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General Healthcare Education

Dragons’ den scheme extended to scientists and nurses

Source: NHS England

Date of Publication: July 2017

In a nutshell: A Dragons’ Den-type scheme designed to help junior doctors develop their ideas and business skills has now been opened up to healthcare scientists and dentists. The programme offers a wide range of support and education including mentoring by leading medical-technology experts designed to give people the business skills and industry know-how they need to turn their bright ideas into reality. Schemes backed so far include Dr Hinnah Rafique’s Help Me I’m a Medic site which aims to widen access to medical careers for poorer students and Dr Lewis Potter’s GeekyMedics network which allows medical students to share skills, knowledge and new techniques to support training and revision. The Clinical Entrepreneur Programme covers all aspects of setting up and running a small business including attracting investors, applying for funding and ensuring appropriate corporate governance.

Health Education England publishes its annual report

Source: gov.uk

Date of Publication: July 2017

In a nutshell: Health Education England (HEE) has published its annual report. Among the highlights are:

- The number of new GP trainees has risen to over 3,000 for the first time ever
- New primary-care roles have been developed including practice nurses and 491 new clinical pharmacists working alongside GPs
- 1,000 nursing associates have been recruited into training
- Over 2,000 nurses have completed their Return to Practice programme
- HEE have been helping junior doctors address their work-life balance
- 600,000 people have received dementia training
- HEE welcome the Leadership Academy this year and published Developing People: Improving Care
- They incorporated the Commission for Workforce Intelligence into the organisation
- 160,000 people have received some education about the 100,000 Genomes project

You can download a copy of the report here.
Inter-professional education in rehabilitation

Source: BMC Medical Education

Date of Publication: July 2017

In a nutshell: Inter-professional education has become much more popular of late as people try to break down the barriers between doctors, nurses and other professional groups. In this paper Sonja Becker, from the University of Freiburg in Germany, led a team of researchers looking into the effectiveness of a team-training programme aimed at healthcare professionals working in rehabilitation clinics. The programme was individualised in content but standardised in its method and processes. It was clinic-specific, task-related, solution-focused and context-oriented. 52 people who had taken part in the programme filled out a questionnaire about it which found that staff in three clinics rated the programme as helpful and saw the moderation, discussions and communications that took place during the programme positively. However in the two other clinics staff did not see the programme as helpful, citing long-term structural problems and a lack of need for team training.

You can read the whole of this article here.

New simulation technologies – what’s just around the corner?

Source: Centre for the Advancement of Interprofessional Education

Date of Publication: July 2017

In a nutshell: This article looks at the potential for new simulation and digital technologies to revolutionise the world of healthcare education leading to more engaging learning with better outcomes and more efficient skills acquisition. The first blended-learning programmes are being produced where learners move from a smartphone app, to engaging in e-learning using virtual reality, into augmented reality combining real-world models and finally into fully realistic live simulated scenarios. Trainee surgeons can already download a free app containing over 40 surgical procedures and some professional bodies have said that if they can’t complete a procedure correctly on a smartphone then they cannot move on to the next, more “hand-on” training. Digital platforms can capture a wealth of data about how learners learn and how they compare with others. This offers the possibility of objective assessment using performance data against specific criteria with chance to assess competence objectively, thus removing the potential for personal bias in signing off an individual as fit for practice. A simulator that objectively measures an individual’s skill in performing CPR has recently been introduced by Laerdal in partnership with the British Heart Foundation. For many years computer based simulators combining use of real surgical instruments, with force-feedback technology to give procedural reality, have been capable of differentiating between novice and expert. These systems are becoming more sophisticated by the day with simulators ultrasound (CAE, Heartworks) now using augmented reality to create even higher levels of reality. The 8th annual conference of the Association for Simulated Practice in Healthcare (ASPiH) will take place in Telford from the 6th to the 8th November 2017 and you can book a place on it here.
Learning-Disabilities Nursing Education

How CitySCaPE can help with learning-disability nursing

Source: Nurse Education in Practice

Date of Publication: July 2017

In a nutshell: People with learning disabilities and/or autism often suffer from poor care compared to the rest of the population. In this study Lorna Saunder and Rachael-Anne Knight, from City, University of London, looked at the effectiveness of a multi-media resource designed to simulate situations student nurses encounter in relation to service users with learning disabilities. The resource was called CitySCaPE (City Simulated Community and Practice Environment). It can be applied to adult, mental-health and childrens’ nursing and is delivered in a blended approach to students in the first part of their programme. 146 students answered questions about the programme and the answers showed that it suited a variety of learning styles, was realistic and improved the understanding of nursing students about the care of people with learning disabilities.

