

An aerial photograph showing a coastline. The top half of the image is dominated by deep blue water with white-capped waves breaking against the shore. The bottom half shows a rugged, brownish landscape, likely a coastline with hills or mountains. The overall scene is captured from a high angle, looking down at the earth.

# Model for a Reproducible Curriculum Infrastructure to Provide International Nurse Anesthesia Continuing Education

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# Executive Summary

- Problem
  - Anesthesia providers have a low status in many developing countries.<sup>1</sup>
  - Increasing evidence that the application of knowledge in developing countries is failing<sup>1</sup>
  - Poor initial training

– <sup>1</sup>Walker, I., Wilson, I., & Bogod, D. (2007). Anaesthesia in developing countries. *Anaesthesia*, 62 (Suppl. 1), 2-3.



# Problem (cont.)

- Many anesthetists in developing countries have poor access to educational materials.
- Unrelenting workload
- Lack of standardized CE in developing countries

# Executive Summary

- Purpose
  - To develop a model for providing nurse anesthesia continuing education (CE) that can be reproduced and used in any developing country



# Market/Risk Analysis

- Market: past, present, & future:
  - Past
    - Historically, face-to-face education
  - Present
    - Higher education has been shifting (Lenn, 1997)
  - Future
    - Internet usage in developing countries

# Project Objectives

- 1) To develop a continuing education needs assessment tool
- 3) To develop an initial CE module library by 2008
- 5) To increase the knowledge base of Phnom Penh Cambodian nurse anesthetists as measured by pre and post-tests



# Project Objectives (cont.)

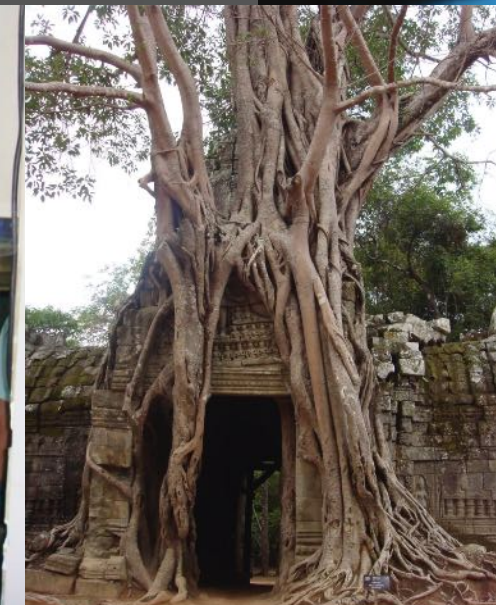
- 4) Secure adequate volunteer assistance, defined as providing a volunteer-delivered CE program within six months of the request
- 5) To increase the knowledge base of the nurse anesthetists in two new developing countries per year starting in 2009
- 6) To obtain 90% program participant satisfaction by 2013
- 7) To develop standards for CE in developing countries

# Market/Risk (cont...)

- Risks:
  - Distance from the end-user
  - Limited volunteer base
  - Language barriers/lack of bilingual staff
  - Program developer's lack of experience with Information Technology (IT)
  - Exchange rates that fluctuate
  - End-user lack of Internet access
  - Presenter's understanding of cultural differences



# Action Plan





# Action Plan

- “Give a man a fish and feed him for a day. Teach him how to fish and feed him for life”<sup>1</sup>
- Training the local trainers
- Develop CE Needs Tool
- Determine the CE needs of nurse anesthetists in the developing country
- Develop CE modules with corresponding tests

• <sup>1</sup>Size, M., Soyannwo, O. A., & Justins, D. M. (2007). Pain management in developing countries.

*Anaesthesia*, 62(Suppl. 1), 38-43.



