. *Nurse Education Today* 2008;**28**:981–992.
- 2 Nursing and Midwifery Council. *Standards for Pre-Registration Nursing Education*. London: Nursing and Midwifery Council, 2010.

G41 WORKING WITH PARENTS AND HEALTH-CARE PROFESSIONALS TO DESIGN, DEVELOP AND PRE-PILOT THE PARENT LEARNING NEEDS AND PREFERENCES ASSESSMENT TOOL: THE PLANT STUDY

¹VM Swallow, ²R Mightingale, ³M Sinha. ¹*School of Nursing, Midwifery and Social Work, University of Manchester, Manchester, UK;* ²*Biomedical Research, Great Ormond Street Hospital/University College London, London, UK;* ³*Nephrology, Evelina Children's Hospital, London, UK*

10.1136/archdischild-2015-308599.41

Aims The purpose of the paper is to present a recently completed, multicentred project, the Parent Learning Needs and Preferences Assessment Tool (PLAnT) study, in which we designed, developed and pre-piloted a tool to promote a standardised, multi-disciplinary approach to assessing parents' learning needs/preferences. Health-care professionals spend considerable time teaching parents to safely manage their child's long-term condition/s at home. However, previous research that explored the ways professionals teach parents, and the ways parents learn to manage their child's condition, identified a need for a robust method of assessing parents' learning needs as professionals can find it challenging to individualise parents' skill and knowledge development.

Methods Phase 1: Data from qualitative interviews with 10 parents and 13 multi-disciplinary team professionals from 11 British children's kidney units about their learning/teaching experiences were used to develop the PLAnT. Participants were then asked to comment on the PLAnT via qualitative interviews or an online survey. Phase 2: Thirteen parents were each then paired with one of nine professionals to test the PLAnT; feedback on the experience of administering and completing the PLAnT was then sought from these 22 participants via qualitative interviews. Data were analysed using Framework Analysis.

Results This presentation will explore and discuss development of the PLAnT, and the three key themes that emerged from phase 2 as we piloted it with professionals and parents.

Purpose: Why ask parents' about their learning needs/preferences? To gain feedback on professionals teaching or identify prospective needs?