You can read the abstract of this article [here](#).

Medical Education

Foreign doctors’ psychosocial struggles

Source: BMC Medical Education

Date of Publication: July 2017

In a nutshell: Psychosocial medicine is all about assessing how someone’s mental state and social circumstances might be affecting their health. While life might be a bed of roses for neither of them the Duke of Westminster and someone with schizophrenia in a bedsit in Camberwell are, for instance, unlikely to have a similar set of problems. For obvious reasons foreign medical students tend to do worse in written and spoken examinations and in their objective structured clinical examinations (OSCEs) and in this study D. Huhn, from University Hospital Heidelberg, led a team of researchers looking into how well foreign doctors did on tests of psychosocial medicine. The researchers found that the foreign doctors did worse than local ones, particularly in terms of their conversational skills although they did as well as local doctors in a multiple-choice test suggesting that it was communication, rather than knowledge, which was at the root of their problems.

You can read this article [here](#).

How students cope when patients die

Source: BMC Medical Education

Date of Publication: July 2017

In a nutshell: Most doctors start their careers with the intention of curing patients but, by the law of averages, only extremely lucky ones never end up with any of them dying. In this study Nicholas J. Batley, from the American University of Beirut Medical Centre, led a team of researchers looking at the effects of patients’ death on medical students working in the emergency department. They
interviewed 16 medical students and found that the following factors affected their reaction to patients’ deaths:

- Context of death
- Age of patient
- Expectation of death
- First death experience
- Relating patients’ deaths to deaths of family and friends
- Extent of interaction with patient and family members

Deaths in an inpatient setting had more of an impact than ones in the emergency department but reactions within the emergency department were especially powerful when a trauma case was deemed physically disturbing and when family reactions were emotionally moving.

You can read the whole of this article [here](#).

What do we really know about self-regulated learning?

**Source:** BMC Medical Education

**Date of Publication:** July 2017

**In a nutshell:** For some people life is like a mango – something to be seized with both hands and savoured – while others (some might argue more wisely) regard it as more akin to a porcupine to be handled carefully and kept at arms’ length wherever possible. Self-regulated learning relies on students adopting the former approach, taking control of their learning, working out what they need to know and working out strategies for getting to grips with it. But how much do we really know about it? In this study Kenneth K. Cho, from Western Sydney University, led a team of researchers reviewing articles on self-regulated learning. The team found 14 articles which met their quality criteria and found three main findings:

- Levels of self-regulated learning change in the clinical environment
- Self-regulated learning is associated with academic achievement, success in clinical skills and mental health
- Various factors can support self-regulated learning levels in medical students

You can read the whole of this article [here](#).

Using simulation to teach colonoscopy

**Source:** BMC Medical Education

**Date of Publication:** July 2017

**In a nutshell:** In this study Christine M. Zupanc, from the University of Queensland, looked into the effectiveness of simulation for teaching trainee doctors how to carry out a colonoscopy. 11 people who were experienced at carrying out endoscopies and 18 people who had never done one before
took part in the study which assessed four main things: the percentage of polyp markers found; the number of polyp markers found per minute; the percentage of the mucosal surface illuminated by the colonoscope and the percentage of polyp markers illuminated but not identified. There were statistically-significant differences between the novices and experts showing that the simulation had potential both to teach people about carrying out a colonoscopy and to assess their ability to do so.

You can read the whole of this article here.

