



HKU Med LKS Faculty of Medicine
School of Nursing
香港大學護理學院



香港大学深圳医院
The University of Hong Kong - Shenzhen Hospital



December 6 – 7, 2024

**14th HONG KONG INTERNATIONAL NURSING FORUM CUM
2024 SINO US NURSING FORUM CUM
2nd GREATER BAY AREA NURSING CONFERENCE**
Cross-Boundary Collaboration for Future Nursing

PROGRAMME BOOK

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The **14th Hong Kong International Nursing Forum cum 2024 Sino US Nursing Forum cum 2nd Greater Bay Area Nursing Conference**, jointly organised by the School of Nursing of The University of Hong Kong and The University of Hong Kong - Shenzhen Hospital (HKU-SZH), will be a special one with the theme on **“Cross-Boundary Collaboration for Future Nursing”**. We expect the participation of delegates from different disciplines and different parts of the world.

The theme this year emphasises the importance of working together and transcending geographical, cultural, and disciplinary borders in the nursing profession. By fostering collaboration and cooperation between nursing professionals and institutions worldwide, this theme seeks to address the challenges and opportunities that nursing professionals face in an increasingly interconnected and globalised world. We aspire to unite nursing professionals, educators, and researchers from various regions and backgrounds. This event will enable the exchange of ideas, experiences, and best practices in the field of nursing, which can lead to innovative solutions and improvements in patient care, nursing education, and research.

Organising Committee

Co-Chairpersons	Professor Patsy Chau	Professor Edmond Choi
Advisors	Professor Chia-Chin Lin	Ms Vivian Chan

Scientific Sub-committee			
Co-Chairpersons	Prof Doris Yu	Prof Daniel Fong	Prof Jojo Kwok
Members	Prof Patsy Chau	Prof Denise Cheung	
	Prof Derek Cheung	Prof Edmond Choi	
	Prof Celine Chui	Dr John Fung	
	Prof Benjamin Ho	Prof Mandy Ho	
	Prof Jay Lee	Prof Polly Li	
	Dr Quanlei Li	Prof Kris Lok	
	Prof Yi Nam Suen	Dr Tongyao Wang	
	Prof Kelvin Wang	Dr Jie Zhong	

Promotion Sub-committee			
Co-Chairpersons	Dr Polly Chan	Ms Zoe Ng	Dr Quanlei Li
Members	Ms Jessica Cheuk		
	Dr Cecilia Kong		
	Dr Benney Wong		

Programme Sub-committee			
Co-Chairpersons	Prof Denise Cheung	Prof Benjamin Ho	Dr Angie Lam
Members	Dr Joanna Ko	Ms Mabel Lam	
	Ms Xian Chen	Ms Ran Huo	
	Ms Yingying Wei	Ms Xiaochong Zeng	

Co-organisers



Co-organisers



大阪大学
OSAKA UNIVERSITY



北京大学
PEKING UNIVERSITY



THE UNIVERSITY OF
SYDNEY



FACULTY OF
NURSING



UNIVERSITY OF
BIRMINGHAM

School of
Nursing and
Midwifery



UNIVERSITI
MALAYA



University of
Pittsburgh.



西安交通大学
XI'AN JIAOTONG UNIVERSITY



Yale SCHOOL OF
NURSING



Welcome Message



Professor Chung-mau Lo

Secretary for Health

Government of the Hong Kong Special Administrative Region

On the occasion of the 14th Hong Kong International Nursing Forum, I would like to extend my heartfelt congratulations to the School of Nursing of The University of Hong Kong (HKU) and The University of Hong Kong - Shenzhen Hospital, as well as all co-organisers on the successful organisation of this meaningful event, in conjunction with the 2024 Sino US Nursing Forum and 2nd Greater Bay Area Nursing Conference.

By bringing together local and international nursing professionals and institutions, these forums and conference offer invaluable opportunities for the exchange of ideas, experiences and best practices in the field of nursing, paving the way for innovation and collaborative partnerships in healthcare services, education and research.

The theme this year, “Cross-Boundary Collaboration for Future Nursing”, highlights the increasingly significant role that cross-boundary collaboration plays in enhancing patient care, advancing nursing education, and addressing the global health challenges we face today. Recognising the need, the Government has all along been enhancing cross-boundary healthcare collaboration, including a recent legislation to create new pathways for admitting non-locally trained nurses to Hong Kong, with a view to not only addressing the shortage of local healthcare professionals but fostering exchange and collaboration among nursing professionals from around the globe.

Taking this opportunity, I would like to thank the HKU School of Nursing for its unwavering commitment to nurturing nursing leaders, and advancing healthcare services in Hong Kong. I sincerely wish the 14th Hong Kong International Nursing Forum every success and the HKU School of Nursing new heights in its future endeavours.

Welcome Message



Professor Chak-sing Lau, BBS, JP

Dean of Medicine, The University of Hong Kong
Vice-President & Pro-Vice-Chancellor (Health) (Interim)
Daniel CK Yu Professor in Rheumatology and Clinical Immunology
Chair Professor of Rheumatology and Clinical Immunology
Immediate Past President, Hong Kong Academy of Medicine

Nursing is an integral part of advancing the health agenda globally. While the importance of cross-boundary collaboration cannot be overstated in today's world. In this context, it is heartening to see this year's occasion shining a spotlight on how collaboration across borders can shape the future of nursing. It is profoundly timely and relevant for intellectual exchange and discussion on the way forward.

As a pioneer of creating seeds of synergy for cross-border healthcare, training and research, HKUMed fully recognises the significance of such collaboration. This two-day event, which is jointly organised by our School of Nursing and HKU-Shenzhen Hospital, exemplifies our dedication to boosting engagement across borders. It also sets the stage for accelerating healthcare innovation, and enhancing the quality of training and patient care that will grow into durable frameworks in the Greater Bay Area and beyond.

At the same time, we are committed to transcending the disciplinary boundaries, too. Interdisciplinary collaboration is, in fact, one of the key directions at HKUMed. We firmly believe that by engaging with professionals across disciplines, we are able to unlock new perspectives and solutions to tackle complex health challenges. I am delighted to welcome scholars and experts from diverse backgrounds and around the world. There is much to learn from each other, and I wish you all a stimulating and enriching experience at the trio events.

Finally, as our School of Nursing prepares to celebrate its 30th anniversary, I would like to commend the School for its remarkable achievements over the past three decades. Looking ahead to the next 30 years and beyond, I am sure that the School will continue to thrive and make a meaningful impact on the lives of people worldwide.

Welcome Message



Professor Chia-Chin Lin

Director, School of Nursing, The University of Hong Kong
Alice Ho Miu Ling Nethersole Charity Foundation Professor in
Nursing

We are delighted to extend a warm welcome to you for the 14th Hong Kong International Nursing Forum *cum* 2024 Sino US Nursing Forum *cum* 2nd Greater Bay Area Nursing Conference, jointly organized by the School of Nursing of The University of Hong Kong and The University of Hong Kong – Shenzhen Hospital. This prestigious event marks the second occasion that our School has the privilege of co-hosting the forum with The University of Hong Kong – Shenzhen Hospital and kicking start our 30th anniversary at the same event and venue since the last one in 2019.

This noteworthy event will also inaugurate a series of commemorative activities in honour of the 30th anniversary of our School. We are excited to bring together nursing professionals, educators, and researchers from all over the world, fostering a platform for the exchange of ideas, experiences, and best practices in the field of nursing.

The theme of this year's Forum, "Cross-Boundary Collaboration for Future Nursing," underscores the importance of transcending geographical, cultural, and disciplinary borders to work together within the nursing profession. Our goal is to address the challenges and opportunities that nursing faces in an increasingly interconnected and globalised world, leading to innovative solutions and improvements in patient care, nursing education, and research.

We are excited to host an array of esteemed speakers and express our deepest gratitude to the 47 universities and organisations that have joined us as co-organisers for this forum.

We eagerly anticipate the stimulating discussions and insightful presentations that lie ahead, and trust that all participants will find this forum a professionally enriching and rewarding experience.

Welcome Message



Professor Patsy Chau
School of Nursing
The University of Hong Kong
Co-Chairperson
Organising Committee



Professor Edmond Choi
School of Nursing
The University of Hong Kong
Co-Chairperson
Organising Committee

As the co-chairpersons of this distinguished event, we are pleased to welcome you to the 14th Hong Kong International Nursing Forum *cum* 2024 Sino US Nursing Forum *cum* 2nd Greater Bay Area Nursing Conference. Jointly organised by the School of Nursing of The University of Hong Kong and The University of Hong Kong - Shenzhen Hospital (HKU-SZH), we are gathered here on December 6 – 7, 2024, at HKU-SZH in Shenzhen, China.

Our theme, "Cross-Boundary Collaboration for Future Nursing," highlights the importance of working beyond geographical, cultural, and disciplinary borders in the nursing profession. We believe that by fostering collaboration between nursing professionals and institutions globally, we can aptly address the unique challenges and opportunities that nursing faces in our increasingly interconnected world. We aspire to unite nursing professionals, educators, and researchers from diverse regions and backgrounds.

This conference is an excellent platform for the exchange of ideas, experiences, and best practices in nursing, which we believe will spur innovative solutions and improvements in patient care, nursing education, and research. We are thrilled to have you participate in this flagship event and are confident that it will be both inspiring and rewarding.

Programme at a Glance

DAY 1 December 6, 2024 (Friday)		
08:15 – 17:00	Lobby	Registration
09:00 – 09:45	Lecture Theatre	Opening Ceremony & Kick-off of the 30 th Anniversary of the HKU School of Nursing
09:45 – 10:05		Officiating Keynote Address Mr James Chau , China-United States Exchange Foundation & World Health Organization Goodwill Ambassador
10:05 – 10:35		Keynote Address Prof Angela Frederick Amar , New York University <i>Diversity and Health Equity in Research</i>
10:35 – 10:55	Tea Reception and e-Poster Viewing	
10:55 – 11:25	Lecture Theatre	Keynote Address Prof Christine E. Kasper , University of Pittsburgh <i>Building a Global Network to Advance the Frontiers of Nursing Science</i>
11:25 – 11:55		Keynote Address Prof Nancy R. Reynolds , Johns Hopkins University <i>Multidisciplinary Teams for Research Advancement: Unlocking Innovation Through Collaboration</i>
11:55 – 13:00	Lunch and e-Poster Viewing	
12:30 – 14:00	Lecture Theatre	Pitching Presentation
13:00 – 14:00	Room T1101 Room T1206 Room F1320 Room F1420	Concurrent Oral Presentation Sessions Concurrent Session 1: Mental Health Across the Lifespan Concurrent Session 2: Youth Mental Health Concurrent Session 3: Chronic Care Management Concurrent Session 4: Digital Health and Artificial Intelligence
14:00 – 15:30	Lecture Theatre	Panel Discussion Prof Honghong Wang , Central South University Prof Aiping Wang , China Medical University Prof Hong Lu , Peking University Prof Ka Li , Sichuan University Prof Xiaomei Li , Xi'an Jiaotong University <i>Challenges and Opportunities in Cross-boundary Collaboration</i> <u>Moderator</u> <i>Prof Chia-Chin Lin</i> <i>Prof Xiuhong Wang</i>

Programme at a Glance

DAY 1 December 6, 2024 (Friday)		
15:30 – 15:45	Tea Reception and e-Poster Viewing	
15:45 – 18:00	<p>Symposium [15:45-17:15, Lecture Theatre]</p> <p>Ms Deai Yu, Zhongshan Nursing Association Ms Qinglian Shi, DongGuan Nursing Association Ms Quying Wen, Huizhou Nursing Association Ms Shunhua Deng, Zhaoqing Nursing Association Prof Iat Kio Van, Kiang Wu Nursing College of Macau Prof Sylvia Fung, The Hong Kong Academy of Nursing & Midwifery Limited</p> <p><i>Pioneering Nursing Excellence in the Greater Bay Area</i></p> <p><u>Moderator</u> <i>Dr Mandy Ho</i> <i>Prof Kefang Wang</i></p>	<p>Concurrent Oral Presentation Sessions [15:45-16:45]</p> <p>Concurrent Session 5: Gerontological Care [Room T1101]</p> <p>Concurrent Session 6: Cancer Care [Room T1206]</p> <p>Concurrent Session 7: Critical Care Nursing [Room F1320]</p> <p>Concurrent Session 8: Cardiovascular and Pulmonary Nursing [Room F1420]</p>
	<p>Symposium [17:15-18:00, Lecture Theatre]</p> <p>Ms Jane Chan, Queen Mary Hospital Dr Susanna Lee, Hong Kong Baptist Hospital</p> <p><i>Transforming Nursing Practice in Public and Private Healthcare</i></p> <p><u>Moderator</u> <i>Prof Doris Yu</i> <i>Prof Renli Deng</i></p>	<p>Concurrent Oral Presentation Sessions [16:45-17:45]</p> <p>Concurrent Session 9: Long-term care [Room T1101]</p> <p>Concurrent Session 10: Palliative Care [Room T1206]</p> <p>Concurrent Session 11: Advanced Nursing Practice [Room F1320]</p> <p>Concurrent Session 12: Nursing Workforce and Professional Development [Room F1420]</p>

Programme at a Glance

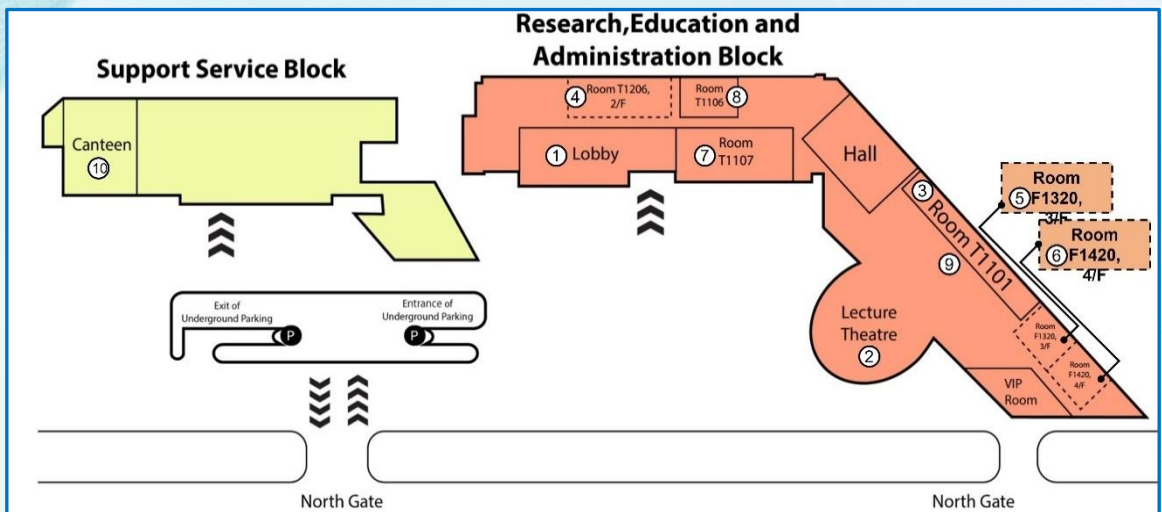
DAY 2 December 7, 2024 (Saturday)		
08:30 – 13:00	Lobby	Registration
08:30 – 09:15	Room T1101 Room T1206 Room F1320	Concurrent Oral Presentation Sessions Concurrent Session 13: Student Wellness Concurrent Session 14: Community and Public Health Nursing Concurrent Session 15: Innovations in Healthcare
09:15 – 09:45	Lecture Theatre	Keynote Address Prof Zheng Li , Peking Union Medical College <i>Interdisciplinary Collaboration for Contemporary Healthcare</i>
09:45 – 10:15	Lecture Theatre	Keynote Address Prof Yan Hu , Fudan University <i>Evidence-based Nursing in the East and the West: An Example of Multi-centered Evidence Implementation Project on CLABSI Prevention</i>
10:15 – 10:30	Tea Reception and e-Poster Viewing	
10:30 – 11:00	Lecture Theatre	Keynote Address Prof Bei Wu , New York University <i>The Future of Geriatric Nursing Research: Interdisciplinary Approaches from a Global Perspective</i>
11:00 – 11:30	Lecture Theatre	Keynote Address Prof June Zhang , Sun Yat-sen University <i>Interdisciplinary Innovation Training for Nursing Graduate Students in Guangdong Hong-Kong Macao Greater Bay Area</i>
11:30 – 12:45	Lecture Theatre	Panel Discussion Dr Shouzhen Cheng , Guangdong Nursing Association Dr Danny Tong , Hong Kong Hospital Authority Prof Agnes Tiwari , The Nursing Council of Hong Kong Prof Sophia Chan , HKU Primary Health Care Academy <i>Nursing Practice without Boundaries</i> <i>Moderator:</i> <i>Prof. Chia-Chin Lin</i> <i>Prof Sylvia Fung</i>

Programme at a Glance

DAY 2 December 7, 2024 (Saturday)		
12:45 – 13:00	Lecture Theatre	Closing Ceremony
14:30 – 16:30	Room T1101 Room F1320	Post-forum Events 1) U21 Health Sciences Group Nursing and Midwifery Group Research Postgraduate Symposium 2) Seminar: Best Practices and Innovations in Simulation-Based Education

Venue

The University of Hong Kong – Shenzhen Hospital (HKU-SZH)



REGISTRATION & ENQUIRY COUNTERS

- ① Lobby, Research, Education and Administration Block, HKU-SZH

KEYNOTE LECTURES

- ② Lecture Theatre, HKU-SZH

CONCURRENT ORAL PRESENTATION SESSIONS

- ③ Room T1101, G/F, Research, Education and Administration Block, HKU-SZH
- ④ Room T1206, 2/F, Research, Education and Administration Block, HKU-SZH
- ⑤ Room F1320, 3/F, above VIP room, HKU-SZH
- ⑥ Room F1420, 4/F, above VIP room, HKU-SZH

e-POSTER PRESENTATIONS

- ⑦ Room T1107, G/F, Research, Education and Administration Block, HKU-SZH

PITCHING PRESENTATIONS

- ② Lecture Theatre, HKU-SZH

POST-FORUM EVENTS

- U21 HSG Nursing and Midwifery Group Research Postgraduate Symposium*
③ Room T1101, G/F, Research, Education and Administration Block, HKU-SZH
- Seminar: Best Practices and Innovations in Simulation-Based Education*
⑤ Room F1320, 3/F, above VIP room, HKU-SZH

PREVIEW ROOM

- ⑧ Room T1106, G/F, Research, Education and Administration Block, HKU-SZH

TEA BREAK

- ⑨ Outside Lecture Theatre, HKU-SZH

LUNCH BOX DISTRIBUTION

- ⑩ Canteen, Support Service Block, HKU-SZH

Officiating Keynote Speaker



Mr James Chau

President
China-United States Exchange Foundation (CUSEF)

Goodwill Ambassador
World Health Organization

James Chau is President of the China-United States Exchange Foundation (CUSEF) and a World Health Organization Goodwill Ambassador. Born in London, he joined CUSEF in 2018, working with its founder The Hon. Tung Chee-hwa before being appointed President in 2023. He also developed the digital initiatives that have become an important part of its outreach and communications.

Mr. Chau serves the United Nations as the World Health Organization Goodwill Ambassador for Sustainable Development Goals, appointed by WHO Director-General Dr. Margaret Chan and re-appointed by Dr. Tedros Adhanom Ghebreyesus. Previously he was a UNAIDS Goodwill Ambassador and the first person in China named to this role.

A long-time television news anchor, he has presented on China Central Television and BBC World News, earning a special reputation for his interviews with world leaders. They include Nobel Peace Prize laureates President Jimmy Carter, UN Secretary-General Kofi Annan, and Professor Muhammad Yunus, as well as Christine Lagarde, Elton John, Paul Kagame, Jane Goodall, Winnie Mandela, Joko Widodo, and Madam Peng Liyuan.

Mr. Chau studied piano at the Royal Academy of Music and graduated from Cambridge University and King's College London. He completed an Executive Education course at the Harvard Kennedy School and is a recipient of a U.S. National Press Foundation Fellowship. He is a World Economic Forum Young Global Leader.

Keynote Speaker



Professor Angela Frederick Amar

PhD, RN, ANEF, FAAN

Dean and Erline Perkins McGriff Professor
Rory Meyers College of Nursing
New York University
U.S.A

Professor Angela F. Amar is Dean of Rory Meyers College of Nursing and Erline Perkins McGriff Professor of Nursing at New York University, U.S.A. Prior to her appointment as dean in August 2023, Professor Amar was a tenured faculty member at Emory University and Boston College. Most recently, she was the dean of the School of Nursing at the University of Nevada Las Vegas. While at UNLV, Professor Amar's innovative approach and focus on advancing strategic priorities have led to growth in student enrollment across academic programs, recruitment of quality and diverse faculty and staff, greater financial stability through revenue-generating activities, and increased ranking and stature of the school, faculty, and students.

Professor Amar was named a fellow in the American Academy of Nursing in 2010 and is a fellow in the Academy of Nursing Education (2016), and a distinguished fellow in the International Association of Forensic Nursing (2010). She was in the inaugural cohort of the Robert Wood Johnson Foundation Nurse Faculty Scholar program (2008-2010) and the AACN Wharton Executive Leadership program.

As a leading scholar in gender-based violence, Professor Amar's research has influenced the direction of campus policy nationally. Professor Amar is also a leader in nursing education regarding violence and forensic nursing. Professor Amar is also recognized for her efforts to advance diversity in nursing leadership across organizations and institutions and is a highly sought-after speaker and media guest.

Professor Amar's work has been widely recognized for the many contributions she has made. This includes the Nursing Leader Award from the Asian American group and the Las Vegas Indian Chamber of Commerce (2022) and the People's Choice Outstanding Dean and Leader from the Nevada Nurses Association (2021). Her 2016 book on forensic nursing received gold and bronze awards from AJN. The Nursing Network on Violence Against Women International awarded her the Excellence in Practice and Policy award (2015).

Professor Amar currently serves on the board of directors of the American Academy of Nursing, chairs the government affairs committee for the American Association of Colleges of Nursing, and is a member of the finance committee of the National League for Nursing.

Keynote Speaker

Professor Angela Frederick Amar

Professor Amar holds a Ph.D. from the University at Pennsylvania School of Nursing and a master's and bachelor's degrees in nursing from Louisiana State University Health Sciences Center.

KEYNOTE ADDRESS

DAY 1 (December 6, 2024) | 10:05 – 10:35 | Lecture Theatre

Diversity and Health Equity in Research

Cultural factors can create barriers and result in suboptimal delivery of health care. This mistrust can extend to research study participation. We will discuss perceptions, bias and discrimination that impede culturally relevant and significant research and strategies to combat them.

Keynote Speaker



Professor Christine E. Kasper
PhD, RN, FAAN, FACSM

Dean and Professor
School of Nursing
University of Pittsburgh
U.S.A.

Professor Christine E. Kasper, PhD, RN, is the Dean of the School of Nursing. Professor Kasper earned a Bachelor of Science in Nursing at the University of Evansville in Indiana, a Master of Science in Nursing at Rush University in Chicago and a PhD in nursing from the University of Michigan, where she also focused on exercise physiology. Following a postdoctoral fellowship at Rush University in physiology and biophysics, she served as assistant professor at the University of Wisconsin-Madison School of Nursing and associate professor at the University of California, Los Angeles, School of Nursing. She was also the M. Adelaide Nutting Research Professor at Johns Hopkins University.

Professor Kasper's scholarship has covered a broad range of topics but has a significant focus on skeletal muscle atrophy and, more recently, conflict-related injuries. She has more than 200 national and international peer-reviewed and invited publications, books and presentations to her credit.

Professor Kasper was previously dean of the University of New Mexico (UNM) College of Nursing, a position she held since 2018. Before joining UNM, she served as a senior nurse executive and senior research scientist in the U.S. Department of Veterans Affairs, Office of Nursing Services, and was professor and chair in the Daniel K. Inouye Graduate School of Nursing at the Uniformed Services University of the Health Sciences in Bethesda, Maryland. She was also principal investigator on numerous National Institutes of Health, NASA and Department of Veterans Affairs grants and has studied the role of "desert dust" metals on the pathobiology of Gulf War Illness.

The current editor of the Annual Review of Nursing Research, Professor Kasper was founding editor of Biological Research for Nursing. She was elected as a fellow of the American Academy of Nurses in 1994, a fellow of ACSM in 1995 and inducted into the Sigma Theta Tau International Inaugural Nurse Researcher Hall of Fame in 2015.

Keynote Speaker

Professor Christine E. Kasper

KEYNOTE ADDRESS

DAY 1 (December 6, 2024) | 10:55 – 11:25 | Lecture Theatre

Building a Global Network to Advance the Frontiers of Nursing Science

The past 60 years have been a time of rapid growth and maturation of scientific research in the discipline of nursing, during which specific knowledge subfields of the discipline emerged and scientific breakthroughs occurred. However, much of this work has centered around an individual researcher and their team—many of the projects developed from local, regional, or occasionally national questions related to patient care. The subfields of nursing science resulting from this work are limited. Rarely are specific questions in nursing science consistently developed by multiple teams of scientists and their students internationally and over many years. The maturation and development of science and research require the consistent international engagement of scholars over time to solve the critical questions related to nursing.

Fortunately, many nursing schools are now located in internationally ranked research-intensive peer universities. These programs support the excellence of science in the nursing faculty and rigorous training of their students and post-doctoral fellows, which now set the foundation for the internationalization of all aspects of nursing science. Highly interactive international networks that advance the frontiers of nursing science to the next level of excellence need to be developed. The development of small international forums for the presentation and discussion of frontier research in discrete subfields of nursing science with a unique mission of the discussion and debate ideas presented from the latest pre-publication research. Forums of this nature have been demonstrated to stimulate new directions for research, building long-term collaborations for each team.

Keynote Speaker



Professor Nancy R. Reynolds

PhD, RN, FAAN

Professor and Associate Dean for Global Initiatives
School of Nursing
Johns Hopkins University
U.S.A.

Professor Reynolds is a professor and the Associate Dean of Global Affairs at the Johns Hopkins University School of Nursing. She is the Director of the Center for Global Initiatives; Director, WHO Collaborating Centre for Nursing Information, Knowledge and Management; Vice Chair of the Consortium of Universities in Global Health (CUGH) and Chair of the CUGH Workforce Capacity Building Committee. She is a member of the Steering Committee for the WHO Global Community of Practice for Nursing and Midwifery. She is the former Secretary General of Global Network of the WHO Collaborating Centers of Nursing and Midwifery and was a member of the Steering Committee of the inaugural WHO State of the World's Nursing Report. She has over 25 years of continuous NIH funding supporting research focused on enhancing behavioral health care services to vulnerable populations affected by HIV domestically and internationally. She is a Johns Hopkins School of Nursing Isabel Hampton Robb Scholar and was inducted in the Sigma International Nurse Researcher Hall of Fame in 2018. She is a Fellow in the American Academy of Nursing.

KEYNOTE ADDRESS

DAY 1 (December 6, 2024) | 11:25 – 11:55 | Lecture Theatre

Multidisciplinary Teams for Research Advancement: Unlocking Innovation Through Collaboration

In today's complex and interconnected world, multidisciplinary research teams are essential for addressing the pressing health, environmental, and social challenges that span beyond the scope of any single discipline. This presentation explores the critical role of multidisciplinary teams in advancing research and driving impactful solutions. It will begin by defining multidisciplinary collaboration and distinguishing it from interdisciplinary and transdisciplinary approaches. This will be followed by a discussion of the benefits of such teams, key strategies for building effective multidisciplinary teams, and common challenges. Looking to the future, emerging trends and opportunities for multidisciplinary research, including advancements in technology that facilitate global collaboration, are examined.

Keynote Speaker



Professor Zheng Li

PhD, RN, FAAN

Dean and Professor, School of Nursing
Peking Union Medical College
China

Prof. Zheng Li is mainly engaged in research and graduate education administration in nursing, and her research interests are chronic illness management and graduate education in nursing. She is the Vice President of Chinese Nursing Association, editor-in-chief of Chinese Journal of Nursing Education, editor of Chinese Nursing Management, Chinese Journal of Practical Nursing, Chinese Journal of Modern Nursing, Chinese Nursing Research, Journal of Nursing Administration, and Modern Clinical Nursing. She is awarded the second prize of teaching achievements by Ministry of Education of the People's Republic of China, the first and the second prize of teaching achievements (higher education) by Beijing Municipal Government, the first and second prize in the Chinese Nursing Association technology awards, the title of outstanding teacher and the prize of excellent young teacher of Beijing, etc. She was the PI of the studies on The National Natural Science Foundation of China, Teaching Reform Project of Beijing, Scientific Planning for Education Key Project in Beijing and the research project granted by World Health Organization, China Medical Board, China Association for Science and Technology, Chinese Nursing Association, etc. She was the chief editor for a number of textbooks, and published more than 200 papers including SCI journals as the first author or corresponding author.

KEYNOTE ADDRESS

DAY 2 (December 7, 2024) | 09:15 – 09:45 | Lecture Theatre

Interdisciplinary Collaboration for Contemporary Healthcare

The healthcare domain is confronted with multiple challenges, for instance, the rapidly aging population, the escalating prevalence of chronic non-communicable diseases, and the increasingly complex needs of patients.

Interdisciplinary collaboration has played a crucial role in addressing these challenges by integrating knowledge from various fields. This approach has broken down traditional disciplinary barriers, expanded practitioners' perspectives, and initiated a paradigm shift away from conventional methods, leading to innovation in medical care and improvements in service quality.

Keynote Speaker

Professor Zheng Li

Currently, the collaboration of nursing with other disciplines such as artificial intelligence, information technology, materials science, and sociology has addressed numerous challenges that were once impediments in health care. Adopting an integrative philosophy, transcending the confines of traditional disciplines, and refining the interdisciplinary curriculum to nurture individuals with a holistic, interdisciplinary mindset are vital for significantly increasing the depth, scope, and impact of interdisciplinary engagement in the healthcare sector.

Keynote Speaker



Professor Yan Hu

PhD, RN, FAAN

Dean, School of Nursing
Director, Fudan University Centre of Evidence-based Nursing, a
Collaborating Center of Joanna Briggs Institute
Fudan University
China

Professor Yan Hu is Director of Fudan University Centre of Evidence-based Nursing: a JBI Centre of Excellence, as well as director of Shanghai Evidence-based Nursing Centre. She also serves as Convener of the Nursing Sub-committee of the National Steering Committee for Graduate Medical Degree Education, Ministry of Education of China, and the Head of Nursing Group, Clinical Epidemiology and Evidence-based Medicine Society, Chinese Medical Association. She acts as Editorial Board Member of Journal of Advanced Nursing (JAN), Nursing and Health Science and other peer-reviewed nursing journals. Currently she is leading her team developing interventional program for musculoskeletal symptoms in breast cancer patients undergoing endocrine therapy with the grant support from National Natural Science Foundation of China (NSFC). She also leads a multi-centered implementation project of prevention central venous catheter-related bloodstream infection in intensive care unit. Her studies also focus on symptom management for HIV/AIDS patients using evidence-based nursing approach. She has received research grants from NSFC, CMB and Shanghai Health Bureau et al, with more than 200 publications in peer-reviewed International or Chinese core nursing journals during the recent five years.

