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POSTER

### Role-play in communication skills training: An exploration of nurses' perceptions and experiences

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Experiential teaching methods are very effective in improving nurses' communication skills. Role-play is a potent learning opportunity, allowing practice in a safe environment whilst acknowledging and building on experience. However, it continues to invoke anxiety and resistance. The aim of the present study was to explore nurses' concerns about role-play and to provide a qualitative evaluation of their experiences during a communication skills training course.

**Method:** Participants undertaking a communication skills training programme were invited to write down their concerns regarding this teaching method. At the end of the course focus groups of participants were set up. Data relating to role-play were extracted and analysed to provide an in-depth evaluation of the nurses' perceptions.

**Results:** Participants were very anxious about being involved in role-play. Anxiety was related to feelings of embarrassment, appearing foolish, not knowing what to say and a general perception that role-play was not realistic. Some participants had experienced role-play previously and found it threatening, leaving them feeling de-skilled. By the end of the course a more positive attitude was evident. Role-play was still perceived as stressful but participants valued the experience and found it to be useful and effective. The opportunity for participants to use their own experiences and the support provided by both the group and facilitators emerged as being important.

**Implications:** Previous research has highlighted the importance of role-play as an effective teaching method. It is important that facilitators are aware of the issues involved in using role-play. The overwhelming majority of nurses in this study agreed with this understanding, stating that role-play was a valuable and beneficial aspect of the course. It was recognised to be a potent learning opportunity, allowing practice in a safe environment whilst acknowledging and building on skills and experience. For some, the anticipation of entering the role-play situation invokes anxiety and resistance. Participants state that these fears are diminished when facilitators ensure that the learning environment is both safe and supportive.

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### A study day for nurses caring for patients experiencing chemotherapy induced alopecia and the effective use of scalp cooling equipment

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**Purpose:** Patients receiving chemotherapy drugs that will potentially cause alopecia are given the option of using scalp cooling equipment to try and prevent hair loss. Therefore the nurses caring for these patients require an understanding as to why alopecia occurs and the most effective use of scalp cooling equipment.

The study day serves as a tool to develop the nurse skills.

**Method:** The nurse will undertake an update/study day once a year. The update allows discussion on the correct use of equipment and dissemination of the Cancer Centres' research, practice based policy on scalp cooling. The policy and study day have been developed by chemotherapy specialist nurses and are reviewed yearly. The study day offers theoretical knowledge and practical demonstrations of the equipment. It will be evaluated with a short questionnaire distributed at the start of the update and a two month follow up questionnaire.

**Results:** The study day will address the concerns about the effectiveness of scalp cooling and the need to know how to use the equipment properly. A lot of interest has been expressed in the study day which suggests there is a real need. Results from the evaluation will indicate if it was successful.

**Conclusion:** Regular updates and teaching will improve the efficiency of the scalp cooling equipment. There is a necessity to address the problem of alopecia. Developing nurses skills in supporting the patient can only add to improving the patients quality of life.

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### Do you see what I see? Can nurses provide an effective evaluation of their own assessment skills?

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The use of tape-recorded nurse-patient assessment is a valid and reliable method for evaluating and improving nurses' communication skills and has been successfully integrated into a number of communication skills training programmes. However, the evaluation and scoring of each audio tape is a time consuming task that may limit access to such programmes. Self-evaluation may also enhance the learning experience by increasing individual self-awareness and may therefore be an effective way to enrich communication skills training programmes.

**Aim:** To explore the relationship between experienced raters' evaluation and the nurses self evaluation of a nurse/patient assessment.

**Method:** After undertaking a 3 day communication skills training programme, participants (n=50) were asked to tape record an assessment interview with a patient. This was scored using The Communication Skills Rating Scale by both the participant and an experienced rater. Data were analysed using the Mann-Whitney test to identify any significant differences between the ratings on each of the key areas as well as on the overall score and the Spearman's Rank Coefficient Correlation to explore the degree of correspondence between the two scores.

**Results:** The mean scores on each key area for participant and expert ratings were calculated. No statistically significant differences were found on any of the key elements, nor on the overall rating.

A statistically significant correlation was found between the overall expert rating and the participant rating using Spearman's  $\rho=0.24$ ;  $p<.05$ .

It would appear that there is a good deal of correspondence between the participants' self-assessment and the expert ratings. Thus, it would seem that after undertaking communication skills training, nurses can provide a valid evaluation of their own assessment technique. The demand for communication skills courses is likely to increase and so any reduction in the assessment load of course facilitators may allow greater numbers of people to be accepted onto such training programmes.

This was a relatively small sample and was self-selected which may impact somewhat on the generalisability of the results. However, nurses in this study were not given any training specifically in the use of the rating scale. If this was incorporated as part of the learning experience, there may be even greater correspondence between ratings. Such considerations warrant further research.

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### Israeli oncology nurses fight fatigue

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Israeli oncology nurses who participated in fatigue related activities such as FIRE and Action for Fatigue, took the initiative to promote the awareness, knowledge and skills of oncology nurses.

Four workshops were implemented as part of the educational activities of the Israeli Oncology Nursing Society.

The objectives were: to learn about the etiology and models of fatigue and treatment modalities. To improve nursing intervention. To refine presentation skills and to explore the possibility of implementing programs locally.

The program was designed as an intensive, interactive two day workshop. 25 participants from different settings: hospitals and the community; were requested to present one or two articles from current research and clinical fatigue literature. In addition experts on Anemia treatment and how to "perform" in front of a group presented a few lectures. Support was obtained from a pharmaceutical company.

The nurses evaluated the program by a questionnaire and the overall results showed high satisfaction with the additional knowledge emphasizing the significance of fatigue. The importance of assessment and documentation of the problem and new nursing interventions were highlighted. The opportunity to present in public was welcomed since for some it was the first time.

Presently we are in the process of evaluating the benefits in the clinical setting.