# Action Plan (cont.)

- Recruit volunteer nurse anesthetists
- Administer pretest to CE program participants
- Present CE modules in Phnom Penh, Cambodia
- Immediate posttest to CE program participants
- Administer satisfaction surveys to CE program participants and volunteer nurse anesthetists

# Action Plan (cont.)

- Evaluate data
- CE Needs Tool and CE Modules stored
- Administer six-month posttest to Cambodian CE participants
- Present findings to IFNA and HVO



# Action Plan (cont.)

- Marketing
  - ✓ Health Volunteers Overseas
    - AANA Booth
    - Health Volunteers Overseas Website
  - ✓ IFNA Website
  - ✓ AANA
    - Advertising in the AANA Bulletin

# Action Plan (cont.)

- Evaluation
  - CE Needs Tool
  - Pretest
  - Posttests (Immediate and 6-months)
  - Participant satisfaction survey
  - Volunteer satisfaction surveys
  - CE Module Database on HVO Servers
  - Number of annual CE programs delivered
  - Budget



# Timeframe

- CE Needs Survey in March 2008
- CE modules developed in April 2008
- Pilot program in Cambodia in May 2008
- CE modules and CE Needs Tool from the pilot program have been stored on HVO website
- Data analysis performed and results presented to HVO in August 2008

# Timeframe (cont.)

- 6-month posttest
- All aspects of the project were on schedule or ahead of schedule
- Timeframe for completion of the pilot program was December 2008
- CE programs planned for Bhutan and Ghana



# Results

- Objective One

- ✓ The continuing education needs tool for developing countries
- ✓ Qualitative questions

# Results

- Objective Two

- ✓ CE modules were developed for EKG, Cardiac Anatomy and Physiology, Thoracic Anatomy and Physiology, Local Anesthetics, and Upper Extremity Nerve Blocks.
- ✓ All five CE modules were placed on the HVO website

