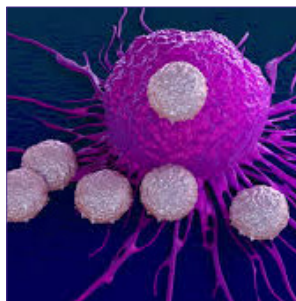
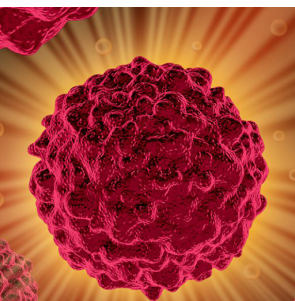


# Poster Presentation

## ***Nursing Education 2019 Cancer 2019***



Joint Event  
29<sup>th</sup> International Conference on  
**Nursing Education and Research**  
&  
14<sup>th</sup> International Conference on  
**Cancer and Cancer Therapy**  
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## Healthcare with quality, safety and family

**Afonso J C Soares, Clara Pettersen, Débora Miguel, Afonso M Soares and Erik R Dana**

Brazilian Air Force Hospital, Brazil

**Description:** It is essential that all patients are treated with quality and safety during their stay in the ICU. It's their right. And we believe that the family also has the right to help them in this process.

Safe ICU is a free app for smartphones to enable families to engage in the treatment of their relatives by completing a simple questionnaire on the service provided in the ICUs. The purpose of the app is to provide families the power to verify the ICUs based on the recognition of items and attitudes considered essential for all patients

**Actions taken:** An app for was developed with a simple questionnaire regarding structural and organizational aspects of an ICU related to safety and quality of care. Each question has a small explanation to take small doubts. To engage on the app, only the hospital must be identified. We also developed a database system where all the answers go to enable the analysis of improvement on the ICU service and ranking of healthcare institutions.

Families were approached at the HFAG's ICU entrance to answer the questionnaire on their own smartphones while visiting their family's member. We had previously aligned with the ICU team the use of the app. After the families answered the questionnaire in Phase 1, we presented the positive and mainly the negative points to the ICU team. As a result, they were able to take the necessary actions to improve their service, which is proved by the following responses in Phase

2. We hope that, with the use of the app, families and the ICUs team can collaborate to improve the quality and safety on health service on a culture of cooperation.

**Multi-disciplinary team:**

**ICU team:** Head of the sector, routine doctors and nurses, physiotherapists and administrative staff.

**Design team:** Rastro agency and web development center Vertice.cc

**Results:** For the first time in Brazil, we are making families participate actively in the verification of items related to safety and quality of care in the ICUs. In addition, some questions were allocated to evaluate the acceptance of the app by the families. The reception of the relatives was excellent and made them realize the effective feeling of collaboration for safety and quality in the ICU. Possibilities for improving health care in the ICU with the app:

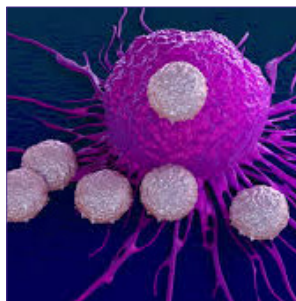
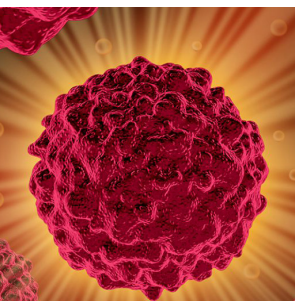
Offer the 'future ICU patient' the possibility to choose in which hospital to go based on a rank of hospitals under the concept of Safe ICU, according to the families' answers,

By bringing the positive and negative aspects of the ICU service to the health team and managers, we offer a data based chance to improve and eliminate nonconformities.

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# Accepted Abstracts

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## Status and hot spots of positive psychology: A bibliometric analysis

Sun Caiyun

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**Objective:** To represent the research status of positive psychology and analyze the hot spots and to provide references for clinical work and future research in this field.

