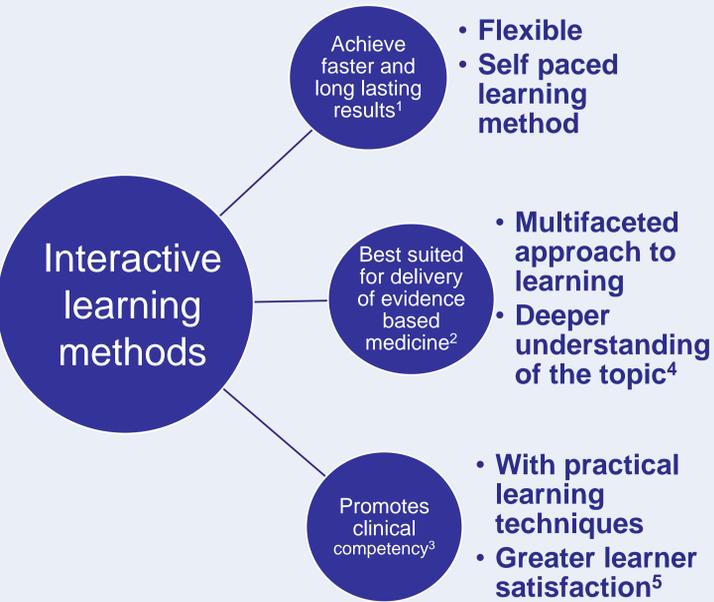


# Making nursing in-services more effective-It's Time!

**AUTHORED BY:** *Gauri Godbole*, Team Leader Pharmacist, Aged Care and Mental Health, Central Coast Local Health District, Gosford Hospital, NSW,  
*Joanne Fleming*, Clinical Nurse Educator, Geriatric Rehabilitation Unit, Central Coast Local Health District, Wyong Hospital, NSW,  
*Leanne Senior*, Nurse Unit manager, Central Coast Local Health District, Wyong Hospital, NSW

## Background

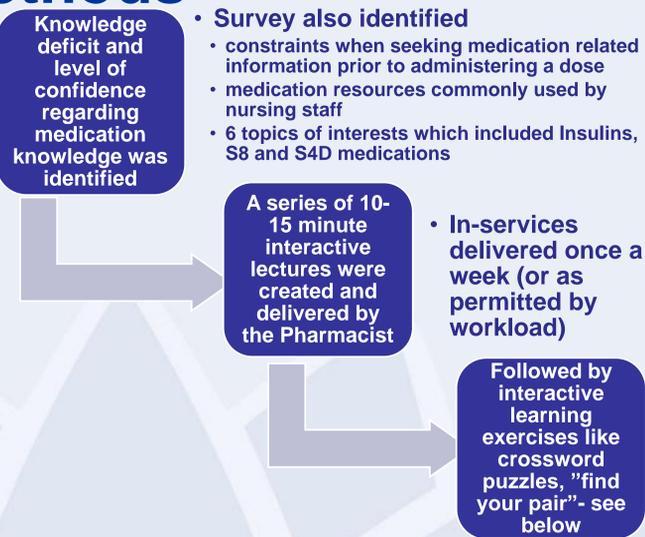


We decided to test this theory for pharmacy delivered nursing in-services.

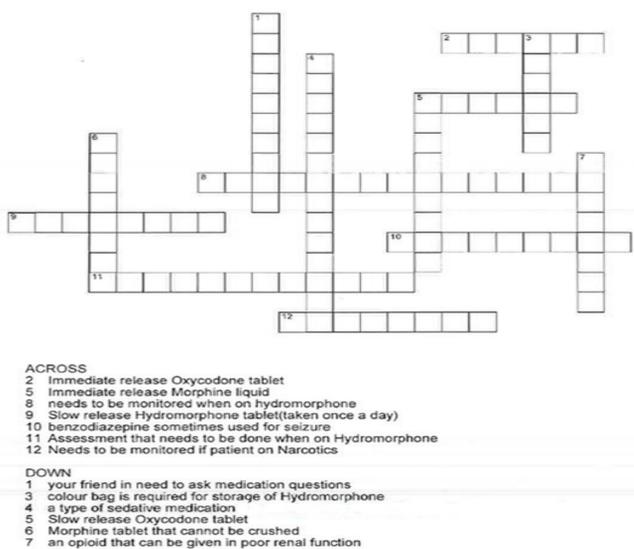
## Aim

To evaluate effectiveness of short pharmacy delivered nursing in-services using active learning methodologies at the Geriatric Rehabilitation Unit (GRU) at Wyong Hospital.