Professor Hu is a pioneer in promoting evidence-based nursing practice (EBNP) in China. She led to develop the first EBNP Centre in mainland China in 2004. Her team has maintained close collaborations with Joanna Briggs Institute (JBI) as well as other evidence-based medicine (EBM) institutes. Her current studies focus on implementation science and knowledge translation, and her team has successfully developed several models and tools for evidence-based nursing practice. In addition, she is the editor-in-chief of several EBN books and has received Chinese National Awards for her outstanding research work on EBNP.

KEYNOTE ADDRESS

DAY 2 (December 7, 2024) | 09:45 – 10:15 | Lecture Theatre

Evidence-based Nursing in the East and the West: An Example of Multi-centered Evidence Implementation Project on CLABSI Prevention

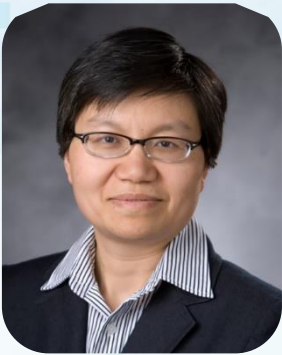
Evidence-informed decision making in healthcare is widely recognized as the foundation for continuing quality improvement in the 21st century. As the world's largest developing country,

Keynote Speaker

Professor Yan Hu

China has embraced evidence-based healthcare for more than 20 years. Therefore, it is essential to contribute to the global knowledge of evidence-informed healthcare by exploring cultural-relevant model, tools and project development evidence-informed practice in nursing. In this presentation, we discussed and compare how JBI model of EBHC, PARIHS model and Fudan Model of Evidence-based implementation were applied in clinical decision making system and their impact on quality of care improvement. A multi-centered evidence implementation project CLABSI prevention will be presented as example of SUNRISE model of evidence implementation.

Keynote Speaker



Professor Bei Wu

Bei Wu, PhD, FGSA, FAGHE, FAAN (Hon)

Research and Dean's Professor in Global Health
Rory Meyers College of Nursing
New York University
U.S.A.

Professor Bei Wu is the Vice Dean for Research and Dean's Professor in Global Health at NYU Rory Meyers College of Nursing. With extensive expertise in large-scale data analysis and behavioral interventions, she co-leads two NIH-funded centers focused on improving Asian American health. Additionally, she serves as the Principal Investigator for NIH-funded clinical trials aimed at enhancing health outcomes for Chinese and Korean dementia caregivers and improving oral health in individuals with mild dementia. Professor Wu also leads an NIH-funded R01 study investigating the links between oral health and dementia subtypes, with a particular focus on biological pathways and social determinants.

A globally recognized leader in gerontology, Professor Wu has built a distinguished career through interdisciplinary collaborations, particularly in nursing and dentistry. She has authored over 800 publications, including 411 peer-reviewed manuscripts, on topics such as dementia caregiving, geriatric oral health, and risk factors for cognitive impairment. Her contributions have earned her numerous honors, including being named a fellow of the Gerontological Society of America and the New York Academy of Medicine, as well as recognition as an honorary fellow of the American Academy of Nursing and an honorary member of Sigma Theta Tau International.

Professor Wu's recognitions include the Distinguished Scientist Award for Geriatric Oral Research from the International Association for Dental Research, the 2022 Wei Hu Inspiration Award from the China Health Policy and Management Society (CHPAMS)—the organization's highest honor—the 2023 Maxwell A. Pollack Award for Contributions to Healthy Aging from the Gerontological Society of America, and the 2024 Public Service Award from the American Association for Dental, Oral, and Craniofacial Research (AADOCR).

Keynote Speaker

Professor Bei Wu

KEYNOTE ADDRESS

DAY 2 (December 7, 2024) | 10:30 – 11:00 | Lecture Theatre

The Future of Geriatric Nursing Research: Interdisciplinary Approaches from a Global Perspective

The global aging population faces a growing prevalence of chronic diseases, cognitive impairments, and disparities in health access, posing critical challenges for geriatric care. This presentation explores innovative interdisciplinary approaches to address these challenges, emphasizing person-centered care, policy advocacy, and technological advancements. Specific focus areas include polypharmacy management, mental health care, social isolation, and caregiver burden. The presentation also highlights the importance of oral health, often neglected in geriatric research and practice, as an essential component of healthy aging. Recent findings reveal strong associations between oral hygiene behaviors and cognitive health, offering cost-effective strategies to mitigate cognitive decline in older adults. Evidence from systematic reviews underscores the potential of integrating oral hygiene protocols into long-term care and dementia care standards. Advancing geriatric nursing research requires the adoption of community-based care models, the expansion of nurses' roles, and the integration of precision medicine and artificial intelligence. By addressing health inequities and fostering global collaboration, the future of geriatric nursing research can transform care delivery for diverse aging populations. This session underscores the critical role of interdisciplinary approaches and policy-driven solutions in promoting healthy aging worldwide.

Keynote Speaker



Professor June Zhang

PhD, RN, FAAN

Dean and Professor
School of Nursing
Sun Yat-sen University
China

Professor Jun-e Zhang, Ph.D, Professor, Ph.D Supervisor, Dean of the School of Nursing at Sun Yat sen University. Renowned teacher at Sun Yat-sen University, Chief Expert on Degree and Graduate Subject Cases at the Ministry of Education, and FAAN. Undertaking multiple projects including 2 National Social Science Fund projects, 1 China University Research Innovation Fund, and 7 provincial-level scientific research projects. Served as the head of the Guangdong Hong Kong Macao University Nursing Alliance, vice chairman of the Nursing Education Professional Committee of the Chinese Research Hospital Association, member of the Nursing Research Working Committee of the Chinese Nursing Association, and chairman of the Academic and External Exchange Working Committee of the Guangdong Nursing Association. Multiple social positions include editorial board member for SCI journals such as Asia -Pacific Journal of Oncology Nursing, International Journal of Nursing Science, and Chinese Nursing Management. Main research areas: elderly care, cancer care. Edited or co-edited multiple textbooks, including one English textbook. Published multiple papers as the first author or corresponding author, including 45 SCI papers.

KEYNOTE ADDRESS

DAY 2 (December 7, 2024) | 11:00 – 11:30 | Lecture Theatre

Interdisciplinary Innovation Training for Nursing Graduate Students in Guangdong Hong Kong Macao Greater Bay Area

Our future depends on every nurse and every voice. We not only need to stand at the forefront of nursing, but also at the forefront of change. The recent policy emphasized the importance of promoting the digital nursing, innovating nursing service models, and improving nursing work efficiency. Gig data and data mining in nursing became more and more important. Emphasizing nurses' information literacy and cultivating digital nursing experts became the urgent needs to be addressed. "Machine learning and data mining in nursing research and practice" is the first shared course of the Guangdong Hong Kong Macao University Nursing Alliance and successful launched from May to July 2024 in 13 universities in Guangdong, Hong Kong, and Macao Universities. This interdisciplinary innovation training achieved very satisfied cultivating effect to graduate students' information literacy and capacity.

Panel Discussion

Challenges and Opportunities in Cross-Boundary Collaborations

DAY 1 (December 6, 2024) | 14:00 – 15:30 | Lecture Theatre



Professor Honghong Wang

Dean and Professor
Xiangya School of Nursing
Central South University
China

Dr. Wang Honghong, professor, Dean of Xiangya School of Nursing, Central South University. She is a supervisor to doctoral students, Fellow of the American Academy of Nursing Science. She serves as the vice president and the director Nursing Education Committee of the Hunan Nursing Association, member of Nursing Education Committee of Chinese Nursing Association. She has served as an editorial board member for the International Journal of Nursing Science and the Chinese Journal of Nursing Administration, etc., and as a reviewer for JAN and JANAC journals. Her research areas focus on HIV/AIDS prevention, control, and care. She is visiting scholar of Yale University and University of Washington. She has extensive experiences in designing and implementing international collaborative research and training programs. She has been involved in editing textbooks on Nursing Research, Nursing English, and Theory and Practice in Nursing Research, either as editor-in-chief or as a contributor of chapters. She has been awarded 11 grants, including National Natural Science Foundation of China (General Program) and other provincial research projects. In collaboration with colleagues in the United States, she has been awarded three NIH grants as a Site-PI. As a result, she has published more than 70 academic papers in SCI journals, more than 100 papers in other core journals. Her team has been awarded the Third Prize for Scientific and Technological Achievement of Hunan Province twice and the Second Prize for Scientific and Technological Achievement of Hunan Medical Association three times. She was awarded as China's most cited scholar by Elsevier for 10 consecutive years.

Panel Discussion

Challenges and Opportunities in Cross-Boundary Collaborations

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Professor Aiping Wang

Dean and Professor
School of Nursing
China Medical University
China

Wang Aiping, Professor, Chief Nurse, PhD Supervisor › Dean of the School of Nursing, China Medical University; Vice President of the Chinese Nursing Association › Chairperson of the Industrial Work Committee of the Chinese Nursing Association › Vice Chairperson of the Geriatric Nursing Professional Committee of the Chinese Nursing Association.

Leading Talent in Science and Technology Innovation under the "Xingliao Talent Program" of Liaoning Province. Recent years, has published over 170 papers, including 51 indexed by SCI; authored or co-authored 35 textbooks and monographs. Has led more than 20 projects funded by the National Natural Science Foundation, key national R&D programs, and provincial/ministerial projects. The 11th China Youth Science and Technology Award; National "May Day" Model Worker.

Elevating Geriatric Nursing Excellence through Strategic Technological Integration

Asian Development Bank (ADB) Technical Assistance Project – Experience Sharing of the Liaoning Geriatric Nursing Policy Research and Training Project

Background: Liaoning Province has the highest aging rate in China, with an insufficient number of geriatric caregivers and a low rate of pre-employment training.

Objective: To develop a curriculum and evaluation system for training geriatric nursing faculty and caregivers; train geriatric nursing faculty and caregivers; compile and publish geriatric nursing training materials; summarize and promote the project's outcomes and submit a recommendation report to the government.

Method: The project team conducted domestic and international field studies to shift perspectives; applied SWOT analysis, organizational sociology, KJ method, and expert meetings to analyze the current state of geriatric nursing in Liaoning; established a curriculum and

Panel Discussion

Professor Aiping Wang

evaluation system for training geriatric nursing faculty and caregivers; used the TOT (Training of Trainers) method to train geriatric nursing faculty and caregivers; and assessed training outcomes with an evaluation index based on theory, skills, and attitude.

Results: Trained 100 geriatric nursing faculty and 100 caregivers, with enhanced capabilities; the project introduced innovative concepts, models, scale, and methods; awarded the Best Dissemination Award for ADB Technical Assistance Project Outcomes.

Conclusion: The model of utilizing the talent and technological advantages of large urban hospitals to train and reserve geriatric nursing professionals is worthy of promotion.

Panel Discussion

Challenges and Opportunities in Cross-Boundary Collaborations

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Professor Hong Lu

Dean and Professor
School of Nursing
Peking University
China

Prof. Hong Lu, Director of Maternal and Child Nursing Department of Peking University School of Nursing, is very active in Maternal and Child Health, and Midwifery. She is Member of the Academic Evaluation Panel of the Academic Degrees Commission of the group State Council China, Deputy Director of Science Research Committee of Chinese Nursing Association, and the Deputy Director of Midwifery Branch, China Maternal and Child Health Association. She is also working as Editorial Board Member of International Journal of Nursing Studies Advances, and Associate Editor of Interdisciplinary Nursing Research.

Dr. Hong Lu is External Supervisor of Higher Degree Research, Griffith University, Australia, External Supervisor of Faculty of Health, University of Technology, Sydney, Australia, and Co-director of PhD student, Institute of Higher Education and Research in Healthcare, Faculty of Biology and Medicine, the University of Lausanne, Switzerland.

She has been awarded Most Cited Researchers by ELSEVIER in Nursing (2014-2024), World's Top 2% Scientists in nursing (2023-2024), Elsevier Reviewer Recognition-Outstanding Reviewer for International Journal of Nursing Studies (2023), and the First Prize of the 5th Chinese Nursing Association Technology Award (2017).

Interprofessional Collaboration: Reflection and Refreshment

We have been facing more and more complex global health problems that will not be solved by individual disciplines. It's vitally important that nurses and other health related researchers and professionals work together to promote health and save lives. Over the past ten years, Peking University School of Nursing has made remarkable experiences and achievements in interdisciplinary education, research and practice, including but not limited to artificial intelligence, information science, public health, material science, mechanics, etc. It is time for a reflection and a perspective on interprofessional collaboration.

Panel Discussion

Professor Hong Lu

Conclusion: The model of utilizing the talent and technological advantages of large urban hospitals to train and reserve geriatric nursing professionals is worthy of promotion.

The UNESCO has set out a roadmap to 2030 for higher education worldwide. It calls for a shift from disciplinary silos to inter- and transdisciplinarity, and for active collaboration among diverse perspectives. We are also facing a digital revolution – including the emergence of artificial intelligence, the rise of web-based education and training and big data developments. Higher education in nursing both has impact on and is impacted by this revolution. Rich and holistic student learning experiences are encouraged through interprofessional training.

Currently, interdisciplinarity leaves disciplinary boundaries mostly untouched during the collaboration work. Transdisciplinarity is an addition to interdisciplinarity, describing collaborations that go beyond coordinating interactions between different disciplines and aim to transcend them, therefore moving beyond disciplinary boundaries. From interdisciplinarity to transdisciplinarity, are nursing education, research and practice ready for the transition?

Panel Discussion

Challenges and Opportunities in Cross-Boundary Collaborations

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Professor Ka Li

Dean and Professor
School of Nursing
Sichuan University
China

Professor Li Ka, Doctoral Supervisor, Selected Talent for the National High Level Talent Program, Sichuan Province Thousand People Plan “Leading Technology Talent”, Dean of West China School of Nursing, Sichuan University/ Director of the Sichuan Provincial Medicine-Engineering Cross Disciplinary Research Center for Nursing and Materials; Chairman of ERAS Nursing Professional Committee of China Medical Education Association; Vice Chairman of Professional Committee of Surgery of Chinese Nursing Association; Member of National Medical Professional Degree Graduate Education Guidance Committee of Academic Degree Committee of the State Council; Member of Professional Committee of Elderly Health Standards of National Health Standards Committee; Member of Nursing Terminology Approval Committee of China National Committee for Terms in Sciences and Technologies; Expert of the Medical Device Technical Evaluation of the National Medical Products Administration; Chairman of the Undergraduate Nursing Teaching Guidance Committee of the Sichuan Provincial Department of Education; Editorial Board Member for 9 journals including Health Expectation(SCI), Chinese Journal of Reparative and Reconstructive Surgery; Deputy Editor of Sichuan University Journal (Medical Edition) (MEDLINE/PKU Core Journal).

Professor Li’s research direction is ERAS nursing basic and clinical research. Professor Li won Sichuan Province Science and Technology Progress First Prize (ranked 1st), National Teaching Achievement Second Prize, Baosteel Excellent Teacher Award; directed 16 national and provincial longitudinal projects, including key projects and general projects of the National Natural Science Foundation of China, and key projects of Science & Technology Department of Sichuan Province; published over 190 papers as first author or corresponding author in high-level journals such as Int J Surg, Compos Part B Eng, she has 9 authorized invention patents and realized the conversion of 1 invention patent, released 7 standards, guidelines, and consensuses. Professor Li is the chief editor of 3 national planned textbooks, leader of national online demonstration courses for graduate education and national first-class undergraduate courses.

Panel Discussion

Challenges and Opportunities in Cross-Boundary Collaborations

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Professor Xiaomei Li

PhD, RN, FAAN

Dean and Professor
School of Nursing
Xi'an Jiaotong University
China

Li Xiaomei, a professor and Ph.D supervisor, Dean, School of Nursing, Xi'an Jiaotong University. She received her bachelor degree in Nursing Science from La Trobe University, Australia, master degree in Nursing Science from Chiang Mai University, Thailand and Ph.D in Epidemiology and Health Statistics from Xi'an Jiaotong University.

She is a fellow of the American Academy of Nursing, a psychologist of the Chinese Psychological Association, and an outstanding professor in Shaanxi Province. She is a member of the Nursing Teaching Guidance Committee of the Ministry of Education of China, a vice-chairman of the Nursing Accreditation Committee of the Ministry of Education of China, a member of the Expert Committee of the Nurse Registration Examination of the National Health Commission, a vice-chairman of the Nursing Psychology Specialised Committee of the Chinese Psychological Association, a vice-chairman of the Educational Committee of the Chinese Nursing Association, a Deputy Director of Shaanxi Provincial Nursing Association, Deputy Editor-in-Chief of International Journal of Nursing Science, editorial committee member of Nursing Education and Practice in U.K and many others.

Her research interests comprise nursing education, psychosocial care, cancer care, and community health nursing. Meanwhile, she has finished many important research projects. For example, a pioneer research project in stress and coping of nurses. Prof. Li also initiated the first master program of community health in China and the research on bilingual nursing education and textbooks. Furthermore, she has been in charge of many research projects, which are sponsored by National Natural Science Foundation, WHO, European Union, Help Age International, CMB, and other organizations nationally and internationally. She has published more than 200 professional papers. Prof. Li has acted as the chief and associate chief editor for 14 national nursing textbooks and also the associate chief editor and editor for other 5 professional books. She has been awarded outstanding educators of the province and university.

Panel Discussion

Nursing Practice with Boundaries

DAY 2 (December 7, 2024) | 11:30 – 12:45 | Lecture Theatre



Dr Shouzhen Cheng
RN, MPH, FAAN

Guangdong Nursing Association

Professor CHENG Shouzhen has worked for 43 years in the nursing profession. She is also playing a leading role in several professional associations. She is the Chairwoman of the Respiratory Diseases Nursing Committee of the Chinese Nursing Association (CAN), Vice chairwoman of Academic Work Committee of CAN, Member of nursing Sub-Committee of Medical Graduate Education Steering Committee, Member of Nursing Professional Committee of National Health Standards Board, National Health Commission hospital Management Institute of the first batch of hospital evaluation experts, President of Guangdong Nursing Association (GNA), Chairwoman of the Committee for Critical & Intensive Care of GNA, Association and the Director of the Nursing Quality Control Center, Guangdong.

As a nursing expert in respiratory and critical care, Cheng has made great contributions to national and international campaigns of aid, disaster relief, training and developing the nursing services. Cheng was awarded the 48th Florence Nightingale Medal in 2021.

Prof. Cheng has innovated a series of nursing standards and procedures in the critical care. She has paved the path for the training and education for ICU nursing specialists and established regional and international nursing collegiality with counterparts. Her research findings and national textbooks in the critical care were published and employed. In addition, she brought the nursing quality indicators that laid a framework for regional nursing practice. She participated in policy makings for advancement of nursing profession.

Panel Discussion

Nursing Practice with Boundaries

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Dr Danny Tong

Hong Kong Hospital Authority

Dr Danny TONG is currently the Chief Manager (Nursing) / Chief Nurse Executive (CM(N)/CNE) of Nursing Services Department at Hospital Authority Head Office (HAHO).

Dr Tong is a nursing leader dedicated to improving clinical practice. Recognising the significance of simulation training, he and his team established the first infectious disease (ID) simulation training centre at HA ID Centre in 2009 to render simulation training to all HA nurses. Also, he advocates for the integration of simulation training into nursing training curriculum of all nursing staff, with a focus on newly qualified nurses. This effectively broadens the talent pool of simulation facilitators and trainers to address the training needs in various specialties.

Dr Tong actively leads Evidence-Based Practice (EBP) and nursing research. A corporate EBP and Research Promotion Working Group was established to guide and monitor the effectiveness of corporate EBP projects and research studies, as well as to create a central talent pool and collaboration hub, fostering partnerships between HA and academic institutions.

Dr Tong has spearheaded numerous large-scale projects that have significantly impacted nursing practice. The development of post creation framework for Nurse Consultant and Associate Nurse Consultant is one of the notable achievements. These two ranks largely contribute to specialty development, facilitating the integration of cutting-edge technologies and advancements in their specialty service.

Nursing Practice Without Boundaries: Education and Professional Development for Boundless Care

To strengthen knowledge exchange and experience sharing among nurses in Greater Bay Area (GBA), the Hospital Authority (HA) has collaborated with the Health Commission of Guangdong Province (GDHC) to launch the GBA Specialty Nursing Knowledge-exchange Programme since 2023. The Programme is delivered through a series of online theoretical sharing followed by a 45-week of clinical exchange at selected service areas of HA hospitals. A target of 300 nurses from Guangdong Province will participate in this Programme in three intakes.

Panel Discussion

Dr Danny Tong

The first intake of 70 exchange nurses in gerontology underwent clinical exchange from April 2023 to February 2024. Towards the end of clinical practicum, focus group interview and survey were conducted to gather feedbacks from both exchange nurses and local nurses, with positive feedbacks received.

Riding on the success of the first intake, the Programme has expanded to include more specialties. The second intake, comprising of 100 exchange nurses in cardiac care, ophthalmology, endoscopy, gerontology, intensive care and peri-operative care, started clinical exchange in HA hospitals since January 2024.

On the other hand, to deepen local nurses' understanding about healthcare system and nursing services development in mainland, a delegation of 26 nursing representatives from HA Head Office and clusters conducted a study visit to 4 Grade A tertiary hospitals in Guangdong Province in January 2024. HA will continue to strengthen collaboration with hospitals in Guangdong Province, especially on rare diseases management and smart hospital development.

Panel Discussion

Nursing Practice with Boundaries

DAY 2 (December 7, 2024) | 11:30 – 12:45 | Lecture Theatre



Professor Agnes Tiwari

PhD, RN, FAAN, CMgr FCMI

Chairman

The Nursing Council of Hong Kong

Professor Agnes Tiwari is the Chairman of the Nursing Council of Hong Kong. She serves as the Head of the School of Nursing at Hong Kong Sanatorium & Hospital and is an Honorary Professor at the School of Nursing, The University of Hong Kong. Previously, she served as the Head of the HKU School of Nursing (2011–2017) and was a Member of the Hospital Authority Board (2018–2024).

In her role as Chairman of the Nursing Council, Professor Tiwari ensures the quality of nursing practice in Hong Kong by fulfilling statutory obligations under the Nurses Registration Ordinance to address the evolving healthcare needs of society. In this talk, Professor Tiwari will discuss how non-locally trained nurses may be admitted to practice in Hong Kong through the newly introduced pathways.

Nursing Practice Without Boundaries: The Nurses Registration (Amendment) Ordinance 2024 in Hong Kong

On 17 July 2024, the Legislative Council passed legislative amendments to the Nurses Registration Ordinance (Cap. 164, Laws of Hong Kong), which took effect following publication in the Gazette on 26 July 2024. These amendments aim to address workforce challenges by introducing new pathways for non-locally trained nurses to practice in Hong Kong's public healthcare and social welfare sectors.

Under the amended ordinance, three distinct pathways have been established: Limited Registration/Enrolment, Special Registration/Enrolment, and Temporary Registration/Enrolment. Each pathway has specific eligibility criteria, including academic qualifications, post-qualification nursing experience, and additional conditions tailored to ensure professional standards.

This presentation will outline the eligibility requirements for each pathway, clarifying how non-locally trained nurses can qualify to practice in Hong Kong. Additionally, the vetting processes for assessing applicants' credentials and suitability will be detailed. Mechanisms for monitoring

Panel Discussion

Professor Agnes Tiwari

the performance of nurses admitted through these pathways will also be explained, ensuring transparency and accountability in maintaining healthcare quality. These legislative changes mark a significant step toward bolstering Hong Kong's healthcare workforce while upholding professional standards. Furthermore, they demonstrate the potential for nurses to apply their professional expertise across geographical, cultural, and institutional boundaries.

Panel Discussion

Nursing Practice with Boundaries

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Professor Sophia Chan

Professor and Director
HKU Primary Health Care Academy

Professor Sophia Chan is currently the Senior Advisor to President's Office at the University of Hong Kong, and the Professor and Director to HKU Primary Health Care Academy at the University of Hong Kong.

Professor Sophia Chan was the Under Secretary for Food and Health of the Hong Kong SAR Government from 2012 to 2017 and the Secretary from 2017 to 2022. She is also the first nursing professor to hold a ministerial post.

During her tenure, Professor Sophia Chan has formulated and promoted a number of medical, food and environmental health policies, including the establishment of the District Health Centers, the promotion of Chinese medicine and laying the foundation of Hong Kong's first Chinese medicine hospital, the opening of Hong Kong's first Children Hospital, the development of a cancer strategy and a plan for the prevention and control of Non-communicable diseases and the Implementation of Strategy and Action Plan on Anti-Microbial Resistance. In addition, Professor Sophia Chan also planned and established the Genome Research Institute, launched the Voluntary Health Insurance Scheme, and implemented a ban on E-cigarettes and Heated Tobacco Products in Hong Kong. In addition, during the epidemic, she led a number of policies and measures to combat COVID-19, contributing significantly to the stabilization and control of the epidemic in Hong Kong.

Prior to her government service, Professor Sophia Chan was the Head of Department of Nursing Studies/School of Nursing of HKU and as Assistant Dean of the Li Ka Shing Faculty of Medicine.

Professor Sophia Chan's academic background includes a Master of Education from the University of Manchester, a Master of Public Health from Harvard University and a Doctor of Philosophy from the University of Hong Kong.

Professor Sophia Chan is a distinguished scientist in the fields of nursing and public health. She has focused her research on public health, management of tobacco dependency and prevention of second-hand smoke exposure in children, primary health care system and policy development, and has published over 240 scientific papers.

Panel Discussion

Professor Sophia Chan

Professor Sophia Chan has received a number of honors, including outstanding teaching award conferred by HKU, Honorary Fellow, Royal College of Physicians of United Kingdom, Fellow of the American Academy of Nursing, and Honorary Fellow of the Hong Kong College of Health Service Executives. She was also awarded the Gold Bauhinia Star in recognition of her contribution to public service. In addition, she received an Honorary Doctor of Social Science of the Metropolitan University, an Honorary Fellowship from the Hong Kong Academy of Nursing and an Outstanding Alumnus Award from the Hong Kong Polytechnic University.

Symposium

Pioneering Nursing Excellence in the Greater Bay Area

DAY 1 (December 6, 2024) | 15:45 – 17:15 | Lecture Theatre



Ms Deai Yu

President
Zhongshan Nursing Association

Ms. Yu De'ai is the former Vice President of Zhongshan People's Hospital, former Vice President of Zhongshan Traditional Chinese Medicine Hospital, and former Director of Zhongshan Blood Center. She currently serves as a member of the Expert Committee on Nursing Management of the Chinese Nursing Association, an editorial board member of the Modern Clinical Nursing Journal, Vice President of the Nursing Branch of the Guangdong Hospital Management Association, Deputy Chair of the Administrative Specialty Committee of the Guangdong Nursing Association, and President of the Zhongshan Nursing Association.

As President of the Zhongshan Nursing Association, Ms. Yu has diligently led its work, convening and presiding over council and executive council meetings, actively recruiting members, and organizing various nursing activities, contributing significantly to the advancement of nursing in Zhongshan. With a commitment to improving nursing services and wholeheartedly serving members, she has created diverse platforms for academic growth, including nursing workshops and specialized lectures. Under her leadership, Zhongshan's nursing teams have engaged in exchanges and learning opportunities with counterparts in Beijing, Shanghai, Zhejiang, Hong Kong, and Taiwan, enabling local professionals to acquire advanced knowledge and management expertise. These efforts have laid a solid foundation for enhancing nursing standards and fostering talent development in the region.

Ms. Yu's achievements have been widely recognized. She was honored as an "Advanced Individual in the Fight Against SARS" in 2003, elected as a Member of the Zhongshan Association for Science and Technology in 2004, named "Excellent Nurse of Guangdong Province" in 2006, awarded the "Three-Star Volunteer for Blood Donation" by the Ministry of Health and the Red Cross Society of China in 2007, and recognized as Zhongshan's "March 8th Red-Banner Pacesetter" in March 2010.

Pioneering Nursing Practices in the Greater Bay Area: The Role of the Zhongshan Nursing Association

This presentation will outline the development trajectory and contributions of the Zhongshan Nursing Association. I will discuss how the association has advanced the nursing profession by adhering to its principles of inheritance and innovation, focusing on areas such as specialized development and education, innovations in full-cycle health services, resource allocation and support programs, as well as participation in social services. Additionally, I will highlight the association's achievements in improving nursing quality and enhancing the accessibility of health services, while providing an outlook on its future direction and emphasizing its leadership role within the nursing field.

Symposium

Pioneering Nursing Excellence in the Greater Bay Area

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Ms Qinglian Shi

President
Dongguan Nursing Association

Ms. Qinglian Shi, Chief Nurse, former Deputy Secretary of the Party Committee and Vice President of Dongguan Tea Mountain Hospital, and Chairperson of the 11th and 12th Councils of the Dongguan Nursing Association, currently serves as Honorary Chairperson of the 13th Council of the Dongguan Nursing Association. She is also a member of the Expert Committee of the Nursing Ethics Professional Committee of the Chinese Nursing Association, a Council Member of the Guangdong Nursing Association, Vice President of the Dongguan Women in Science and Technology Alliance Council, and a Discipline Construction Consultant for Dongguan No. 8 People's Hospital (Dongguan Children's Hospital). Shi has studied and trained in the United Kingdom, the United States, Hong Kong, and Macau, gaining extensive experience in hospital management, community health care, and professional association development. Her research project, "Reducing Subglottic Secretion Aspiration in Artificial Ventilation for Patients with Brain Injuries to Prevent Pneumonia," was awarded third prize in the Dongguan Science and Technology Progress Awards. She has co-authored and contributed to professional books, including Manual for Transfusion Quality Management, Post Training for Community Nurses, and Interpersonal Communication: Case-Based Edition. During the COVID-19 pandemic, she led the compilation of the Dongguan Medical Observation Manual for Centralized Isolation, 8th Edition (Internal Publication). Shi has received numerous honors, such as National Model Worker, Advanced Individual in COVID-19 Pandemic Control in the National Health System, National Outstanding Female Worker, National Outstanding Nurse, China's Good Nurse, Guangdong's Good Doctor, Outstanding Communist Party Member of Guangdong Province, Outstanding Nurse in the Style of Nightingale in Lingnan, and Most Beautiful Scientist in Dongguan. In both 2022 and 2023, her innovation studio, Shi Qinglian Model Worker and Craftsman Talent Innovation Studio, was officially recognized by the Dongguan Federation of Trade Unions and the Guangdong Federation of Trade Unions.