**Methods:** Literatures related to positive psychology were retrieved in Web of Science Core Collection database from 2000 to 2019. We make a bibliometric analysis about the annual publication number, distribution of countries, funding agencies, journals of publication and research areas. CiteSpace visualization software and HistCite software were used to facilitate the analysis of research hot spots and high cited references respectively.

**Results:** A total of 4536 pieces of literature relevant with positive psychology were collected. The volume of published documents showed an increasing trend year by year. America had most articles which number is 1793 while China had 241 articles and ranking 6. The funding agencies and journals of publication were diverse, most of which belonged to America.

The research areas mainly consisted of Psychology, accounting for 52.491%, while Nursing ranked 10 accounting for 1.984%. Top 5 strongest burst keywords were mindfulness, psychosis, association, predictor and randomized controlled trial. The highest 10 cited references mainly focused on the research of relationship between positive psychology and happiness and positive psychological intervention methods.

**Conclusions:** Positive psychology is at the stage of growing and developing. Core journals have not emerged yet. America is in the leading position in this field. The quantity of literature in China is small and still has a larger upside. The research hot spots include mindfulness intervention, associated therapy, and design of randomized controlled trial. In future, research workers could expand and enhance positive psychology in clinical application and study for further exploration of effective intervention program.

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## **Nursing role in ambulatory surgical care**

**Caroline Bilen**

The Compass Health Consultancy, UAE

**N**urses play a critical role in patient safety. They provide high-quality, evidence-based care across the lifetime to enhance safety and reduce adverse events. The primary goal of nursing care in ambulatory surgical procedure is to prevent surgical site infection (SSI) and other surgical complications, improve patient safety, experience and satisfaction.

Many factors can contribute to the risk of SSIs and their prevention is complex but achievable. It requires specific measures such as patient preparation before, during and after surgery, appropriate hand hygiene, sterility of the instruments, etc...

Clinical evidence demonstrated that operating room (OR) activities related to asepsis and aseptic practices have the highest direct impact on the surgical team in helping to reduce the patient's risk to surgical site infection. Having policies and procedures in OR does not mean compliance is guaranteed. The efficacy of these policies depends on the knowledge skills of the team and how well the surgical team adheres to them. Besides, team communication and collaboration are very critical to achieve excellence in ambulatory surgical care.

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## **Impact of human cytomegalovirus infection on survival of patients with Ovarian Cancer**

**MinYin and Ai-PingChen**

Qingdao University, China

**H**uman cytomegalovirus (HCMV) has been detected in various types of tumors. We studied the prevalence of HCMV in ovarian cancer and its relation to clinical outcomes. Paraffin-embedded tissues obtained prospectively from 60 patients with ovarian cancer, 30 patients with benign ovarian cystadenoma and 10 patients with normal ovarian tissue were analyzed for expression of HCMV immediate-early protein (IE) and HCMV tegument protein (pp65) by immunohistochemistry. Extensive HCMV-IE protein expression was detected in 73% of ovarian cancers and 23% of benign tumors; pp65 was detected in 65% of ovarian cancers and 13% of benign tumors. A higher grade of HCMV infection

was associated with higher stage of disease. Extensive HCMV-pp65 expression was associated with shorter median overall survival than focal expression (37 versus 45 months,  $P=0.04$ ). At study closure, 55% of ovarian cancer patients with focal pp65 expression were alive versus 28% of patients with extensive pp65 expression ( $P=0.03$ ). Thus, HCMV proteins are detected at different levels in ovarian tumors and benign cystadenomas. Ovarian cancer patients with focal HCMV-pp65 expression in their tumors lived longer, highlighting a need for in-depth studies of the oncomodulatory role of HCMV in ovarian cancer.