Medical students’ elective – going for the easier option
Source: BMC Medical Education
Date of Publication: July 2017

In a nutshell: While politicians often talk about making hard choices electorates prove rather reluctant to make them. Rather like Boris Johnson their choices tend to be in favour of both having cake and eating it. But does the same hold true of medical students choosing their electives? Electives are aimed at broadening the education of medical students and students can take a varying number of them over the course of their degrees. In this study Catriona Daly and Jason Last, from University College Dublin, reviewed students’ elective choices and held focus groups with medical students to ask them about their choices. The most-frequently chosen electives were in-programme (i.e. more medical courses) and applied languages. Men and women chose the same type of topics and the focus groups revealed that the main factor behind the students’ choices was workload (or lack thereof). The students also said that grading and assessment criteria had a significant impact on their choices and that a more structured elective programme would be better.

You can read the whole of this article here.

Numbers of clinical academics shrink
Source: British Medical Journal
Date of Publication: July 2017

In a nutshell: The UK Medical Schools Council has been totting up and analysing the numbers of clinical academic staff. The council gathered information from all 33 publicly-funded UK medical schools and found that there were 3,041 FTE clinical academic staff, down 2.1% since 2015 and 4.2% since 2010. Between 2000 and 2016 the number of professors rose by 29.7% but this was offset by declines in the numbers of readers and senior lecturers (-32.9%) and lecturer-grade staff (-32%). Overall 40% of clinical academics are physicians, 9.2% surgeons, 8.1% psychiatrists and 7.4% GPs. London has nearly a third (31.6%) of the countries clinical academic staff.

You can download a copy of the full report here.

Group mentoring and reflection
Source: BMC Medical Education
Date of Publication: July 2017
In a nutshell: In this study Gabriele Lutz, from Witten/Herdecke University in Germany, led a team of researchers looking into the ins and outs of a group-mentoring programme featuring reflective practice for pre-clinical medical students. The researchers interviewed 14 students who had diverse attitudes to “reflective discourse on professional challenges.” Although some of the students liked the programme others had “aversive,” attitudes due to the programme having unclear goals and benefits, not getting on with everyone in their mentoring groups and having traditional views about medical education. The students had several ideas about what could make the programme more effective these included:

- Explaining the program thoroughly
- Setting expectations
- Integrating the reflective discourse in a meaningful way into the curriculum
- Obliging participation without coercion
- Developing a sense of security, trust and interest in each other within the groups
- Randomizing group composition
- Facilitating group moderators as positive peer and faculty role models and as learning group members

When training into hours won't go
Source: BMC Medical Education
Date of Publication: July 2017

In a nutshell: In many parts of the world the number of hours that junior doctors can work is now limited by legislation. Not all senior doctors approve of this and a few are of the “I worked sixteen days and nights back to back and it never did me any harm,” school of thinking (although whether their patients would agree is another matter). And of course not all patient care or training opportunities fit neatly into hour-long segments. In this study Kristen A. Gerjevic, from Dartmouth Hitchcock Medical Centre in New Hampshire, led a team of researchers who held focus groups with 40 junior doctors from five departments to find out how duty-hour regulations affected their relationships with consultants. The study found that the consultants’ behaviour either explicitly or implicitly lent support and understanding of the junior doctors’ legal obligation to comply with the law on hours worked OR implied a lack of support and understanding. Three major themes that affected how this issue was tackled were:

- Consultants’ explicit communication of expectations
- Implicit non-verbal and verbal cues
- The programme’s organizational culture

You can read the whole of this article [here](#).

Teaching doctors intra-professional collaboration
Source: BMC Medical Education
In a nutshell: Much effort has been expended on getting doctors to work better with nurses and other health professions but less has been done about getting doctors who work in different sectors to work well with one another. This can be particularly important where patients are being looked after in primary and secondary care. In this study Marijn Janssen, from Radboud University Medical Centre in the Netherlands, led a team of researchers who looked into the effectiveness of a consultation training programme for trainees working in general practice and internal medicine. The researchers held focus groups for trainees who had been on the programme who said that they had gained knowledge about, and skills in, collaboration and consultation they could not have got otherwise. Meeting one another and discussing cases with mentors or supervisors was a key factor in the learning process and meetings, discussing preconceptions and the enthusiasm of mentors and supervisors all facilitated learning. Learning was, however, sometimes hampered by technical problems and lack of information.

You can read the whole of this article here.

