

**BE WHAT YOU WANT TO BE**

# **So What's Behind the Mask?**

**Day Surgery Nurses Association Inc. NSW  
Conference: *Education into Practice***



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# Day Surgery

- Anxiety
- Fear
- Foreign
- Unknown
- Unfamiliar faces
- Unfamiliar smells
- Unfamiliar language
- Privacy and clothing
- Being a number

# Personal Reflection

- A nightmare to a dream
  - My son's story
  - My own story

# The Simple Things

- Care at all levels by all personnel
- Communication
  - Verbal/non verbal
  - The initial greeting to discharge
- The environment
- The privacy
- The relatives

# Preparing Beginners - The Fundamentals

- First Years
- No/ minimal previous Experience
- Clinical –simulated only
- School leavers
- Mature Age
- International

# The Focus

- Therapeutic communication skills- integral to every practical skill taught
- The simple things
- Taking off the skin

# Foundation of Nursing Practice

- Outline of the course
  - Patch Adams
  - A ‘crabbit old woman’
  - Holism
  - Simulation- Constructing Reality



# Simulation

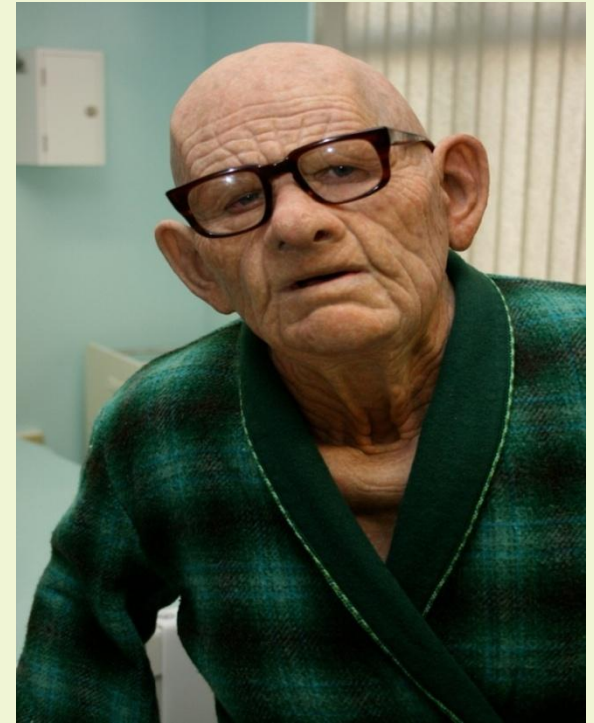
- Constructing reality
- Dress up Box
- The 3 D's
- Simple to total immersion

# Simple

- The Stoma Experience
- A Simple Prop



# Total Immersion through Mask Ed



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# High Fidelity Patient Latex Simulation

- Life-like commercially prepared latex masks and body parts adorned over the teacher/educator as a means to mimic real human situations and responses.
- The latex enables the educator's face to be masked.

# The History

- 7 years in the making
- Iva Sore
- Solid masks
- LATEX

# The Key Elements

- Valuing different learning
- Making sense through reality
- Following a Mask Ed approach

# Uniqueness

- Non rehearsed scripts
- Educator behind the mask
- Interactive
- Immediate
- Real
- SAFE
- Critical thinking
- Unique side effects

# Does it Work ?

- Teaching evaluations- overwhelmingly YES
- Research
  - Teaching and Learning grant



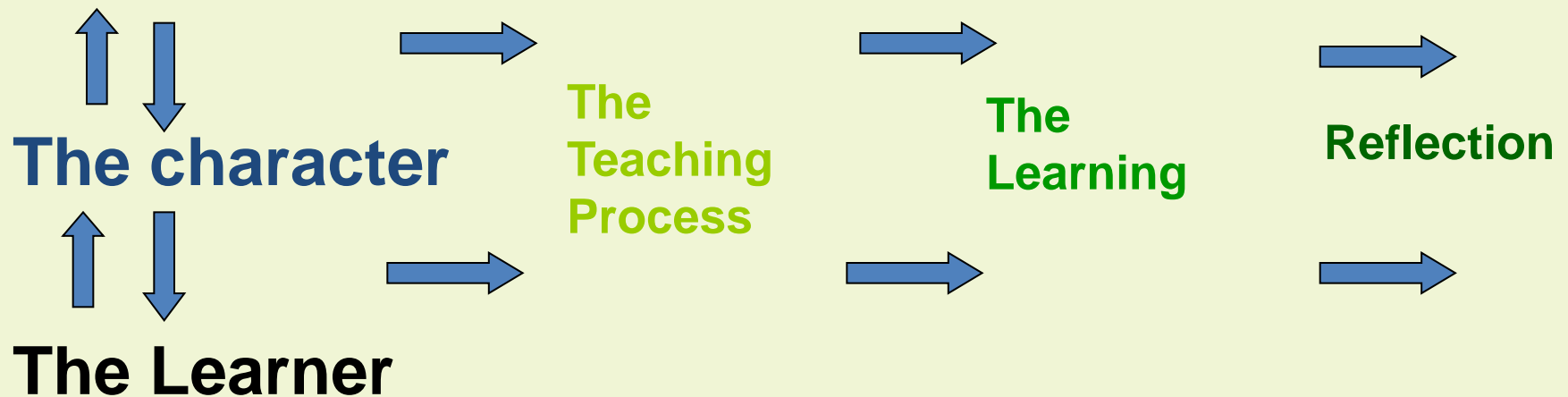
- Teaching and Learning Grant
  - Kerry Reid Searl, Anne Eaton (PI)
  - Lea Veith (RA)
- Undergraduate nursing students-
  - Previous 3 years
  - Face to face Exposure
- Ethical considerations
- 3 focus groups
- Thematic analysis
- Pilot questionnaire- academics



