



THE UNIVERSITY OF
MELBOURNE

—
Department of
Medical Education

—
Department of
Nursing

Clinical communication in nursing and nurse education Program and abstracts




Symposium

Researching clinical communication in nursing: Implications for nurse education

Workshop

Learning and teaching clinical communication on clinical placement

 10.00am-4.30pm Tuesday 11 February 2020

 Theatre 2, (room 109), Alan Gilbert Building
Cnr Barry and Grattan St, Parkville
The University of Melbourne

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Welcome

We acknowledge the traditional custodians of the land, the Wurundjeri people, on whose land we meet today. We pay our respects to the Elders, past and present.

This symposium and workshop is for clinical nurse educators, nursing academics and researchers, to discuss aspects of nursing clinical communication and the implications for clinical teaching and learning. This all-day event includes a symposium in the morning with interdisciplinary speakers presenting their research. The afternoon workshop focusses on effective clinical communication in nursing. A methodology for feedback conversations about students' clinical communication will be presented. Participant input from the afternoon session will inform the development of an e-learning professional development module for clinical educators.

In line with the University of Melbourne's commitment to reducing its carbon footprint, we have attempted to make the symposium and workshop as sustainable as possible by minimising the amount of paper and plastic used and providing only vegetarian food. Please bring your own re-fillable water container and coffee keep-cups for use on the day.

We also invite you to bring along your own copy of this program booklet or refer to it electronically on the day, as we will not be printing copies of this booklet. We appreciate your understanding.

We hope you enjoy today's symposium and workshop.

Symposium Convenors

Associate Professor Robyn Woodward-Kron

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Program

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10.00-10.15	Registration
10.15-10.25	Symposium Welcome Associate Professor Robyn Woodward-Kron, Department of Medical Education, University of Melbourne (Chair)
10.25-10.50	We don't have time for that... Communication in nursing practice and nurse education from a German perspective. Professor Dr Michael Ewers, Institute of Health and Nursing Science, Charité University Hospital, Berlin
10.50-11.15	Performance management and decision to fail a student on placement – mapping difficult conversations. Dr Zerina Tomkins, Department of Nursing, University of Melbourne
11.15-11.40	Clinical placements in nursing education: Perspectives of students, health services and patients. Professor Marie Gerdtz, Department of Nursing, University of Melbourne
11.40-12.05	Communication challenges facing internationally-qualified nurses in Australian workplaces. Associate Professor Ute Knoch, Language Testing Research Centre, University of Melbourne
12.05-12.30	Better nursing handover communication: Interdisciplinary, translational research at St Vincent's Hospital Sydney. Professor Diana Slade, School of Languages, Literature, and Linguistics, Australian National University
12.30-1.30	Lunch
1.30-3.10	Workshop The workshop will be presented by Dr Zerina Tomkins and Associate Professor Robyn Woodward-Kron, with assistance from colleagues in the Department of Nursing, University of Melbourne, and Ms Susan Philip, PhD candidate, University of Melbourne. Please note - workshop participants will be invited to participate in a research project. There is no obligation to participate and non-participation in the research will not hinder participation in the workshop. Welcome and outline What is effective clinical communication in nursing? Presentation and discussion Participant perspectives of nursing students' clinical communication Clinical communication framework and activity
3.10-3.30	Afternoon tea
3.30-4.30	Feedback conversations for teaching and learning clinical communication Discussion, next steps, and close

Abstracts

We don't have time for that...

Communication in nursing practice and nurse education from a German perspective.

Professor Dr Michael Ewers

Institute of Health and Nursing Science, Charité University Hospital, Berlin

Communication is a professional tool which nurses use to build up and maintain relationships with patients and their relatives, help them to enhance their health literacy and their self-management and to cope with their health problems. Furthermore, profound communicative competencies are necessary to share information, to coordinate health services or to work collaboratively with members of intra- and interprofessional teams. For this reason, special attention is paid to the development and evaluation of these competencies in nurse education, practice and educational research internationally.

This presentation provides an insight into current discussions and developments on this topic from a German perspective. It is argued that the current reforms of nurse education programs are overdue. However, nurses in this country often see little opportunity to apply their communicative competencies in clinical practice due to strict hierarchies, a shortage of skilled nurses and other adverse working conditions. Therefore, initiatives in nurse education and educational research must go hand in hand with practice development, new patterns of task-sharing between health professionals and an overall optimization of working conditions so that nurses actually can use communication as professional tool in their everyday practice.

Professor Dr Michael Ewers MPH

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Performance management and decision to fail a student on placement – mapping difficult conversations.

Dr Zerina Tomkins

Department of Nursing, University of Melbourne

A decision to performance manage the student through learning contracts or to fail a student when the contract obligations are not met, is difficult. A mutual and transparent relationship is vital for student progress and success in relation to learning contracts, yet this is often challenging to achieve. The stress of undertaking these conversations with the student, or the challenges this may pose for clinician's own wellbeing, perceived consequences for the students or student's reactions to being failed are some of the underlying factors as to why clinical educators may chose not to fail the student even when they know that the student is not safe to practice.