Symposium

Ms Qinglian Shi

Innovation, Integration, Collaboration, and Development: Promoting High-Quality Nursing Practice in the Greater Bay Area

The Greater Bay Area (GBA) refers to the Guangdong-Hong Kong-Macao region, encompassing nine cities in the Pearl River Delta of Guangdong Province along with the Hong Kong and Macao Special Administrative Regions. As one of the most dynamic and open regions in China, the GBA is characterized by its international and multicultural features, which are also reflected in its nursing practices. With the continuous advancement of the GBA's development, nursing professionals are required to enhance their cross-cultural communication skills and gain a deeper understanding of the healthcare policies and nursing standards across different regions. This ensures the provision of more efficient and high-quality nursing services to the broader population.

In response to the national strategy of prioritizing public health and wellness, the Dongguan Nursing Association actively embraces the principles of innovation, integration, collaboration, and sharing. It has established robust learning and exchange platforms for nursing professionals in various fields, including community nursing, palliative care, psychological counseling, and traditional Chinese medicine nursing. These initiatives aim to meet the development needs of the GBA and cultivate more nursing talents with international perspectives and professional expertise.

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Pioneering Nursing Excellence in the Greater Bay Area

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Ms Quying Wen

Huizhou Nursing Association

惠州市中心人民医院护理部主任 硕士研究生导师 主任护师

- 广东省护士协会第二届副会长
- 惠州市护理质控中心主任
- 惠州市护理学会第十三届理事会理事长

Symposium

Pioneering Nursing Excellence in the Greater Bay Area

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Ms Shunhua Deng

President
Zhaoqing Nursing Association

Ms. Shunhua Deng is the Director of Nursing Department at the First People's Hospital of Zhaoqing, Chief Nurse, and Associate Professor. She is among the Outstanding Young Medical Talents in Guangdong Province and High Level Talents in Zhaoqing City. She is the Director of Zhaoqing Nursing Professional Quality Control Center, President of Zhaoqing Nursing Association, Member of the 9th Council of Guangdong Nursing Association, Vice President of the Second Council of Guangdong Nurses Association, and a Member of the Expert Database of the Professional Committee of the 28th Council of Nursing Management of the Chinese Nursing Association. She led the joint training of specialized nurses between Guangdong and Hong Kong.

Integrating Bay Area for Empowerment nursing: Zhaoqing Nursing Association

In February 2019, Health Commission of Guangdong Province, the Food and Health Bureau of the Hong Kong Special Administrative Region Government, and the Health Bureau of the Macao Special Administrative Region Government signed the "Consensus on Health Cooperation in the Guangdong-Hong Kong-Macao Greater Bay Area" to jointly build a high-quality and healthy Greater Bay Area, establish a high-quality and efficient health service system that is in line with international standards. The consensus includes six parts, namely focusing on people's health, promoting close cooperation in high-quality medical resources, strengthening cooperation in the field of public health emergency response, deepening innovative cooperation in the field of traditional Chinese medicine, expanding cooperation in scientific research and services, and strengthening cooperation in talent training and diagnosis and treatment.

The Zhaoqing Nursing Association jointly organized a pediatric nursing training project with The Association of Hong Kong Health Care Professionals and Hong Kong College of Paediatric Nursing, Exchange of nursing professionals. We shared experience in specialist nursing development with the Nurses Association of Macau. We specially interviewed with the Macau Polytechnic University on cultivating nursing talents. disseminating traditional Chinese medicine nursing technology and narrative nursing, and building an efficient platform for

Symposium

Ms Shunhua Deng

promoting the integrated development of regional nursing. A cooperation and exchange platform was established to achieve complementary advantages, mutual benefit and win-win results, and transform exchange results into innovative nursing practice measures to promote the sustainable and healthy development of nursing in the Bay Area.

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Pioneering Nursing Excellence in the Greater Bay Area

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Prof Iat Kio Van

PhD

President

Kiang Wu Nursing College of Macau

Professor VAN Iat Kio, Doctor of Philosophy in Education, President of Kiang Wu Nursing College of Macau. Registered nurse in Macao SAR Government. Fellow of the Hong Kong Academy of Nursing and Midwifery in the specialty of Education and Research - Education (Non-local).

Primary research interests are in the areas of nursing education and nursing development, and major teaching subjects are Healthcare Ethics and Law, Macao Nursing History, and the Changing Health Care Context. Over the years, Prof. Van has published more than 100 academic papers, founded and served as Chief Editor of the Macau Journal of Nursing. Currently, Van holds the following social positions: Director of the Council of the Chinese Women's Research Society, Member of the Teaching Steering Committee of Guangdong Province Undergraduate Nursing Programmes, Chief Advisor of the Zhuhai Nursing Association, Member of the Nursing Specialties Committee and the Education Committee of the Macao SAR Government, Vice-President of the Nurses Association of Macau and the Nursing Education Association of Macao, and Board Member of a college and two secondary schools in Macao, among other positions.

Symposium

Pioneering Nursing Excellence in the Greater Bay Area

DAY 1 (December 6, 2024) | 15:45 – 17:15 | Lecture Theatre



Prof Sylvia Fung

BBS, RN, RM, FHKCHSE, FACHSE, FAAN, FHKANM
Post-reg. Dip (Health Care Education), MBA, MSc (Hospital & Health
Mgt), Hon Doctor (Health Sciences)

President
The Hong Kong Academy of Nursing & Midwifery Limited

Professor Fung has extensive experience in clinical practice, education and management of nursing. She has been the Chief Manager (Nursing) of Hospital Authority (HA) taking charge of more than 20,000 nurses and pioneered the new clinical nursing career pathway of nurse consultant.

She was elected as the Asia Pacific Board Member of the International Confederation of Midwives and was invited to be the International Trustee of the Commission for Foreign Nursing School. She is currently appointed by the Department of Health of Hong Kong as a member of the Complaint Committee of the Private Healthcare Facilities and also appointed by the Hong Kong Hospital Authority as a member of the Public Complaint Committee and a member of the Hospital Governance Committee of Shatin Cheshire Home.

She received the Best Staff Award and Best Contributor Award from the Hong Kong Hospital Authority; the prestigious Florence Nightingale Medal in 2005 by the International Red Cross for her commitment and contribution to nursing services and mankind; and the Bronze Bauhinia Star Award by the Government of Hong Kong SAR for her exemplary contribution to nursing and population health in Hong Kong.

Symposium

Transforming Nursing Practice in Public and Private Healthcare

DAY 1 (December 6, 2024) | 17:15 – 18:00 | Lecture Theatre



Ms Jane Chan

General Manager (Nursing) (Cluster GMN)
Queen Mary Hospital

Ms. Jane Chan is the esteemed Cluster General Manager (Nursing) for the Hong Kong West Cluster and Queen Mary Hospital. With a distinguished career spanning over thirty years in the public sector in Hong Kong, Ms. Chan has been instrumental in advancing nursing practices and patient care within the region. Her leadership has fostered a culture of excellence, innovation, and compassionate care. Known for her expertise in service development and professional development, she has significantly contributed to the growth and enhancement of the nursing workforce. Under her guidance, the nursing staff has grown significantly, ensuring high standards of healthcare delivery. Ms. Chan's dedication to professional development and her commitment to improving healthcare outcomes have made her a respected figure in the nursing community.

Hong Kong Hospital Authority Nursing Practice: From Essential to Advanced and Specialized Care

Established in 1990, the Hong Kong Hospital Authority (HA) has grown into a robust organization with around thirty thousand dedicated nursing professionals. The HA's comprehensive nursing practice framework spans from general nursing to advanced and specialized care. General nursing focuses on delivering high-quality, patient-centered care across various healthcare settings. Advanced nursing roles, including nurse clinics, integrated model of nurse clinics and cancer case management, enhance patient outcomes through specialized services and coordination of complex care. Specialty nursing areas, such as oncology, critical care, and genomic nursing, ensure that patients receive specialized, cutting-edge care tailored to their unique needs. The integration of the Smart Hospital initiatives and nursing informatics enhances efficiency in daily operations through advanced technology and data analytics, streamlining processes, and improving patient care. Additionally, the HA is responsible for providing professional training to nurses, ensuring continuous development and excellence in nursing practice. This holistic approach strengthens the healthcare system, promotes professional development, and ensures the delivery of exceptional patient care.

Symposium

Transforming Nursing Practice in Public and Private Healthcare

DAY 1 (December 6, 2024) | 17:15 – 18:00 | Lecture Theatre



Dr Susanna Lee

RN, RM, DN, MN, BBA (Hons), FHKAN(Paediatrics), FHKAN(Nursing and Health Care Management)

Chief Nursing Officer
Hong Kong Baptist Hospital

Dr. Susanna Lee is currently the Chief Nursing Officer (CNO) of the Hong Kong Baptist Hospital. She has been the Associate Professor (Nursing Practice) at School of Nursing, the University of Hong Kong from 2018-2020. She was the Chief Nursing Officer (CNO) of the Hospital Authority (HA) Head Office (HO) in Hong Kong from 2011-2017. She shouldered the leadership role in corporate nursing services operations, nursing specialty development, and health care management at a corporate level for public hospitals under HA. Academically, Susanna attained her Doctoral Degree from the University of Hong Kong, Master's and Bachelor's Degree from the Chinese University of Hong Kong.

Dr. Susanna Lee is the Vice President of the Hong Kong Academy of Nursing and Midwifery. She contributed greatly to the formulation of core competencies of Advanced and Specialized Practice nurses including Paediatric Nursing for the Voluntary Scheme of Advanced Practice Nurse (APN) registration in the Nursing Council of Hong Kong (NCHK), which has been launched by the government since January 2021. With her vast experiences working in Paediatrics, Susanna was the Convenor of the Paediatric Nursing Panel in developing the Advanced Practice Nurse (Paediatrics) core competencies under the NCHK in 2021. She was also the Past President of the Hong Kong College of Paediatric Nursing (2015-2021) and the Past President of the Hong Kong Paediatric Nurses Association (2006-2012). Susanna was the Chairman of the Licensure Examination Sub-committee of Registered Nurses (Sick Children) of NCHK for nurses trained outside Hong Kong SAR, China (2012-2021). Susanna exercised her leadership role and won the Hospital Management Asia (HMA) Excellent Awards in 2012 at HAHO and in 2024 at the Hong Kong Baptist Hospital.

Internationally, she is the Founding President and is honored as the Honorary President of The Asia Pacific Paediatric Nurses Association (APPNA). Susanna established The APPNA in 2012 with 8 country/region Member Associations including Australia, China, Hong Kong SAR, China, Indonesia, Japan, Philippines, Singapore, and Thailand. She is currently the Co-chairman of the International Council of Nurses (ICN) Nurse Practitioner/Advanced Practice Nurse Network Student group and a former member of the ICN NP/APN Network Health Policy Subgroup.

Transforming Nursing Practice in Public and Private Healthcare

Hong Kong's healthcare system is underpinned by a sturdy public sector and an expanding private sector which operate along a dual track. The Government finances the public healthcare system and provides Hong Kong citizens with equitable access to healthcare services at a very affordable price. The private sector offers those who can afford and are willing to pay for services at their own expense and choice. The Hospital Authority (HA) oversees 43 public hospitals and shoulders 90% of in-patient care in Hong Kong. The 13 private hospitals in Hong Kong adopt a market principle, and prices are based on the cost of medical services and demand.

Nurses are the major workforce of the healthcare system. Nursing has undergone a major transformation worldwide, including in Hong Kong. The role of nurses is dynamic and ever-changing, taking account of the aging population, societal changes, and technological advances. Advanced nursing practice is a global trend in response to patient healthcare needs. The Voluntary Registration Scheme on Advanced and Specialized Nursing Practice by the Nursing Council of Hong Kong has been implemented since January 2021 to recognize qualified nurses working in advanced practice roles.

This presentation shares the care practice in a private hospital and the importance of advanced nursing practice in delivering quality care to meet the complex healthcare needs of patients. The public healthcare system has been overstretched resulting in long waiting times for public access to care. Public-private partnership (PPP) is the HA strategy by leveraging available capacity and capability in the private sector and shifting some of the workload to the private for managing service demands and enhancing the public's access to clinical services, ultimately leading to an overall improvement in healthcare service.

Concurrent Oral Presentation Session

Session 1: Mental Health Across the Lifespan

Day 1 (December 6, 2024) | 13:00 – 14:00 | Room T1101

Moderator: Dr Yi Name Suen, The University of Hong Kong

Dr Wilson Tam, National University of Singapore

CS1-1 Psychoactive Substance Use Among People Over 50 in São Paulo, Brazil and Birmingham, UK. a Qualitative Study.

Chris Wagstaff¹, Sandra Pillon², Walmir Teodoro Sant'anna²

¹Department of Nursing & Midwifery, The University of Birmingham, United Kingdom, ²College of Nursing, University of Sao Paulo at Ribeirao Preto College of Nursing, Brazil

CS1-2 The Role of Social Support and Sleep in Affecting Infertility Psychological Distress Among Women Undergoing Assisted Reproductive Treatments

Lingjun Jiang, Meiliyang Wu, Zining Zhu, Tieying Zeng, Liu Yang, Juan Yao
Department of Nursing, Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, China

CS1-3 Prenatal Depression and Anxiety Symptoms Associated with Social Media Addiction in Chinese Pregnant Women

Ningyuan Guo¹, Mengtong Chen², Shufang Leng³, Hong Li³, Lin Wang¹

¹School of Nursing, Shanghai Jiao Tong University, China, ² Department of Social Work, The Chinese University of Hong Kong, Hong Kong, ³International Peace Maternity and Child Health Hospital, Shanghai Jiao Tong University School of Medicine, China

CS1-4 Bidirectional Associations Between Insomnia Subtypes and Depression: A Prospective Cohort Study

Minhui Liu¹, **Shuomin Wang²**, Qianyuan Li², Kehan Liu², Ruiqi Zhang², Xiao Tian¹, Mengting Dai¹, Xurui Yu¹

¹School of Nursing, Ningxia Medical University, China, ²Xiangya School of Nursing, Central South University, China

CS1-5 Latent Subtypes and Network Structure of Depressive Symptom Trajectories in Middle-Aged and Older Adults in China: A Prospective Cohort Study

Jia Fang, Wenwen Wu, Meifen Zhang

School of Nursing, Sun Yat-sen University, China

Concurrent Oral Presentation Session

Session 1: Mental Health Across the Lifespan

Psychoactive Substance Use Among People Over 50 in São Paulo, Brazil and Birmingham, UK. a Qualitative Study.

Chris Wagstaff¹, Sandra Pillon², Walmir Teodoro Sant'anna²

¹Department of Nursing & Midwifery, University of Birmingham, United Kingdom (UK), ²College of Nursing, University of Sao Paulo at Ribeirao Preto College of Nursing, Brazil

Background and Objectives

Background: Globally psychoactive substance use amongst older adults is growing. Psychoactive substance use in older people is associated with reduced life expectancy & accelerated ageing, further compounded by socioeconomic deprivation (RCP, 2018). Rocket et al (2006) found that compared to 16- 24 years those aged 65 and over were more likely to underreport substance use. The RCP (2018) report highlights that older people are ignored in addiction research and further research is needed into the modern-day phenomenon of psychoactive substance drug use in the over-50 population. Aim: The study aimed to develop a broader understanding of the experiences of people over 50 who use psychoactive substances.

Methods

Method: The study was an exploratory, qualitative study, using in-depth, semi-structured interviews to understand participant's experiences regarding their psychoactive substance use. The UK branch used snowballing recruitment strategies to recruit participants who were 50 plus and currently using psychoactive substances were interviewed. The Brazilian branch of the study used participants who were in-patients in two different therapeutic communities. Twelve (UK) and twenty (Brazil) semi-structured interviews were completed and themes were generated using qualitative analysis techniques.

Results

Results: A superordinate theme across the UK participants, bar one, were happy with their use and had no desire to change. Other themes generated were quality assurance, discussions with children, the psychoactive substances used and music. The Brazilian participants highlighted the context of a lifetime of use and understandings of relapse and consequences. Additionally, the narratives provided insights into challenges faced during the pandemic, which had significant implications for the participants. The study demonstrates that the lives of people who are over 50, who use psychoactive substances, are rich and complex.

Conclusions

Conclusion: These interpretative findings offer insights into the experiences of people over 50 who use psychoactive substances. Future research, methodological considerations and limitations of the study will be discussed.

Concurrent Oral Presentation Session

Session 1: Mental Health Across the Lifespan

The Role of Social Support and Sleep in Affecting Infertility Psychological Distress Among Women Undergoing Assisted Reproductive Treatments

Lingjun Jiang, Meiliyang Wu, Zining Zhu, Tieying Zeng, Liu Yang, Juan Yao

Department of Nursing, Tongji Hospital, Tongji Medical College, Huazhong University of Science and Technology, China

Background and Objectives

Women undergoing assisted reproductive treatments often face significant psychological distress related to infertility, which profoundly affects both individuals and families. Social support is considered a protective factor against infertility psychological distress, while sleep quality is believed to exacerbate such distress. However, the complex relationships among social support, sleep quality, and infertility psychological distress remain unclear. This study aims to explore how social support and sleep quality influence infertility psychological distress.

Methods

A cross-sectional study design was employed, utilizing convenience sampling. Between March and July 2024, 1,007 women receiving assisted reproductive treatments were recruited for a questionnaire survey at two tertiary hospitals' reproductive medicine centers in Wuhan, China. The collected data included demographic information, the Infertility Psychological Distress Scale (IPDS), the Perceived Social Support Scale (PSSS), and the Insomnia Severity Index (ISI). Mediating effect model was employed to identify the underlying mechanisms between study variables.

Results

Social support exerted both direct and indirect effects on infertility psychological distress (Total effect=-0.380, 95%CI did not cross zero), with the Insomnia Severity Index partially mediating the relationship between perceived social support and infertility psychological distress (Indirect effect=-0.132, 95%CI did not cross zero). Social support directly alleviated infertility psychological distress (Indirect effect=-0.248, 95%CI did not cross zero), and it also improved individuals' insomnia, further reducing psychological distress.

Conclusions

Clinical practice should prioritize women's social support and sleep quality, implementing corresponding interventions to enhance the psychological well-being of women undergoing assisted reproductive treatments.

Concurrent Oral Presentation Session

Session 1: Mental Health Across the Lifespan

Prenatal Depression and Anxiety Symptoms Associated with Social Media Addiction in Chinese Pregnant Women

Ningyuan Guo¹, Mengtong Chen², Shufang Leng³, Hong Li³, Lin Wang¹

¹School of Nursing, Shanghai Jiao Tong University, China, ² Department of Social Work, The Chinese University of Hong Kong, China, ³International Peace Maternity and Child Health Hospital, Shanghai Jiao Tong University School of Medicine, China

Background and Objectives

Prenatal depression and anxiety symptoms have been prevalent in global pregnant women, leading to adverse health outcomes of women and their offspring. Less is known about social media use that could be addictive and induce mental health problems. We examined social media addiction and its associations with prenatal depression and anxiety symptoms in Chinese pregnant women.

Methods

Participants were pregnant women attending a tertiary maternity hospital in Shanghai, China. Social media addiction over a 12-month period was measured using 6-item Bergen Social Media Addiction Scale (BSMAS) on a 5-Likert scale ranging from 1 (very rarely) to 5 (very often), with higher total scores (range 6–30) indicating higher levels of addiction. Prenatal depression and anxiety symptoms were respectively measured using the 10-item Edinburgh Postnatal Depression Scale (EPDS, range 0–24) and 13-item Pregnancy-Related Anxiety Questionnaire (PRAQ, range 13–52), with higher total scores indicating higher symptom severities. Associations among BSMAS, EPDS, PRAQ scores were examined using bivariate and multivariable linear regression analyses adjusting for age, educational attainment, employment status, monthly household income, and gestational age. Unstandardized (b) and standardized beta (B) were reported.

Results

332 participants (mean age 32.6 ± 3.5 years, mean gestational age 34.8 ± 4.4 weeks) reported the mean score of BSMAS, EPDS, and PRAQ were 11.2 ± 4.6 , 5.1 ± 4.9 , and 23.9 ± 6.3 , respectively. Participant characteristics showed no significant differences in BSMAS scores (all $P_s > 0.05$). Dose-response associations were observed for BSMAS scores with EPDS (adjusted $b=0.42$, 95% CI: 0.32, 0.53, adjusted $B=0.40$) and PRAQ scores (adjusted $b=0.41$, 95% CI: 0.27, 0.55, adjusted $B=0.30$).

Conclusions

Social media addiction of pregnant women was associated with higher symptom severities of prenatal depression and anxiety symptoms. Longitudinal data are warranted to confirm temporal relations. Prevention and intervention programs on healthy use of social media during pregnancy could be developed for reducing prenatal depression and anxiety.

Concurrent Oral Presentation Session

Session 1: Mental Health Across the Lifespan

Bidirectional Associations Between Insomnia Subtypes and Depression: A Prospective Cohort Study

Minhui Liu¹, **Shuomin Wang**², Qianyuan Li², Kehan Liu², Ruiqi Zhang², Xiao Tian¹, Mengting Dai¹, Xurui Yu¹

¹School of Nursing, Ningxia Medical University, China, ²Xiangya School of Nursing, Central South University, China

Background and Objectives

Depression and insomnia are prevalent in older adults and show bidirectional relationships. Difficulty initiating sleep and difficulty maintaining sleep are major subtypes of insomnia. However, whether and how these two insomnia subtypes differ in their associations with depression is unknown.

Methods

We used data of the community-dwelling older adults from three waves (2011-2013) of the National Health and Aging Trends Study, a nationally representative survey of Medicare Beneficiaries in the United States (Sample 1 [Non-depressed at baseline]: N=4,048; Sample 2 [Non-insomnia at baseline]: N=3,581). Depressive symptom was assessed by the Patient Health Questionnaire-2. Insomnia included self-reports of difficulty initiating sleep (DIS) and difficulty maintaining sleep (DMS). Logistic regression models were used to examine whether baseline (T1) DIS and DMS predicted depression at 12 months (T2) and 24 months (T3). Multinomial regression models were used to examine whether depression at T1 predicted the two insomnia subtypes at T2 and T3.

Results

Participants with no depressive symptom at baseline (n=4,048) tended to be younger than 80 years old (63.1%), female (57.1%) and non-Hispanic whites (70.1%). After adjusting for demographics, lifestyle and health-related covariates, T1 DIS predicted depression at T2 (OR: 1.62, 95% CI: 1.14, 2.31) and T3 (OR: 1.84, 95% CI: 1.21, 2.81). T1 DMS not predict either T2 or T3 depression. Participants with no insomnia at baseline (n=3,581) were younger than 80 years old (63.2%), female (56.3%) and non-Hispanic whites (71.7%). T1 depression predicted T2 DIS (RRR: 2.19, 95% CI: 1.44, 3.34) and T3 (RRR: 1.70, 95% CI: 1.07, 2.70) in the full adjusted model. T1 depression did not predict T2 and T3 DMS.

Conclusions

This study demonstrates a bidirectional association of depression with DIS but not DMS in older adults. Interventions targeting DIS may moderate depression onset in older adults.

Concurrent Oral Presentation Session

Session 1: Mental Health Across the Lifespan

Latent Subtypes and Network Structure of Depressive Symptom Trajectories in Middle-Aged and Older Adults in China: A Prospective Cohort Study

Jia Fang, Wenwen Wu, Meifen Zhang
School of Nursing, Sun Yat-Sen University, China

Background and Objectives

Depression among middle-aged and elderly individuals is a significant public health concern, with varying symptom trajectories over time. Understanding these trajectories and their predictors can inform targeted interventions. To identify subgroups of depression symptom trajectories among middle-aged and elderly individuals; to determine predictors of these trajectory subgroups; and to explore core symptoms among subgroups.

Methods

A total of 7,166 participants aged ≥ 45 years were recruited from the China Health and Retirement Longitudinal Study (2011, 2013, 2015, 2018). Group-based trajectory modeling (GBTM) was used to identify depression trajectories. Ordinal multinomial logistic regression explored influencing factors. Cross-lagged panel network models (CLPN) identified core symptoms within these trajectories.

Results

Three distinct trajectory groups were identified: "consistently low" (Group 1, 66.4%), "decline followed by an increase" (Group 2, 27.8%), and "steadily rising" (Group 3, 5.8%). Compared to Group 1, females had higher odds of depression in Group 2 (OR = 2.13; 95% CI: 1.90–2.38) and Group 3 (OR = 3.72; 95% CI: 2.92–4.75). Higher education was protective in both groups (Group 2 OR = 0.70; 95% CI: 0.59–0.83; Group 3 OR = 0.34; 95% CI: 0.20–0.59). Poor self-reported health increased depression risk (Group 2 OR = 1.77; 95% CI: 1.66–1.90; Group 3 OR = 3.16; 95% CI: 2.76–3.61). Rural residence was associated with higher odds in both groups. CLPN analysis revealed that "depressed mood" had the highest outgoing expected influence, while "everything is an effort" had the highest incoming expected influence.

Conclusions

Distinct depression symptom trajectories exist among middle-aged and elderly individuals, influenced by factors such as gender, education, health status, and residence. Females, those with lower education, poor health, and rural residents are at higher risk. "Depressed mood" and "everything is an effort" are key symptoms within these trajectories. Targeting these core symptoms could improve mental health outcomes, guiding public health strategies and clinical interventions for this population.

Concurrent Oral Presentation Session

Session 2: Youth Mental Health

Day 1 (December 6, 2024) | 13:00 – 14:00 | Room T1206

Moderator: Dr Jojo Kwok, The University of Hong Kong
Dr Sha Li, Nanjing Medical University

- CS2-1** Chinese Adolescent Self-Injury and Suicide Ideation Linked to Nonrestorative Sleep: Findings from a Longitudinal Study
Sha Li¹, Yanzhe Wang¹, Yuting Ren¹, Zheng Lin^{1,2}
¹School of Nursing, Nanjing Medical University, China, ²Administrative Department of Nursing, The First Affiliated Hospital of Nanjing Medical University, China
- CS2-2** Psychological Pain to Suicidal Ideation: The Chain-Mediating Role of Time Perspective and Meaning in Life in Young Adults with Cancer
Chulei Tang¹, Yu Liu², Kaili Zhang², Yanfei Jin¹, Qin Xu¹
¹School of Nursing, Nanjing Medical University, China, ²School of Nursing, Xuzhou Medical University, China
- CS2-3** Prevalence and Predictors of Post-Traumatic Stress Disorder in Pediatric Patients Aged 8-18 Years After Discharge from Pediatric Intensive Care Units
Mao Ting Tang¹, Xian Liang Liu², Lqbal Javed³
¹Department of Pediatric Intensive Care Unit Nursing, West China Second University Hospital, China, ²School of Nursing and Health Studies, Metropolitan University, China, ³Nursing Department, Communicable Disease Center - Hamad Medical Corporation, Qatar
- CS2-4** The Role of Nurses in Interdisciplinary Collaboration for Managing Mental Health, Substance Use, and Psychosocial Crises in the Emergency Department
Celene Yi Yap^{1,2}, Marie Gerdtz¹, Cathy Daniel¹, Mark Putland²
¹Department of Nursing, The University of Melbourne, Australia, ²Emergency Department, The Royal Melbourne Hospital, Australia
- CS2-5** Unhealthy Weight Control Behaviors in Adolescents: A Latent Profile Analysis
Xinlu Li, Zhuo Chai, Min Zhang, Lina Mu, Xilin Yang, Yuanyuan Yu, Yang Li
School of Nursing, Harbin Medical University Daqing Campus, China

Concurrent Oral Presentation Session

Session 2: Youth Mental Health

Chinese Adolescent Self-Injury and Suicide Ideation Linked to Nonrestorative Sleep: Findings from a Longitudinal Study

Sha Li¹, Yanzhe Wang¹, Yuting Ren¹, Zheng Lin^{1, 2}

¹School of Nursing, Nanjing Medical University, China, ²Administrative Department of Nursing, The First Affiliated Hospital of Nanjing Medical University, China

Background and Objectives

Nonrestorative sleep (NRS) is linked to various negative outcomes. The goal of this study was to examine the relationship between NRS and self-harm attempts, suicidal ideation, and suicide attempts using a longitudinal design.

Methods

This two-wave longitudinal school-based survey invited adolescents in Grades 7 to 12 in Nanjing, China, with Time1 (T1) occurring from January 11th to 23rd, 2024, and Time2 (T2) from May 16th to 26th, 2024. We employed the Nonrestorative Sleep Scale to assess NRS, the Perceived Stress Scale for stress, the Center for Epidemiologic Studies Depression-10 for depression, and the Family APGAR Index for family function. The self-injury attempt, suicide ideation, and suicide attempts of the adolescents were asked. We applied multivariable logistic regressions to assess the links between NRS and self-harm attempts, suicidal thoughts, and suicide attempts.

Results

In total, 323 adolescents (57% male) participated in the two-wave surveys, with an average age of 15.4 years (standard deviation: 1.86, range: 12–19). Among the participants, 9.3% engaged in self-injury attempts, 12.7% experienced suicide ideation, and 5.9% had made suicide attempts during the last four months. Less NRS significantly reduced the odds of self-injury attempts (OR=0.89, $P<0.001$), suicide ideation (OR=0.90, $P<0.001$), and suicide attempts (OR=0.93, $P=0.015$). Moreover, the protective effect of less NRS on reducing the risk of self-injury attempts (OR=0.88, $P=0.003$) and suicide ideation (OR=0.92, $P=0.015$) remained significant after adjusting for sociodemographics, stress, depression, and family function but showed no significant impact on suicide attempts.

Conclusions

NRS could increase the risk of self-injury and suicide ideation. Related interventions that could improve restorative sleep would benefit adolescents' health.

Concurrent Oral Presentation Session

Session 2: Youth Mental Health

Psychological Pain to Suicidal Ideation: The Chain-Mediating Role of Time Perspective and Meaning in Life in Young Adults with Cancer

Chulei Tang¹, Yu Liu², Kaili Zhang², Yanfei Jin¹, Qin Xu¹

¹School of Nursing, Nanjing Medical University, China, ²School of Nursing, Xuzhou Medical University, China

Background and Objective

Psychological pain is a significant predictor of suicidal ideation, particularly in vulnerable populations like young adult cancer patients. However, the mediating roles of time perspective and meaning in life in this relationship remain underexplored. This study aims to investigate how time perspective and meaning in life mediate the relationship between psychological pain and suicidal ideation, providing insights for targeted interventions.

Methods

A cross-sectional design was utilized with 296 young adult cancer patients. Participants completed validated self-report measures assessing psychological pain, time perspective (past negative, past positive, present fatalistic, present hedonistic, and future), meaning in life, and suicidal ideation. Pearson correlation analysis and bias-correction percentile Bootstrap method were used for chain mediation tests.

Results

Psychological pain significantly affected suicidal ideation both directly and indirectly. Time perspective and meaning in life were found to mediate this relationship partially, with past negative and present fatalistic perspectives increasing suicide risk by reducing meaning in life, while past positive and future perspectives mitigated this risk by promoting meaning in life.