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## **The use of handheld ultrasound by general physicians, midwives and Nurses to avert maternal deaths in 2 regions of the Philippines.@ ibuntis**

**Godofreda Vergeire-Dalmacion**

Asian Hospital and Medical center, Philippines

**Background and Objectives:** One of the major reasons for the Philippines' high maternal ratio of 209 per 100,000 livebirths is the lack of primary health care and low contraceptive coverage. Thus, the functions of nurses, midwives and general physicians manning our health facilities must be expanded and optimized to the fullest. Using a cross sectional design we chose 2 municipalities from 2 regions of the Philippines, one rural and one urban with similar maternal mortality ratio. Our objectives were to train their health workers on the use of handheld ultrasound to identify 5 obstetrical conditions of women in their 20th to 24th weeks age of gestation which may lead to catastrophic pregnancy outcomes. The ultrasound readings of the trainees were compared with those made by an obstetrician- perinatologist, acting as gold standard. Training activities used lectures, modules, return demos and small group discussions.

**Results:** Four hundred sixty pregnant women were scanned. Thirty two percent of images were abnormal, namely, fetal malpresentation (27%) abnormal placentation (3.7%), twin pregnancy, ( 1.3%) and amniotic fluid volume abnormalities

(1.3%). All women with abnormal scans were subsequently referred to their health facilities and advised closer prenatal followups. Early ultrasound imaging will potentially avert 6.3% of maternal deaths and 28.0% of neonatal deaths. In our study, we had 3 cases of neonatal deaths, 2 from congenital anomalies and 1 from dysfunctional labor secondary to neglected breech. The latter was actually diagnosed by the team but patient opted for home delivery. The agreement between the health workers readings with the gold standard was 100% for the number of fetuses, 99% for placental localization and amniotic fluid volume and 95% for fetal presentation specifically breech versus cephalic.

**Conclusion:** Screening ultrasound between 20th to 24th weeks AOG can detect a high number of abnormal ultrasound images and can potentially avert maternal and neonatal deaths. Community health workers are trainable and reliable in the use of handheld ultrasound on five important obstetrical parameters. However, knowledge alone is not enough to improve health seeking behavior

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## Health benefits of mindfulness-based interventions for patients with inflammatory bowel disease: A systematic review and meta-analysis

Zhou Meijing

Nanjing Medical University, China

**Introduction:** Given that there is no cure for inflammatory bowel disease (IBD), psychosocial interventions have been recommended as an important component of complementary alternative therapies. Mindfulness-based interventions, a burgeoning psychological interventions, are increasingly used to reduce stress, alleviate psychological concerns and improve overall well-being in patients with other chronic disease. However, there are a lack of consensus regarding the effectiveness of mindfulness-based interventions in patients with IBD.

**Objectives:** We collected data to explore the efficacy of mindfulness-based interventions compared to treatment as usual, in treating psychosocial symptoms associated with IBD.

**Methods:** We conducted a systematic review and meta-analysis of randomized controlled trials. We included interventions focused on mindfulness-based stress reduction, mindfulness-based cognitive therapy, dialectical behavior therapy and acceptance and commitment therapy, with no restrictions on participants' age and disease severity. We searched the following electronic databases: MEDLINE, EMBASE, PsycINFO, CINAHL, the Cochrane Library, China

Biology Medicine, Chinese National Knowledge infrastructure, Wan Fang Data. The review was performed in accordance with Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines.

**Results:** We included six studies in the meta-analysis, with 400 patients. Mindfulness-based interventions showed significant effects on depression in both the short (SMD=-0.71; 95%CI: -1.20, -0.22; P=0.004) and long term (SMD=-0.53; 95%CI: -0.97, -0.10; P=0.02), short term effects on anxiety (SMD =-0.58; 95%CI: -1.03, -0.14; P=0.01), but not statistically significant improvements in QOL (SMD=0.18; 95%CI: -0.26, 0.61; P= 0.42) and not statistically significant effects on stress in both the short (SMD= -1.26; 95%CI: -2.99, 0.48; P=0.15), and long term (SMD=-0.82; 95%CI: -1.70, 0.06; P=0.07).

