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# Education Bulletin – December 2024

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# General Healthcare Education

## Can ChatGPT give savour to the word salad?

**Source:** Computers and Education

**In a nutshell:** “Word salad,” is the derogatory term applied to a banquet of verbiage made up of interchangeable abstract nouns, with little or no substance or sustenance in them. It’s the mental equivalent of iceberg lettuce and cucumber without the steak and chips. In this study a team of researchers, led by Francisco Garcia-Varela, from the Pontifical Catholic University of Chile, attempted to see if ChatGPT could help bridge the gap between abstract concepts and real life. They developed a protocol for ChatGPT to help lecturers take abstract concepts and make them more relevant for students. ChatGPT helped the lecturers refine their responses from abstract to more concrete terms “enhancing clarity and engagement.” The researchers concluded that the “ChatGPT-4 protocol effectively bridges the gap between abstract pedagogical theories and practical classroom application, training teachers to use vivid descriptions, relatable scenarios, and tangible examples.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.compedu.2024.105182>

## Reviewing the evidence on ChatGPT

**Source:** Computers and Education

**In a nutshell:** Also looking into ChatGPT were a team of researchers, led by Ruiqi Deng, from Hangzhou Normal University in China. They reviewed 69 articles on the use of ChatGPT and concluded that overall it improved academic performance, “affective-motivational states,” and “higher-order thinking propensities.” However, it also reduced mental effort and had no significant effect on self-efficacy.

You can read the abstract of this article at

<https://doi.org/10.1016/j.compedu.2024.105224>

# Medical Education

## How do medical students see the homeless?

**Source:** The Clinical Teacher

**In a nutshell:** Objects of pity, the authors of their own misfortune, the neglected mentally ill, or just ordinary people down on their luck there are any number of ways of viewing the homeless. In this study David Bronstein, from George Washington University in the US, led a team of researchers investigating attitudes to the homeless among 238 medical students, resident doctors, and consultants. They found that “overall perceptions of homelessness across the entire sample were positive and not greatly influenced by the level of training during a medical career. Medical students across classes were largely in agreement and there was a noticeable increase in positive perceptions for students engaged in clinical rotations.”

You can read the abstract of this article at

<https://doi.org/10.1111/tct.13828>

## “Pick me! Pick me!” But what’s it like on the other side?

**Source:** BMC Medical Education

**In a nutshell:** In this study Abdulrahman Alaseem, from King Saud University in Saudi Arabia, led a team of researchers who interviewed various programme directors (surgical and non-surgical) about what made an ideal candidate for a resident doctor in their department. Both surgical and non-surgical programme directors said that the applicant’s attitude and professionalism was the most important thing they went on when making a decision. For surgical interviewers doing a rotation in their department was the second-most important factor, whereas for non-surgical programme directors the second-most important factor was performance in their clinical rotation. Surgical programme directors were more likely to prioritise research projects than non-surgical programme directors.

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06234-z>

## Professionalism on placement

**Source:** The Clinical Teacher

**In a nutshell:** In this study Lauren W. Cochran, from City University of New York led a team of researchers investigating professionalism among medical students doing their clinical placements. The researchers analysed the reports of the students about their placements and from 753 reports found 176 that mentioned professionalism. Of these only 29 provided a detailed description, with an anecdote or example. From the more detailed comments seven core themes emerged which were:

* Managing time
* Following through on expectations
* Eager to engage
* Work ethic and efficiency
* Effective communication
* Going above and beyond
* Situational awareness

You can read the abstract of this article at

<https://doi.org/10.1111/tct.13830>

## Does peer teaching help the students as much as the teachers?

**Source:** BMC Medical Education

**In a nutshell:** Peer teaching – medical students teaching other medical students – has a number of benefits; not least letting lecturers have half an hour on their Christmas cards before the last post. Those doing the teaching have been found to benefit from it, but what about those on the other end of the process? In this study Karl Aharonian, from the Kirk Kerkorian School of Medicine in Las Vegas, led a team of researchers studying 57 first-year medical students. The students were divided into two groups. One group took part in peer-led teaching sessions, whilst the other did not. The group who had peer-led sessions did better on a basic-science test but not on a more advanced test of “organ systems physiology.” The researchers concluded that peer teaching could “effectively enhance foundational science understanding but may be less impactful for advanced topics.”