GMC aims to slim down revalidation  
Source: British Medical Journal  
Date of Publication: July 2017

In a nutshell: Rather like cars going in for their MOT doctors have to be revalidated every so often to make sure they are still able to do what is asked of them. The General Medical Council (GMC), the body responsible for regulating doctors, has decided to make this process less of a burden doing more to make clear what are, and are not, compulsory parts of the process. They aim to have the new guidance ready by March 2018, to strengthen the revalidation process for doctors working in several different locations and to offer more-specific advice on how doctors should collect feedback from their colleagues to put in their own portfolios.

If you have access to the British Medical Journal you can read the whole of this article here.

Nurse Education  
Simulating bed baths  
Source: Nurse Education Today  
Date of Publication: June 2017

In a nutshell: Simulation is often used to teach nursing students the more technical aspects of nursing but even relatively simple tasks like tying a tie, riding a bicycle or tying one’s shoelaces make a lot more sense when done in practice than when explained via a lecture or instruction manual. In this study Renata Pinto Ribeiro Miranda, from the Federal University of Alfenas in Brazil, led a team of researchers looking into the effectiveness of using simulation to teach nursing students how to give a bed bath. 58 students took part in the study. Compared to a control group the students taking part in a simulation gained more knowledge and felt more satisfaction with the teaching method but were no better at actually carrying out a bed bath.

You can read the abstract of this study here.
Do manikins need a back story?

**Source:** Nurse Education Today

**Date of Publication:** June 2017

**In a nutshell:** Simulation often involves the use of manikins for students to practise their skills on. Apart from those with particular tastes it can be hard to form a bond with a manikin which can make it difficult for students to engage with learning. In this study Sandra Johnston, Christina N. Parker and Amanda Fox from Queensland University of Technology, looked into using audiovisual narratives to give a back story to the manikins students were practising on. Their study found that the students reported high levels of value, realism and transferability in relation to the viewing of the audio-visual narrative. They liked the back stories and “statistically-significant results were evident in the subscale of transferability of learning from simulation to clinical practice.”

You can read the abstract of this article [here](#).

Do cheating students turn into shoddy nurses?

**Source:** Nurse Education Today

**Date of Publication:** June 2017

**In a nutshell:** Even the most casual acquaintance with the world of social media is enough to convince one that despite several decades of peace and prosperity people aren’t any better in the 21st century than they were in the 18th. Students still cheat at exams, and nursing students are no exception. In this study Margaret W. Bultas, from the University of St Louis in Missouri, led a team of researchers who looked at students’ cheating behaviour in the classroom and on the wards. The study found that older and second-degree nurses were less tolerant of cheating than younger ones. Frequent dishonest classroom behaviours included asking and telling other students what was on the exam while the most-frequent dishonest clinical behaviours included documenting findings that were not assessed or findings that were false.

You can read the abstract of this article [here](#).

Using peer education to teach nurses about domestic violence

**Source:** Nurse Education Today

**Date of Publication:** July 2017

**In a nutshell:** Peer education happens when slightly-older students teach slightly-younger ones. It’s been used in a variety of settings and to teach a variety of topics. In this study Özlem C. Gürkan, from Marmara University in Turkey and Nuran Kömürçü from Istanbul Aydin University looked into the effectiveness of a peer-education programme in which third-year nursing students taught second- and first-year ones about violence against women. 136 nursing students took part in the study. 63 of them took part in the peer-education classes and 73 didn’t). Those students who took part in the peer-education classes finished up with a significantly-better knowledge of domestic violence and “in their ability to explain the correct interventions in a case study about violence against women.”
Self-directed e-learning. Is it the way forward for neurology?

**Source:** Nurse Education Today

**Date of Publication:** July 2017

**In a nutshell:** ‘x, y or z isn’t brain surgery,’ hasn’t passed into the English language for no good reason. Brain surgery and brain diseases are, indeed, fiercely complicated and many nurses (and doctors) are more than a little perplexed by it. In this study Ji Yeon Shin, from Chung-Ang University Hospital in Korea, led a team of researchers looking into the effectiveness of a 35-minute self-directed neurologic assessment e-learning programme held once a week for two weeks. 50 nurses took part in the study – half did the course while the other half formed a control group. Although the course made no difference in the nurses’ knowledge or self-confidence about neurology the nurses who took the course “showed higher neurologic assessment ability compared with those in the control group.”