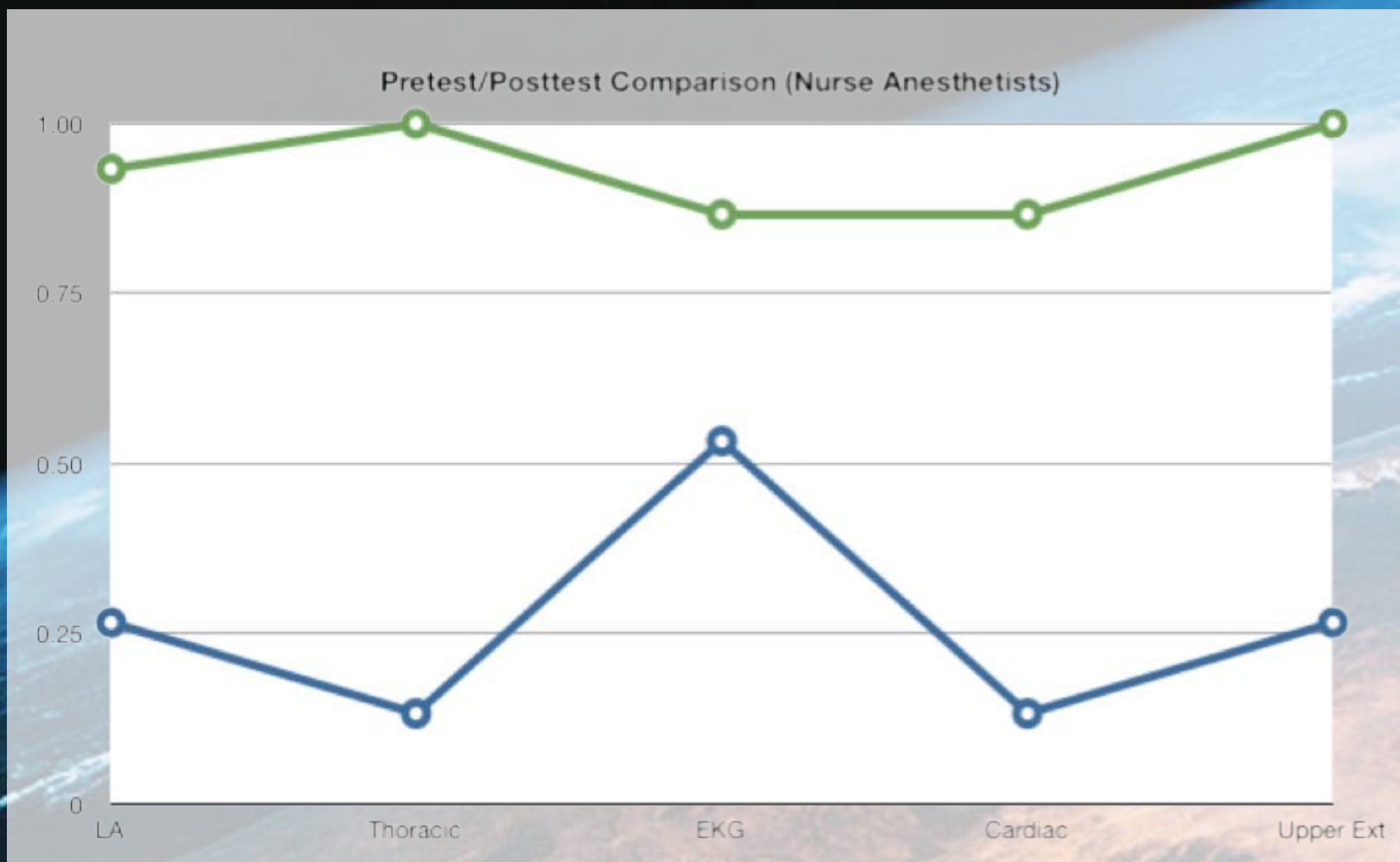


# Results

- Objective Three

- ✓ Piloted in Phnom Penh, Cambodia
- ✓ All participants showed a significant increase in knowledge
  - ✓ Local Anesthetics (Pre = 27%, Post = 93%)
  - ✓ Thoracic (Pre = 13%, Post = 100%)
  - ✓ EKG (Pre = 53%, Post = 87%)
  - ✓ Cardiac (Pre = 27%, Post = 93%)
  - ✓ Upper extremity nerve blocks (Pre = 27%, Post = 100%)

# CE Pretest/Posttest Results





# Results

- Objective Four

- ✓ CE program for Cambodia was requested in November 2007.
- ✓ The Cambodian pilot CE program was delivered in May 2008
- ✓ Vietnam
- ✓ Bhutan

# Results

- Objective Five
  - ✓ Health Volunteers Overseas annual Steering Committee met in August 2010
    - ✓ It was agreed to move the program into Bhutan and Ghana in 2009.
    - ✓ 2010-2011



# Results

- Objective Six
  - ✓ Participant satisfaction surveys were developed
  - ✓ The satisfaction survey
    - ✓ Delivered via Survey Monkey at the end the CE Module delivery.
  - ✓ Responses on survey show 90% satisfaction
  - ✓ The areas with room for improvement
    - ✓ Handouts, in-class questions, facilitation of discussions, and language

# Results

- Objective Seven
  - ✓ This is a long-term objective
  - ✓ IFNA is working to develop international CE guidelines
- Unintended Consequences
  - ✓ Increased presentation length



# Recommendations

- 1) CE Module delivery and students.
- 2) Access of the CE modules on the HVO website.
- 3) CE Needs Tool and Satisfaction Surveys translated into the local language.
- 4) Access email addresses through the IFNA database of its members.

# Recommendations

- 5) The CE module database
- 6) Determine what topics need to be included in the database.
- 7) Advertise for and solicit PowerPoint lecture donations on various topics
- 8) Advertise for and solicit PowerPoint lecture donations on various topics



# Recommendations

- 9) Foster relationships with nurse anesthetists in the developing country
- 10) Hand out the lectures in paper format
- 11) Trips to deliver the CE modules
- 12) Speak slowly
- 13) Expand the CE program

# Maintaining/Sustaining Change

- The Nurse Anesthesia Overseas Steering Committee
  - The project director serves on the Steering Committee for Nurse Anesthesia Overseas
- The project director and the IFNA
- The CE Needs Tool and CE modules
- CE Modules are being added





