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Research paper

Perceptions of an educational programme for registered nurses who work at non-major trauma services in Victoria, Australia: The Nursing Emergency eXternal Trauma Programme



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ABSTRACT

Background: Emergency nurses working in non-Major Trauma Service (non-MTS) facilities face the challenge of providing immediate care to seriously injured patients, despite infrequent presentations at their workplace. A one-day education programme endorsed by the Australian College of Nursing was developed to provide contemporary trauma education for nurses. The aim of this study was to report participants' perceptions of their experience of this programme.

Methods: Peer reviewed lesson plans were developed to guide educational activities. Of 32 participants, 24 consented to and completed pre and post-programme surveys. Thematic analysis and descriptive statistics were used to report study findings.

Results: Most participants were nurses with greater than two years' experience in Emergency Nursing (92%). Trauma patient transfers each year from a non-MTS to a Major Trauma Service occurred infrequently; eight nurses (33.3%) reported greater than 10 trauma transfers per year. Participant expectations of the programme included personal growth, knowledge acquisition, increased confidence and a focus on technical skills. Participants reported the day to be worthwhile and valuable; improved confidence, increased knowledge, and the opportunity to discuss current evidence based practice were highly regarded. Recommendations for future programmes included extending to two days and include burns and more complex pathophysiology.

Conclusions: With centralisation of trauma care to major trauma services, frequent and continuing education of nurses is essential. Nurses from non-Major Trauma Service facilities in Victoria found this programme worthwhile as they gained knowledge and skills and increased confidence to care for trauma patients.

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1 Introduction

Trauma related injury and associated death affects all ages and has no geographical boundary. Civilian trauma systems are founded on experience from the United States of America (USA) military [1]. In 2004 the World Health Organization published guidelines for essential trauma care aiming to establish achievable and affordable trauma care world-wide [2]. Evidence from a systematic review and meta-analysis evaluating trauma system performance, demon-

strated a 15% reduction in mortality for severely injured patients treated at a trauma centre [3]. In Australia, trauma systems inclusive of 27 designated trauma centres exist across all states and territories [4–8].

In Victoria, reducing morbidity and mortality by identifying and addressing system issues that resulted in a number of potentially preventable deaths was an outcome of the review of trauma and emergency services (RoTES) 1999 report [9]. In 2000, the Victorian State Trauma System (VSTS) was established [10]. Maintaining upto-date knowledge and skills in trauma management is essential if injured patients are to receive recommended care during their initial resuscitation.

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Internationally, there are several reputable providers of trauma education for nurses and other health professionals. In the USA, the Emergency Nurses Association (ENA) co-ordinates the Trauma Nursing Core Course (TNCC) [11] and the Society of Trauma Nurses offers the Advanced Trauma Care for Nurses programme [12]. In Europe, the European Society for Trauma and Emergency Surgery offer a trauma course for doctors and other health care professionals including advanced practice nurses [13]. In the United Kingdom (UK) the ENA TNCC [14] is available as is the Advanced Trauma Nursing Course [15].

In Australia, the College of Emergency Nursing Australasia (CENA) the peak professional association for Emergency Nurses offers a national Trauma Nursing Program (TNP) [16]. Further the Australian College of Emergency Nursing has the sole distribution rights to the International Trauma Life Support (ITLS) course [17]. TNCC, TNP and ITLS are available across all states and territories within Australia.

Registered nurses in each state and territory across Australia have access to a range of trauma programmes locally [6,18-21]. In Victoria, meeting the education and training needs of health professionals was identified as one of the key priorities in the five-year strategic framework for the continuing development of the VSTS [22]. In 2015, the Trauma Victoria education program was launched. Web based education resources are available through the Trauma Victoria website [23]. The National Trauma Research Institute in Melbourne provides education and training for medical graduates with an interest in Trauma Reception and Resuscitation [23]; currently there are no adult trauma based programmes provided by a MTS in Victoria for nurses who work beyond a Level 1 Trauma Centre. As one of the designated adult Level 1 [24] MTS for Victoria, our centre is well positioned to provide trauma education training and support to Registered Nurses (RNs). The Nursing Emergency eXternal Trauma Programme (N.E.X.T.p) was developed for nurses working at metropolitan and regional trauma services and urgent and primary care services across Victoria, Australia.