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06069-8>

## When step by step stands you in good stead

**Source:** BMC Medical Education

**In a nutshell:** In this study a team of researchers, led by Xin Li, from Zhengzhou University in China, evaluated the effectiveness of a step-by-step approach in teaching transvaginal ultrasound, compared to a more traditional one. 50 postgraduate reproductive medicine students took part in the study. They were divided into two groups. One group was taught using the step-by-step approach, the other in the traditional fashion. The researchers found that the students taught using the step-by-step approach did better in theory, skills, and comprehensive assessment and rated the instructor’s teaching ability and methods significantly better than the control group did. What the patient on the other end of it all made of it is anybody’s guess; one can only hope that her top half was wrapped up warm when the students used the step-by-step method.

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06257-6>

## Getting to grips with systems-based practice

**Source:** The Clinical Teacher

**In a nutshell:** In the US doctors are taught – and assessed – on something called systems-based practice (SBP). In this study Ami L. DeWaters, from Penn State College of Medicine, led a team of researchers interviewing 42 people (all of whom were involved in graduate medical education) about it. Five themes emerged from the interviews which were:

* SBP remains a challenge to define
* SBP may be intuitively understood, particularly when framed at a microsystems level
* SBP aligns with the Health Systems Science framework
* SBP learning must be intentionally integrated into the clinical learning environment through onboarding
* Multidisciplinary settings and work processes are critical to engage in SBP

You can read the abstract of this article at

<https://doi.org/10.1111/tct.13840>

## Can you trust entrustable professional activities?

**Source:** The Clinical Teacher

**In a nutshell:** Entrustable professional activities (EPAs) are tasks which professionals should be able to fulfil at certain points during their career. In this study a team of researchers, led by Jenny McDonald, from Western Sydney University, analysed written feedback for two EPAs – admitting or holding a consultation with a patient, and writing a discharge summary. “Written feedback was provided for 89.5% of 997 EPAs. The proportions of feedback types to support learning were as follows: feedback related to what was done well (75.6%), areas for improvement (27.7%) and next steps (17.4%). Only 10% of EPAs received all three types of feedback. EPAs completed independently were more likely to receive any feedback. Feedback for supervised EPAs was more likely to include areas for improvement or next steps. Qualitative analysis identified two themes: effective feedback for present and future performance with detailed description of performance or targeted advice, and lack of specific guidance for improvement with affirmative statements or non-specific directions.”

You can read the abstract of this article at

<https://doi.org/10.1111/tct.13837>

## Beefing up clinical supervision

**Source:** The Clinical Teacher

**In a nutshell:** We all need a comfortable shoulder to cry on, and a wise head to steer us in the right direction; preferably not simultaneously. Clinical supervisors often fulfil this role and in this study a team of researchers – led by Tim Clement from the University of Melbourne – studied a new scheme to provide more in-depth training to them. The scheme had a three-tier tapered design: a foundational self-paced online course; online, interprofessional learning communities; and a Graduate Certificate in Clinical Education. People who took part in the scheme “reported greater consciousness of their teaching practices, made changes to their practice, and the interprofessional learning communities allowed better integration of practical knowledge with the formal knowledge from the foundational course. Systemic outcomes included the creation of informal educator networks and the diffusion of ideas and practices within the hospital.”

You can read the abstract of this article at

<https://doi.org/10.1111/tct.13838>

## Personality and uncertainty

**Source:** BMC Medical Education

**In a nutshell:** One of the many joys of televised whodunnits is that all the loose ends are tied up at the end of the programme and everyone gets their just deserts. “The good ended happily, and the bad unhappily,” as Miss Prism said in Oscar Wilde’s *The Importance of Being Earnest* “that is what fiction is.” Real life does not always have this degree of certainty and in this study Julia Gärtner, from Hamburg-Eppendorf Medical University Centre in Germany, led a team of researchers investigating the links between personality traits and “the need for cognitive closure,” in a study of 373 final-year medical undergraduates. They found that openness, extraversion, and honesty/humility were all linked to a reduced need for certainty whereas “emotionality,” and conscientiousness were both linked to an increased need for certainty. Women had a higher tendency for needing closure when they had high levels of emotionality.

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06283-4>

## Jittery in Jordan, anxious in Amman

**Source:** BMC Medical Education

**In a nutshell:** In this study a team of researchers, led by Yasmeen Dodin, from King Hussein Cancer Centre in Jordan, surveyed 618 medical students about their mental health. “48.4% screened positive for depression, 36.7% for anxiety, and 63.6% for [a] high level of stress. Slightly over half experienced somatic symptoms, and 28.6% exhibited signs of eating disorders. Roughly 26% had suicidal thoughts.” Only 5.7% had a balanced diet, and only 17% engaged in “vigorous physical activity.” Just under a quarter (24.6%) smoked. “Stress, insomnia, eating disorders and cigarette smoking were significantly associated with depression, anxiety, and somatization. Higher physical activity scores were associated with lower depression risk. Females were significantly more likely than males to fall in[to] more severe somatization categories.”