You can read the abstract of this article [here](#).

What makes a good advanced nurse practitioner?

**Source:** Nurse Education Today

**Date of Publication:** July 2017

**In a nutshell:** In these days of no student grants and tuition fees education is a high-stakes business with students and universities losing out when students drop out. In this study Ercolie R. Bossema, from the HAN University of Applied Sciences in the Netherlands, led a team of researchers looking into what factors led to success (and by antithesis failure) in an advanced nurse practitioner programme. Out of the 214 students who started the programme between September 2009 and September 2015 80% were women, two-thirds had a bachelor’s degree in nursing and 58% worked in a general healthcare setting. 64% of them finished the course successfully. Working in a general healthcare setting and getting a higher grade for one’s literature-study report were both associated with a higher success rate for the course.

You can read the abstract of this article [here](#).

Getting more men into nursing. Feeling the second-degree burn.

**Source:** Nurse Education in Practice

**Date of Publication:** July 2017

**In a nutshell:** Every so often – rightly or wrongly – people get themselves worked up into a tizzy about the lack of men going into nursing. One way of overcoming this is by the development of ‘second-degree’ nursing programmes where people have already achieved a degree in another subject before they start their nursing course. In this study Thomas Harding, from the University of Canterbury in New Zealand, led a team of researchers who interviewed eight men who had enrolled in the first free cohorts of a second-degree nursing programme. The interviews yielded two primary
themes. The first theme was in search of a satisfying career which had subthemes of at a loss, fulfilment through working with and helping people and a career with options. The second theme was the time was right which had the subthemes of the right time of life and the right course.

You can read the abstract of this article here.

Help the aged. How clinical instructors act as role models

Source: Nurse Education in Practice

Date of Publication: July 2017

In a nutshell: With an ageing population it’s important that healthcare professionals provide good-quality care to older people. While technology plays a part a large part of this is down to people’s attitudes and in this study Sheena Simpkins Gibbs from MacEwan University and Judith C. Kulig from the University of Lethbridge (both Canada) looked at how clinical instructors’ attitudes affected the nursing students they taught on placement. The researchers interviewed six clinical instructors and 13 nursing students and found that nursing instructors were seen as strong role models who influenced their students through demonstrations, expectations and support. As a result the nursing students mirrored the attitudes of their instructors towards older adults.

You can read the abstract of this study here.

What do nurse educators need to thrive?

Source: Nurse Education in Practice

Date of Publication: July 2017

In a nutshell: Worldwide there is a shortage of nurse educators so anything that can be done to help them and help them find their work more satisfying is a good way of getting more people to do it and persuading those people that already do it to keep at it. In this study Florin Oprescu, from the rather wonderfully-named University of the Sunshine Coast, led a team of researchers who carried out a survey of 138 nurse educators in Queensland. 83% of them were enthusiastic about nurse education but only 45% were confident in their skills and less than 10% saw themselves as expert nurse educators. The areas the nurse educators were keenest to develop were IT skills, assessment and technical knowledge. The researchers concluded that “there seems to be a shared need for developing global online and offline support resources and communities of practice to support nurse educators in their teaching and research.”

You can read the abstract of this article here.

What do young people really think about nursing?

Source: Nurse Education Today
In a nutshell: Trying to persuade more young people to take up nursing as a career is, necessarily, dependent in large part on what they think about nursing as a profession. In this study Niina Glerean, from the University of Turku in Finland, led a team of researchers reviewing articles about just this topic. The researchers found eight articles which met the criteria for inclusion in their study and these suggested that young people still had a rather old-fashioned view of nursing. They described nursing work as having poor working conditions, involving shift work and having a limited level of autonomy. Nursing was mainly seen as caring for and helping patients which was seen as inferior to doctors’ work. Youngsters did not recognise the educational requirements of careers in nursing and described the status of nursing in society as low. Nurses themselves were seen as kind, caring people who worked hard but were less intellectual. Factors influencing youngsters perceptions of nursing included family, friends, the media, girlfriends and boyfriends and personal factors.