Conclusions

This study highlights the critical mediating roles of time perspective and meaning in life in the link between psychological pain and suicidal ideation among young adult cancer patients. These findings suggest that therapeutic interventions should focus on modifying time perceptions and enhancing meaning in life to alleviate psychological distress and prevent suicidal ideation in this population.

Concurrent Oral Presentation Session

Session 2: Youth Mental Health

Prevalence and Predictors of Post-Traumatic Stress Disorder in Pediatric Patients Aged 8-18 Years After Discharge from Pediatric Intensive Care Units

Mao Ting Tang¹, Xian Liang Liu², Lqbal Javed³

¹Department of Pediatric Intensive Care Unit Nursing, West China Second University Hospital, China, ²School of Nursing and Health Studies, Metropolitan University, China, ³Nursing Department, Communicable Disease Center-Hamad Medical Corporation, Qatar

Background and Objectives

To identify the prevalence and impact factors for post-traumatic stress disorder (PTSD) in pediatric intensive care unit (PICU) patients one month after discharge.

Methods

Four pediatric intensive care units (PICUs) formed part of the study from August to December 2023. Children aged 8–18 years who were expected to stay in the PICU for more than 48 hours were recruited. Data were collected anonymously utilizing the Demographic Characteristics Table, PICU Environmental Stress Scale, the Pittsburgh Sleep Quality Index, and the Children's Impact of Event Scale.

Results

A total of 409 children participated in the study (mean age = 12.32 years; 59.17% male; 91.44% Han). A total of 36.43% of patients in the PICU exhibited severe PTSD symptoms within one-month post-discharge. PICU environment stress levels were moderate, with 41.08% experiencing poor sleep quality. Factors influencing PICU patients' PTSD included sleep quality, family type, and children's education level.

Conclusions

This study highlights that children display ongoing PTSD symptoms one month after discharge from PICU. Sleep quality, family type, and children's education level are factors influencing PICU patients' PTSD, highlighting the need for comprehensive interventions by healthcare providers to prevent PTSD after discharge.

Concurrent Oral Presentation Session

Session 2: Youth Mental Health

The Role of Nurses in Interdisciplinary Collaboration for Managing Mental Health, Substance Use, and Psychosocial Crises in the Emergency Department

Celene YI Yap^{1, 2}, Marie Gerdtz¹, Cathy Daniel¹, Mark Putland²

¹Department of Nursing, The University of Melbourne, Australia, ²Emergency Department, The Royal Melbourne Hospital, Australia

Background and Objectives

In Australia, emergency departments (EDs) are the primary after-hours care point for people with mental health, AOD, and psychosocial crises. A new team of psychiatric-trained registered nurses has been introduced to ensure timely care by assessing patients before the ED medical team. This study explores multidisciplinary ED clinicians' perceptions of this team's impact.

Methods

A qualitative approach was employed using focus groups and individual interviews with multidisciplinary ED clinicians, including general nurses, emergency mental health clinicians, and ED doctors. Sessions were audio-recorded and transcribed verbatim. Data were analysed thematically.

Results

A total of 5 ED nurses, 5 emergency mental health clinicians, and 4 emergency medicine doctors participated in this study. Overall, the new dedicated team was highly valued in the ED. Staff perceived that the team of psychiatric nurses facilitated timely transfers of patients with mental health, substance use, or complex psychosocial crises to short-stay units, reducing both waiting times in the ED and the time to be assessed by doctors. Their expertise in mental health was seen as a valuable resource for general ED nurses, providing crucial support in managing these patients. Emergency mental health clinicians reported that the team of nurses had positively impacted their workload by conducting preliminary assessments, ensuring that patients received appropriate care pathways. However, as a newly established team, challenges such as recruitment difficulties and maintaining 24-hour coverage have arisen. The lack of consistent staffing and high turnover has raised concerns about sustainability and negatively affected staff trust, as the team has not been consistently available.

Conclusions

In conclusion, the introduction of this dedicated team of nurses has significantly enhanced interdisciplinary collaboration in the ED, improving care quality for patients with mental health, AOD, and complex psychosocial issues. However, further investigation is needed to assess the sustainability of this role.

Concurrent Oral Presentation Session

Session 2: Youth Mental Health

Unhealthy Weight Control Behaviors in Adolescents: A Latent Profile Analysis

Xinlu Li, Zhuo Chai, Min Zhang, Lina Mu, Xilin Yang, Yuanyuan Yu, Yang Li

School of Nursing, Harbin Medical University Daqing Campus, China

Background and Objectives

Driven by the dual pursuit of health and ideal appearance, a considerable number of adolescents engage in unhealthy weight control behaviors. The present study aims to employ a person-centred approach to investigate the potential categories of unhealthy weight-control behaviors among adolescent populations and the differences in their characteristics using latent profile analysis.

Methods

A total of 338 freshmen students were recruited by convenient sampling. The participants were asked to complete a set of questionnaires, including demographic information and social media usage, as well as the BAS-2, SATAQ-4, and the unhealthy weight control behavior subscale. Univariate analysis and multinomial logistic regression analysis were performed to evaluate the influence of various factors on the categories of unhealthy weight control behaviors among the participants.

Results

Finally 300 participants were included in the present study, adolescent unhealthy weight control behaviors were divided into three distinct latent categories, namely mild unhealthy weight control group (P1,37.7%), severe unhealthy weight control group (P2,11.3%) and high diet restriction group (P3,51.0%). The univariate analysis revealed that gender, BMI, monthly household income per capita, the use of little red book, body appreciation, internalization of a thin or low body fat physique, internalization of a muscular or athletic body type, pressure from family, pressure from friend and pressure from media were factors that influenced the three latent profiles ($P < 0.05$). The multinomial logistic regression analysis showed that the use of little red book, body appreciation, pressure from family, gender and internalization of thin or low body fat physique were significant predictors of the various profiles ($P < 0.05$).

Conclusions

This study identified heterogeneity in adolescents unhealthy weight control behaviors, revealing three distinct latent categories. Latent profile analysis has provided us with a clear understanding of subgroups among adolescents with unhealthy weight control behaviors, thereby offering reference material and direction for further research and interventions targeting these behaviors in adolescents

Concurrent Oral Presentation Session

Session 3: Chronic Care Management

Day 1 (December 6, 2024) | 13:00 – 14:00 | Room F1320

Moderator: Dr Jay Lee, The University of Hong Kong
Dean Ratsiri Thato, Chulalongkorn University

CS3-1 The Effectiveness of Nudge-Based Interventions on Self-Monitoring Behaviors Among Patients with Cardiometabolic Diseases: A Systematic Review and Meta-Analysis

Jianing Yu, Yujia Fu, Haoyang Du, Jing Shao*

Institute of Nursing Research, Zhejiang University School of Medicine, China

CS3-2 Prevalence of Diabetes and Hypertension in Thai Prisons Implementing Preventive Measures: A Cross-Sectional Study

Ratsiri Thato¹, **Sirinapha Jittimane**¹, Nirut Rungsawasd², Woraphot Leerat², Haritphon Jaikham², Rohanee Etae², Chalita Prommart², Kotchakorn Tantivisan², Penpakr Uthis¹

¹*Faculty of Nursing, Chulalongkorn University, Thailand*, ²*Department of Corrections, Ministry of Justice, Thailand*

CS3-3 The Impact of Snyder's Hope Theory-Based Intervention on Hope Levels and Coping Strategies in Elderly Patients with Multiple Comorbidities

Zhiyu Ren, **Hongxia Song**

Nursing Department, Henan Provincial People's Hospital, China

CS3-4 Network Analysis of Psychosocial Adaptation in Patients with Intestinal Stoma: A National Cross-Sectional Study in China

Xu Zhang

School of Nursing, Peking University, China

CS3-5 Effects of a Nurse-Led Online-to-Offline Peer Support Intervention Among HIV / AIDS Patients with Poor Self-Management: A Randomized Controlled Trial

Xinyi Su, Xueyuan Zhong, Honghong Wang

School of Nursing, Central South University, China

Concurrent Oral Presentation Session

Session 3: Chronic Care Management

The Effectiveness of Nudge-Based Interventions on Self-Monitoring Behaviors Among Patients with Cardiometabolic Diseases: A Systematic Review and Meta-Analysis

Jianing Yu, Yujia Fu, Haoyang Du, Jing Shao*

Institute of Nursing Research, Zhejiang University School of Medicine, China

Background and Objectives

Cardiometabolic diseases significantly impact global mortality and life expectancy, highlighting the need for effective self-monitoring strategies. Nudge-based interventions, such as reminders and automatic prescription refills, show promise in enhancing adherence to self-monitoring, which remains suboptimal. This systematic review and meta-analysis aims to evaluate the effectiveness of nudge-based interventions in improving self-monitoring behaviors and health outcomes in this population.

Methods

We conducted a comprehensive search across seven databases for randomized controlled trials on nudge-based interventions in cardiometabolic disease self-monitoring from January 2008 to October 2024. Nudge strategies were categorized into "Decision Information", "Decision Structure", and "Decision Assistance", according to the choice architecture taxonomy by Münscher et al. Two researchers performed rigorous study selection and quality assessment, with data analyzed using Comprehensive Meta-Analysis software version 3.7.

Results

Data from 6,572 participants in 33 trials involving 63 nudge strategies were analyzed. "Decision Information" was the most common nudge strategy. Meta-analyses showed that nudge-based interventions significantly improved self-monitoring behaviors in cardiometabolic patients (Hedge's $g = 0.52$; 95% CI [0.40, 0.65]; $p < 0.001$) and reduced HbA1c levels (MD = -0.46; 95% CI [-0.59, -0.33]; $p < 0.001$), systolic blood pressure (MD = -4.47; 95% CI [-5.66, -3.28]; $p < 0.001$), and diastolic blood pressure (MD = -2.02; 95% CI [-3.69, -0.35]; $p < 0.05$) compared to the control group. LDL-C reduction was non-significant (MD = -1.31; 95% CI [-4.93, 2.31]; $p = 0.48$). Subgroup analyses indicate potential variation in effectiveness by monitoring behaviors, delivery modes, components, and intervention duration.

Conclusions

This systematic review and meta-analysis concludes that nudge-based interventions effectively improve self-monitoring adherence, HbA1c levels, and blood pressure in patients with cardiometabolic diseases. Future interventions should not only integrate multiple nudge strategies but also incorporate other behavioral theories and policy tools to optimize outcomes.

Concurrent Oral Presentation Session

Session 3: Chronic Care Management

Prevalence of Diabetes and Hypertension in Thai Prisons Implementing Preventive Measures: A Cross-Sectional Study

Ratsiri Thato¹, Sirinapha Jittimane¹, Nirut Rungsawasd², Woraphot Leerat², Haritphon Jaikham², Rohanee Etae², Chalita Prommart², Kotchakorn Tantivisan², Penpaktr Uthis¹

¹Faculty of Nursing, Chulalongkorn University, Thailand, ²Department of Corrections, Ministry of Justice, Thailand

Background and Objectives

Certain living conditions in prisons, such as restricted activity, stress, limited food choice, increase the risk of diabetes and hypertension. However, there is limited evidence on whether preventive measures such as smoking bans and prolonged fasting periods during cell time would affect the prevalence of these diseases in prisons. This study aimed to assess the prevalence and associated factors of diabetes and hypertension among incarcerated individuals in Thailand.

Methods

A cross-sectional study conducted at five prisons in Thailand that implements preventive measures, including a smoking ban. The study included 11,290 eligible participants aged 18 or older. Data were collected through face-to-face interviews, measurements of height and weight, capillary blood glucose tests, and blood pressure assessments from September 7, 2023, to December 29, 2023. Logistic regression was used to analyse the associations.

Results

Of the 11,290 eligible participants, 98.9% were screened for diabetes and 98.6% for hypertension. The prevalence of diabetes was 0.8% (95% CI: 0.6-1.0) and hypertension was 4.0% (95% CI: 3.6-4.4). Diabetes was significantly associated with a family history of diabetes (Adjusted OR=2.33, 95% CI 1.37- 3.97), and hypertension was associated with being 35 years or older (Adjusted OR=3.21, 95%CI 2.52- 4.08) and a family history of hypertension (Adjusted OR=1.81, 95% CI 1.46- 2.23).

Conclusions

The prevalence of diabetes and hypertension in this study was the lowest compared to those reported in the literature, suggesting that preventive measures in Thai prisons may help reduce the prevalence of these diseases. Screening criteria should prioritize individuals aged 35 or older and those with a family history of diabetes and hypertension, based on the factors observed in this study.

Concurrent Oral Presentation Session

Session 3: Chronic Care Management

The Impact of Snyder's Hope Theory-Based Intervention on Hope Levels and Coping Strategies in Elderly Patients with Multiple Comorbidities

Zhiyu Ren, **Hongxia Song**

Nursing Department, Henan Provincial People's Hospital, China

Background and Objectives

Background: Elderly patients with multiple comorbidities often face complex medical issues that increase their psychological burden. Snyder's hope theory has shown potential in enhancing hope and coping strategies but lacks systematic research in this context. **Objective:** To investigate the impact of nursing interventions based on Snyder's hope theory on the levels of hope and coping strategies in elderly patients with multiple comorbidities, providing scientific evidence for improving patient care quality and developing effective intervention measures.

Methods

Methods: This study included 80 elderly patients with multiple comorbidities admitted to the Digestive Medicine Department of Henan Provincial People's Hospital from January 2024 to June 2024. Patients were randomly divided into a control group and an intervention group, with 40 patients in each group, using a random number table method. The control group received conventional nursing care, while the intervention group received nursing interventions based on Snyder's hope theory, including hope level assessment, goal setting, pathway thinking training, and motivation enhancement activities. The levels of hope (Herth Hope Index (HHI)), coping strategies (Medical Coping Modes Questionnaire (MCMQ)), and quality of life (General Quality of Life Questionnaire (GQOL)) were compared before and after the intervention.

Results

Results: The hope levels in the intervention group were significantly higher than those in the control group ($P < 0.05$). Regarding coping strategies, the intervention group had significantly lower scores in avoidance and surrender dimensions and significantly higher scores in the facing dimension compared to the control group ($P < 0.05$). Additionally, the quality-of-life scores in the intervention group were also significantly higher than those in the control group ($P < 0.05$).

Conclusions

Conclusion: Nursing interventions based on Snyder's hope theory significantly improved hope levels, coping strategies, and quality of life in elderly patients with multiple comorbidities. This approach helps patients manage their challenges effectively and should be widely applied in clinical practice.

Concurrent Oral Presentation Session

Session 3: Chronic Care Management

Network Analysis of Psychosocial Adaptation in Patients with Intestinal Stoma: A National Cross-Sectional Study in China

Xu Zhang

School of Nursing, Peking University, China

Background and Objectives

Psychosocial adaptation is a critical aspect of postoperative recovery for individuals with intestinal stoma, significantly impacting their quality of life. Despite its importance, limited research has focused on the specific factors influencing psychosocial adaptation and the core symptoms at different adaptation levels. The aim of this study is to identify these influencing factors and core symptoms.

Methods

This was a multicenter, cross-sectional and online study. All patients with intestinal stoma were evaluated for psychosocial adaptation using the Ostomy Adjustment Inventory-20 (OAI-20). Univariate and multivariate linear regression were used to analyse the potential relationship between the level of psychological adaptation of patients with intestinal stoma and individual factor. By network analysis, we calculated the centrality indicators for each node in the psychosocial adaptation network at different levels of low, medium and high, respectively.

Results

This study ultimately enrolled a total of 19,909 patients with intestinal stoma from 202 Chinese hospitals, out of which 6408 (32%) reported low psychosocial adaptation. It was found that being female, partially self-care, completely dependent on others for care, and having no medical insurance were negatively associated with psychosocial adaptation scores. In the low-level psychosocial adaptation network, #OAI-14: limited activity ($rS=1.007$, $rEI=0.787$), #OAI-9: worried about ostomy ($rS=1.085$, $rEI=0.697$), and #OAI-11: always like a patient ($rS=0.942$, $rEI=0.733$) were identified as central indicators.

Conclusions

Individualised and precise interventions can be carried out in terms of both the influencing factors and the most influential nodes of psychosocial adaptation in order to improve the level of psychosocial adaptation in patients with intestinal stoma.

Concurrent Oral Presentation Session

Session 3: Chronic Care Management

Effects of a Nurse-Led Online-to-Offline Peer Support Intervention Among HIV/AIDS Patients with Poor Self- Management: A Randomized Controlled Trial

Xinyi Su, Xueyuan Zhong, Honghong Wang

School of Nursing, Central South University, China

Background and Objectives

Background: HIV infection is now a chronic disease affecting patients' quality of life. Peer support and multimodal interventions show promise in self-management, but research in HIV is limited, and no economic evaluations exist. Objective: Evaluate the effects of a nurse-led online-to-offline peer support intervention for HIV/AIDS patients, and its cost-effectiveness.

Methods

This RCT conducted from May 2023 to February 2024 at an HIV clinic. It included 108 participants with poor self-management, who were randomized into intervention (n=54) and control (n=54) groups. The control group received routine healthcare, counseling, and follow-up services. The intervention group underwent an online-to-offline intervention program. Online intervention included setting self-management plans, learning skills, engaging with a peer leader, and group education, with a multimodal format featuring text, pictures, videos, audio, and live streaming. Offline intervention included nurse-to-patient communication, problem feedback, and summaries. Quality of life, self-management skills, and other health-related outcomes were measured at baseline (T0), immediately after the intervention (T1), and at the 3-month follow-up (T2). A health economic evaluation was conducted using cost-effectiveness analysis.

Results

The intervention group showed a significant improvement in quality of life compared to the control group (DID=9.565, 95% CI: 4.343-14.786, $P<0.001$), with a net effect exceeding the minimal clinically important difference of 6.19. Additionally, the intervention group demonstrated improved self-efficacy and disease self-management skills compared to controls, with significant differences at both time points ($P<0.05$). No significant differences were found in medical and social support, self-stigma or depressive symptoms between groups ($P>0.05$). It took 1,263 yuan (within acceptable cost-effectiveness threshold) for one participant to perceive the improvement in quality of life.

Conclusions

The intervention significantly improved patients' quality of life, disease self-efficacy, and self-management skills, while its effects on self-stigma, social support, and depressive symptoms were not significant. The program proved cost-effective and is suitable for wider implementation

Concurrent Oral Presentation Session

Session 4: Digital Health and Artificial Intelligence

Day 1 (December 6, 2024) | 13:00 – 14:00 | Room F1420

Moderator: Dr Derek Cheung, The University of Hong Kong
Dr Heeyoung Lee, University of Pittsburgh

CS4-1 Digital Exclusion in Older Adults: A Scoping Review

Hui Ge, Jiashuai Li, Huiling Hu, Tingting Feng, Xue Wu
School of Nursing, Peking University, China

CS4-2 Design and Primary Application of the iNATURE Weight-Management Program for Obese Children and Adolescents

Wenbing Shi
School of Nursing, Nanjing Medical University, China

CS4-3 Pulmonary Rehabilitation in Children with Bronchiolitis Obliterans: The Effectiveness of Interactive AI Respiratory Training

Huayan Liu
Department of Respiratory Medicine, Hunan Provincial Children's Hospital, China

CS4-4 User Personas for eHealth on Self-Management of Depressive Symptoms in People Living with HIV: Mixed Methods Study

Ting Zhao¹, Chulei Tang², Huang Yan³, Xinyi Su¹, Xueyuan Zhong³, Honghong Wang¹
¹Xiangya School of Nursing, Central South University, China, ²School of Nursing, Nanjing Medical University, China, ³Department of Nursing, Third Xiangya Hospital of Central South University, China

CS4-5 A Study on the Construction and Application of an Intervention Strategy to Improve Maternal Urinary Incontinence Seeking Behavior Based on Artificial Intelligence Virtual Chatbot

Yanyan Li¹, Wenzhi Cai², Surui Liang²
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Concurrent Oral Presentation Session

Session 4: Digital Health and Artificial Intelligence

Digital Exclusion in Older Adults: A Scoping Review

Hui Ge, Jiashuai Li, Huiling Hu, Tingting Feng, Xue Wu

School of Nursing, Peking University, China

Background and Objectives

The intersection of aging and digitization is a distinctive feature of this new era. While digitalization brings convenience, it also forces older people to use tools that did not exist during the most active stage of their lives. The scoping review of digital exclusion among older adults, the primary demographic affected, is essential for their better integration into the digital society, particularly in improving digital healthcare services' usability, continuity, and precision. This study aims to conduct a scoping review of digital exclusion to better understand this phenomenon among older adults.

Methods

A literature search was conducted from the inception until March 2024 in six databases (MEDLINE, CINAHL, Abstracts in Social Gerontology, Academic Search Complete, ACM digital library, and Google Scholar). Data analysis was conducted using the descriptive inductive thematic analysis method.

Results

A total of 39 articles were included in the scoping review. The attributes of digital exclusion were identified as resource exclusion, skills exclusion, and motivational exclusion. Contributing factors were categorized into three domains: sociodemographic characteristics, physiological conditions, and psychological states. The consequences of digital exclusion were separated into social exclusion and technology anxiety. Intervention strategies included accessibility, ability, and willingness, aligning with the attributes of digital exclusion among older adults.

Conclusions

The findings of this scoping review contribute to understanding and clarifying digital exclusion in older adults. Digital exclusion is a prevalent, complex, multi-causal, and multidimensional phenomenon that predisposes individuals to social exclusion. Identifying attributes, contributing factors, and consequences can guide digital product developers, sociologists, and geriatric clinicians in addressing digital exclusion in older adults to improve their mental and physical well-being. Future research needs to focus more on empirical studies to deepen our understanding of digital exclusion in older adults.

Concurrent Oral Presentation Session

Session 4: Digital Health and Artificial Intelligence

Design and Primary Application of the iNATURE Weight-Management Program for Obese Children and Adolescents

Wenbing Shi

School of Nursing, Nanjing Medical University, China

Background and Objectives

Childhood and adolescent obesity poses a significant threat to physical and mental health while steadily increasing worldwide, imposing a heavy socioeconomic burden. Mobile app-based interventions have proven to be effective tools for promoting healthier weight management within families. Thus, our team designed and developed the iNATURE weight management platform and conducted a preliminary evaluation to assess its intervention efficacy and user experience.

Methods

Prior to development, we conducted a needs assessment to understand the weight management requirements of the target population, identifying key functions and service scopes for the app. Guided by the Health Ecological Model, we developed a personalized intelligent weight management platform. A pilot study was carried out in Nanjing, Jiangsu Province, utilizing a pre-post design. A total of 328 overweight and obese children and adolescents participated in an 8-week empirical study using the app.

Results

The app consists of four core modules: daily activity monitoring, health education and intervention push notifications, knowledge sharing and communication, and personal profile management. Significant differences were observed in participants' BMI, dietary behavior, and physical activity scores before and after the intervention. In terms of factors influencing the app's effectiveness, BMI changes and weight logging frequency, as well as dietary behavior changes and behavior logging frequency, were significantly correlated. Weight record was significantly associated with family income, primary caregiver, and parents' perception of the child's weight. Behavior record was also significantly associated with parents' perception of the child's weight, while usage duration was significantly correlated with the primary caregiver (all $p < 0.05$).

Conclusions

The app demonstrated initial effectiveness in promoting childhood obesity prevention. However, further optimization is needed to enhance user outcomes, enabling better personalized weight management and promoting the physical and mental health of children and adolescents.

Concurrent Oral Presentation Session

Session 4: Digital Health and Artificial Intelligence

Pulmonary Rehabilitation in Children with Bronchiolitis Obliterans: The Effectiveness of Interactive AI Respiratory Training

Huayan Liu

Respiratory Medicine, Hunan Provincial Children's Hospital, China

Background and Objectives

Bronchiolitis obliterans (BO) is a chronic, irreversible lung disease with prognostic heterogeneity. The interactive artificial intelligence (AI) respiratory training is a method. This study evaluates the effectiveness of interactive AI respiratory training in pulmonary rehabilitation for children with BO by training compliance, clinical symptom severity, lung function, and training-related adverse events.

Methods:

A two-arm, single-blind randomized controlled trial was conducted on 84 children with BO and their families from January 2022 to October 2023, who were randomly allocated into the intervention group and conventional group with a 1:1 ratio. Data on training compliance, clinical symptom severity, lung function and training-related adverse events were collected from both groups at three points of time: the day of discharge (T1), one month after discharge (T2), and three months after discharge (T3). A repeated measures ANOVA was used to compare the changes in each group due to the respiratory training. The study report followed the CONSORT 2010 checklist.

Results:

63 families completed the trial, including 32 in the intervention group and 31 in the conventional group. The repeated measures ANOVA showed statistically significant differences across three time points in both groups in clinical symptoms ($P < 0.001$), as well as in symptom severity and lung function for time, group, and time-by-group interaction ($P < 0.001$). Simple effect analysis revealed that after 4 and 12 weeks of intervention, the intervention group had significantly higher compliance with the respiratory training ($P < 0.05$) and less severe clinical symptoms ($P < 0.001$). After a 12-week intervention, the lung-function measurements, such as forced expiratory volume in one second, forced vital capacity, and peak expiratory flow rate, were significantly higher in the intervention group than in the conventional group ($P < 0.001$). Besides, training-related adverse events occurred considerably less in the intervention group as well ($P < 0.05$).

Conclusions:

Interactive AI respiratory training effectively improves children's training compliance and lung function, relieves clinical symptoms, and reduce training-related adverse events.

Concurrent Oral Presentation Session

Session 4: Digital Health and Artificial Intelligence

User Personas for eHealth on Self-Management of Depressive Symptoms in People Living with HIV: Mixed Methods Study

Ting Zhao¹, Chulei Tang², Huang Yan³, Xinyi Su¹, Xueyuan Zhong³, Honghong Wang¹

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Background and Objectives

A lack of personalization is an important barrier to user engagement with eHealth on self-management of depressive symptoms in people living with HIV. According to goal-directed design, personalized eHealth requires identifying user personas before concrete design to understand different users' goals & needs. Therefore, this study aimed to identify user personas for eHealth on self-management of depressive symptoms in people living with HIV and explore the goals & needs of different user personas for future eHealth.

Methods

We used an explanatory sequential mixed methods design at the First Hospital of Changsha City, Hunan Province, China, from April to October 2022. In the quantitative phase, 572 people living with HIV completed validated questionnaires, including their demographics, self-efficacy, self-management of depressive symptoms, and eHealth literacy. Latent profile analysis was performed to identify distinct user personas. In the qualitative phase, 43 one-to-one, semi-structured interviews across different user personas were conducted, transcribed verbatim, and analyzed using conventional content analysis.

Results

Three types of user personas could be identified, including "high-level self-manager," "medium-level self-manager," and "low-level self-manager." High-level self-managers had relatively high levels of self-efficacy, self-management abilities of depressive symptoms, and eHealth literacy; they desired access to self-management support for depressive symptoms from eHealth with high usability. Medium-level self-managers had relatively medium levels of self-efficacy, self-management abilities of depressive symptoms, and eHealth literacy; they desired access to self-management support for HIV from eHealth with privacy. Low-level self-managers had relatively low levels of self-efficacy and self-management abilities of depressive symptoms and a relatively medium level of eHealth literacy; they desired access to professionals' guidance from eHealth with privacy and free of charge.

Conclusions

The three user personas shed light on the possibility of personalized eHealth to support the self-management of depressive symptoms in different people living with HIV. Further endeavor is needed to examine the generalizability of the user personas across study sites.

Concurrent Oral Presentation Session

Session 4: Digital Health and Artificial Intelligence

A Study on the Construction and Application of an Intervention Strategy to Improve Maternal Urinary Incontinence Seeking Behavior Based on Artificial Intelligence Virtual Chatbot

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Background and Objectives

To analyze the incidence of maternal incontinence without seeking medical treatment and related influencing factors. On the basis of evidence-based research in the literature, we built a maternal incontinence virtual chatbot health consultation and education platform based on artificial intelligence to improve the maternal incontinence medical consultation rate.

Methods

On the basis of the current situation investigation and literature review, we established the discussion contents and entries of the expert meeting, and used the expert meeting method to build a maternal incontinence virtual chatbot platform based on artificial intelligence, and through continuous training and simulated dialogues of the virtual chatbot, in order to realize the consulting and education platform that is more in line with the needs of the maternal demand for health knowledge. The effectiveness of the intervention strategy was verified through a clinical randomized controlled trial.

Results

The virtual chatbot health consultation and education platform for pregnant women constructed based on artificial intelligence is practical, easy to operate, and able to meet the knowledge needs of pregnant women with urinary incontinence. The positive coefficient of experts >90%, authority coefficient 0.89, coefficient of variation 0.02~0.30, the full rate of constructed content 40%~95%, $P < 0.001$. Randomized control study subjects 183 people, 162 people completed all nodes of the follow-up, the results of generalized estimating equation showed that the experimental group in the urinary incontinence medical consultation rate and the rate of knowledge was significantly higher than that of the control group $P=0.021$; $P=0.032$. significantly better than the control group in improving the quality of life in urinary incontinence $P=0.038$.

Conclusions

The maternal incontinence virtual chatbot health consultation and education platform built based on artificial intelligence can effectively improve the maternal incontinence medical consultation rate and knowledge rate, as well as improve the impact of incontinence on the quality of life, and ultimately improve the developmental outcome of incontinence.

Concurrent Oral Presentation Session

Session 5: Gerontological Care

Day 1 (December 6, 2024) | 15:45 – 16:45 | Room T1101

Moderator: Dr Celine Chui, The University of Hong Kong

Prof Jing Wang, Xi'an Jiaotong University

CS5-1 Digital Health Literacy Questionnaire for Older Adults: Instrument Development and Validation Study
Xinxin Wang^{1,2}, Chengrui Zhang², Yue Qi³, Ying Xing², Yawen Liu⁴, Jiayi Sun⁴, Wei Luan¹
¹Nursing Department, Shuguang Hospital Affiliated to Shanghai University of Traditional Chinese Medicine, China, ²School of Nursing, Shanghai Jiao Tong University, China, ³School of Health Management, Harbin Medical University, China, ⁴School of Nursing, Shanghai University of Traditional Chinese Medicine, China

CS5-2 Constructing Reliability and Validity: Physical Restraint Assessment Scale for the Elderly People in Aged Care Facilities
Lichun Yan^{1,2}, Zhiyi Wang¹, Yajing Hu¹, Xiaocong Yi¹, Suwen Tan¹, Yinhua Zhang¹
¹School of Nursing, Hunan University of Chinese Medicine, China, ²Nursing Department, The First Affiliated Hospital of Hunan University of Traditional Chinese Medicine, China

CS5-3 Association Between Hearing Loss and Cognitive Frailty in the Elderly and Their Dose-Response Relationship
Kairong Wang¹, Wanrui Wei², Weinan Liu¹, Zheng Li²
¹Department of Nursing, Chinese Academy of Medical Sciences - Peking Union Medical College, Peking Union Medical College Hospital, China, ²School of Nursing, Chinese Academy of Medical Sciences & Peking Union Medical College, China

CS5-4 Age-Specific Cutoff Values of Calf Circumference for Determining Sarcopenia in the Elderly in the Community: The SONIC Study
Chisato Hori¹, Yuya Akagi¹, Mai Kabayama¹, Michiko Kido¹, Hiroshi Akasaka², Yasumichi Arai³, Takumi Hirata⁴, Yasuyuki Gondo⁵, Koichi Yamamoto², Kei Kamide¹
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CS5-5 Self-Efficacy of ICU Nurses in Delirium Care: An Analysis of the Current Status and Influencing Factors
Jing Nie
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Concurrent Oral Presentation Session

Session 5: Gerontological Care

Digital Health Literacy Questionnaire for Older Adults: Instrument Development and Validation Study

Xinxin Wang^{1, 2}, Chengrui Zhang², Yue Qi³, Ying Xing², Yawen Liu⁴, Jiayi Sun⁴, Wei Luan¹

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Background and Objectives

The integration and fusion of digital technology in elderly health and eldercare has enhanced the intelligence level of health and eldercare products and services while altering how seniors acquire and disseminate health information. Assessing the digital health literacy (DHL) of the older people is crucial for formulating targeted interventions. Our study developed a DHL assessment questionnaire for older adults to provide a scientific tool for assessing the level of DHL among older adults.