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06273-6>

## Teaching end-of-life care

**Source:** BMC Medical Education

**In a nutshell:** In Taiwan they still seem interested in end-of-life care and in this study Yuan-Ping Chao, from the National Defence Medical Centre, led a team of researchers investigating a new method for teaching medical students about it. “The curriculum, called the video-triggered expert-led debrief module, included a video scenario on end-of-life care, insights shared by three interprofessional experts, and students debrief.” The researchers found that the programme led to significant improvements in students’ knowledge. “Before the module, students’ understanding was superficial and focused on literal meanings. Three themes emerged in what they wanted to know: medical decision-making, ethics and laws, and empathetic communication, with eight subthemes. After the module, three themes and six subthemes were identified in the “what I learned” section. Students reported gaining knowledge related to ethics and laws, and empathetic communication.”

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06304-2>

## Case-based learning and cake-cutting campaigns

**Source:** BMC Medical Education

**In a nutshell:** Wenzhou Medical University’s Alberta College was the setting for this study. In it Zhipeng Liu, from Wenzhou Medical University, led a team of researchers investigating the effect of case-based learning in teaching clinical students preventative medicine. 79 students took part in the study, engaging in 10 case-based learning sessions. They found that the students marks rose from 69.2 under the old approach, to 77.62 under the case-based approach. The students’ academic performance, problem-solving capabilities, research cooperation and communication, and learning attitude all improved significantly following case-based learning and the students believed that their overall competence had increased significantly.

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06372-4>

## When OSCEs got grand

**Source:** BMC Medical Education

**In a nutshell:** Some people collect diagnoses with the avidity of bingo players ticking off numbers. Traditional objective structured clinical examinations (OSCEs) don’t always acknowledge this, with doctors only being examined in one specialty at a time and patients conveniently presenting with only one problem. Enter the Grand OSCE. This has been tried out at Koya University in Iraq, and features a whole bunch of pretend patients suffering from all sorts of ailments, some of them with several simultaneously. In this study Dawan J. Hawezy, from Koya University, led a team of researchers investigating the effectiveness of this approach. 104 medical students took part in the study with 80% saying the fairness of the assessment was “good.” 85.6% said the new exam covered a wide range of skills. 76.85% thought the patients “cooperated.” 75% of the Koya University lecturers “strongly agreed that the examination adequately covered a wide variety of clinical abilities,” as did 82% of the external examiners.

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06388-w>

## Es possible que sienta un rasguňo agudo

**Source:** BMC Medical Education

**In a nutshell:** It’s now estimated that there are 62.6 million Hispanic people in the US which can make communication at the doctors difficult though and in this study Juan Carlos Martinez, from Wyckoff Heights Medical Centre in Brooklyn, led a team of researchers examining ways to help. They studied the effectiveness of virtual peer-led medical-Spanish education. The course consisted of 10 one-hour lectures, one a week, delivered via Zoom. “Through realistic clinical scenarios, students practiced and reinforced their clinical knowledge in Spanish. The final exam involved a 20-minute patient encounter on Zoom, with the instructor acting as the patient and the student as the physician.” The students became significantly more comfortable in taking a medical history and carrying out a physical examination in Spanish and “most students praised the convenient and effective online format.”

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-05918-w>

## Building bridges in the backwoods

**Source:** BMC Medical Education

**In a nutshell:** In this study Brendan Carrigan, from Griffith University in Australia, led a team of researchers investigating the key elements underpinning junior doctors’ placements in small communities. “Eleven participants fulfilling key roles within LICs, including clinical school directors, program coordinators, and clinical educators, were recruited for the study. Thematic analysis indicated that it is Connectivity, expressed through three subthemes, Fostering Links, Building Trust, and Facilitating Change, which underpins sustainable LICs [placements] in small communities.”

You can read the whole of this article at

<https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-024-06373-3>

# Nurse Education

## Here’s one AI wrote earlier

**Source:** Nurse Education in Practice

**In a nutshell:** Patient information is the latest field for AI to get its teeth into and in this study a team of researchers, led by Gamze Saatçi from Kırşehir Ahi Evran University in Turkey evaluated its use by nursing students as they wrote patient information as part of their coursework. 180 nursing students took part in the study. 89 used books, journals, and web sites to prepare patient information with the rest also being allowed to use AI. The researchers found that the patient information produced by the students who were allowed to use AI was more understandable, more “actionable,” by patients, and of better quality than the material produced by the students who had not used AI.