You can read the abstract of this article here.

Social capital and nursing placements
Source: Nurse Education in Practice
Date of Publication: July 2017

In a nutshell: Social capital is “broadly understood as the social organisation of trust, norms and networks that benefit society.” Social capital in the workplace has been linked to nursing students enjoying their placements more and this study, led by Michelle Materne, from Queensland, Australia, looked into the effectiveness of initiatives aimed at building social capital in the workplace. 1,176 students filled out a Student Clinical Learning Culture Survey after their first placement and (after the introduction of the quality-improvement initiatives) five years later. There was no change after the first year but six years after the introduction of the initiatives there were improvements in social capital. The researchers concluded that “leadership that promotes open communication and connections across staff and students to achieve common goals can build workplace social capital that enhances student placement experiences.”

You can read the abstract of this article here.

What happens when lecturers go back to the wards?
Source: Nurse Education in Practice
Date of Publication: July 2017

In a nutshell: Nursing lecturers don’t always get the chance – or perhaps want – to go back on to the wards to practise. Yet doing just that has been shown to keep their skills up-to-date and allow them to retain their ‘clinical competency.’ Some nursing and midwifery academics believe it is essential to remain clinically current and up-to-date with professional issues in the clinical environments, whereas other academics believe reading current research maintains clinical competency. In this
study three nursing lecturers from Edith Cowan University in Western Australia went back onto the wards and wrote about their experiences. The lecturers found their time on the wards invaluable as it allowed them to become part of the health-professional team, refine their clinical skills, gain clinical confidence and share knowledge. It also allowed them to change their teaching style and use some of the experiences they had gained on the wards in their lectures. They concluded that “faculty clinical practice allows academics to increase confidence, encourage leadership skills and improve their teaching abilities in their clinical area of expertise.”

You can read the abstract of this article [here](#).

**Evidence-based practice. Is embedding the answer?**

**Source:** Nurse Education Today

**Date of Publication:** July 2017

**In a nutshell:** Many blameless trees have had their lives cut short – and pixels their tranquillity disturbed – in the quest to teach nursing students about evidence-based practice (EBP) i.e. using research to make sure patients get the best treatment possible. The latest academic Don Quixotes to tilt at this particular windmill were a team of researchers led by Laura Scurlock-Evans, from the University of Worcester. They had the idea of ‘embedding’ EBP in the curriculum, making it integral to each part of it, rather than teaching it as a self-contained topic. 56 nursing students took part in the study roughly half having a curriculum with EBP embedded within it and half having an old-style curriculum with EBP being taught separately. At the end of the students’ courses the researchers found that there were no significant differences between the groups although the group taking the embedded curriculum actually showed a decline in their scores during their second year which appeared to be “related to associated features of the course such as the timing of placements and delivery of theory.”

You can read the abstract of this article [here](#).

**Physiotherapy Education**

**Teaching patients to support older people with back pain**

**Source:** Physiotherapy

**Date of Publication:** July 2017

**In a nutshell:** In this study Kay Cooper, from Durham University, led a team of researchers looking into the effectiveness of a training programme for people suffering with back pain teaching them to support other people with sore backs. 17 people signed up to the programme, although only 12 finished it. Those that did finish the training gave it a positive evaluation and 10 out of the 12 passed a test about back pain at the end of the course. 90% of them had high scores for their self-efficacy (their confidence at helping people with back pain).

You can read the abstract of this article [here](#).
In a nutshell: Anyone with any sense knows that, pound-for-pound (and despite its propensity for covering everything in pebbledash) Wales is the most beautiful country in the world with the nicest accent and best music. Now Wales is taking the lead in radiology education by setting up a National Imaging Academy for Wales based in Pencoed due to be open for business in mid-2018. The academy will receive £3.4m of Welsh Government funding and will provide specialist training in partnership with hospitals. It will feature state-of-the-art workstation suites, simulation training and a lecture theatre. Consultant radiologists will provide seminars and supervision for trainees including on the interpretation of X-rays and CT and MRI scans. At first the academy will concentrate on training radiologists but later it will train radiographers, sonographers and other imaging professionals.

You can read more about this initiative here.