Methods

The literature review, focus group discussion method, and Delphi method were used for questionnaire item pool construction and item screening. The questionnaire items were analyzed by item analysis for comprehensive judgment, and the questionnaire validity was analyzed by construct validity, content validity, and criterion-related Validity. Questionnaire reliability was analyzed through Cronbach's alpha coefficient, split-half reliability, and test-retest reliability.

Results

All items showed statistically significant differences between the high and low score groups. A total of six common factors were extracted after multiple exploratory factor analysis with a cumulative variance contribution rate of 73.745%. Confirmatory factor analysis showed a good fit of the questionnaire ($\chi^2/df=2.803$, RMSEA=0.071, CFI=0.907, GFI=0.773, IFI=0.908, TLI=0.901, NFI=0.863). The factor loadings of the 39 items corresponding to the 6 dimensions ranged from 0.538 to 0.931. The average variance extracted for each dimension ranged from 0.608 to 0.768. All dimensions of the questionnaire were significantly correlated with each other. The I-CVI of this questionnaire ranged from 0.81 to 1.000, and S-CVI/Ave=0.92. Our questionnaire was positively correlated with the total score and the dimension scores of the eHEALS. The total questionnaire's Cronbach's α coefficient is 0.976, and each dimension's Cronbach's α coefficients ranged from 0.819 to 0.952.

Conclusions

Our questionnaire can be used to identify the current status of DHL in older adults and provide a scientific and feasible evaluation tool for assessing the current status of DHL in older adults in the future and providing personalized interventions.

Concurrent Oral Presentation Session

Session 5: Gerontological Care

Constructing Reliability and Validity: Physical Restraint Assessment Scale for the Elderly People in Aged Care Facilities

Lichun Yan^{1, 2}, Zhiyi Wang¹, Yajing Hu¹, Xiaocong Yi¹, Suwen Tan¹, Yinhua Zhang¹

¹School of Nursing, Hunan University of Chinese Medicine, China, ²Nursing Department, The First Affiliated Hospital of Hunan University of Traditional Chinese Medicine, China

Background and Objectives

Background: There are no guidelines to regulate physical restraint in aged care facilities (ACFs). Objectives: Construct a physical restraint assessment scale for elderly staff in ACFs and test its reliability and validity.

Methods

The physical restraint assessment scale was constructed by two-tier Delphi method. The entry pool was determined by literature review and research team discussion, followed by a discussion by a panel of experts to establish the items of the Delphi study. The retest reliability of the scale was investigated by 30 elderly staff two weeks ago and later. Inter-rater reliability was obtained by rating the same 30 elderly by a researcher and a nursing staff. Internal consistency and structural validity were obtained by scoring the scale entries by 240 elderly staff using the Likert 5-point scoring method. Content validity was obtained by scoring entries using a 4-point scoring method by 9 experts.

Results

The physical restraint assessment scale for elderly people in ACFs was finally formed, which included consciousness, muscle strength, behavior, cognitive function, experience of unplanned tube drawing or slipping within a specified period (① tube: infusion tube, urethral catheter, stomach tube, ② time: Within one month), a history of falls/bed-fall, use of sedative drugs within 24 hours, and direct restraint indicators. It contained 8 dimensions and 22 items. The retest reliability was 0.976. Inter-rater reliability was 0.944. The internal consistency was 0.869. Content validity I-CVI was 0.909 and S-CVI was 0.889. The KMO value of exploratory factor analysis was 0.799. In the elderly unit of pipeline nursing, 1-4 points means unrestricted; 5-6 points were substitution restraint; ≥ 7 means to restrain and strengthen monitoring. Without pipeline care in elderly unit, 1-6 points were unrestricted, and ≥ 7 were restricted.

Conclusions

The physical restraint assessment scale of the elderly in ACFs had great reliability and validity.

Concurrent Oral Presentation Session

Session 5: Gerontological Care

Association Between Hearing Loss and Cognitive Frailty in the Elderly and Their Dose-Response Relationship

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²School of Nursing, Chinese Academy of Medical Sciences & Peking Union Medical College, China

Background and Objectives

Cognitive frailty increases the risk of varied adverse outcomes in the elderly. The relationship and dose-response relationship between hearing loss and cognitive frailty were not clear. This study aims to explore the association of hearing loss with the risk of cognitive frailty in the elderly and the dose-response relationship between them.

Methods

Four hundred thirty-two elderly individuals from two communities in Beijing were convenience sampled and recruited. Objective hearing loss was measured using hearing software based on pure tone audiometry to calculate the pure tone average (PTA). Self-perceived hearing loss was assessed by the Hearing Handicap Inventory for the Elderly-Screening (HHIE-S). Cognitive frailty included reversible cognitive frailty (RCF) and potentially reversible cognitive frailty (PRCF), which were assessed using the Fried Phenotype, Montreal Cognitive Assessment, and Subjective Cognitive Decline Questionnaire 9. Restricted cubic splines were used to examine the dose-response relationship between hearing loss and cognitive frailty.

Results

For RCF, the PTA and HHIE-S scores were not associated with the risk of RCF (all $P > 0.05$) after full adjustment. For PRCF, for every 1 dB increase in PTA in the better ear, there was a 4% (95% CI: 1%~12%, $P = 0.005$) increased risk of PRCF after full adjustment. The results of the restricted cubic spline showed that PTA in the better ear showed a meaningful linear increasing dose-response relationship with the risk of PRCF ($P_{\text{overall}} = 0.023$, $P_{\text{non-linear}} = 0.281$). However, there was no statistically significant association between HHIE-S scores and the risk of PRCF ($P = 0.167$), nor was there a significant dose-response relationship ($P_{\text{overall}} = 0.057$).

Conclusions

Objective hearing loss based on pure tone audiometry significantly increased the risk of PRCF, and there was a significant linear dose-response relationship between them. However, there was no significant relationship between self-perceived hearing loss and PRCF. Moreover, no significant association was found between objective or scale-measured hearing loss and the risk of RCF.

Concurrent Oral Presentation Session

Session 5: Gerontological Care

Age-Specific Cutoff Values of Calf Circumference for Determining Sarcopenia in the Elderly in the Community: The SONIC Study

Chisato Hori¹, Yuya Akagi¹, Mai Kabayama¹, Michiko Kido¹, Hiroshi Akasaka², Yasumichi Arai³, Takumi Hirata⁴, Yasuyuki Gondo⁵, Koichi Yamamoto², Kei Kamide¹

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Background and Objectives

Age-related loss of muscle mass and muscle strength is called sarcopenia, and is associated with increased need for long-term care and mortality. Although a standard screening value (<34 cm for men and <33 cm for women) using calf circumference, which can be easily measured, has been established for determining sarcopenia in the health-check-ups, this study aimed to examine more accurate cutoff values for calf circumference by age, considering age-related changes in body shape.

Methods

A total of 1840 men and women who participated in a long-term longitudinal epidemiological study (The SONIC study) of elderly people living in four regions in Japan from 2015~2019 were included in the analysis. Sarcopenia determination was assessed using grip strength, walking speed, and skeletal muscle mass BIA method based on AWGS2019, and ROC analysis was performed by age and sex.

Results

The analysis showed that the cutoff values for calf circumference were 33.6 cm in men in their 70s - 32.8 cm in their 80s - 33.3 cm in their 90s, and 31.9 cm in women in their 70s - 32.0 cm in their 80s - 31.0 cm in their 90s.

Conclusions

Cutoff values for age-specific calf circumference in sarcopenia determination are proposed to be 33 cm for men in their 70s-90s, 32 cm for women in their 70s-80s, and 31 cm for women in their 90s. In the future, it would be desirable to disseminate this indicator in the community and have it utilized not only by medical professionals but also by the older adults and their families themselves, leading to the prevention and early detection of sarcopenia.

Concurrent Oral Presentation Session

Session 5: Gerontological Care

Self-Efficacy of ICU Nurses in Delirium Care: An Analysis of the Current Status and Influencing Factors

Jing Nie

Intensive Critical Unit, Chongqing University Cancer Hospital, China

Background and Objectives

Objective: The aim of this study was to assess the current status of delirium care self-efficacy among nurses in the intensive care unit (ICU) and the level of their knowledge about delirium in the ICU, as well as to analyze factors influencing the delirium care self-efficacy of ICU nurses.

Methods

Methods: The study was based on a sample of 283 ICU nurses from eight hospitals in Chongqing selected using a convenience sampling method between July 2023 and September 2023. The tools used included a general information questionnaire, the Chinese version of the Delirium Care Self-Efficacy of ICU Nurses Scale, and the Chinese version of the ICU Delirium Knowledge Level Questionnaire.

Results

Results: The self-efficacy score (47.84 ± 9.93) of ICU nurses was positively correlated with the delirium knowledge level score (12.32 ± 3.47 , $r = 0.591$, $P < 0.001$). Multivariate linear regression analysis identified the gender of the nurse, hospital level (tier), duration of ICU work experience, whether the nurse was a specialized ICU nurse, whether the nurse received delirium-related training, and the level of knowledge about delirium (all $P < 0.05$) as the influencing factors for the delirium care self-efficacy of ICU nurses.

Conclusions

Conclusion: It is recommended that ICU nursing managers offer targeted interventions based on the influencing factors to improve the delirium care self-efficacy of ICU nurses and their delirium knowledge levels, thereby reducing the incidence of delirium and improving the quality of care provided for patients with delirium in the ICU.

Concurrent Oral Presentation Session

Session 6: Cancer Care

Day 1 (December 6, 2024) | 15:45 – 16:45 | Room T1206

Moderator: Dr Denise Cheung, The University of Hong Kong

Dr Wei Xia, Sun Yat-sen University

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| CS6-1 | <p>A Nomogram for Predicting Cancer-Related Cognitive Impairment in Lung Cancer Patients from a Nursing Science Precision Health Model Perspective</p> <p>Lei Ye^{1,2}, Xia Guanghui¹</p> <p><i>¹School of Nursing, Brain Hospital of Nanjing Medical University, China, ²Department of Respiratory Medicine, Nanjing Chest Hospital, China</i></p> |
| CS6-3 | <p>Dyadic Effects of Financial Toxicity and Social Support on the Fear of Cancer Recurrence in Breast Cancer Patients and Caregivers: An Actor–Partner Interdependence Model</p> <p>Hui Ren</p> <p><i>The First Hospital of Jilin University, China</i></p> |
| CS6-4 | <p>Construction of a Home-Based Self-Management Guidance Program for Elderly Patients After Lung Cancer Surgery</p> <p>Shuya Wang, Yan Wu, Yanyan Wu, Li Cheng, Chumin Ji</p> <p><i>Zhongshan Hospital, Fudan University, China</i></p> |
| CS6-5 | <p>Simulation Intervention of Frailty Heterogeneity Trajectory in Older Gastric Cancer Patients Based on G-Formula Model</p> <p>Yinning Guo, Qin Xu</p> <p><i>School of Nursing, Nanjing Medical University, China</i></p> |

Concurrent Oral Presentation Session

Session 6: Cancer Care

A Nomogram for Predicting Cancer-Related Cognitive Impairment in Lung Cancer Patients from a Nursing Science Precision Health Model Perspective

Lei Ye^{1, 2}, Xia Guanghui¹

¹Nursing, Brain Hospital of Nanjing Medical University, China, ²Department of Respiratory Medicine, Nanjing Chest Hospital, China

Background and Objectives

With the development of patient-centered care models, cancer-related cognitive impairment (CRCI) has become one of the most commonly reported symptoms in lung cancer patients. The nursing science precision health (NSPH) model considers identifying the biological basis of symptoms in order to develop precise intervention strategies that ultimately improve the overall health of the symptomatic individual. This study sought to construct a nomogram for predicting cancer-related cognitive impairment (CRCI) in lung cancer patients within the context of the NSPH Model.

Methods

A cohort of 252 patients with lung cancer was prospectively collected and randomly divided into training and validation cohorts in a 7:3 ratio. The least absolute shrinkage and selection operator (LASSO) regression method optimized variable selection, followed by multivariate logistic regression to develop a model, which subsequently formed the basis for the nomogram. The nomogram's discrimination and calibration were evaluated using a calibration plot, the Hosmer-Lemeshow test, and the receiver operating characteristic curve (ROC). Decision curve analysis (DCA) quantified the net benefits of the nomogram across various threshold probabilities.

Results

Five pivotal variables were incorporated into the nomogram: age (≥ 65 years), treatment, education, albumin, and platelet-to-lymphocyte ratio (PLR). The area under the ROC curve (0.970 for the training cohort and 0.973 for the validation cohort) demonstrated the nomogram's excellent discriminative ability. Calibration curves closely aligning with ideal curves indicated accurate predictive capability. Moreover, the nomogram exhibited a positive net benefit for predicted probability thresholds ranging from 1% to 98% in DCA.

Conclusions

Key risk factors, including advanced age (≥ 65 years), low education, combined chemotherapy, and high PLR, were significantly associated with higher CRCI incidence. This nomogram model performs well and accurately identifies CRCI in patients with lung cancer.

Concurrent Oral Presentation Session

Session 6: Cancer Care

Dyadic Effects of Financial Toxicity and Social Support on the Fear of Cancer Recurrence in Breast Cancer Patients and Caregivers: An Actor–Partner Interdependence Model

Hui Ren

The First Hospital of Jilin University, The First Hospital of Jilin University, China

Background and Objectives

Fear of cancer recurrence (FCR) remains a prevalent psychological issue, not only for patients but also for their caregivers. Financial toxicity (FT), arising from the high costs of cancer treatment, is increasingly recognized as a significant stressor that exacerbates FCR, making it crucial to explore the interplay these factors. This study utilized the actor–partner interdependence mediation model (APIMeM) to assess the factors that affect the FCR and the mediating effect of social support on FT and FCR.

Methods

A multi-center cross-sectional study design was employed, involving 405 pairs of breast cancer patients and their caregivers. Data were collected on financial toxicity, social support, and FCR using patient-reported outcome measures, the Social Support Rating Scale, and the Fear of Cancer Recurrence Inventory Short Form, respectively. The analysis was conducted using SPSS 24.0 and AMOS 23.0.

Results

The results showed that the fear of cancer recurrence of breast cancer patients and their caregivers was significantly related to dyadic financial toxicity and social support. In addition, the financial toxicity of breast cancer patients and their caregivers had significant actor effects and partner effects on the fear of cancer recurrence through dyadic social support.

Conclusions

The FT of breast cancer patients and their caregivers could produce actor and partner effects on the FCR through the mediation of social support, which provided empirical support for improving reducing the level of FCR among patients and caregivers at the dyadic level. Clinically, these findings suggest that interventions aimed at reducing FT and enhancing social support systems for both patients and caregivers could be effective strategies in alleviating FCR. Healthcare providers should consider addressing both economic and psycho-social factors to improve the overall well-being of breast cancer patients and their caregivers.

Concurrent Oral Presentation Session

Session 6: Cancer Care

Construction of a Home-Based Self-Management Guidance Program for Elderly Patients After Lung Cancer Surgery

Shuya Wang, Yan Wu, Yanyan Wu, Li Cheng, Chumin Ji

Zhongshan Hospital, Fudan University, China

Background and Objectives

To construct a home-based self-management guidance program for elderly patients after lung cancer surgery, providing guidance for home self-management of elderly patients with lung cancer post-surgery.

Methods

Through a literature research method, an initial draft of a home-based self-management guidance program for elderly patients after lung cancer surgery was preliminarily drafted. From May to June 2024, two rounds of expert correspondence were conducted using the Delphi method with 16 experts. The first-level indicators were revised and selected based on expert opinions to form the final draft.

Results

Two rounds of questionnaires were distributed and returned by 16 experts, with an active coefficient of 100% for both rounds; the authority coefficients of the consulting experts were 0.878; the Kendall's W coefficients for item importance were 0.249 and 0.262, respectively, and for item operability, they were 0.328 and 0.333; the results of the second round of correspondence showed that the coefficients of variation for item importance ranged from 0.05 to 0.20, and for item operability, from 0.09 to 0.21; all items' coefficients of variation were <0.25 ; ultimately, a home-based self-management guidance program for elderly patients after lung cancer surgery was formed, comprising 2 first-level indicators, 12 second-level indicators, and 32 third-level indicators.

Conclusions

The process of constructing the home-based self-management guidance program for elderly patients after lung cancer surgery is scientifically reliable and the content is reasonable and feasible, capable of providing guidance for standardized and effective self-management for elderly patients during their home stay post-lung cancer surgery.

Concurrent Oral Presentation Session

Session 6: Cancer Care

Simulation Intervention of Frailty Heterogeneity Trajectory in Older Gastric Cancer Patients Based on G- Formula Model

Yinning Guo, Qin Xu

School of Nursing, Nanjing Medical University, China

Background and Objectives

Frailty is common among elderly gastric cancer patients and seriously affects their prognosis. The development of frailty is continuous and dynamic, increasing the difficulty and burden of care. G-formula model was constructed for simulation intervention, and the optimal combination of intervention factors was selected to minimize the risk of frailty heterogeneity trajectory, which provides the basis for the intervention of frailty heterogeneous trajectories.

Methods

Relevant data were repeatedly collected from elderly gastric cancer patients at multiple time points within 24 hours of admission, on the day of discharge, 1 month after surgery, 3 months after surgery, 6 months after surgery, 12 months after surgery, and the construction of the G-formula model, parameter estimation and fitting, and the simulation intervention settings were carried out to screen and identify the best intervention targets that could minimize the risk of the occurrence of frailty heterogeneous trajectories.

Results

412 follow-up cases were included to construct a G-formula model. In the single-factor G-formula simulation intervention, compared with the risk of occurrence of frailty heterogeneous trajectories under no intervention, simulation of providing nutrition, alleviate anxiety, achieve the family cohesion score ≥ 64 , achieve the social objective support score ≥ 13 , and achieve the nursing satisfaction score > 85 all significantly reduced the risk of occurrence of frailty heterogeneous trajectories. The optimal combination of intervention targets was providing nutrition, alleviating anxiety, increasing family cohesion, improving social objective support, and nursing satisfaction, at which point the risk of frailty heterogeneous trajectory was minimized to 14.92%, with the lowest RR value (RR=0.323, 95%CI. 0.208-0.685).

Conclusions

The G-formula simulation intervention identified the optimal combination of intervention targets that minimized the risk of frailty heterogeneous trajectory, providing a scientific basis for subsequent long-term frailty interventions.

Concurrent Oral Presentation Session

Session 7: Critical Care Nursing

Day 1 (December 6, 2024) | 15:45 – 16:45 | Room F1320

Moderator: Dr Benjamin Ho, The University of Hong Kong

Dean Li-Yin Chien, National Yang Ming Chiao Tung University

CS7-1 Construction and Internal and External Validation of a MDRO Risk Prediction Model for ICU Patients Based on Multiple ML Algorithms: A Multicenter, Retrospective Study

Mingxin He, Yanyan Li, Mei Tang, Ailin Song, Jian Zhong, Li Guo, Lin Zhang
Department of Intensive Care Unit, Peking University Shenzhen Hospital, China

CS7-2 Accuracy of Disease Prediction in Pediatric Intensive Care Unit Patients Using Modified Early Warning Score: A Randomized Controlled Trial

Kang Lin^{1,2}, Quan Xiaoxiang²
¹*Department of Nursing, Shantou University Medical School, China*, ²*Department of Nursing, The First Affiliated Hospital of Shantou University Medical College, China*

CS7-3 Influential Factors of Shared Decision-Making Among ICU Surrogates Based on the COM-B Model: A Structural Equation Modeling Analysis

Yuling Lei^{1,2}, Weijing Sui², Na Zhang³, Jiayu Zhang³, Yiyu Zhang², Yu Luo¹
¹*School of Nursing, Army Medical University, China*, ²*Nursing Department, Zhejiang University School of Medicine Sir Run Run Shaw Hospital, China*, ³*School of Nursing, Hangzhou Normal University, China*

CS7-4 Applying Electrical Impedance Tomography to Assess Lung Regional Ventilation Distribution and Predict Short-Term Prognosis in ICU Patients After Cardiac Surgery

Wenjia Liu, Runshi Zhou, Zunzhu Li, Yun Long, Wenbo Cui, Longxiang Su, Huaiwu He
Department of Critical Care Medicine, Peking Union Medical College Hospital, China

CS7-5 The Management of Intravenous Insulin Infusion Among Critically Ill Patients in Intensive Care Unit: A Best Practice Implementation Project

Qidan Deng, Jianqing Ming
Department of Intensive Care Unit, The Affiliated Qingyuan Hospital (Qingyuan People's Hospital), Guangzhou Medical University, China

Concurrent Oral Presentation Session

Session 7: Critical Care Nursing

Construction and Internal and External Validation of a MDRO Risk Prediction Model for ICU Patients Based on Multiple ML Algorithms: A Multicenter, Retrospective Study

Mingxin He, Yanyan Li, Mei Tang, Ailin Song, Jian Zhong, Li Guo, Lin Zhang
Intensive Care Unit, Peking University Shenzhen Hospital, China

Background and Objectives

To construct a risk prediction model for multidrug-resistant organism (MDRO) based on five types of machine learning, to identify high-risk patients early, and to intervene in prevention, control, management and precise treatment at an early stage.

Methods

Descriptive statistics were performed using SPSS 26.0, and data were processed and analyzed by R4.2.1 software and its toolkit. The dataset was divided into training and test sets in a time series in the ratio of 8:2 using the occurrence of MDRO as the outcome event. Data from three of the hospitals were used for internal validation and data from one hospital were used for external validation. The final data of the modeling set was 1475 cases and the data of the testing set was 369 cases. Five prediction models were constructed based on machine learning algorithms. Compare the accuracy, precision, recall, AUC and other indexes of each model in the test set, and draw ROC and DCA curves to evaluate the prediction performance and clinical practical value of the models.

Results

A total of 1844 cases of model data were included in this study. Fourteen important features were obtained after feature screening, and the features were incorporated into Random Forest, Support Vector Machine, XGBoost, Decision Tree, and Lasso regression for model construction. The accuracy, precision, recall, F1 score, AUC value, and specificity of the five models were above 0.7, and all of them had good prediction performance. Among them, the AUC value (0.93), precision (0.92), recall (0.97), F1 score (0.96), specificity (0.84), and negative predictive value (0.94) of the Lasso regression model were higher than those of the other 4 models, which was the optimal prediction model for MDRO.

Conclusions

The risk prediction model for MDRO patients constructed based on machine learning algorithms, especially the Lasso algorithm, can effectively identify high-risk groups at an early stage and provide theoretical and practical reference value for clinical decision-making.

Concurrent Oral Presentation Session

Session 7: Critical Care Nursing

Accuracy of Disease Prediction in Pediatric Intensive Care Unit Patients Using Modified Early Warning Score: A Randomized Controlled Trial

Kang Lin^{1, 2}, Quan Xiaoxiang²

¹Department of Nursing, Shantou University Medical School, China, ²Department of Nursing, The First Affiliated Hospital of Shantou University Medical College, China

Background and Objectives

Due to their young age and limited communication, pediatric patients in internal medicine wards are vulnerable to nursing assessment errors, which can result in adverse events. Implementing a risk management scale enables quick identification of critically ill or at-risk patients, enhancing treatment outcomes. To explore the application effect of modified pediatric early warning score (PEWS) on the severity assessment of children in pediatric intensive care unit (PICU).

Methods

This study was a single-blind, two-arm randomized controlled trial involving 300 pediatric inpatients at a tertiary hospital in Guangdong Province from June 2021 to December 2023. Patients were randomly assigned to an observation group (150 cases) or a control group (150 cases). The control group received standard treatment and routine nursing care, while the observation group received an intervention combining the PEWS with a graded nursing management model. PEWS scores were analyzed upon admission, and its effectiveness in assessing illness severity was evaluated using a receiver operating characteristic (ROC) curve. The study compared treatment outcomes, complication rates, mortality, and parental satisfaction between the two groups.

Results

The observation group had significantly lower mortality, complication rates, hospital stay duration, and costs compared to the control group ($P < 0.05$). Parental satisfaction was also significantly higher in the observation group ($P < 0.05$). A modified PEWS score of ≥ 1 was identified as the threshold for predicting the need for nursing intervention in critically ill patients, with an area under the curve (AUC) of 0.91, sensitivity of 92.1%, specificity of 75.4%, and a Youden index of 0.675.

Conclusions

The modified PEWS effectively assesses patient conditions, increasing nursing care likelihood for scores above 1. It aids early illness detection and monitors patient changes, enabling timely interventions that reduce complications and mortality, shorten hospital stays, lower costs, and improve parental satisfaction. This approach deserves promotion.

Concurrent Oral Presentation Session

Session 7: Critical Care Nursing

Influential Factors of Shared Decision-Making Among ICU Surrogates Based on the COM-B Model: A Structural Equation Modeling Analysis

Yuling Lei^{1, 2}, Weijing Sui², Na Zhang³, Jiayu Zhang³, Yiyu Zhang², Yu Luo¹

¹School of Nursing, Army Medical University, China, ²Nursing Department, Zhejiang University School of Medicine Sir Run Run Shaw Hospital, China, ³School of Nursing, Hangzhou Normal University, China

Background and Objectives

Surrogate decision-making in the ICU is a critical process, particularly when patients are unable to make decisions for themselves. The involvement of surrogates in shared decision-making is essential to ensure that medical decisions align with the patient's values and preferences. However, the extent of surrogate involvement and the factors influencing their participation in shared decision-making remain underexplored. The COM-B model, which considers Capability, Opportunity, and Motivation as key determinants of behavior, provides a comprehensive framework for understanding the complexities of surrogate decision-making in the ICU. By applying this model, this study seeks to identify the level of surrogates' involvement in shared decision-making and the factors that influence their participation.

Methods

A cross-sectional survey was conducted, recruiting 306 surrogates from the ICU of a university-affiliated hospital in China. Data collection involved questionnaires that covered sociodemographic information, disease characteristics, shared decision-making, participation ability, social support, and surrogate decision-making self-efficacy. Structural equation modeling was employed to test the hypothesized pathways.

Results

The mean score for shared decision-making was 29.28 ± 5.958 . The model accounted for 52% of the variance in ICU surrogates' participation in shared decision-making. Both social support and participation ability exhibited direct and indirect effects on shared decision-making, with total effects of $\beta = 0.967$ and $\beta = 0.274$, respectively ($P < 0.001$). Surrogate decision-making self-efficacy partially mediated the relationship between participation ability and shared decision-making ($\beta = 0.095$, $P < 0.001$).

Conclusions

The level of involvement of surrogates in shared decision-making is relatively low. The results support the applicability of the COM-B model in explaining surrogates' participation in shared decision-making, highlighting that social support has a more significant impact on surrogates.

Concurrent Oral Presentation Session

Session 7: Critical Care Nursing

Applying Electrical Impedance Tomography to Assess Lung Regional Ventilation Distribution and Predict Short- Term Prognosis in ICU Patients After Cardiac Surgery

Wenjia Liu, Runshi Zhou, Zunzhu Li, Yun Long, Wenbo Cui, Longxiang Su, Huaiwu He
Department of Critical Care Medicine, Peking Union Medical College Hospital, China

Background and Objectives

Electrical impedance tomography (EIT) is an emerging technology which can be used to monitor regional lung ventilation via transforming electrical impedance gathered from patients' thorax into tomograms. Considering the non-invasive, real-time, and visualized features of this bedside tool, it is potential to extend its application in clinical practice. This study aimed to explore the value of applying EIT in patients admitted to the intensive care unit (ICU) after cardiac surgery to predict short-term prognosis.

Methods

Data from 46 patients admitted to ICU after cardiac surgery from January to November 2023 were retrospectively collected. Using EIT, we assessed the lung regional ventilation of four regions of interest (ROI) and analyzed its impact on patients' mechanical ventilation duration, tracheal intubation duration, and length of stay in ICU.

Results

Participants included 29 males and 17 females, with an average age of (58.2 ± 9.5) years. Patients who received cardiac surgery ≤ 5 hours had worse ventilation in the dorsal region (ROI 4) ($p = 0.022$). Patients with worse dorsal region ventilation (ROI 4 $< 9\%$) had lower oxygenation index ($p = 0.025$), longer mechanical ventilation duration ($p = 0.004$), longer tracheal intubation duration ($p = 0.010$), and longer ICU stay ($p = 0.018$). A larger ROI 4 percent was a protective factor for patients' short-term prognosis (OR = 0.743, 95% CI: 0.587-0.941, $p = 0.014$). With a cutoff value of 9.5%, ROI 4 had 85.7% sensitivity and 56.2% specificity to predict worse prognosis.

Conclusions

Lower dorsal region ventilation predicts worse short-term prognosis in patients admitted to ICU after cardiac surgery. EIT can be used as a bedside tool to monitor patients' regional lung ventilation and inform corresponding healthcare interventions (e.g. changes of patients' position) to improve patients' clinical outcomes.

Concurrent Oral Presentation Session

Session 7: Critical Care Nursing

The Management of Intravenous Insulin Infusion Among Critically Ill Patients in Intensive Care Unit: A Best Practice Implementation Project

Qidan Deng, Jianqing Ming

Department of Intensive Care Unit, The Affiliated Qingyuan Hospital (Qingyuan People's Hospital), Guangzhou Medical University, China

Background and Objectives

Intravenous insulin infusion is essential for managing hyperglycemia in the ICU, but improper use can result in severe complications, including hypoglycemia and loss of consciousness. This project aimed to promote evidence-based practices in the management of intravenous insulin infusion among critically ill ICU patients.