## Methods

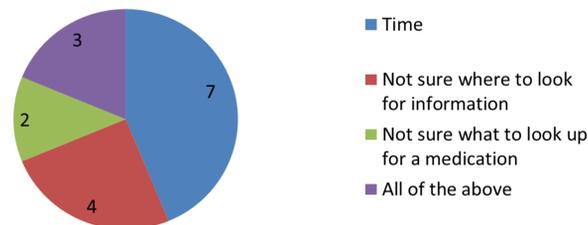


Example of interactive teaching exercise  
**Schedule 8 and S4D Crossword puzzle**



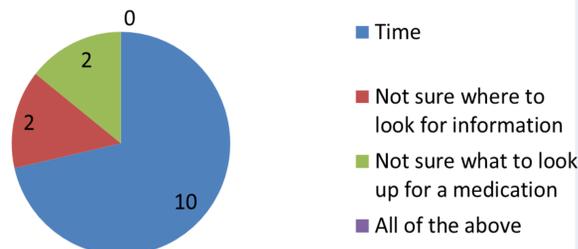
## Results

**Pre implementation responses: Constrains to seek medication related information prior to giving a medication dose**

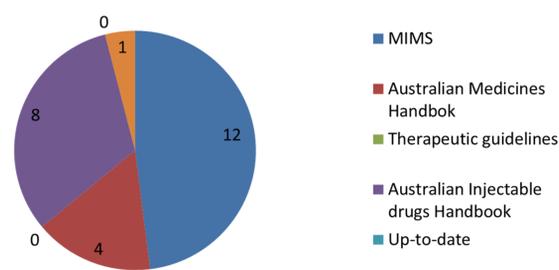


**Post intervention, more nursing staff were aware of relevant medication related resources and appropriate monitoring required**

**Post implementation responses: Constrains to seek medication related information prior to giving a medication dose**

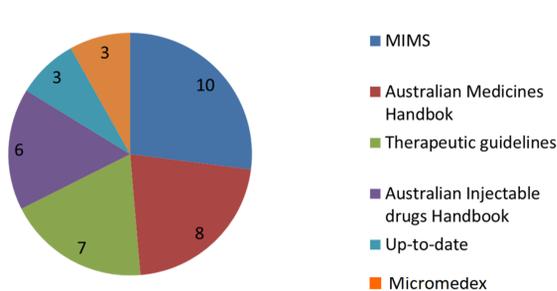


**Pre intervention: Responses to usage of Medication resources by Nursing staff on GRU**



**Post intervention, nursing staff started gathering information from a variety of resources other than MIMS**

**Post intervention: Responses to usage of Medication resources by Nursing staff on GRU**



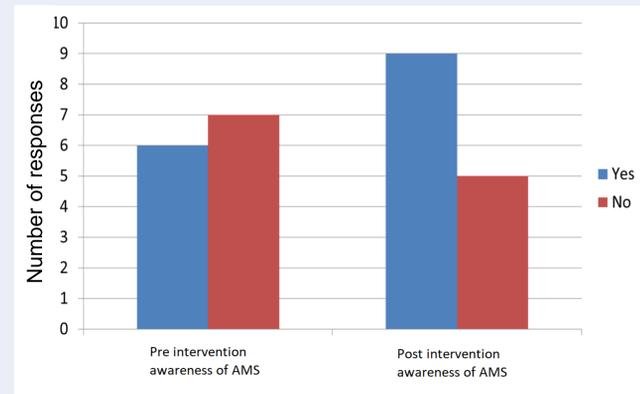
Example of interactive teaching exercise  
**Insulin: "Find your Pair"**

Participants were divided in two groups. One group received cards with type of insulin on it and other group received information regarding duration of action of insulin and administration with regards to meal timing. Groups were then invited to find their pair.



## Results continued..

Antimicrobial Stewardship (AMS) was launched at our local health district a few years ago. We wanted to ascertain if the Nursing staff were aware of AMS and what different colour codes for antimicrobials meant in Guidance MS<sup>®</sup> (antimicrobial monitoring and guiding tool).



Additionally, there was a **40% increase in awareness of pharmacist documented medication history**. This was helpful for nursing staff to know if a patient was on a particular medication prior to the admission. This had an advantage in resolving supply issues with medications not stocked by hospital pharmacy and if patient had brought in their own supply.

Positive impact on patient safety was identified by a **9% reduction in medication related incident reports (IIMS)** as compared to similar time frame during previous year. Although IIMS cannot be a perfect measure to establish success of an initiative, the results are encouraging.

**100% of nursing staff** indicated a greater level of understanding about the presented topic post evaluation.

- Ripple effect on reduction in medication errors, improved understanding regarding monitoring required

## Conclusion

This interactive method of in-service delivery not only increases knowledge retention rate amongst nursing staff, but also reduces time required by pharmacist to prepare these in-services.

With the versatility of this teaching methodology, we believe it will have a wider application in other specialties too. Interactive exercises were helpful in promoting an informal learning environment and improved relationship between nursing and pharmacy.

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