Many communication models have been offered to help manage these conversations, however, what these models do not carefully consider are academic policies, system-related issues (for example what happens when universities rely on clinical partners to manage students) and how clinical partners view the role of university academics in helping them manage challenging students. Student's own scope of practice is often misinterpreted by the clinical educator and by the student.

In this presentation, these themes will be brought together to equip clinical educators to have difficult conversations whilst considering policies that guide clinical placement assessments, interaction with academic staff and regulatory scope of practice in the space of a nursing graduate entry-to-practice program.

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Abstracts

Clinical placements in nursing education: Perspectives of students, health services and patients.

Professor Marie Gerdtz

Department of Nursing, University of Melbourne

In a climate of limited healthcare resources student clinical placements are often considered in terms of a fee for service arrangement between education providers and health services. When viewed through this transactional lens, the value of work integrated learning remains largely hidden and underdeveloped. In this multi-method qualitative study, we sought to document the benefits of clinical placements in entry to practice programs from: 1) the existing literature and 2) from perspectives of students, health service providers and patients.

The setting for the study includes four Australian Universities providing entry-to-practice programs in nursing and four acute care hospitals located in metropolitan and regional centres providing clinical placements to student nurses. Participants were: 1) students undertaking an entry-to-practice degree in nursing in one of the designated universities, and 2) education providers/clinical supervisors of clinical placements in nursing and 3) patients.

The results of our study make explicit the benefits of clinical placements to students, health services and patients. It is anticipated the outcomes of our work may provide the foundation for a work integrated curriculum framework that focusses on providing consistently high-quality learning experiences and ultimately delivers to the community graduates that prepared to enter the health workforce.

This project is funded by the Clinical Deans of Nursing and Midwifery.

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Communication challenges facing internationally-qualified nurses in Australian workplaces.

Associate Professor Ute Knoch

Language Testing Research Centre, University of Melbourne

High standards of professional communication are vital for patient safety and social integration in the multicultural healthcare workplace. The challenges for internationally qualified nurses (IQNs) in meeting such standards are recognized, although detailed explorations of these challenges in the Australian context are still scarce. This study aimed to gain detailed insights into the communication challenges faced by internationally qualified nurses in the Australian context and to identify some of the barriers to successful communication with nursing colleagues, other health professionals, patients and family. The study also explored what strategies IQNs used when facing communication challenges.

Thirty overseas-trained nurses were interviewed for the study. The nurses were asked about communication challenges they faced in their day-to-day work and how they coped with these challenges.

The findings showed that most of the interviewees reported struggling with various communication tasks when they first entered Australian workplaces. These issues were evident in communication with colleagues, other hospital staff as well as patients and family. Problems were evident across a range of tasks and were challenging for nurses both professionally and socially. The interviewees also reported an array of strategies they used to deal with their problems and the majority seemed to be able to integrate into their workplaces successfully after a period of time. The findings have implications for the training and support of IQNs.

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Abstracts

Better nursing handover communication: Interdisciplinary, translational research at St Vincent's Hospital Sydney.

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² St Vincent's Hospital Sydney

Clinical handover is a pivotal, high-risk communicative event in hospital practice. Studies focusing on critical incidents, mortality, risk and patient harm in hospitals have highlighted ineffective communication – including incomplete and unstructured clinical handovers – as a major contributing factor. In response, St Vincent's Hospital, Sydney (SVH) invited Slade and her team to build on their Australian wide research on clinical handover (Eggins, Slade & Geddes, 2016) to collaborate with SVH nurses to improve shift-to-shift nursing bedside handovers in the wards. In this paper, we detail the research, evidence-based training and impact in one ward at SVH.

The research used complementary methods derived from qualitative approaches, incorporating ethnography and discourse analysis, interviews with clinicians and management, and video and audio-recordings of actual handover interactions. The data collection in one ward consisted of 36 interviews with clinicians and management, 13 patient interviews, video and audio-recordings of 39 patient handovers and detailed observations. Following our translational methodology, we did an in-depth language analyses of the spoken interactions and based on our findings developed and delivered professional development training for nurses and management. Three months later we assessed the impact of our training and the uptake of the recommendations.

The observation and recordings of actual handover practices revealed extensive inefficiencies with nursing handover practices. Information was duplicated, misunderstood or poorly clarified, compounded by variation in practice, unsupportive clinical systems and unimplemented organisational policies. In addition, lack of interaction with both patients and incoming nurses meant misunderstandings, failures and errors in communication were not rectified.

As a result of the intervention, traditional shift-to-shift group handover was replaced with a 'ward forecast', a focussed handover (less than ten minutes) that communicates to staff patients at risk of harm (e.g. falls risk). Individual patient handovers are no longer delivered as a single monologue by the nurse-in-charge, but rather are delivered at the bedside actively involving both the patient and allocated nursing staff.

Since the delivery of the training program, there has been a significant decrease in a range of reported healthcare-associated complications. Comparing the post-intervention period – December 2018 to present – to an average of the previous three years, there has been a 52% reduction in inpatient falls, a 22% decrease in the number of newly acquired pressure injuries and a 21% reduction in the number of medication errors and related incidents during this time.

Professor Diana Slade

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