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2024.104186>

## Can concept maps point the way to assessment?

**Source:** Nurse Education Today

**In a nutshell:** An old joke has a graffiti artist spraying “THINK AHEad” as he runs out of wall to spray on. Concept maps – a graphical representation of knowledge on a particular topic – can lead to similar problems among the less spatially-aware, but can also be a good way of working out whether students have got to grips with the entirety of a subject. In this study Anna V. Chatzi and Claire McNamara from the University of Limerick studied the use of concept maps in assessment in a sample of 185 first-year nursing students, alongside a more conventional multiple-choice exam. The researchers concluded that “concept maps’ structure allows the assessment of the totality of concepts of a specific area/section of the material. MCQs can assess one aspect/detail of a concept at a time without the limitation to draw material from a specific area/section. When used together, educators can use these different features in assessing student's knowledge/understanding on the totality of taught material. Additional advantage of the concept map is its straightforward, objective, and quick correction process.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2024.106479>

## Is EPR easier than CPR?

**Source:** Nurse Education in Practice

**In a nutshell:** Depending on which is more frightening to you – computers or being the centre of attention – filling out an electronic patient record may, or may not, be preferable to carrying out cardio-pulmonary resuscitation. It was the former Ergun Kaplan and Fatos Korkmaz, from Haceteppe University in Turkey, investigated in this study. They interviewed 12 nurses about their experiences using electronic patient records. The nurses reported difficulties related to inadequate physical infrastructure and software issues in the clinical setting. However, they acknowledged that electronic patient record systems enabled them to collect accurate, complete, and traceable data, improved the quality of care, and saved time for care. The nurses said that they “required training on these systems during their undergraduate education, especially learning from their colleagues. Participants suggested that teaching should involve the development of demo software.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2024.104197>

## Which is better, Escape from Alcatraz or Listen with Mother?

**Source:** Nurse Education in Practice

**In a nutshell:** In this study Nilgun Dogu, from Ankara Medipol University in Turkey, led a team of researchers comparing the effectiveness of an escape room and storytelling methods in teaching nursing students about the body’s response to stress. 35 second-year nursing students took part in the study. They were divided into two groups. One group took part in an escape room whilst the other learned about stress using storytelling. The researchers found that “the students in the escape room group scored significantly higher than those in the storytelling group.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2024.104209>

## The nurses tackling the resistance

**Source:** Nurse Education in Practice

**In a nutshell:** In this study Renu Gupta, from the Institute of Human Behaviour and Allied Sciences in Delhi, led a team of researchers studying the effectiveness of a new, online, course aimed at teaching nurses about antibiotic resistance. 517 nurses completed a “gap analysis,” which was used to construct the course. After taking the course the nurses showed considerable improvements in their knowledge of antimicrobial resistance, specimen selection, culture indications, and collection techniques.

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2024.104223>

## The patient-safety gap

**Source:** Nurse Education Today

**In a nutshell:** Whether it’s losing weight, stretching, drinking more water, or becoming better organized nothing illustrates the gap between who we would like to be, and who we are, than New Year’s resolutions adopted with vigour on January 1st and ditched with (self)-disgust on January 20th, or thereabouts. But is there a similar gap between classroom and placement when it comes to nursing students’ views on patient safety? In this study a team of researchers, led by Awatif M. Alrasheeday, from the University of Hail, in Saudi Arabia, attempted to find out. They studied 360 nursing students and found that patient-safety culture was significantly higher in the classroom than in the clinical setting. The students in the classroom scored higher for “clinical safety skills,” “effective communication,” and “safety-risk management.” However those in clinical settings did better when it came to “teamwork with other healthcare professionals,” “understanding human and environmental factors,” and “recognising and responding to immediate hazards.” 95.8% of the students believed in the benefits of discovering and reporting medical errors. However a “considerable number,” expressed concerns about doing this including 87.5% who feared disciplinary action and 87.2% who were worried about getting the blame themselves.

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2024.106539>

## The nursing students battling bullying

**Source:** Nurse Education Today

**In a nutshell:** Neutrinos are sub-atomic particles so small and diffident that they pass through human bodies, steel, and rock (all of which, atomically speaking, are mostly holes) with no impact whatsoever and have to be detected by finely-tuned implements installed in mines. Meteorites, on the other hand, crash into people with gay abandon, doing huge amounts of damage wherever they end up. It’s fair to say that those of us who like the quiet life are more like neutrinos, whereas bullies tend to be more like meteorites. In this study Jinlong Zheng, from Xiangyang Central Hospital in China, led a team of researchers investigating how thirteen nursing students on their clinical placements coped with bullying. Five themes emerged from the researchers’ interviews with the students:

* Negative emotional experiences of bullying
* The effect on clinical placements
* The effect on “professional ideology”
* Lack of effective coping and support
* The cultivation and growth of psychological resilience

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2024.106538>

## Advanced breast-cancer education

**Source:** Nurse Education Today

**In a nutshell:** In this study a team of researchers, led by Sarah Sheehan, from Dublin City University, evaluated the effectiveness of an online programme designed to teach nurses about advanced breast cancer. 30% of people with breast cancer go on to develop advanced breast cancer yet “despite the … need for specialist care, access remains inconsistent due to disparities in specialist cancer nurse education.” 272 nurses started the ABC4Nurses online programme, with 79 completing it. The programme – which was made freely available online in English, Czech, Spanish, ad Turkish – was made up of six modules, and was positively evaluated. “Participants commended the accessibility, quality of materials, and relevance of content to clinical practice. Despite the self-directed nature of the programme influencing progression, participants reported increased confidence in caring for people living with advanced breast cancer.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2024.106533>

## Teaching nurses bioscience

**Source:** Nurse Education in Practice

**In a nutshell:** Once you get past average numbers of ears, legs, and arms and why it’s a good idea not to ingest air or breathe in Rich Tea biscuits it’s easy to find yourself in deep water when it comes to anatomy and physiology. Nursing students can struggle with bioscience and in this article Kieran R. Manchester and Debbie Roberts, from Bradford University, reviewed the evidence on this topic. They found that each teaching method had something to recommend it. “Active learning methods generally improved student engagement, understanding, and retention of knowledge. Technology-enhanced learning provided immersive and interactive experiences, despite cost and scalability challenges. Traditional teaching methods were valued by students for their insights and application to clinical practice. Blended learning approaches catered to diverse learning preferences and improved learning.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2024.104226>

## Cultural intelligence – when the real world trumps the classroom

**Source:** Nurse Education Today

**In a nutshell:** In this study Ilona Cieślak, from the Medical University of Warsaw, compared the effects of formal and informal education on nursing students’ cultural intelligence. 1,373 students from 39 Polish nursing schools took part in the study which found that the largest increase in cultural intelligence came from “interactions with culturally diverse people.” The smallest effect came from “multiculturalism-related content delivered during the course of study.” Nevertheless, the researchers concluded that there was “a significant correlation between formal education and cultural intelligence, especially for the combination of formal and informal education.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2024.106537>

## Stress and collaboration – make or break?

**Source:** Nurse Education Today

**In a nutshell:** In this study F.S. Dijkstra, from Saxion University of Applied Sciences in the Netherlands led a team of researchers investigating 25 nursing students’ experiences of “learning to collaborate under stress.” They found that the students could be divided into two categories *Practice makes perfect, so let’s do it* and *Practice is needed, but it scares me*. The former saw learning to collaborate under stress as a challenge, whereas the latter “appeared anxious despite feeling the necessity to learn this.” The researchers pointed to the importance of “a learning environment in which mistakes can be made.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nedt.2024.106534>

## When case-based learning takes to the platform

**Source:** Nurse Education in Practice

**In a nutshell:** Many of us will have had the experience of adjusting the distribution of cases on a train’s luggage rack only to find some bozo cutting up rough about their laptop/human kidneys/pet chihuahua contained therein. All of which brings us to this study on case-based learning and platforms from a team of researchers, led by Ying Liu, from Fujian Medical University. They studied 88 undergraduate nursing students undertaking case-based learning. 45 of them received case-based learning in the classroom, with the remainder using an online platform. The researchers found that the online group showed significant improvements in self-efficacy and clinical decision-making.

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2024.104236>

## Taking a needle into the escape room

**Source:** Nurse Education in Practice

**In a nutshell:** Reactions to escape rooms can vary from the eager beavers keen to demonstrate their suitability for MI5, to weary cynics sitting in the corner with the paper secure in the knowledge that legislation apropos false imprisonment (at least in the UK) means they’ll get out by home time whatever happens. Whipping out a hypodermic needle might not be everyone’s first reaction but in this study a team of researchers, led by Asena Köse from Ataturk University in Turkey, studied the effectiveness of an escape room at teaching nursing students about intravenous drug administration. The students were divided into two groups. One group got traditional education, whereas the other took part in an escape room designed to teach them about this topic. The researchers found that the students in the escape room significantly outperformed the other group in a test. “The students found escape games enjoyable, motivating, and effective in improving knowledge retention and stress management skills.”

You can read the abstract of this article at

<https://doi.org/10.1016/j.nepr.2024.104228>