**Conclusions:** Mindfulness-based interventions are effective in alleviate depression and anxiety, but do not show an advantage in improving quality of life and reducing stress among patients with IBD. Further additional rigorously designed randomized controlled trials with larger sample size are urgently warranted to verify this conclusion.

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## The involvement of relatives in the care of patients in medical settings in Australia and Saudi Arabia - An ethnographic study

**Shadia Alshahrani**

King Khalid University, Saudi Arabia

**Aims:** To explore the role relatives play in the care of patients in medical ward settings in Australia and Saudi Arabia and to understand the nature of this involvement.

**Background:** There is little known about how nurses and relatives respond to the involvement of relatives in patient care and the impact of the participation on the quality of care. Previous studies have focused on settings such as critical care and paediatrics where relatives' involvement as advocates is mostly acknowledged and accepted.

**Design:** The study used a qualitative ethnographic approach based on an interpretive paradigm.

**Methods:** Data collection was carried out in medical settings in two major hospitals; one in Australia and another in Saudi Arabia. Data were collected by observations and interviews over a six-month period with three months spent in each setting.

**Results:** In both fields nurses and relatives faced ongoing ambiguity about the role relatives should play in the hospital environment and nurses were challenged by the unpredictability of relatives' participation in patient care. The nurses' fear of taking responsibility and uncertainty about the relatives' role led them to take varied and individualised approaches to the involvement of relatives in patient care. Relatives were unclear about how to behave in the role, what the needs of patients were and whether they were contributing positively to care and this resulted in frustration.

**Conclusion:** The results show that ambiguity regarding the role of relatives led to problems in patient care such as safety concerns and conflict with nurses.

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## **Nurses' role in medical prescription from a cybernetic perspective**

**Taghrid CHAABAN and Mathieu AHOUAH**

University Paris, France

Prescribing is a physician's prerogative in many countries. In geriatric institutions, due to time constraints, physicians often base their prescribing decisions on nurses' expertise (Fleming 2014). The nurse's proximity to the resident, her multiple skills and particularly those in interpersonal communication, can participate to the prescribing decision. However, the literature indicates that nurse-physician communication remains ineffective (Tan et al 2017) and physician-nurse interactions are generally informative (Chaaban et al 2019). Thus, the lack of communication can affect the quality of information exchange affecting the quality of health care (HAS 2014). Interactive communication could allow the nurse to participate more effectively in decision-making

in drug prescribing. Thus, a new model of physician-nurse communication was designed using the concept of cybernetic communication, which could provide an atmosphere of dialogue, prevent the traps of subjectivity and improve treatment optimization. Our cybernetic communication model imperatively requires systemic interactive relationships that enable the sharing of knowledge and expertise. It includes several elements including the nurse's assertiveness. The nurse can be a promoter of communication in this model based on her theoretical knowledge, clinical judgment and empowerment. Research is needed to determine the feasibility of our model and the practical impact of its implementation.

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## Evaluating the transfer of Nursing CE to practice

**Tiffany Bryant**

American Nurses Association Enterprise, USA

**Background:** The nursing profession needed evidence of the important contributions that nursing continuing education (CE) makes to nursing practice change. Nurse researchers analyzed nurses' intent to change practice, actual practice change and examples of practice change following completion of nursing CE courses of differing types, topics and geographic locations.

**Methods:** A retrospective, mixed-methods study design was used to analyze quantitative and qualitative survey data gathered upon completion and within one year following completion of 16 different nursing CE courses.

**Results:** With a sample size of 480 nurse respondents, majority of the nurses reported positive intent to change practice (88.6%) and actual practice change (89.1%) following participation in the nursing CE courses. Qualitative analysis revealed four practice-related themes including becoming certified, improved leadership, enhanced role performance, and educating or mentoring others.

**Conclusions:** Nursing CE can positively impact nursing practice change and lead to broader organizational improvements.

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