

Session 5.10
Education Track

Abstract Title:

A Conceptual Model for Nursing Information: Educational Implications and Challenges

Presenters:

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Intended Audiences:

Educators, Clinicians, Informaticists, Administrators

Area of Focus:

Use in Education

Research Format:

For Non-Research Reports

TOPIC: This paper will consider the educational implications and challenges for UK nurse education between the core nursing activity of clinical decision-making and the nursing data captured in the Electronic Patient Record. A Conceptual Model for Nursing Information is utilized to describe these core activities of nursing and how the resulting information may be used to provide a maximum data set for nursing.

BACKGROUND: The UK is rapidly moving towards the Electronic Patient Record (EPR). This program has not been without setbacks in England (House of Commons 2007) although other countries are faring better IHC (2007) . Within the nursing profession, there remains concern regarding the "preparedness" of nurses to capture and input nursing information to the EPR, (RCN 2007). In evidence to the UK parliament, Hansard (2007) RCN stated that "adequate resources [must be] allocated to the education and training of nurses to enable proper use of the EPR, including the use of structured documentation and standardized terminology". The adoption of SNOMED CT by England, CfH (2007), and Scotland, Scottish Executive (2005), may give impetus to the latter position, but the aspirations of the "education and training of nurses" is where we believe the major challenges exists both for nursing and the EPR.

DESCRIPTION: The adaptation of SNOMED CT means that the core activities of nursing will need to be described using standardized nursing languages. We believe that the use of a Conceptual Model for nursing information, Hughes et al (2007), would allow nurses to describe and measure outcomes of nursing care, in such a way as to provide a maximum data set, capturing the totality of nursing activity. This maximum data set must be the standard goal of all care planning if nursing input to the EPR is not to be relegated to the "basic functions" described by Aderibigbe, Brooks, & McGrath; (2007).

Conclusions: It is the model's maximum data set that we believe should form the template for educating nurses to capture their activities not just for EPR purposes, but also to provide the quality of care demanded by clients and the profession.

Citations:

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Hughes, J.R.; Clarke, J. & Lloyd, D. (2007) A Conceptual Model for Nursing Information, Proceedings of the 6th biannual European Conference of ACENDIO, Oud Consultancy, Amsterdam
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