# Findings

- **Core themes**
- Teacher
- Character
- Learner
- Teaching process
- Learning
- Reflection

## The Teacher



# Teacher

- Knowledge of the teacher
- Medium behind the mask
- Directs the learning process
- Understand teaching and learning
- Timing

# Knowledge of the Teacher

## Student 5

- *... it can't just be anyone under the mask ...[the teacher has] got **the knowledge** there, ... she knows which path, what we've got to ask, which path we've got to go down so the experience needs to be under the mask but while keeping it real for us.*

# Learner

- Initial fear and confrontation
- Builds confidence
- Creates and reduces fear
- Takes out of comfort zones
- Touches on emotions
- Prepares for clinical

## Student 4

- I actually think the first initial introduction was fantastic because it was such a **shock** to everybody... nobody knew what to expect ...and it was like, ... this is what you are going to expect to see when you go out into a hospital. You could see this character any day, in any hospital, or health care centre ... and I think that was just great. We just loved that.*

# Character

- Realistic
- Confrontational
- Never the same
- Unpredictable
- Humanistic
- Humorous



## Student 5

- ... **the confrontation** ...making you think ...outside the box, that everything isn't black and white, that sometimes you do have to, ... go a different way about getting the information that you want or to learn things or something like that.

# Teaching Process

- Fun
- Learning styles
- Dynamic- ever changing
- The context
- Capturing moments
- Here and now

# Fun

## Student 1

- I don't learn by sitting in a classroom reading a power point, I like to interact, ... especially when there is fun involved I find it sank in so much more when, ...**it was so much fun** and it was a real talking point, it was a real highlight*

# Learning Styles

## Student 2

- ... it does seem to almost feel as if you are in the situation, and you've kind of taken everything you learnt so far and trying to use it and trying to gather everything you can **by the way they say it**, how they say it, what they're wearing, what they smell like you know. **Feel it, touch it, see it, do it almost.**

# Dynamic

## Student 2

- ... it changes, **it's never the same**, even though we still have Cyril however often we have him, the scenarios changed constantly, and, and so there was just that that continual learning. You never felt like you could get enough of him. Like you just wanted to see him. It didn't matter whose lab he was in, if you got a chance to see him, you'd go and see him cause you'd never, ... take it all in, you just get more and more every time you watch him

# Learning

- The bigger picture
- Beyond the text books
- The simple things
- Critical analysis
- Real
- Safe

- Make mistakes
- Shared learning
- Holism
- Communication
- Embedded

# *The Bigger Picture*

## **Student 3**

- ... *they make you look at the **bigger picture**, not just the person sitting there, ... you listen to what they are telling you and ... clues that they give you about their family situation, and their living arrangements and, you know, whether they have food at home. It just helps you to sort of hone those skills.*



# Beyond the Textbooks

## Student 3

- ... it takes you out of your comfort zone. But I think it also, it gives you an opportunity to learn **things that a text book will never teach** you. ... you'll never learn and get those skills to interact ...you know do the whole holistic nursing you know.

# *The Simple Things*

## **Student 1**

- ... Cyril really reinforces **the simple things** that are so easily overlooked, that that is why it is why it is really so effective. I mean your communication, your touches, your posture, ... just the really simple things that are so easily overlooked. He puts them into the limelight.

# Becomes Embedded

## Student 4

- ... *I work in aged care and I think, one of the things that we learnt ... Cyril saying like, have you put the brakes on the bed? Have you done this, ... And now in my position at my work, one of the things, the first things I think of, are the brakes on, ... you know like these just basic things, are they done? ... And I **do it now without thinking ...***

# Reflection

- Personal reflection - strengths and weaknesses
- Laughter and remembering
- Memory recall when in the real clinical context

# Reflection

## Student 6

- *... it allows you ... to also look at yourself and how you are dealing with that ... you can then also go away afterwards and **analyse yourself ... and you know how you've approached it and what could've done differently.***

# Reflection

## Student 1

- ... we could reflect on ourselves like, almost identify our weaknesses, hey I need to work on this. I need to work on my communication, need to work on my thought processes.

# Where to Now?

- Validation
  - Research and publication
- Transferability
- MaskEd
- Staff development

# Acknowledgments

- CQUniversity Australia
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- Lea Vieth
- Annie Eaton



# A Final Word...

- No matter what we do or say, it is the client that has the last say in how we as members of the health care team make a difference.