Methods

The project was conducted from January to June 2024 in three comprehensive ICUs at a general tertiary hospital in Qingyuan City, China. The JBI Implementation Framework and the JBI Model of Evidence- Based Healthcare were employed for audits and feedback. Audit criteria were derived from JBI's Practical Application of Clinical Evidence System (PACES). After conducting the FAME evaluation, five contextually suitable criteria were adopted. A baseline audit was conducted on 60 patients in the ICUs, followed by a similar follow-up audit. The JBI PACES, Getting Research into Practice (GRiP) tools, and the Consolidated Framework for Implementation Research (CFIR) -ERIC Implementation Strategy Matching Tool were used to support data collection, data analysis, and implementation planning.

Results

The baseline audit revealed compliance below 50% for four of the five criteria. To address this, strategies such as developing a nurse-led insulin infusion protocol, revising standard operating procedures, altering allowance structures, implementing a nurse education program, and implementing an electronic insulin dose adjustment program. Follow-up audits showed marked improvement: Criterion 1 (timely initiation) improved from 45% to 86.67%. Criterion 2 (maintaining target glucose levels) showed a marked improvement from 0% to 70%. Criterion 3 (use of a validated insulin infusion protocol) also saw substantial progress, increasing from 0% to 78.3%. Criterion 4 (frequency of blood glucose monitoring) reached the highest compliance rates, rising from 80% to 95%. Criterion 5 (use of arterial sampling for blood glucose monitoring) improved from 1.4% to 68.8%.

Conclusions

The project significantly improved compliance with the audit criteria and enhanced the quality of insulin infusion management in ICUs. Further investigation is necessary to assess the long-term effectiveness of the interventions.

Concurrent Oral Presentation Session

Session 8: Cardiovascular and Pulmonary Nursing

Day 1 (December 6, 2024) | 15:45 – 16:45 | Room F1420

Moderator: Dr Polly Li, The University of Hong Kong
Dr Yali Tian, Sichuan University

- CS8-1** Parallel Mediating Effects of Social Support and Self-Efficacy Between Frailty and Depression in Elderly Patients After PCI: A Cross-Sectional Survey
Wang Rong¹, Bi Min², **Jia Wei**¹, Ma Jing¹, Yao Li²
¹School of Nursing, Ningxia Medical University, China, ²Department of Cardiology, The General Hospital of Ningxia Medical University, China
- CS8-2** Heterogeneous Subtypes of Intrinsic Capacity in Middle-Aged and Older Patients After Percutaneous Coronary Intervention: A Latent Class Analysis
Yuan Zhao¹, Yueying Jiang¹, Qunyan Xu², Dandan Chen³, Panpan Tang¹, Xueqing Wang¹, Yunyu Guo¹, Chang Liu¹, Xiuqin Feng¹, Leiwen Tang¹
¹Department of Nursing, The Second Affiliated Hospital of Zhejiang University School of Medicine, China, ²Adjunct Research Academic, Clinical and Health Sciences Academic Unit, The University of South Australia, Australia, ³School of Nursing, Zhejiang University School of Medicine, China
- CS8-3** Telehealth Strategies for Enhancing Medication Adherence in Tuberculosis Patients: A Systematic Review of Randomized Controlled Trials
Lutfian Lutfian¹, Fahmi Wildana², Izdihar Javier Wardika², Desfara Anggreani³, Melani Adelia Efendi²
¹Master of Advanced Nursing, Faculty of Medicine, Nursing and Health Science, Monash University, Australia, ²Faculty of Nursing, University of Jember, Indonesia, ³Faculty of Health Science, National University, Indonesia
- CS8-4** Effect of a M-Health Transitional Care Program on Self-Care and Quality of Life Among Patients with CHF: A Randomized Controlled Trial in China
Yali Tian, Guiying You, Ka Li
West China School of Nursing, Sichuan University, China

Concurrent Oral Presentation Session

Session 8: Cardiovascular and Pulmonary Nursing

Parallel Mediating Effects of Social Support and Self- Efficacy Between Frailty and Depression in Elderly Patients After PCI: A Cross-Sectional Survey

Wang Rong¹, Bi Min², Jia Wei¹, Ma Jing¹, Yao Li²

¹School of Nursing, Ningxia Medical University, China, ²Cardiology, The General Hospital of Ningxia Medical University, China

Background and Objectives

Frailty is a cause of depression among elderly patients after percutaneous coronary intervention (PCI). Although previous studies have shown that frailty, social support, self-efficacy, and depression are significantly related, the interaction mechanism remains unclear. Objectives: We aimed to deeply explore the internal relationships between frailty, depression, social support and self-efficacy variables in elderly after PCI, clearly analyze the direct and indirect effects between variables, and explain the internal relationships between variables, and thus improve depressive symptoms in elderly after PCI.

Methods

Convenience sampling was used to recruit participants from a tertiary hospital in Yinchuan City, Ningxia Province, China from December 2023 to February 2024. Participants completed the FRAIL Scale, Social support rate scale, General Self Efficacy Scale, Hospital anxiety and depression scale. We used the PROCESS macro for SPSS to determine the mediating effect of social support and self-efficacy between frailty and depression.

Results

Among 241 participants, 63.1% of participants experienced depression and 80.5% of participants experienced frailty. Elderly patients after PCI's frailty score was negatively correlated with social support ($r = -0.14$, $P < 0.05$) and self-efficacy ($r = -0.28$, $P < 0.01$), and positively correlated with depression ($r = 0.31$, $P < 0.01$). Social support was significantly positively correlated with self-efficacy ($r = 0.31$, $P < 0.01$), significantly negatively correlated with depression ($r = -0.39$, $P < 0.01$). Finally, self-efficacy was significantly negatively correlated with depression ($r = -0.40$, $P < 0.01$). Social support and self-efficacy mediated 11.61% and 29.46% of the total depressive effect in elderly after frailty and PCI, respectively.

Conclusions

This study found that frailty can indirectly depression in older elderly patients after PCI through the parallel mediating effect of social support, self-efficacy. Therefore, reducing the degree of frailty in older elderly patients after PCI and improving their social support and self-efficacy may help prevent depression in elderly patients after PCI.

Concurrent Oral Presentation Session

Session 8: Cardiovascular and Pulmonary Nursing

Heterogeneous Subtypes of Intrinsic Capacity in Middle- Aged and Older Patients After Percutaneous Coronary Intervention: A Latent Class Analysis

Yuan Zhao¹, Yueying Jiang¹, Qunyan Xu², Dandan Chen³, Panpan Tang¹, Xueqing Wang¹, Yunyu Guo¹, Chang Liu¹, Xiuqin Feng¹, Leiwen Tang¹

¹Nursing, The Second Affiliated Hospital of Zhejiang University School of Medicine, China, ²Adjunct Research Academic, Clinical and Health Sciences, University of South Australia, Australia, ³Nursing, Zhejiang University School of Medicine, China

Background and Objectives

To explore the associated factors of intrinsic capacity (IC) levels and subtypes in middle-aged and older patients after percutaneous coronary intervention (PCI).

Methods

The patient health questionnaire-9 (PHQ-9), the mini-mental state examination (MMSE), the short physical performance battery test (SPPB), and the mini-nutritional assessment short form (MNA-SF) were utilized for assessing IC domains. Both aural and visual were self-reported. The study employed latent class analysis (LCA) to investigate the diverse IC subtypes. Logistic regression analyses were used to identify the impact factors of IC levels as well as IC subtypes.

Results

318 middle-aged and older patients who had undergone PCI completed the assessments. Logistic regression results indicated that age, gender, occupation, comorbidity index (CCI), chronic disease resource utilization, multiple coronary artery lesions, and hs-CRP are implicit factors of IC levels. The findings of LCA suggested that three heterogeneous IC subtypes were identified: 47.8% poor audition- vision group (class 1), 38% high cognition-psychology group (class 2), 14.2% low locomotion-vitality group (class 3). Education, exercise frequency, cardiac function, drinking, NT proBNP, and cTnl could affect the IC subtype classification.

Conclusions

The determinants of IC levels in middle-aged and older adults after PCI still require more empirical investigation. For targeted intervention, the examination of IC subtypes may bring benefits.

Concurrent Oral Presentation Session

Session 8: Cardiovascular and Pulmonary Nursing

Telehealth Strategies for Enhancing Medication Adherence in Tuberculosis Patients: A Systematic Review of Randomized Controlled Trials

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Background and Objectives

Tuberculosis (TB) presents a significant global health challenge, requiring strict medication adherence to prevent treatment failure, multidrug-resistant TB, relapse, and increased transmission rates. Telehealth interventions have shown promise in enhancing medication adherence, yet comprehensive reviews focusing on randomized controlled trials (RCTs) solely on TB patients are lacking. This systematic review aims to evaluate and synthesize evidence from RCTs on telehealth strategies for improving medication adherence in TB patients.

Methods

A systematic review was conducted using PubMed, Ovid-MEDLINE, and CINAHL databases. Inclusion criteria were RCT studies published in English from 2019 to 2024, focusing on telehealth interventions for TB medication adherence. Data extraction and quality appraisal were performed using the Joanna Briggs Institute (JBI) critical appraisal method, and findings were synthesized according to the PRISMA framework.

Results

Nine studies were included, evaluating various telehealth methods: four on Video Observed Therapy (VOT/VDOT), three on Medication Event Reminder Monitor (MERM), one on Electronic DOT, and two on technology-based adherence reminders. Overall, telehealth interventions were more effective than traditional DOT in improving medication adherence and treatment outcomes. VDOT and VOT showed significant reductions in missed doses and increased patient satisfaction. Electronic and reminder-based technologies like MERM, electronic DOT, WOT, and MTRP provided timely reminders, real-time monitoring, and personalized prompts, enhancing adherence and accountability.

Conclusions

Telehealth interventions significantly improve TB medication adherence and treatment outcomes. Integrating these telehealth interventions into TB treatment strategies can optimize adherence and improve health outcomes.

Concurrent Oral Presentation Session

Session 8: Cardiovascular and Pulmonary Nursing

Effect of a M-Health Transitional Care Program on Self- Care and Quality of Life Among Patients with CHF: A Randomized Controlled Trial in China

Yali Tian, Guiying You, Ka Li

West China School of Nursing, Sichuan University, China

Background and Objectives

Transitional care intervention is the most innovative program to improve the continuity of care for patients with heart failure from admission to post-hospital discharge. Currently, the transitional care model is widely used in the home care of patients with chronic diseases, although it is rare to find the implementation of transitional care for patients with chronic heart failure in mainland China. This study aimed to explore the m-health transitional care and follow-up model among patients with chronic heart failure and verify its effect.

Methods

This randomized controlled trial was conducted in a 4,000-bed top-level university-affiliated hospital with 380 patients participating from May 2023 to December 2023. The control group received routine nursing care, including general care for admission, while the experimental group participated in a m-health transitional care program in addition to receiving routine care.

Results

In the intervention group, the scores of EHFSCB-9 is higher in the first month compared with discharge, and the scores of EHFSCB-9 is much more higher in the third month compared with discharge and the first month. The mean scores of MLHFQ were significantly lower at the one-month and three-month follow-ups than the baseline in the intervention group. However, there is no significant difference of EHFSCB-9 and MLHFQ among discharge, the first month, and the third month in the control group.

Conclusions

The m-health transitional care program can help nurses to implement targeted, effective health interventions for CHF patients and improve their self-care ability and quality of life in China.

Concurrent Oral Presentation Session

Session 9: Long-term care

Day 1 (December 6, 2024) | 16:45 – 17:45 | Room T1101

Moderator: Dr Celine Chui, The University of Hong Kong
Dean Minhui Liu, Ningxia Medical University

CS9-1 Characterizing Family Decision-Makers' Expectations of Participation in Decision-Making on Thromboprophylaxis: A Latent Profile Analysis

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CS9-2 Self-Management Behavior in Patients with Mild Cognitive Impairment Based on the Information-Motivation-Behavioral Skills Model: A Latent Profile Analysis

Han Yue^{1,2}, Jiyan Ji^{2,3}, Jiaoyuchen Jiao^{2,4}, Lizhuoling Li^{2,5}, Wangtingxuan Wang^{2,6}

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CS9-3 Exploring the Dynamic Relationship Between Sleep and Psychological Symptoms in Stroke Survivors: A 7-Day Intensive Longitudinal Study

Shouqi Wang, Ying Wu

Department of Neurology, The Second Affiliated Hospital of Soochow University, China

CS9-4 Non-Motor Symptom Changes and Their Association with Falls Among Parkinson's Disease Patients Undergoing Deep Brain Stimulation: A One-Year Cohort Study

Ying Gao¹, Hui You^{1,2}, Jue Wang^{1,2}, Mengsi Yao^{1,2}, Dianyou Li², Bomin Sun², Linbin Wang², Xian Qiu^{1,2}

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CS9-5 Association Between Insomnia and Physical Frailty in Nursing Home Residents: The Role of Social Interaction

Boqin Xie, Xiaobin Lai, Junqiao Wang

School of Nursing, Fudan University, China

CS9-6 Community-Based Geriatric Nursing Simulation Enhanced by Standardized Patients: A Qualitative Video Analysis Approach

Ma Jing

Faculty of Medicine, Universiti Malaya, Malaysia, School of Nursing, Henan University of Science and Technology, China

Concurrent Oral Presentation Session

Session 9: Long-term care

Characterizing Family Decision-Makers' Expectations of Participation in Decision-Making on Thromboprophylaxis: A Latent Profile Analysis

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Background and Objectives

Shared decision making is a healthcare delivery model that advocates for patient-centered care in clinical practice. Examining orthopaedic patients' preference on thromboprophylaxis is critical to achieving this goal. This study aims to outline the expectations of family decision-makers regarding participation in decision-making on thromboprophylaxis.

Methods

This descriptive study examined a cross-section of a sample in the Ningxia Hui Autonomous Region People's Hospital, a tertiary hospital in Yinchuan, China, from December 2023 to March 2024. All the individuals were invited to finished the four questionnaire, including Socio-demographic list, Control Preferences Scale, Expectation of Participation in Medical-Decision Making Scale and Preparation for Decision-Making Scale. The latent profile of expectations were used from the Expectation of Participation in Medical-Decision Making Scale. Differences among profiles were analyzed using ordinal and multinomial logistic regression.

Results

The three profiles were designated as "High Expectation - Active Decision-Making Participation Group" (67.7%), "Medium Expectation - Neutral Decision-Making Participation Group"(26.4%), and "Low Expectation - Indifferent Decision-Making Participation Group"(5.9%). Potential influencing factors include the decision-makers' employment status, kinship relationship, and level of preparedness for decision- making. In terms of employment status, the probability of employees (OR = 0.236, 95%CI = 0.062 - 0.898, p = .037) or self-employed individuals (OR = 0.213, 95%CI = 0.057 - 0.796, p = .023) belonging to the high-expectation group is the highest. Meanwhile, in relationships, the probability of spouses (OR = 0.031, 95%CI = 0.002 - 0.508, p = .012) or first-degree relatives (OR = 0.071, 95%CI = 0.008 - 0.673, p = .016) belonging to the high-expectation group is the highest. In PrepDM, the higher the total score of decision- makers, the greater the probability of belonging to the low-expectation group (OR = 1.070, 95%CI = 1.006-1.138, p = .031).

Conclusions

This study demonstrated heterogeneity in decision-makers' expectations of participation in decision making on thromboprophylaxis. Stakeholders may use meaningful information to focus efforts on optimizing decisions and to develop customized bundles guided by category profiles.

Concurrent Oral Presentation Session

Session 9: Long-term care

Self-Management Behavior in Patients with Mild Cognitive Impairment Based on the Information-Motivation-Behavioral Skills Model: A Latent Profile Analysis

Han Yue^{1,2}, Jiyan Ji^{2,3}, Jiaoyuchen Jiao^{2,4}, Lizhuoling Li^{2,5}, Wangtingxuan Wang^{2,6}

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Background and Objectives

To explore the potential profile types and characteristics of self-management behaviours in patients with mild cognitive impairment, and to analyse influencing factors of self-management behaviours in different types of MCI patients.

Methods

Using convenient sampling method, 226 MCI patients from 3 tertiary hospitals and 1 community in Nanjing were recruited. The general information questionnaire, MCI related knowledge questionnaire, Social support rate scale, Exercise of Self-Care Agency Scale, and Self-efficacy for Managing Chronic Disease 6-Item Scale were used to analyze the potential profile of self-management behavior of MCI patients, and Logistic regression analysis was used to further explore the relationship between self-management behavior types and demographic variables.

Results

The results showed that MCI patients' self-management behavior were divided into three potential classes: loose slack group (7.35%), stationary fluctuation group (36.11%), self-directed group (56.54%). Multiple logistic regression analysis showed that education, occupation and residence were significant influencing factors associated with different types of self-management behaviours of MCI patients ($p < 0.05$). Compared with the self-directed group, the higher the probability of junior high school education OR below (OR value 0.096, 95% CI 0.015-0.601) falling into the loose slack group, Business, service and technical professionals (OR 21.008, 95% CI 4.099-107.674) and living with spouse (OR 16.174, 95% CI 1.991-131.399) were more likely to fall into the self-directed group. Compared with the self-directed group, the higher the probability that junior high school education OR below (OR value 0.11, 95% CI 0.038-0.317) belongs to the stationary fluctuation group, Business, service and technical professionals (OR 2.824, 95% CI 1.104-7.221) and living with a spouse (OR 13.633, 95% CI 2.9-64.099) were more likely to fall into the self-directed group.

Conclusions

The self-management behavior of MCI patients can be divided into three categories, according to which medical staff can understand the characteristics of different categories of patients, identify key patient groups and carry out tracking management, active guidance and precise intervention to improve the self-management level of MCI patients.

Concurrent Oral Presentation Session

Session 9: Long-term care

Exploring the Dynamic Relationship Between Sleep and Psychological Symptoms in Stroke Survivors: A 7-Day Intensive Longitudinal Study

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Background and Objectives

Emotions and symptoms can fluctuate significantly within a day, and sleep may be affected by the complex interplay of daytime environmental and personal factors. Therefore, this study aims to explore the real-time associations between sleep and psychological symptoms among stroke survivors during hospitalization, providing insights into their dynamic interplay.

Methods

We conducted a prospective observational study employing ecological momentary assessment (EMA) surveys thrice daily for 6–7 days. During the study period, a convenience sample of 29 participants completed 573 momentary surveys about their sleep and psychological symptoms. To explore how sleep and psychological symptoms affect each other in stroke survivors, we used multilevel models to analyse concurrent and lagged associations.

Results

In terms of concurrent associations, the average total sleep time (TST) was positively correlated with fatigue ($\beta=0.012$, $P=0.013$; $\beta=0.009$, $P=0.03$), but no significant associations were found between other sleep variables and psychological symptoms ($P>0.05$). Lagged analysis revealed that better sleep quality three nights prior (SQ_{t-3}) was associated with fewer psychological symptoms (fatigue: $\beta=-0.636$, $P=0.019$; depression: $\beta=-3.295$, $P=0.009$; anxiety: $\beta=-2.223$, $P=0.032$). However, a contrasting positive association was found between the average sleep quality of the past two nights (SQ_{t-2}) and depression ($\beta=2.229$, $P=0.032$). Interaction analysis indicated that the TST and subjective NWK moderated the association between sleep quality and depression. For current survey psychological symptoms, which are a predictor of next survey sleep quality, greater fatigue was associated with higher current night sleep quality (SQ_t) and average sleep quality ratings of the current night and the following two nights (SQ_{t+2}) (SQ_t: $\beta=0.075$, $P=0.016$; SQ_{t+2}: $\beta=0.047$, $P=0.012$).

Conclusions

This study provides preliminary evidence of the complex relationship between sleep and psychological symptoms in stroke survivors, highlighting potential directions for future interventions and research. Understanding these associations contributes to a deeper comprehension of the sleep–mental health relationship, providing insights for future therapeutic strategies targeting psychological symptoms.

Concurrent Oral Presentation Session

Session 9: Long-term care

Non-Motor Symptom Changes and Their Association with Falls Among Parkinson's Disease Patients Undergoing Deep Brain Stimulation: A One-Year Cohort Study

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Background and Objectives

Fall severely affects the quality of life of Parkinson's disease (PD) patients. Subthalamic nucleus (STN) deep brain stimulation (DBS) is an effective treatment for PD motor symptoms (MS), but it may worsen falls and has mixed effects on non-motor symptoms (NMS). However, the link between NMS and falls, and how DBS influences this relationship, remain unclear. This study is to investigate changes of NMS and falls before and after STN-DBS, and longitudinal association between NMS and falls.

Methods

The study included 136 PD patients undergoing STN-DBS between April 2020 and February 2022 in Shanghai Ruijin Hospital. Data were collected preoperatively, at 6 months, and at 12 months postoperatively. We used the Friedman and Chi-square tests to assess changes in NMS and fall. Specific circumstances of falls were assessed through structured interviews. Generalized estimating equations (GEE), adjusted for sociodemographic and disease-related variables (e.g., disease duration, MS, Hoehn- Yahr stage, levodopa equivalent daily dose), was used to explore longitudinal associations between NMS and fall, and interaction effects between MS and NMS on fall. MS were evaluated using the Unified Parkinson's Disease Rating Scale-III. NMS were assessed using the Non-Motor Symptoms Scale (NMSS). Fall was a binary outcome variable.

Results

Significant improvements ($P < 0.01$) were observed in all the NMSS domains except gastrointestinal domain. Although no difference was observed in fall ($P = 0.641$), significant changes were observed in the fall locations and the presence of freezing of gait between baseline and follow-ups. The GEE showed mood/cognition ($P = 0.044$), gastrointestinal ($P = 0.027$), and urinary ($P = 0.007$) symptoms significantly correlated with fall occurrence. Additionally, the interaction effect of MS with these three NMS domains ($P < 0.05$) also correlated with fall.

Conclusions

Our study found that NMS, including mood/cognition, gastrointestinal, and urinary symptoms, and their interactions with MS, are associated with fall risk, highlighting the need for comprehensive fall

Concurrent Oral Presentation Session

Session 9: Long-term care

Association Between Insomnia and Physical Frailty in Nursing Home Residents: The Role of Social Interaction

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Background and Objectives

Merging studies have reported an interplay between insomnia and physical frailty among older adults. However, the mechanism underlying this link remains elusive. Of particular interest is the role of social interaction as a potential mediator and/or moderator in this association. This study aimed to examine the mediating and moderating effect of social interaction in the association between insomnia and physical frailty among Chinese older adults living in nursing homes.

Methods

A cross-sectional study was conducted in Shanghai, China and a total of 438 older adults aged 60 years or older were recruited from 8 nursing homes. Information was collected regarding insomnia, physical frailty, social interaction, sociodemographic characteristics and health conditions. Logistic regression was used to explore the association between insomnia and frailty and the moderating effect of social interaction. Bootstrap analyses was performed to test the indirect effect of insomnia on frailty through social interaction.

Results

Insomnia was significantly associated with physical frailty in older adults living in nursing homes (OR = 3.38, 95% CI [1.85, 6.46]). The interaction between insomnia and social interaction shows that as social interaction increases, the adverse effect of insomnia on frailty is reduced (OR = 0.81). Analyses using the Johnson-Neyman technique showed that low levels of social interaction strengthened the association between insomnia and frailty, while high levels can mitigate or even reverse this effect. Mediation analysis showed that insomnia indirectly influenced in the physical frailty through the partial mediating effects of social interaction (95% CI [0.0424, 0.34], $p = 0.0024$), accounting for 15% of the total effect.

Conclusions

These findings suggest that insomnia is a critical risk factor for physical frailty among nursing home residents, but social interaction can play an important moderating and mediating roles. Increasing social interaction in older nursing home residents, particularly those experiencing insomnia, may help reduce physical frailty and ultimately improve overall health outcomes.

Concurrent Oral Presentation Session

Session 9: Long-term care

Community-Based Geriatric Nursing Simulation Enhanced by Standardized Patients: A Qualitative Video Analysis Approach

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Background and Objectives

Geriatric nursing education requires innovative teaching strategies that can effectively bridge theoretical knowledge with practical skills. The incorporation of standardized patients (SPs) in simulation-based learning is one such strategy, yet its qualitative assessment through video analysis remains understudied.

Methods

This qualitative study utilized a descriptive design involving 21 senior nursing students engaged in community-based geriatric care simulations with SPs. Data collection included semi-structured interviews and video recordings of the simulation sessions. A deductive thematic analysis approach was employed to analyse the qualitative data, focusing on the educational value added by integrating SPs and video analysis.

Results

The study identified four main themes with twelve subthemes: the authenticity of SP interactions (geriatric makeup and aged simulation suit), enhancement of clinical reasoning through video-assisted reflection (prevent emergency, sensitive to circumstances, and inter-professional cooperation), improvement of empathy and caring behaviours (proactive inquiry, ongoing support, family involvement, patience on elderly, and response to emotion), and increased awareness of real-world geriatric nursing challenges (differences between age groups and technology assistance). Video analysis provided deeper insights into students' learning processes and the educational impact of the simulation before community-based practice.

Conclusions

The integration of SP with video analysis in geriatric nursing simulations proved to be an effective educational tool, offering a realistic, reflective, and skill-enhancing learning experience. The qualitative insights from video analysis highlight the importance of this methodological approach in advancing geriatric nursing education.

Concurrent Oral Presentation Session

Session 10: Palliative Care

Day 1 (December 6, 2024) | 16:45 – 17:45 | Room T1206

Moderator: Dr Jie Zhong, The University of Hong Kong
Dr Ping Guo, University of Birmingham

CS10-1 Factors Associated with Readiness to Engage in Advance Care Planning Among Cancer Caregivers: A Cross-Sectional Study in China

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CS10-2 Gender Disparities in End-of-Life Experience Among Older Adults

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CS10-3 The Mediating Role of Stigma and Perceived Social Support in the Relationship Between Health Literacy and Perceived Barriers to Healthcare Decision-Making Among Cervical Cancer Patients

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¹School of Nursing, Peking Union Medical College, China, ²Department of Neonatology, Zhongshan People's Hospital, China

CS10-4 Priority Setting for Palliative Care Research with People Affected by Dementia

Ping Guo¹, Nikolaos Efstathiou¹, Cara Bailey¹, Peymane Adab², Jon Glasby³
¹Department of Nursing and Midwifery, The University of Birmingham, United Kingdom, ²Department of Applied Health Research, The University of Birmingham, United Kingdom, ³School of Social Policy, The University of Birmingham, United Kingdom

CS10-5 Preliminary Application of the Engagement of Advance Care Planning Among Elderly Patients with Chronic Diseases in Community Based on the Transtheoretical Model

Siyuan Feng¹, Mingli Zhao^{1,2}, Xinyue Zhao², Xue Wang², Yijia Zhuo²
¹Department of Nursing, The Fifth People's Hospital of Shanghai, Fudan University, China, ²School of Nursing, Zhengzhou University, China

CS10-6 Construction of the Index System of Hospice Nursing Service Program in Tertiary Hospitals Based on Delphi Method

Mai Du, Shuqin Zhu
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Concurrent Oral Presentation Session

Session 10: Palliative Care

Factors Associated with Readiness to Engage in Advance Care Planning Among Cancer Caregivers: A Cross-Sectional Study in China

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Background and Objectives

Cancer caregivers play an important role in helping patients plan their current and future care, even acting as surrogate decision-makers when patients become incapable of deciding for themselves. Surrogate preparation is increasingly seen as an important objective of advance care planning. Yet, little research has understood cancer caregivers' experiences with medical decision making and examined the factors associated with their readiness to engage in advance care planning.

Methods

A single-center, cross-sectional, descriptive study was conducted from August to October 2023 in a tertiary cancer center in China. Cancer caregivers who were nominated as potential surrogate decision-makers were recruited. A structured questionnaire about sociodemographic and clinical characteristics, experiences with medical decision making, the advance care planning engagement survey for surrogate decision-maker were used to collect information. Descriptive statistics, t test, ANOVA and multiple linear regression were conducted for data analysis.

Results

Data from 170 participants were analyzed, and over half of them were female, adult children and primary medical decision-makers for cancer patients. During previous experiences with medical decision making, participation rate in advance care planning was only 27.4%. Regarding behavior change process for advance care planning, the mean scores were 2.52 ± 0.90 (Self-efficacy), 2.40 ± 0.84 (Knowledge), 2.38 ± 0.77 (Contemplation), and 2.23 ± 1.11 (Readiness). After adjusting for sociodemographic and clinical characteristics, while knowledge about serving as a surrogate decision maker was not significantly associated with readiness to engage in advance care planning, self-efficacy and contemplation was ($p < 0.001$). The most common barriers include lack of interest, living well now, cannot understand, and don't want to put unnecessary pressure on the patient.

Conclusions

As potential surrogate decision makers, cancer caregivers' engagement in advance care planning was uncommon, indicating a lack of preparation for end-of-life communication and decision-making. Cancer caregivers' readiness is mainly associated with self-efficacy and contemplation rather than their knowledge. Further strategies are needed to address barriers to engaging cancer caregivers in advance care planning.

Concurrent Oral Presentation Session

Session 10: Palliative Care

Gender Disparities in End-of-Life Experience Among Older Adults

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Background and Objectives

Addressing gender inequalities is an urgent agenda for the UN and the WHO. Previous studies have predominantly investigated gender disparities in the prevalence of specific diseases and access to of medical services, with limited attention given to end-of-life experience. This study aims to examine gender disparities in the end-of-life experiences (the last year of life) of older adults and to explore the contributions of socioecological factors to these disparities.

Methods

This study utilized data from four waves (2008-2018) of the Chinese Longitudinal Healthy Longevity Survey (CLHLS). Information on chronic diseases, activities of daily living, family support, quality of death, and place of death of deceased older adults was extracted to describe the end-of-life experience. Logistic regression models were employed with controlling for age at death, education, residential area, per capita household income, and old-age insurance status. The Fairlie decomposition was applied to further analyze the factors contributing to gender differences.

Results

A total of 12533 deceased older adults were included, with 7516 (59.97%) being females. Males experienced higher levels of pain ($\beta=0.258$, $P<0.001$), suffered from more chronic diseases ($\beta=0.213$, $P<0.001$), and had less family support ($\beta=0.301$, $P<0.001$). Females had fewer functional disabilities ($\beta=0.291$, $P<0.001$). The socioecological factors accounted for only 25.9% to 46.45% of the variance. Notably, advanced age (>85 years) exacerbated gender differences in pain, chronic diseases, and family support, while rural residency further widened the gender gap in chronic diseases.

Conclusions

The poorer end-of-life experiences exhibited by males in this study stand in contrast to the prevailing perception that females generally experience inferior health outcomes, highlighting the specificity and complexity of health inequalities at the end of life. Socioeconomic factors contribute minimally to explaining these gender disparities, with most of them stemming from gender itself or other factors. The mechanisms underlying gender disparities need further investigation, particularly through linking with healthcare insurance or death registration systems to enhance data reliability.