# Where are we today?

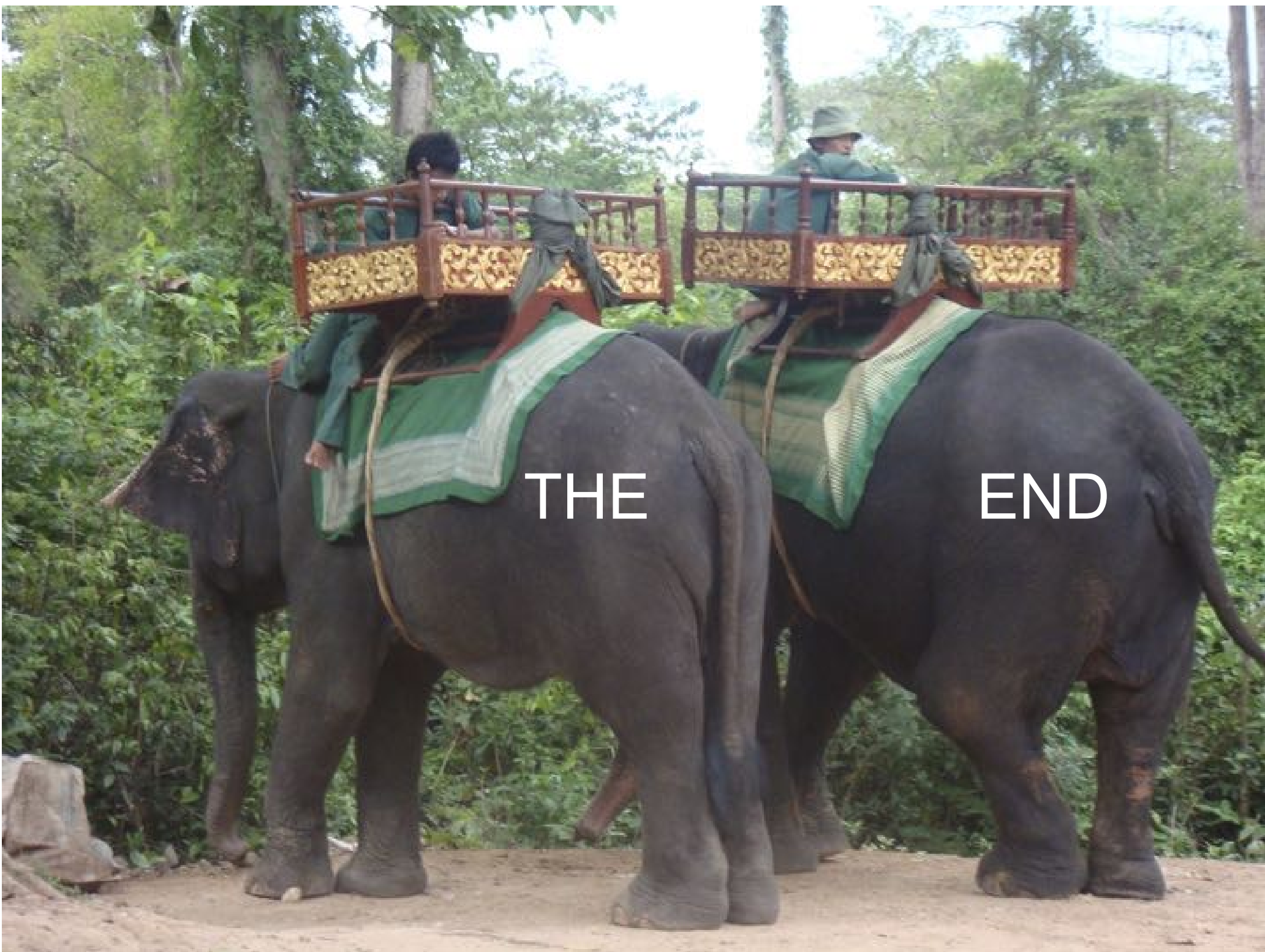
- HVO
  - Vietnam
  - Belize
  - Bhutan
  - Ethiopia











THE

END