

Newsletter sponsored by the Student Nurses Association of Trinitas School of Nursing

Responding, Recognizing and Reminding

NURE Course Textbooks SNA Works With UCC Library

Following a recommendation at a previous SNA meeting, an Ad Hoc Committee met with the Library Director on the Elizabeth Campus. With support from the SON, the library will be adding one to two copies of all required and recommended textbooks. These copies will be found in the reserve section, meaning they cannot be removed from the library. The committee will continue to work with the library and the SON on increasing the number of NURE textbooks available for check out and circulation.

SNA Elections

Here is the ticket for SNA elections:
President: Rebecca Flanagan (132)
Vice President: Rachael Omonywa (250), Jane Mone (231) and Lovegem Santillan (132)
Voting will take place at the end of the end of April and first week of May. Look for special edition of newsletter for candidate bios and information

Trinitas School of Nursing Handbook

The SNA wants to remind all students that it is imperative to be familiar with the Trinitas School of Nursing Student Handbook. The most up to date version of the TSON Student Handbook can be found on the TSON website and on the Community ANGEL shell ("important documents for students"). The TSON Student Handbook contains important information on a variety of pertinent topics that includes information on TSON philosophy and goals, scholarships, student regulations, student policies, academic policies, students' rights and responsibilities, disciplinary processes and grievance and appeal processes. The following statement taken directly from the handbook reinforces the importance of being familiar with its contents.

All School of Nursing rules, regulations, policies, and procedures are subject to change. Failure to read this or other school of nursing or college publications does not excuse the student from knowing about and following the rules and regulations in effect at the school or college.

Is Forensic Nursing Right For You?

Shaakira Abdul Razzaq SNA President

Are you interested in the legal system and law enforcement agencies? Do shows like CSI, Law and Order and COPS keep you from studying at times? Are you concerned about the well being of patients victimized by acts of violence and sexual assault? If so, forensic nursing may be right for you!

In observance of April being National Sexual Assault Awareness Month, the Student Nurses Association will be hosting an Informational Session with Forensic Nurse, Felicia M. Greulich, BSN, RN, FN-CSA. Ms. Greulich currently works as the Union County SANE/SART Program Coordinator and has been since 2002. The SANE or Sexual Assault Nurse Examiner is typically a forensic nurse whose role is to conduct a detailed assessment, collect evidence, and care for the victimized patient's physical and emotional needs. The goal of the program is to provide compassionate, competent, and timely forensic nursing care to victims of sexual assault 24 hours/day, 7 days/week.

As coordinator of the SART program, Felicia M. Greulich supervises and conducts sexual assault forensic examinations, maintains four operating SART (Sexual Assault Response Team) hospital sites, and provides in-services to hospital personnel. She also chairs on the monthly SART Advisory Board meetings and provides testimony at Grand Jury and/or trial proceedings when needed. During the session, Felicia M. Greulich will expand on her role as a SANE and forensic nurse, her career path, and conclude with a Q&A session.

As nursing students, it's an excellent opportunity for you to be exposed to different aspects of nursing to better decide what's right for you. The Informational Session will be a great opportunity to learn and expand your knowledge of such a unique aspect of the nursing profession.

SNA Workshop Alert

The SANE Informational Session will take place on Wednesday, April 25th in Room 332 from 3pm-5pm. There is limited seating (approx 40), so seats will go on a first come basis. RSVP by Friday April 20th.

RSVP to Professor Bowers via the Community Shell email if you plan on attending.

“Worth Sharing”

The Loss of Empathy in Nursing Education

Laurie Scudder, DNP, NPPosted: 03/12/2012 Ward J, Cody J, Schaal M, Hojat M *J Prof Nurs.* 2012;28:34-40

The Empathy Enigma: An Empirical Study of Decline in Empathy Among Undergraduate Nursing Students Study Summary

Background: Empathy is central to the nursing role and has been found to be associated with improved patient outcomes and greater satisfaction with care. Empathy is defined here as a cognitive, rather than emotional, skill that includes the ability to understand a patient's experience and communicate in a manner that conveys a recognition of patient concerns and perspectives. The skill of empathy must be integrated into the process of absorbing the social role of the profession that student nurses learn throughout their education. In an increasingly complex and technology-laden healthcare environment, nursing students are so focused on the *science* of nursing that they might neglect the *art*, which includes the empathetic communication that is the heart of the nurse-patient relationship. The purpose of this study was to examine changes in empathy during the student experience.

Methodology: This longitudinal cohort study was conducted with 214 undergraduate nursing students drawn from 3 programs at a single institution: an associate degree program, a bachelor's degree program, and a facilitated post-degree program open to students who had earned a previous degree in another discipline. At the beginning of the academic year, students completed a survey containing questions about demographics, academic background, and future career plans. They also completed the Jefferson Scale of Empathy, which was adapted for nursing students from the Jefferson Scale of Physician Empathy. The empathy scale was readministered at the end of the school year.

Results: Participants were predominantly women (84%) and white (74%). Of the one third of the group with a previous undergraduate degree ($n = 83$), more than half (59%) held a degree in the sciences, with smaller numbers holding degrees in the humanities (29%) or business-related fields (12%). A statistically significant decline in empathy occurred in the total sample from the start to the end of the academic year, a decline that was small and, on the basis of an effect size of -0.16 , determined to be of no practical importance. However, the magnitude of the decline was important in some subgroups, including Asian students (effect size of -0.62) and those with previous degrees in business (effect size -1.37) and the sciences (effect size -0.46). Of greater importance, a clinically relevant decline was found in students with more clinical exposure. In other words, as students gained more clinical exposure, they demonstrated a much greater decline in empathy scores over the year than did those with limited clinical experience during that year. This finding extended to students with previous work experiences in the clinical setting, who also evidenced declines in empathy of practical importance, with an effect size of 0.57 .

Viewpoint: This study, which captures the experiences of a group of students at a single institution over a single academic year, has important limitations. However, the results echo those of previous studies that found that younger nurses and those with less clinical experience were more empathetic. Research has documented similar reductions in empathy in medical students as they progress through the years of school. Why is this? Although no single factor can likely explain this phenomenon, Ward and colleagues speculate that several factors contribute to this decline, including lack of time (which limits opportunities for empathetic patient communication), anxiety, lack of support from colleagues, an intimidating educational environment, and expanded roles for nurses, which require increased technical skills. It is likely that all are contributing factors. However, the role of education must be examined with its increasing use of technology-driven models such as distance education, which limits opportunities for students to interact with faculty, thus minimizing opportunities for role modeling. The researchers (all faculty members) suggest a number of commonsense strategies for incorporating empathy training into nursing education, including improved attention to selection of preceptors who will serve as positive role models; provision of pseudohospitalization experiences to allow students to see the hospital experience through a patient's eyes; use of standardized patients for role-playing; recordings of student-patient interactions for later examination and identification of positive and negative behaviors; and recognition and reward for empathetic behavior. Clearly, students must learn the science of nursing. However, until the art of nursing is recognized as a necessary criterion for successful completion of coursework and as important as passing an exam, students will likely continue to demonstrate behaviors that make them good technicians but not necessarily very good nurses.

Above is a copy of abstract. Full article available **Medscape Nurses** © 2012 WebMD, LLC (Free registration)

Next SNA Meeting: Wednesday April 18th 3pm in room 332. All reps are expected to attend. All students are welcome.