Concurrent Oral Presentation Session

Session 10: Palliative Care

The Mediating Role of Stigma and Perceived Social Support in the Relationship Between Health Literacy and Perceived Barriers to Healthcare Decision-Making Among Cervical Cancer Patients

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Background and Objectives

To explore the interactions between health literacy, stigma, and perceived barriers to seeking medical care among patients with cervical cancer, and to provide guidance for improving patients' healthcare-seeking behaviors.

Methods

A study was conducted with 322 hospitalized cervical cancer patients, utilizing a general information questionnaire, Health Literacy Scale, Stigma Scale, and Perceived Barriers to Healthcare Scale. The mediation effects of stigma and perceived social support between health literacy and perceived barriers to seeking medical care were analyzed.

Results

The overall rate of delayed medical care among the patients was 37.3%. The total scores for perceived social support, health literacy, stigma, and perceived barriers to healthcare were (71.51±9.19), (63.11±10.30), (48.9±11.37), and (31.45±9.43), respectively. Pearson correlation analysis indicated that correlations between any two scales were statistically significant ($P < 0.01$). The mediation analysis showed that health literacy had a significant negative predictive effect on stigma ($\beta = -0.3397$, $P < 0.001$), and a positive predictive effect on perceived social support ($\beta = 0.1869$, $P < 0.001$). Stigma had a significant negative predictive effect on perceived social support ($\beta = -0.2632$, $P < 0.001$). Both stigma ($\beta = 0.3713$, $P < 0.001$) and perceived social support ($\beta = -0.2679$, $P < 0.001$) significantly predicted perceived barriers to seeking medical care.

Conclusions

The healthcare-seeking behavior of cervical cancer patients needs improvement. Stigma and perceived social support play a partial mediating role between health literacy and perceived barriers to seeking medical care. Government and healthcare professionals should implement appropriate measures to improve the healthcare-seeking behaviors of cervical cancer patients, promoting timely medical care and improving patient outcomes.

Concurrent Oral Presentation Session

Session 10: Palliative Care

Priority Setting for Palliative Care Research with People Affected by Dementia

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Background and Objectives

People with dementia typically have complex needs, which will lead to increasing demand for palliative care. However, there is limited evidence on the priorities for palliative care research with people affected by dementia. This study aimed to identify priorities for palliative care research with people with dementia and carers in the West Midlands of England.

Methods

Data were collected via: (1) rapid review of recommendations on priorities for palliative or dementia care research, (2) stakeholder consultation at a workshop, and (3) online cross-sectional survey using a Delphi technique where research topics were rated for importance and ranked to indicate top priorities for palliative care research with people affected by dementia in the region. A list of 45 research topics was identified from the review and stakeholder consultation, which informed the survey development. Descriptive statistics was used to analyse the survey quantitative data and content analysis for free text responses.

Results

The review identified 54 priorities across 11 domains which were discussed with 20 key stakeholders (clinicians, researchers, local government representatives, and experts by experience) at the workshop. Forty-three stakeholders completed the subsequent online survey. The top ten priorities include symptom assessment/management (e.g., pain, distress); cultural competence of staff; care for people with advanced dementia at the end of life; the needs of young people with dementia; nutrition and difficulty in swallowing; supporting carers of people with dementia living at home; the needs of people who live alone; advance care planning and other approaches incorporating individual preferences; and home care and coordination of services.

Conclusions

Our results suggest the top priorities for palliative care research with people affected by dementia, thus informing future policy and research.

Concurrent Oral Presentation Session

Session 10: Palliative Care

Preliminary Application of the Engagement of Advance Care Planning Among Elderly Patients with Chronic Diseases in Community Based on the Transtheoretical Model

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Background and Objectives

Patients' willingness to seek medical treatment and nursing preferences are of great significance for improving the level of hospice care. Advance care planning (ACP) is an effective way to solve it. According to the American Medical Association, elderly patients with chronic diseases in the community are the key population to develop ACP. Therefore, it is necessary to know the future medical willingness preference of elderly with chronic diseases and improve their participation. But at present, ACP in China is developing slowly and little known. Studies showed that the trans-theoretical model provides a neoteric way to improve the participation of ACP. Therefore, this study preliminarily verified the effect of the intervention program on the knowledge, attitude and participation.

Methods

This was a randomized effectiveness trial. Randomization began August 1, 2023, and follow-up concluded September 15, 2023. The study population included patients 60 years or older with chronic disease in Zhengzhou. Participants were randomly assigned to either the intervention group (n=22) or the usual group (n=22). The intervention group received an ACP intervention designed based on the Transtheoretical Model. Immediately post-intervention, at one month and three months after the intervention, data were collected through the Advance Care Planning Questionnaire and the Advance Care Planning Participation Questionnaire.

Results

The scores of patients in the intervention group were significantly higher than those in the usual group, with statistically significant differences ($P < 0.001$). The results from the analysis using generalized estimating equations revealed that there were statistically significant differences in the within-group effects ($F = 25.965$, $P < 0.001$) and interaction effects ($F = 454.226$, $P < 0.001$) between the two groups of patients. Conversely, no statistically significant difference was found in the between-group effect ($F = 504.720$, $P < 0.001$).

Conclusions

This intervention program of ACP can effectively enhance the patient's knowledge level, improve their attitudes towards ACP, strengthen their self-efficacy and preparedness for ACP, ultimately leading to increased participation rates.

Concurrent Oral Presentation Session

Session 10: Palliative Care

Construction of the Index System of Hospice Nursing Service Program in Tertiary Hospitals Based on Delphi Method

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Background and Objectives

To construct a scientific, objective and feasible hospice nursing service program index system for tertiary hospitals that is suitable for China's national conditions.

Methods

The initial framework was adjusted and improved by referring to hospice standards, combining with patients' needs, and communicating online or face-to-face with clinical nursing experts engaged in hospice care. Then, through the Delphi expert consultation method, 15 hospice experts conducted two rounds of expert consultation for modification, and constructed a tertiary hospital hospice nursing service program index system.

Results

The recovery rates of the two rounds of expert consultation were 80% and 100%, respectively, and the expert authority coefficient was 0.96, which finally formed a tertiary hospital hospice nursing service program indicator system covering 6 primary indicators, 15 secondary indicators, and 53 tertiary indicators.

Conclusions

The hospice nursing service program index system lays a foundation for the study of hospice nursing workload, nursing human resource allocation based on workload, and also provides a reference basis for the subsequent development of hospice service program costing, fee determination and compensation mechanism.

Concurrent Oral Presentation Session

Session 11: Advanced Nursing Practice

Day 1 (December 6, 2024) | 16:45 – 17:45 | Room F1320

Moderator: Dr Quanlei Li, The University of Hong Kong
Prof Jun-E Liu, Capital Medical University

- CS11-1** The Effectiveness of Social Media-Delivered Education in the Compliance of Treatment in Patients with Category 1 Tuberculosis: An Experimental Trial
Josephine De Leon^{1,2}, Arre Rona Mae¹, Danielle Begaso¹, Maryjames Clark¹, Rafaella Bea Detera¹, Alexandra Macarubbo¹, Kiara Manongsong¹, Camille Anne Pagayatan¹, Sharina Marie Paor¹, Joshamel Sta. Barbara¹, Jaso Arthur Gabriel Mendia¹, Darius Salmero¹
¹School of Nursing, Centro Escolar University, Philippines, ²Research and Innovation Department, Centro Escolar University, Philippines
- CS11-2** Hypothermia Management Practice of Nurse Anesthetists in the Post-Anesthesia Care Unit: A Qualitative Field Study
Manman Wang, Weiwei Wu, Qimin Xie
School of Nursing, Fujian Medical University, China
- CS11-3** Observation of the Analgesic Effect of Wrist and Ankle by Meridian Exploration Method in Patients with Lung Cancer Bone Metastasis
Dongya Li, Yingqi Yang, Mengjie Xu, Lihua Qin, Xinshuo Zheng
School of Nursing, Hunan University of Chinese Medicine, China
- CS11-4** Efficacy of Nebulized GM-CSF Inhalation in Preventing Oral Mucositis in Patients Undergoing Hematopoietic Stem Cell Transplantation: A Retrospective Study
Fenglian Luo¹, Li Lizhao¹, Qi Zhang¹, Yunyun Yuan¹, Jun Cai²
¹Department of Hematology, The Second Affiliated Hospital of Chongqing Medical University, China, ²Department of Gynecology, The Second Affiliated Hospital of Chongqing Medical University, China
- CS11-5** Enhancing Self-Management Practice in GDM: The Mediating Role of Medical Coping Modes Between Social Support and Self-Management Behaviors
Zhixiang Chen¹, Yunfeng Zhang¹, Hangcheng Tao¹, Jiao Tang¹, Juan Li², Hengyu Zhou¹, Jingya Yu³, Xingyu Wang¹, Nianyue Li¹, Lingyao Chen¹
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Concurrent Oral Presentation Session

Session 11: Advanced Nursing Practice

The Effectiveness of Social Media-Delivered Education in the Compliance of Treatment in Patients with Category 1 Tuberculosis: An Experimental Trial

Josephine De Leon^{1, 2}, Arre Rona Mae¹, Danielle Begaso¹, Maryjames Clark¹, Rafaella Bea Detera¹, Alexandra Macarubbo¹, Kiara Manongsong¹, Camille Anne Pagayatan¹, Sharina Marie Paor¹, Joshamel Sta. Barbara¹, Jaso Arthur Gabriel Mendia¹, Darius Salmero¹

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Background and Objectives

Tuberculosis is one of the main health concerns in the Philippines. Challenges presented include treatment compliance, disease stigma, and early detection. This study aimed to determine the effectiveness of social media-delivered education in patients with category 1 tuberculosis and its role in the compliance of patients to treatment.

Methods

The study was conducted from January to April 2024, the research involved nine (9) patients enrolled in selected health centers of Mandaluyong City's TB-DOTS program. The intervention involved a three-month social media education program focusing on medication adherence, hygiene practices, and preventive measures. Testing of the patients using the KAP survey, compliance to medications, and sputum examinations were done in 0 months, 1 month, 2 months, and after 3 months of the intervention. Differences in the parameters were tested using one-way ANOVA with repeated measures and Tukey HSD Multiple Comparisons Post Hoc Tests.

Results

findings revealed significant improvements in patients' tuberculosis knowledge, attitude, and practices post-intervention, with all patients maintaining complete medication adherence. Sputum examination results transitioned from positive to negative post-intervention, underscoring the efficacy of both medication and social media health education. Patients with category 1 tuberculosis maintained adequate medication adherence. Patients tended to be responsive, demonstrating their adherence to the social media-delivered education during their time in the TB-DOTS program.

Conclusions

The social media delivered education demonstrated effectiveness in promoting compliance to treatment for tuberculosis. It can be used to elevate health literacy and foster beneficial health behaviors in TB patients. The success of social media in maintaining treatment compliance among the study population demonstrates its potential as an effective tool for disseminating information and enhancing patient understanding of treatment protocols. The results of the study can be used as a basis for a full-scale study in educating patients with TB.

Concurrent Oral Presentation Session

Session 11: Advanced Nursing Practice

Hypothermia Management Practice of Nurse Anesthetists in the Post-Anesthesia Care Unit: A Qualitative Field Study

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School of Nursing, Fujian Medical University, China

Background and Objectives

Inadvertent hypothermia is a common perioperative issue for surgical patients, resulting in adverse outcomes and negative experiences. Understanding the clinical hypothermia management practice is critical to promoting the quality of nursing care and reducing the adverse effects of hypothermia. However, the practice of nurse anesthetists in preventing and managing inadvertent hypothermia in the post-anesthesia care unit(PACU) is still unclear. This field study aimed to describe the hypothermia management practices of nurse anesthetists in the PACU, including the content of hypothermia management and its problems.

Methods

Fieldwork with unstructured participant observation was conducted in three post-anesthesia care units of a tertiary hospital in Fujian Province from April to June 2024. Data were recorded as field notes. The traditional content analysis method was used to analyze the data.

Results

A total of 2 months of observation was conducted. The current PACU clinical hypothermia management work content of nurse anesthetists mainly includes three categories: hypothermia assessment, body warming, and nursing documentation. Six deficiencies were identified in the PACU practice of hypothermia management. There were four deficiencies at the implementation level: inadequate hypothermia assessment, poor implementation of temperature monitoring, insufficient normative thermoprotection, and lack of hypothermia health coaching; and two deficiencies at the organization level: lack of hypothermia management processes, and inadequate training in the use of warming device.

Conclusions

The current clinical practice of hypothermia management in the PACU still has many deficiencies. To change this situation, it is recommended to establish a scientific and standardized PACU hypothermia management program for anesthesia nurses, including training content, and analyze the barriers to program implementation to facilitate its implementation.

Concurrent Oral Presentation Session

Session 11: Advanced Nursing Practice

Observation of the Analgesic Effect of Wrist and Ankle by Meridian Exploration Method in Patients with Lung Cancer Bone Metastasis

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SCHOOL OF NURSING, HUNAN UNIVERSITY OF CHINESE MEDICINE, China

Background and Objectives

Limited research has explored the effectiveness of meridian-based exploration of wrist and ankle acupuncture on pain. To investigate the impact of meridian-based exploration of wrist and ankle acupuncture on pain and quality of life in patients suffering from pain due to lung cancer bone metastasis.

Methods

Eighty patients were selected and randomly divided into an observation group and a control group, each comprising 40 cases. The observation group explored acupuncture points along the 12 meridians of the human body to target the most painful areas, while the control group received conventional wrist and ankle acupuncture targeting fixed acupuncture points. After a 2-week intervention period, both groups were assessed for pain intensity using the numerical rating scale (NRS), onset and duration of analgesia, quality of life (including physical, cognitive, pain, emotional, and overall quality of life), the occurrence of adverse reactions, and overall effectiveness.

Results

The observation group exhibited a significantly higher total effective rate (90.0%) compared to the control group (75.0%) ($P < 0.05$). Furthermore, the observation group showed greater reductions in NRS scores post-intervention compared to the control group ($P < 0.05$). Additionally, the onset of analgesia was shorter and the duration of analgesia was longer in the observation group compared to the control group ($P < 0.01$). The quality of life scores in the observation group were significantly better than those in the control group ($P < 0.01$). Although the incidence rate of adverse reactions was slightly lower in the observation group (5.0%) compared to the control group (7.5%), the difference was not statistically significant ($P > 0.05$).

Conclusions

Meridian-based exploration of wrist and ankle acupuncture, targeting the most painful points, demonstrated superior efficacy in alleviating pain and improving the quality of life in patients with lung cancer bone metastasis pain compared to conventional fixed-point acupuncture. This innovative approach represents a promising advancement in acupuncture therapy and warrants further promotion.

Concurrent Oral Presentation Session

Session 11: Advanced Nursing Practice

Efficacy of Nebulized GM-CSF Inhalation in Preventing Oral Mucositis in Patients Undergoing Hematopoietic Stem Cell Transplantation: A Retrospective Study

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Background and Objectives

Oral mucositis (OM) is a debilitating complication frequently encountered by patients undergoing hematopoietic stem cell transplantation (HSCT). Despite advancements in supportive care, effective prevention and treatment strategies for OM remain a significant clinical challenge. This retrospective study investigates the efficacy of nebulized granulocyte-macrophage colony-stimulating factor (GM-CSF) inhalation in preventing OM in HSCT patients. By analyzing patient outcomes over two years, this study aims to provide valuable insights into the potential benefits of GM-CSF inhalation therapy, offering a promising avenue for improving patient quality of life and clinical outcomes.

Methods

Data from patients who received hematopoietic stem cell transplantation and GM-CSF for oral mucositis (June 2021 - June 2023) were collected. Patients were divided into observation and control groups based on GM-CSF use. The WHO Mucositis Scale was used to evaluate oral mucositis from pretreatment to discharge. General data, preconditioning protocol, transplantation method, oral mucositis grade and duration, pain score, nutritional score, days of parenteral nutrition, oral mucosal infection status, antibiotic use, granulocyte and megakaryocyte reconstruction time, and adverse reactions were summarized from medical records.

Results

This study included 143 patients: 75 in the observation group (36 males, 39 females, aged 22-67) and 68 in the control group (33 males, 35 females, aged 25-74). Both groups had similar distributions of leukemia, lymphoma, multiple myeloma, and other diseases. The observation group had significantly lower rates and severity of oral mucositis, pain scores, infection rates, antibiotic use, nutritional scores, and hematopoietic reconstruction times compared to the control group ($P < 0.05$). No adverse reactions were reported.

Conclusions

In both autologous and allogeneic transplantation patients, GM-CSF atomized inhalation improves oral mucositis prevention and treatment, reduces oral infection incidence, antibiotic use intensity, and parenteral nutrition days, promoting hematopoietic reconstruction.

Concurrent Oral Presentation Session

Session 11: Advanced Nursing Practice

Enhancing Self-Management Practice in GDM: The Mediating Role of Medical Coping Modes Between Social Support and Self-Management Behaviors

Zhixiang Chen¹, Yunfeng Zhang¹, Hangcheng Tao¹, Jiao Tang¹, Juan Li², Hengyu Zhou¹, Jingya Yu³, Xingyu Wang¹, Nianyue Li¹, Lingyao Chen¹

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Background and Objectives

To examine the mediating role of the medical coping mode between self-management behaviors and social support in women with gestational diabetes mellitus (GDM) in China, we aimed to inform the development of personalized interventions to enhance the self-management practices of women with GDM.

Methods

This cross-sectional study involved 618 women diagnosed with gestational diabetes at four hospitals. The research instruments used included the Self-Management Scale for Chinese Gestational Diabetes Mellitus (SMS-GDM), the Perceived Social Support Scale (PSSS), and the Medical Coping Mode Scale (MCMS). Multiple linear regression analyses were conducted to identify factors influencing self-management practices. Mediation effects were examined via the SPSS PROCESS macro with bias-corrected bootstrap methods.

Results

Among the 422 participants, the average self-management score was 80.78 (SD=13.71), with nearly half scoring in the low to moderate range. Perceived social support ($\beta=0.390$, $P<0.01$), confrontation ($\beta=0.170$, $P<0.01$), and acceptance–resignation ($\beta=-0.155$, $P<0.01$) were identified as significant predictors of self-management. Mediation analysis revealed significant indirect effects of perceived social support on self-management practices through confrontation (effect size = 0.350) and acceptance–resignation (effect size= 0.420). However, the difference between these two mediation effects was not significant (95% CI=-0.057, 0.044). Additionally, the direct effect remained significant, with an effect size of 0.366, indicating a partial mediation, while no significant indirect effect was observed through avoidance.

Conclusions

This study innovatively explores the interplay between perceived social support, medical coping strategies, and self-management in women with GDM, providing novel insights for targeted interventions applicable to chronic disease care. Enhancing social support and fostering positive coping mechanisms are crucial. Recommendations include cognitive-behavioral therapy and structured support groups to improve self-management. Training healthcare staff to address maladaptive coping strategies is equally critical. The study provides meaningful insights to improve health outcomes for women with GDM, aligning with the broader goal of advancing healthcare and realizing health for all.

Concurrent Oral Presentation Session

Session 12: Nursing Workforce and Professional Development

Day 1 (December 6, 2024) | 16:45 – 17:45 | Room F1420

Moderator: Dr Jay Lee, The University of Hong Kong

Dean Elvira Urgel, Centro Escolar University

CS12-1 Growth Mindset and Job Satisfaction in Chinese Nurses: The Chain Mediating Effect of Grit and Self-Efficacy

Xiaoyan Zhang

West China School of Nursing, Sichuan University, China

CS12-2 Profiles of Innovative Behavior and Disparities in Research Output Among New Nurses: A Multicenter Study Using Latent Profile Analysis

Husheng Li^{1,2}, Yue Qiao^{1,2}, Tianxiang Wan^{3,4}, Chunhua Shao⁴, Fule Wen², Xiaoxin Liu¹

¹Department of Nursing, Shanghai Chest Hospital, Shanghai Jiao Tong University School of Medicine, China, ²School of Nursing, Shanghai Jiao Tong University, China, ³Department of Health Sciences, Faculty of Biology, Medicine & Health, The University of Manchester, United Kingdom, ⁴Department of Nursing, Midwifery & Health, Northumbria University, United Kingdom

CS12-3 Effects of Job Demands, Job Resources, Personal Resources on Night-Shift Alertness of ICU Shift Nurses: A Cross-Sectional Survey Study

Jiayan Gou¹, Xin Zhang¹, Yichen He¹, Kexin He¹, Jiajia Xu²

¹School of Nursing, Chinese Academy of Medical Sciences Peking Union Medical College, China, ²Health Department, Jiaying Municipal Health Commission, China

CS12-4 A Core Competency Evaluation Index System for Different-Level Clinical Nurse Specialists: Development and Empirical Research

Yafang Zhao¹, Xiaopeng Huo², Danping Zheng³, Xiaoxing Lai⁴, Hongmei Zhang², Yawen Ye⁵, Xinyue Zhang⁶

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Concurrent Oral Presentation Session

Session 12: Nursing Workforce and Professional Development

CS12-5 Exploring Perceptions of Medical Students About Interprofessional Education (IPE): A Qualitative Study

Ying Xing^{1,2}, Chengrui Zhang¹, Tao Jin³, Wei Luan²

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CS12-6 Awareness and Responses to Climate Change: Perspectives from Nurses in Mainland China

Maoting Tian¹, Pui Hing Chau², Michelle Cole³, Chia-chin Lin², Roinah Ngunyulu⁵, Yasna Karina Palmeiro Silva⁶, Julia Slark⁴, Tiffany Leong Tung Yu², Yan Hu^{1,7}

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Concurrent Oral Presentation Session

Session 12: Nursing Workforce and Professional Development

Growth Mindset and Job Satisfaction in Chinese Nurses: The Chain Mediating Effect of Grit and Self-Efficacy

Xiaoyan Zhang

West China School of Nursing, Sichuan University, China

Background and Objectives

As a long-standing research topic in nursing management, job satisfaction plays an essential role in patient care, healthcare organizations, and career planning and development of nurses. It is thus extremely important to explore the psychosocial factors contributing to nurses' job satisfaction. Aims: This study aimed to explore the relationship between growth mindset and job satisfaction in Chinese nurses and to investigate the underlying mediation role of grit and self-efficacy in this relationship.

Methods

A cross-sectional survey design was used. The data were collected from 709 nurses during the COVID-19 pandemic in southwest of China by using standard measurements regarding growth mindset, grit, self-efficacy, and job satisfaction. Model 4 and Model 6 in the SPSS macro program PROCESS3.2 were used to analyze the mediating effects.

Results

We revealed a positive relationship between Chinese nurses' growth mindset and their job satisfaction; and grit and self-efficacy played a mediating role in this relationship, respectively. Moreover, there was a significant chain mediating effect of grit and self-efficacy on the link of growth mindset with job satisfaction.

Conclusions

Our study highlights the complex interaction among growth mindset, grit, self-efficacy, and job satisfaction by revealing that grit and self-efficacy serve as parallel and sequential mediators in the link of growth mindset with job satisfaction among Chinese nurses. Implications for Nursing Management: Nursing administrators should actively seek to promote nurses' growth mindset and build their grit and self-efficacy, thereby improving job satisfaction.

Concurrent Oral Presentation Session

Session 12: Nursing Workforce and Professional Development

Profiles of Innovative Behavior and Disparities in Research Output Among New Nurses: A Multicenter Study Using Latent Profile Analysis

Husheng Li^{1,2}, Yue Qiao^{1,2}, Tianxiang Wan^{3,4}, Chunhua Shao⁴, Fule Wen², Xiaoxin Liu¹

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Background and Objectives

The innovative behavior (IB) of nurses is a critical competency for effectively solving clinical problems. Despite its importance, there is relatively limited research focused on IB among new nurses. This study aims to identify the profiles of innovative behavior in this group and explore the disparities in their research output.

Methods

A multicenter survey was conducted from April to May 2023 among 354 new nurses in Shanghai, utilizing a general information questionnaire, the Innovative Behavior Scale for Nurses (IBSN), the Future Time Perspective Scale (FTPS), and the Utrecht Work Engagement Scale-9 (UWES-9). A latent profile analysis was performed using Mplus 7.0, and a mixture regression model was employed to analyze the impact of different latent classes of innovative behaviors on the research outcomes of these new nurses.

Results

Among the respondents, individuals aged 25 to 35 accounted for 55.9%, and females comprised 94.6%. IB of new nurses can be identified into 3 groups: low-level (n=108, 30.51%), moderate-level (n=149, 42.09%), and high-level (n=97, 27.40%) groups. Based on the results of LPA, marital status, education level, work experience, monthly income, night shifts, future time perspective scores, and work engagement scores can be the predictors of IB among different profiles. Statistically significant associations were found between IB level and research productivity, including publishing academic papers ($\chi^2=15.307$, $p<0.001$), registering patents ($\chi^2=17.163$, $p<0.001$), and winning Sci. & Tech awards ($\chi^2=27.814$, $p<0.001$).

Conclusions

According to our research, new nurses have three unique IB profiles. The current level is predominantly at a moderate level, with less than thirty percent demonstrating a high level of innovation. It revealed that better socio-demographic status and professional characteristics, future time perspective, and work engagement positively influenced innovative behavior among new nurses. The findings also highlight the potentially important role of IB in contributing to nurses' research output. Nursing administrators should pay attention to IB of new nurses and develop targeted interventions to enhance their IB levels.

Concurrent Oral Presentation Session

Session 12: Nursing Workforce and Professional Development

Effects of Job Demands, Job Resources, Personal Resources on Night-Shift Alertness of ICU Shift Nurses: A Cross-Sectional Survey Study

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Background and Objectives

A positive work environment can enhance nursing safety and patient satisfaction while alleviating nurse stress. Conversely, a poor work environment can harm nurses' physical and mental health and compromise the quality of care, particularly in the high-intensity and shift-based setting of the ICU. Based on the Job demands-resources (JD-R) model, this study examined the effects of job demands and job resources in the work environment, as well as personal resources, on the night-shift alertness of ICU shift nurses.

Methods

This study conducted from July to September 2022, recruited 291 ICU shift nurses from a hospital in Beijing, China. The Copenhagen Psychosocial Questionnaire (COPSOQ), the Self-resilience scale, the General Self-Efficacy Scale (GSES), and the Psychomotor Vigilance Task (PVT) were used to subjectively and objectively measure the job demands, job resources, personal resources, and night-shift alertness. SPSS 26.0 and Mplus 8.3 were used to analyze the data and construct the structural equation model.

Results

The night-shift reaction time was 251.0 ms (Median), indicating a relatively high level of alertness. Job demands were negatively correlated with both job resources ($r=-0.570$, $P<0.001$) and personal resources ($r=-0.462$, $P<0.001$), while a positive correlation existed between job resources and personal resources ($r=0.554$, $P<0.001$). The results show that increased job demands can lead to higher levels of nurse strain ($\beta=0.955$, $P<0.001$), whereas job resources were found that it can decrease strain ($\beta=-0.477$, $P=0.047$). Adequate job resources can enhance motivation directly ($\beta=0.874$, $P<0.001$), subsequently reducing reaction time ($\beta=-0.148$, $P=0.044$) and improving night-shift alertness among ICU shift nurses.

Conclusions

Enhancing ICU shift nurses' work motivation through bolstering job resources can boost night-shift alertness. However, it is noteworthy that, in this study, neither strain nor individual resources significantly influenced nurses' night-shift alertness. This may be attributed to the complexity of the ICU environment and individual differences. Future research should explore the relationship between these factors and nurses' work alertness.

Concurrent Oral Presentation Session

Session 12: Nursing Workforce and Professional Development

A Core Competency Evaluation Index System for Different-Level Clinical Nurse Specialists: Development and Empirical Research

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Background and Objectives

Evaluating the core competence of clinical nurse specialists (CNSs) at different levels reflects the quality of nursing and the development of the nursing profession. Objectives: Develop and utilize a graded evaluation core competency evaluation system to describe the differences in core competency among three levels of CNSs (primary, intermediate, and advanced) and compare between two years.

Methods

Two rounds of questionnaire surveys were administered to 21 nursing experts for the Delphi method in evaluation index system development. Then we used the evaluation tool for the empirical study, a cross-sectional online survey (implemented in November 2021 and November 2023) conducted among CNSs in a grade 3A hospital in China.

Results

The evaluation system consisted of 5 domains (clinical practice, consulting guidance and teaching, scientific research innovation, management and leadership, and discipline development), and 34 items. A total of 483 CNSs participated. When comparing the scores across two years, all competency scores increased and the advanced-level CNSs changed the most ($P=.002$). The 'discipline development' is second only to 'clinical practice', and is most prominent among intermediate and advanced CNSs. When compared within the subgroup of CNSs in 2023, 'clinical practice' and 'management and leadership' are highest at the advanced level ($P=.044$, $P=.032$), 'consulting guidance and teaching' is highest at the intermediate level ($P=.027$).

Conclusions

The mobility of Advanced CNSs between different units helps to spread knowledge and skills, promotes interdisciplinary integration, and promotes mutual understanding of patient care processes, and collaboration relationships. Improving intermediate CNSs is particularly prominent, as they are great in providing effective consultation for patients and colleagues, and promoting disciplinary development. More advanced and intermediate CNSs are needed to meet the urgent needs of hospitals and patients in difficult clinical problems, manage teams and develop professionals.

Concurrent Oral Presentation Session

Session 12: Nursing Workforce and Professional Development

Exploring Perceptions of Medical Students About Interprofessional Education (IPE): A Qualitative Study

Ying Xing^{1, 2}, Chengrui Zhang¹, Tao Jin³, Wei Luan²

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Background and Objectives

Integration of clinical medicine and other subjects has laid more emphasis on the cultivation of high-quality medical talents, with the increasing demand for interprofessional education (IPE). IPE has been promoted by a number of universities to create and sustain authentic IPE activities, with which students can engage. Although IPE has achieved certain results, there are still many problems. Many studies focused on the perspective of educators without understanding the essential needs and experience of students. This study intends to focus on the implementation of IPE from the perspective of medical students. Purpose: To describe the interprofessional experiences of medical students and provide a reference for the development of interprofessional education programs for medical students.

Methods

A descriptive qualitative study was conducted in 2023, using purposive sampling to select medical students who had interprofessional learning experiences for semi-structured interviews. The study used a phenomenological approach and Colaizzi's phenomenological method for analyzing and summarizing the interprofessional experiences and perceptions to extract themes.

Results

The interprofessional experiences of medical students were distilled into five themes: "cognition and attitude", "practice and collaboration", "motivation and drive", "difficulty and challenge", and "expectation and vision". Students reported their experience and found interprofessional learning beneficial for broadening horizon and building a harmonious healthcare team. Based on the experience of interprofessional learning, students also put forward expectations and ideas for IPE especially setting for medical students.

Conclusions

Each institution should establish a complete interprofessional education system in accordance with the professional education system of students, to achieve interprofessional education for medical students that adapts to the national conditions of China, and to better improve the overall quality of future medical service teams, to achieve patient-centered high-quality care experience.