2 Aim

The aim of this study was to report the perceived level of entry skill and knowledge of participants prior to programme attendance and to describe participants' perceptions of their skill and knowledge level after attending the programme.

3 Methods

3.1 Study design

There were three phases to this research. The first phase was the distribution of a web based pre-programme survey for participants who registered to attend the programme. The second phase was participant attendance at the one-day programme and the third phase was a web based post-programme evaluation survey completed by programme participants.

3.2 Ethics

This study adhered to the National Statement on the Conduct of Human Research by the Australian National Health and Medical Research Council, and was approved by the local ethics committee; approval number: 74/16.

3.3 The Nursing Emergency eXternal Trauma Programme

3.3.1 Curriculum development

Best practice for teaching adults includes providing a safe, welcoming learning environment, creating a culture of empathy, respect and approachability and ensuring the practicality of all learning activities [25]. Lesson plans were developed by Clinical Nurse Educators (CNEs) for each session and were informed by evidence from existing literature. The content was peer reviewed and approved by CNEs and the director of medical education from a Level 1 MTS. Based on Knowles' theory of adult learners, lesson plans were tailored to be flexible and responsive to learner's needs by acknowledging prior knowledge and building on knowledge during programme delivery [25]. Prior knowledge was sought from participants using a web based pre-programme survey at registration. Facilitators of N.E.X.T.p reviewed the responses of participants who consented to complete the survey prior to programme delivery.

3.3.2 Delivery of N.E.X.T.p.

The programme content was delivered by expert trauma clinicians from a Level 1 MTS with a case load of over 1200 major trauma patients (MTP) per annum [26]. Trauma clinicians modelled the reception and resuscitation of a seriously injured patient using a systematic approach to trauma assessment using Advanced Trauma Life Support (ATLS) principles [27]. The demonstration employed a plausible simulated trauma scenario using a standardised patient (actor) [28].

Following the simulation session participants were given the opportunity to engage in a question and answer forum with expert trauma nurses and medical staff. Participants then rotated through a number of skill-based workshops that focused on interventions required to manage potential or actual threats to life, focusing on the primary survey. Experiential learning [29] was emphasised through hands-on interaction at each workshop, reinforcing the systematic approach to patient assessment and management observed during the simulation session.

The closing session of N.E.X.T.p. focused on transfer expectations of a seriously injured person from a non-MTS to a level 1 adult MTS including how to provide an effective handover to the receiving hospital staff. This session was informed by the Inter-hospital Major Trauma Transfer Guideline in Victoria [30]. An interactive game was used to identify challenges when communicating over a telephone and to explore ways to overcome the identified challenges. The model endorsed by the Department of Health for use in Victoria for communicating patient handover by Ambulance Victoria (AV) to Emergency Departments (EDs), 'IMIST- AMBO' [31] was highlighted as one way to provide an effective way of transferring relevant and meaningful information from one facility to another.

3.4 Programme endorsement

N.E.X.T.p was endorsed by the Australian College of Nursing. Participants were offered seven continuing professional development hours.

3.5 Sample size and recruitment

Marketing of the programme and registration to attend N.E.X.T.p was administered by the research assistant from the Academic Program Office at the MTS. Web based advertising, email to contact persons at local hospitals and email to individual nurses were strategies used for the marketing campaign. The size of the facility and number of workshops scheduled as part of the programme limited the number of registrations to 40. This number was determined by the course convenor in consultation with other programme facilitators.

3.6 Survey tool development

3.6.1 Pre-programme survey

The pre-programme survey was developed by the programme convenor. CNEs from the MTS peer reviewed the survey, pro-

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