Concurrent Oral Presentation Session

Session 12: Nursing Workforce and Professional Development

Awareness and Responses to Climate Change: Perspectives from Nurses in Mainland China

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Background and Objectives

Climate change presents significant public health challenges, influencing healthcare delivery worldwide. The International Council of Nurses (ICN) issued a position statement in 2018, advocating nurses to participate in climate change mitigation and support vulnerable communities. This study evaluated the awareness and responses of nurses in mainland China to climate change, aiming to identify educational and policy gaps to enhance nursing roles in climate change efforts.

Methods

The cross-sectional study was conducted from December 2023 and January 2024, surveying 597 nurses across various healthcare settings in mainland China. It employed selected items from the "Preparedness of Nurses for Climate Change Questionnaire," developed by the U21 Health Sciences Nursing and Midwifery Group, to evaluate the impact of climate change on nursing practices and the involvement of nurses in sustainable practices.

Results

Nurses in mainland China reported a moderate impact of climate change on their practices, with an average score of 5.32 ± 2.84 on a 0–10 scale, primarily affecting patient numbers (81.40%) and care complexity (71.36%). While engagement in sustainable practices varied, nurses rated their involvement relatively high in green practices (6.49 ± 2.70) and eco-friendly advocacy (6.03 ± 2.90). However, participation was low in committees on occupational safety (3.78 ± 3.52) and community collaborations (3.71 ± 3.45). The highest engagement was in promoting green practices within families (83.75%), the lowest in broader educational initiatives (14.74%).

Conclusions

The study found that nurses in mainland China had moderate awareness of climate change impact on nursing practices, but their involvement in sustainable practices varied significantly. Enhanced educational and policy support is essential to improve nursing contributions to climate change mitigation and adaptation, thereby fostering more resilient healthcare systems.

Concurrent Oral Presentation Session

Session 13: Student Wellness

Day 2 (December 7, 2024) | 08:30 – 08:15 | Room T1101

Moderator: Dr Jojo Kwok, The University of Hong Kong

Director Jing Su, Shantou University Medical College

CS13-1 Factors Related to Learning Motivation Among Nursing Students in Medical College: A Cross-Sectional Study

Nhan Thi Nguyen¹, Nga Thi Hoang^{1,2}

¹Faculty of Nursing and Medical Technology, University of Medicine and Pharmacy at Ho Chi Minh City, Vietnam, ²School of Nursing, Dak Lak Medical College, Vietnam

CS13-2 Challenges and Coping Strategies of Nursing Students in Training for Nationwide Medical Technical Skills Competition: A Qualitative Descriptive Study

Zhongchen Luo^{1,2}, Qing Wang^{2,3}, Jie Li⁴, Hongli Chen², Hong Li¹, Keyan Xue⁵, Jiao Tang⁶

¹School of Nursing, Guizhou Medical University, China, ²School of Nursing, Chinese Academy of Medical Sciences & Peking Union Medical College, China, ³School of Nursing, Lanzhou University, China, ⁴West China Hospital, Sichuan University / West China School of Nursing, Sichuan University, China, ⁵Department of Emergency Pediatrics, The Affiliated Hospital of Guizhou Medical University, China, ⁶School of Nursing, Chongqing Medical University, China

CS13-3 The Perception of the Comprehensive Sexuality Education Program and Knowledge on Reproductive Health Among Junior High School Students

Beann Klein Bulanadi, Philina Faye Eborra, Maureen Gamboa, Kristine Katigbak, Bethany Leonin, Isaac Lorenzo, Endrea Jonna Mallari, Mike Joseph Mendoza, Queen Beryl Stephanie Pacris, Angeline Palatino, Katrina Pastrana, **Joylyn Mejilla**
School of Nursing, Centro Escolar University, Philippines

CS13-4 The Influencing Factors and Improvement Strategies of Professional Identity Among Nursing Undergraduates: From the Perspective of Professional Social Practice Teaching

Haiyue You, Ying Zhao, Lingying Cai, Zhiqin Sun, Ren Wang, Wei Chen
School of Nursing, Fudan University, China

Concurrent Oral Presentation Session

Session 13: Student Wellness

Factors Related to Learning Motivation Among Nursing Students in Medical College: A Cross-Sectional Study

Nhan Thi Nguyen¹, Nga Thi Hoang^{1, 2}

¹Faculty of Nursing and Medical Technology, University of Medicine and Pharmacy at Ho Chi Minh City, Vietnam, ²School of Nursing, Dak Lak Medical College, Vietnam

Background and Objectives

Learning motivation is key concept in medical education; students who have strong motivation in learning will present a commitment to their study and enhance the education result. Therefore, learning motivation is crucial among nursing student to improve the quality of health workforce training. Objectives: To determine the proportion of nursing students who had good learning motivation at Dak Lak Medical College and to identify its related factors.

Methods

A descriptive cross-sectional study was conducted among 134 nursing students at Dak Lak Medical College from November 2023 to March 2024. Data was collected based on a self-completed questionnaire with 5 parts: General information, learning motivation, family support, training program, facilities and equipment of the school. Descriptive statistic, Chi square, and t-test were used to analyze the data.

Results

The percentage of students with good learning motivation in this study was 66.4%. Factors related to learning motivation among nursing students at Dak Lak Medical College were learning outcomes ($\chi^2 = 13.5$, $p = .001$), passion and awareness about the field of study ($\chi^2 = 24.9$, $p < .001$) and training program ($\chi^2 = 4.8$, $p = .028$). Other factors including age, gender, year of study, family support, school facilities have no relationship with students' learning motivation ($p > 0.05$).

Conclusions

Nursing students' motivation in learning largely comes from the passion and the desire to explore knowledge, helping students proactively seek new knowledge and overcome challenges to achieve self- development continuously. The finding evoke for the school need to think about the nursing curriculum program in student-centered way, creating an active learning environment to make the students have strong learning motivation in nursing program.

Concurrent Oral Presentation Session

Session 13: Student Wellness

Challenges and Coping Strategies of Nursing Students in Training for Nationwide Medical Technical Skills Competition: A Qualitative Descriptive Study

Zhongchen Luo^{1, 2}, Qing Wang^{2, 3}, Jie Li⁴, Hongli Chen², Hong Li¹, Keyan Xue⁵, Jiao Tang⁶

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Background and Objectives

Nursing technical skill competitions have been shown to be an effective and efficient method for promoting both learning and teaching within the field. Investigating the obstacles encountered by participants and their approaches to overcoming them is essential for improving preparation training strategies and daily pedagogical techniques. This study aims to examine the challenges and coping strategies for intern nursing students in preparation training for the National Medical Technical Skills Competition for College Students in China.

Methods

Seventeen undergraduate nursing interns who underwent preparation training for the competition were recruited by purposive sampling in two medical universities between February and May 2021. The data were collected using face-to-face semi-structured interviews and analyzed by qualitative content analysis.

Results

Identified challenges included 1) intensive training and insufficient rest; 2) lack of knowledge application and integration abilities; 3) inconsistent training standards affecting training progress; 4) cohesion impacted by an adverse team climate; 5) difficulty in balancing training, academics, and job hunting; 6) challenge in regulating pressure and negative emotions; and 7) insufficient motivation and ease to slack off. Coping strategies encompassed 1) arranging training content and duration reasonably, 2) adopting innovative training approaches and teaching methods, 3) aligning the frequency and difficulty of training assessments with students' current abilities, 4) enhancing the professional practice and teaching skills of trainers, and 5) pre-selecting contestants based on their characteristics and professional capacity.

Conclusions

Nursing students face various challenges in preparing for the national medical skills competition. It is crucial to create a well-organized training schedule, address adverse emotions, provide timely psychological support and establish a high-level competition training team to enhancing training effectiveness. Additionally, implementation of comprehensive reforms in nursing education teaching methods is imperative for improving the professional competence of student interns, specifically in enhancing their clinical decision-making skills for analyzing and resolving nursing issues in specific clinical environments.

Concurrent Oral Presentation Session

Session 13: Student Wellness

The Perception of the Comprehensive Sexuality Education Program and Knowledge on Reproductive Health Among Junior High School Students

Beann Klein Bulanadi, Philina Faye Ebor, Maureen Gamboa, Kristine Katigbak, Bethany Leonin, Isaac Lorenzo, Endrea Jonna Mallari, Mike Joseph Mendoza, Queen Beryl Stephanie Pacris, Angeline Palatino, Katrina Pastrana, **Joylyn Mejilla**

School of Nursing, Centro Escolar University, Philippines

Background and Objectives

In 2018, the Department of Education introduced policy guidelines for the Comprehensive Sexuality Education (CSE) program to tackle rising teenage pregnancy and sexually transmitted infections (STIs) among young Filipinos. This study assesses junior high school (JHS) students' perceptions of the CSE program and their knowledge of reproductive health.

Methods

A descriptive-correlational research design was used to explore the relationship between the respondents' perceptions of CSE and reproductive health knowledge. A sample of 350 Grade 8 to 10 students from public and private schools in Bulacan was selected using proportionate stratified sampling. Levels of perception of CSE and reproductive health knowledge were measured using weighted mean and standard deviation. Pearson correlation analysis, ANOVA, and Independent T-Tests were used for data analysis.

Results

The respondents generally exhibit high scores in their perceived CSE benefits, barriers, threats, and cues to action, as well as in reproductive health knowledge covering puberty, contraception, STIs, and relationships. Pearson correlation analysis revealed a moderate to weak positive correlation between perceptions of CSE and knowledge of contraception, STIs, and relationships, but a negative correlation regarding the perceived barriers and knowledge of puberty and reproduction. Through ANOVA and Independent T-Test, demographic analysis revealed significant differences in CSE perception and reproductive health knowledge among the respondents. Specifically, females aged 14-15, in higher grade levels, attending private schools, and with higher family income showed greater perception of CSE benefits, threats, and cues to action but lower perception of barriers. Similarly, these groups demonstrated higher mean scores in reproductive health knowledge. However, females notably score lower in contraception knowledge than males.

Conclusions

Despite positive perceptions and knowledge, barriers to the CSE program persist, including societal stigma, gender disparities, and socioeconomic inequalities. Addressing these barriers requires expanding support systems and incorporating culturally-sensitive, age-appropriate, and gender-specific approaches to foster a more inclusive and effective CSE curriculum.

Concurrent Oral Presentation Session

Session 13: Student Wellness

The Influencing Factors and Improvement Strategies of Professional Identity Among Nursing Undergraduates: From the Perspective of Professional Social Practice Teaching

Haiyue You, Ying Zhao, Lingying Cai, Zhiqin Sun, Ren Wang, Wei Chen

School of Nursing, Fudan University, China

Background and Objectives

This study aims to explore the factors influencing the professional identity of nursing undergraduates and to assess the effectiveness of specialized social practice teaching in enhancing professional identity.

Methods

Established four social practice bases in collaboration with geriatric care homes, special education institutions, and other health-related organizations, launched the "Nursing Social Practice" course based on the O-PIRTAS flipped classroom model. A mixed-methods research design was utilized to conduct the teaching experiment. A questionnaire survey was conducted to assess the professional identity of the experimental group (participants in the course) and the control group (non-participants) among students studying at a university in Shanghai from September to December 2023. Paired sample t-tests were used to analyze the qualitative results. Semi-structured group interviews were conducted with the experimental group to explore the benefits from the course and sources and status of professional identity. Qualitative data were analyzed using content analysis methods.

Results

The professional identity of the experimental group (n=40) significantly improved ($P<0.05$), while there was no significant change in the control group (n=34) ($P>0.05$). Qualitative data identified four factors affecting nursing professional identity: personal factors, educational factors, social factors, and occupational factors. Additionally, five positive effects of specialized social practice on enhancing professional identity were identified: increasing professional awareness, enhancing interest, broadening horizons, transforming professional attitudes, and achieving self-identification.

Conclusions

The professional identity of nursing undergraduates is influenced by various factors such as personal traits, education, society, and occupational characteristics, and its formation and development require collaboration from multiple parties. Specialized social practice can effectively enhance the professional identity of lower-grade nursing undergraduates. It is recommended universities to strengthen cooperation with practice sites, provide more practical opportunities for students starting from their lower grades, and fully leverage the exemplary role of outstanding instructors to help students deeply understand the value of individual contributions to nursing work.

Concurrent Oral Presentation Session

Session 14: Community and Public Health Nursing

Day 2 (December 7, 2024) | 08:30 – 08:15 | Room T1206

Moderator: Dr Denise Cheung, The University of Hong Kong

Prof Li Yoong Tang, Universiti Malaya

- CS14-1** Utilizing Community-Engaged Research Towards Capacity Building in Health of an Underserved Community
Earl Francis Sumile, Mary Abigail Hernandez, Kristine Joy Tomanan, Jan Vincent Delos Santos, Laurence Lloyd Parial
College of Nursing, The University of the Philippines Manila, Philippines
- CS14-2** Chinese Nurses' Perspectives on Child-Friendly Healthcare Practice Assessment: A Qualitative Study
Wei Xiao Huang^{1,2}, Mei Chan Chong¹
¹Nursing Department, Universiti Malaya, Malaysia, ²Nursing Department, Huzhou University, China
- CS14-3** Analysis of the "High-Quality Development of Family Doctor Contracted Services" in China: Based on the Content Analysis Method
Lingna Liu¹, Yanhua Ning¹, Jing Shi¹, Yahong Guo², Haiyan Liu³, Weijuan Kong², Xinjin Li¹, Cailing Yang¹
¹School of Nursing, Ningxia Medical University, China, ²Department of Nursing, Ningxia Medical University General Hospital, China, ³Department of Nursing, Wuzhong First People's Hospital, China
- CS14-4** Intention to Have a Third Child Among Millennial Parents with Two Children in Eastern China: A Cross-Sectional Survey
Fen Xu¹, Sha Lu², Meichan Chong¹
¹Department of Nursing Science, The University of Malaya, Malaysia, ²Department of Obstetrics and Gynecology, Hangzhou Women's Hospital, China

Concurrent Oral Presentation Session

Session 14: Community and Public Health Nursing

Utilizing Community-Engaged Research Towards Capacity Building in Health of an Underserved Community

Earl Francis Sumile, Mary Abigail Hernandez, Kristine Joy Tomanan, Jan Vincent Delos Santos, Laurence Lloyd Parial

College of Nursing, University of the Philippines Manila, Philippines

Background and Objectives

Nurses have a pivotal role in nurturing the capabilities of individuals, families, and population groups for better health. However, underserved communities in the Philippines, such as those with socioeconomic inadequacies, geographic isolation, and service access problems, have significant limitations in attaining the highest possible level of health. The current paper aimed to describe the engagement of the community residents in describing their current health situation and related priority problems, as well as explore appropriate initiatives to manage the identified problems.

Methods

Community-engaged research was utilized to enable the residents of a community in Central Luzon to participate in health capacity building. Particularly, records review and focus group discussions were conducted to assess the community's health needs and to identify the residents' perceived problems. The findings were presented in a community assembly, where residents further discussed their priority health concerns and potential interventions to address them. Quantitative data were summarized through descriptive statistics, while qualitative information was synthesized via content analysis.

Results

The priority community health problems included healthcare inaccessibility, food insecurity, water supply limitations, and environmental sanitation. Moreover, there was inadequate knowledge and skills among the residents in health promotion, disease prevention, and illness management. While the community had limited socioeconomic resources to optimize their health capacities, the sense of community among the residents is a vital resource towards empowering them to improve their health.

Conclusions

The results could be utilized as a launching pad for developing appropriate health programs for the community. Hence, the next steps should include the identification and training of core group members toward community mobilization, and further exploring collaborative and sustainable partnerships across organizations to ensure that the community will have long-term solutions to their problems.

Concurrent Oral Presentation Session

Session 14: Community and Public Health Nursing

Chinese Nurses' Perspectives on Child-Friendly Healthcare Practice Assessment: A Qualitative Study

Wei Xiao Huang^{1, 2}, Mei Chan Chong¹

¹Nursing Department, Universiti Malaya, Malaysia, ²Nursing Department, Huzhou University, China

Background and Objectives

Nurses play a critical role in the implementation of child-friendly healthcare, ensuring that pediatric patients receive comprehensive and compassionate services. However, there is a global scarcity of research evaluating nurses' practices in delivering child-friendly healthcare. Therefore, this study focuses on exploring the assessment of child-friendly healthcare practices among Chinese nurses.

Methods

This descriptive qualitative study employed purposive sampling to recruit 14 pediatric nurses from six hospitals in Zhejiang province, Southeast China. Individual semi-structured interviews were conducted online or face-to-face between January and June 2024. Data were analyzed through the qualitative content analysis approach.

Results

We identified 475 unique meaning units in the interview data, 372 of which were related to child-friendly healthcare practice assessment. These were classified into 61 codes across 4 categories and 17 subcategories. The four categories were identified: services designed for children's interests, tailoring the environment adapted for children, facilitating social interactions, and promoting childhood development.

Conclusions

The findings from this study were derived from the perspectives of Chinese nurses on child-friendly healthcare practices assessment, offering a comprehensive and multidimensional view of this field. The results reflect the current state and future direction of child-friendly healthcare in China, which will aid in sustaining the development of a child-friendly healthcare evaluation system.

Concurrent Oral Presentation Session

Session 14: Community and Public Health Nursing

Analysis of the "High-Quality Development of Family Doctor Contracted Services" in China: Based on the Content Analysis Method

Lingna Liu¹, Yanhua Ning¹, Jing Shi¹, Yahong Guo², Haiyan Liu³, Weijuan Kong², Xinjin Li¹, Cailing Yang¹

¹School of Nursing, Ningxia Medical University, China, ²Department of Nursing, Ningxia Medical University General Hospital, China, ³Department of Nursing, Wuzhong First People's Hospital, China

Background and Objectives

Since 2022, China has implemented a new version of the family doctor contracting service policy to help promote the high-quality development of family doctor contracting service. Objective To retrieve, summarize and analyze the policy texts of "high-quality development of family doctor contracted services" in various provinces and municipalities in China, so as to provide a reference for better promoting family doctor contracted services in various regions.

Methods

The content analysis method was used to sort out the relevant policies of "high-quality development of family doctor contracted services" in 31 provinces and municipalities in China, and put forward suggestions for improving the policy of "high-quality development of family doctor contracted services".

Results

A total of 16 policy texts were included in this study. The high-quality development of family doctor contracted services mainly includes seven aspects: improving the capacity of medical services, improving the quality of basic public health and health management, ensuring the rational drug use needs of residents, carrying out door-to-door services, optimizing referral services, strengthening traditional Chinese medicine services, and forming an orderly medical treatment order. The services include basic medical and public health services, health management services, and personalized services.

Conclusions

The policy objectives of "high-quality development of family doctor contracted services" in each region are detailed, and on the basis of covering the whole population, the key population is strengthened, the service supply population is expanded, the content of family doctor contracted service is innovated, and the service contract rate, recognition and satisfaction of residents are improved in a variety of innovative forms. It is suggested that all regions should pay attention to the quality and quality of contracted services of family doctors, improve the overall ability and work enthusiasm of the family doctor team, implement the content of contracted services, and improve the quality of services.

Concurrent Oral Presentation Session

Session 14: Community and Public Health Nursing

Intention to Have a Third Child Among Millennial Parents With Two Children in Eastern China: A Cross-Sectional Survey

Fen Xu¹, Sha Lu², Meichan Chong¹

¹Department of Nursing Science, University of Malaya, Malaysia, ²Department of Obstetrics and Gynecology, Hangzhou Women's Hospital, China

Background and Objectives

The decline in global birth rates has raised concerns worldwide, particularly in China, where the total fertility rate dropped to 1.3 in 2020 despite the introduction of the two-child policy in 2015. To counteract this trend, China implemented the three-child policy in 2021. Fertility intention, especially among Millennial parents, plays a crucial role in fertility behaviour, but research on their willingness to have a third child remains limited. Objectives: This study aimed to assess the fertility intention of Millennial parents (25–40 years old) with two children in Eastern China and explore factors influencing their decision to have a third child.

Methods

A cross-sectional study was conducted using a convenience sampling method. A face-to-face questionnaire survey was administered to 520 childbearing-age participants in two tertiary hospitals in Hangzhou from June 2021 to March 2022. Multivariate logistic regression was used to identify independent influencing factors of fertility intention.

Results

Among the participants, 105 (20.2%) expressed the intention to have a third child. Significant factors influencing this intention included employment status, age, reasons for wanting a third child, perceived barriers, and policy support. Participants over 30 years old were 2.466 times more likely to intend to have a third child compared to those 30 years and under. The most cited barrier was personal health status, and those requiring medical assistance were less likely to have a third child (OR = 0.453).

Conclusions

The fertility intention of Millennial parents with two children remains low. Targeted policies, including healthcare and work support, could enhance their reproductive decisions, with nurses playing a critical role in providing consultation, guidance, and psychological care.

Concurrent Oral Presentation Session

Session 15: Innovations in Healthcare

Day 2 (December 7, 2024) | 08:30 – 08:15 | Room F1320

Moderator: Dr Benjamin Ho, The University of Hong Kong
Dr Jing Shao, Zhejiang University

CS15-1 Acceptability of Remotely Delivered Cognitive Remediation for Schizophrenia: A Systematic Review and Meta-Analysis

Min Wen, Jie Zhang, Keqing Jiang, Juan Liu, Xiaodan Zhu
School of Nursing, Ningxia Medical University, China

CS15-2 Prediction Models for the Risk of Ventilator-Associated Pneumonia in Patients on Mechanical Ventilation: A Systematic Review and Meta-Analysis

Jiaying Li¹, Guifang Li², Ziqing Liu¹, Xingyu Yang¹, Qiuyan Yang¹
¹*School of Nursing, Ningxia Medical University, China*, ²*Department of Critical Care Medicine, General Hospital of Ningxia Medical University, China*

CS15-3 "Utilizing Artificial Intelligence for Individualized Medicine in Digital Healthcare"

Lovtee Wah¹, **Precious Nachula**²
¹*School of Nursing, Nanjing Medical University, China*, ²*School of Nursing (Geriatric Nursing), Central South University, China*

CS15-4 Feasibility and Effectiveness of a Dysphagia Cup for Older Adults Living in Residential Care Homes: Real-World Pilot Study

Guowen Zhang¹, Yusheng Zuo¹, Ryder Chan², Derek Yee Tak Cheung¹
¹*School of Nursing, The University of Hong Kong, Hong Kong*, ²*School of Public Health, The University of Hong Kong, Hong Kong*

Concurrent Oral Presentation Session

Session 15: Innovations in Healthcare

Acceptability of Remotely Delivered Cognitive Remediation for Schizophrenia: A Systematic Review and Meta-Analysis

Min Wen, Jie Zhang, Keqing Jiang, Juan Liu, Xiaodan Zhu

School of Nursing, Ningxia Medical University, China

Background and Objectives

Cognitive remediation therapy (CRT) is a pivotal treatment for cognitive impairments in patients with schizophrenia, but access remains unequal across regions. Remotely delivered CRT offers a potential solution. The introduction of remotely delivered CRT presents a promising solution to these limitations. This meta-analysis aims to examine the acceptability of remotely delivered CRT and the factors influencing its acceptability.

Methods

This study systematically searched PubMed, Embase, and EBSCO databases to identify randomized controlled trials involving remotely delivered CRT. Meta-analyses were performed using both random-effects and fixed-effects models. Subgroup and meta-regression analyses were employed to investigate potential factors affecting the acceptability of remotely delivered CRT.

Results

The literature search yielded 1782 studies. 20 studies met the inclusion criteria and reporting on 21 randomized controlled trials. Dropout rates were 22.76% for the remotely delivered CRT group and 20.73% for the control group. Meta-analysis results indicated no significant difference in dropout rates between the two groups ($p = 0.909$). Subgroup and meta-regression analyses identified factors such as male gender, development of cognitive strategies, facilitation of transfer to everyday functioning, and inclusion of all core components of CRT as facilitators of the acceptability of remotely delivered CRT.

Conclusions

Remotely delivered CRT demonstrates efficacy comparable to other forms of cognitive remediation, yet it exhibits a higher rate of dropout. Future studies should consider the specificities of the target population and their environmental context, designing more meticulous and rigorous protocols to optimize the efficacy and acceptability of remotely delivered CRT.

Concurrent Oral Presentation Session

Session 15: Innovations in Healthcare

Prediction Models for the Risk of Ventilator-Associated Pneumonia in Patients on Mechanical Ventilation: A Systematic Review and Meta-Analysis

Jiaying Li¹, Guifang Li², Ziqing Liu¹, Xingyu Yang¹, Qiuyan Yang¹

¹School of Nursing, Ningxia Medical University, China, ²Department of Critical Care Medicine, General Hospital of Ningxia Medical University, China

Background and Objectives

Identifying patients at risk of ventilator-associated pneumonia through prediction models can facilitate medical decision-making. Our objective was to systematically evaluate the current models for ventilator-associated pneumonia in patients with mechanical ventilation.

Methods

Nine databases including PubMed, Web of Science, The Cochrane Library, Embase, CINAHL, CNKI, Wanfang, VIP, and SinoMed were systematically retrieved from establishment to March 6, 2024. Two independent reviewers performed study selection, data extraction, and quality assessment, respectively. The Prediction Model Risk of Bias Assessment Tool was used to evaluate the risk of model bias and applicability. Stata 17.0 was used to conduct a meta-analysis of discrimination of model validation.

Results

The total of 34 studies were included, with reported 52 prediction models. More than 50% of the models were developed using logistic regression, and the area under the receiver-operating curves of the included models ranged from 0.509 to 0.982. The most frequent predictors in the models were mechanical ventilation duration, length of ICU stay, age. Each study was essentially considered having an overall high risk of bias. A meta-analysis of 17 studies containing 33 models with validation was performed with a pooled area under the receiver-operating curve of 0.80 (95% CI: 0.78–0.83).

Conclusions

Despite the relatively excellent performance of the models, there is a high risk of bias of the model development process. Enhancing the methodological quality and revealing the details of study process, especially the external validation, practical application, and optimization of the models need urgent attention.

Concurrent Oral Presentation Session

Session 15: Innovations in Healthcare

"Utilizing Artificial Intelligence for Individualized Medicine in Digital Healthcare"

Lovtee Wah¹, Precious Nachula²

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Background and Objectives

This paper examines the integration of AI technologies in personalized medicine, focusing on its impact on patient outcomes, treatment planning, and diagnosis. It analyzes current developments in AI applications, including AI-based patient monitoring systems, diagnostic tools, and therapy planning. The research also includes a meta-analysis of quantitative data from various medical field technologies to enhance illness identification, treatment planning, and resource utilization. However, data privacy, healthcare system integration, and fair access issues need to be addressed for effective healthcare delivery. **OBJECTIVE** This study examines the role of AI technologies in developing customized medicine in digital healthcare. It evaluates the effectiveness of AI tools in clinical settings, their impact on clinical decision-making, and their integration into healthcare systems. The research aims to highlight the advantages and challenges of AI implementation and provide guidance for future use.

Methods

We'll analyze AI applications in personalized medicine using a systematic literature review from 2018- 2023, examining peer-reviewed publications, clinical trials, and case studies. This research focuses on AI- based patient monitoring systems, diagnostic tools, and therapy planning, with a meta-analysis of quantitative data from various medical fields.

Results

AI technologies, like machine learning and natural language processing, have significantly improved personalized medicine by enhancing diagnosis, treatment planning, patient monitoring, and chronic illness management. A meta-analysis reveals that AI integration in personalized medicine improves clinical outcomes, particularly in cardiology, by reducing heart attack frequency.

Conclusions

AI integration in healthcare can improve personalized treatment, but challenges like data privacy, algorithm transparency, and worker training require further investigation. Collaboration between developers, physicians, and legislators is crucial. Collaboration is crucial for optimizing the creation and application of AI technologies, thereby reducing potential risks and maximizing their advantages. I intend to apply for this award My research on AI for individualized medicine in digital healthcare aims to improve healthcare outcomes and maximize resource utilization.

Concurrent Oral Presentation Session

Session 15: Innovations in Healthcare

Feasibility and Effectiveness of a Dysphagia Cup for Older Adults Living in Residential Care Homes: Real-World Pilot Study

Derek Yee Tak Cheung¹, Guowen Zhang¹, Yusheng Zuo¹, Ryder Chan²

¹School of Nursing, The University of Hong Kong, Hong Kong, ²School of Public Health, The University of Hong Kong, Hong Kong

Background and Objectives

Assistive technologies (ATs) can enhance the quality of life and increase the capacity of older adults to live independently. However, evidence on the effectiveness of dysphagia cups as ATs for older adults with dysphagia in the real world remains scarce. To examine the feasibility and effectiveness of a dysphagia cup (Sippa) to safely assist older adults in drinking water.

Methods

It was a one-group pre-test/post-test study (NCT05818501). From July to September 2023, older adults aged ≥ 65 with dysphagia from two residential care homes in Hong Kong were recruited. During a 5-day pre-test, older adults were spoon-fed or used conventional cups to drink water, then they were guided to use Sippa for 2-3 days. Afterward, older adults used Sippa to drink water during a 5-day post-test. Feedback from 10 staff and 6 older adults was collected through individual interviews. Primary outcome was the daily water consumption, and secondary outcomes included the frequency and severity of choking and coughing while drinking, willingness to drink, and the feasibility of study method. Linear mixed models and Wilcoxon signed-rank tests were used to analyze quantitative data. Qualitative data was analyzed by thematic analysis.

Results

16 older adults completed this study. By comparing the post-test data with the pre-test data, no significant differences were found in daily water consumption ($p=0.725$), frequency of choking and coughing ($p=0.657$), severity of choking and coughing ($p=0.693$), and willingness to drink ($p=0.788$). Older adults viewed Sippa as acceptable. However, the staff viewed widespread Sippa as less feasible due to expensive fragile pads, comprehensive cleaning procedures, and a shortage of manpower to monitor usage.

Conclusions

This pilot study confirmed the potential of Sippa as an ATs to assist older adults in drinking water but also identified several obstacles to limiting widespread use. Future ATs products such as dysphagia cup implementation must consider economic factors, manpower, and caregiver acceptability.

Poster Abstract

Category: Advanced Nursing Practice

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¹School of Nursing, Ningxia Medical University, China, ²Gastroenterology Department, General Hospital of Ningxia Medical University, China, ³Cardiac and Large Vascular Surgery, General Hospital of Ningxia Medical University, China, ⁴Nursing Department, General Hospital of Ningxia Medical University, China
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¹School of Nursing, Ningxia Medical University, China, ²Intensive Care Unit, Ningxia Medical University General Hospital, China

Poster Abstract

Category: Advanced Nursing Practice

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383 "Grow with My Baby, Bittersweetly": a Descriptive Phenomenology Study Exploring the Experiences of Perinatal Vulnerability among Maternal Women

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442 Comparison of Public Washrooms' Cleanliness and Hand Hygiene Facilities Before and After the Coronavirus Disease 2019 (COVID-19)

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