The IP as an Educator

Basics of Infection Prevention
2-Day Mini-Course
2016

Objectives

- **Review** three common types of educational presentations typically given by the IP
- **Develop** objectives for educational programs using sample action verbs
- **Identify** ways to keep the attention of the adult learner
- **List** key elements of preparing a presentation that will be effective if using Powerpoint as the media

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Types of Presentations

- Classroom/lecture style – large group
  - More structured format; needs written learning objectives
    - Examples: new hire orientation, Charge Nurse workshop
  - May use PowerPoint presentation
- Discussion – small group
  - May not need/require handouts, depending on complexity of material
    - Examples: department staff meetings, task forces or teams
  - Helps learners to HEAR, SEE, and DISCUSS
- Just-in-time – one person
  - Usually verbal
    - Examples: during unit rounds
  - Information sharing or corrective action needed; may follow w/ location of policy or materials for further review

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Know the Audience – What's In It For Them?

Assess the learning needs of your audience

- New Employee Orientation or Charge Nurse meeting?
  - What do they need to know? Are they new to healthcare or experienced?
  - How can you make this personal to them to encourage them to listen and learn?
- Department staff meeting?
  - What is their interest and willingness to hear about the rate of infection on their unit?
  - Will they be likely to cooperate with a change of practice?
- Just-in-time?
  - How can you engage that employee to promote a change in behavior?

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Recognize Learner Diversity

- Many part-time or temporary staff
- Contract labor, students, volunteers
- Wide gaps in ages: are they boomers, gen X, gen Y?
- Cultural differences
- Language barriers
- Little "scheduled" time for inservices
- Many educational levels
- Competing priorities

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Tailor Educational Approaches

- Try explaining "bloodborne pathogens" in a way that engages each segment of your workforce
  - Some = "I already know it"
  - Others = "I don't need to know it"
  - Even those that say = "I don't WANT to know it"

Who responds best to the "academic" approach?
Who needs to see a scary needle to make the point?
Who needs pictures / special language assistance?

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Ideal Environments for Learning

- Comfortable seating
- Safe and non-threatening
- Pleasant room temperature
- No distractions from noise
- Frequent stretch / bathroom breaks
- Snazzy presentation / good handouts
- Willing and motivated learners

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Get real. This is a hospital. Pagers and phones will ring

You must be engaging enough to overcome distractions

Learning Objectives

- Three is a good number
- Give the learner a roadmap to the content of your presentation
- Should be measurable where feasible
- Begin objective statements with action verbs
  - Examples include
    - Discuss…
    - Describe…
    - Demonstrate…
    - Identify…
    - Compare…

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Innovative Ways to Teach Infection Prevention

- Lectures
  - Sometimes necessary when need to give a lot of information
  - Good speaking skills required
  - Does not readily allow for student involvement
- Computer-based training
  - Self-paced
  - Can meet individual needs
  - Alternative to attending formal classroom training
  - Requires some level of computer skill

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Innovative Ways to Teach Infection Prevention – continued

- Games
  - Can be a "gathering tool" to engage students
  - Some adults may feel childish at first
  - Examples: scramble puzzles, word search, Jeopardy
- Case Studies / Clinical Experiences
  - Can help with problem solving skills
  - Often build on learners experience
  - Help people relate to their own work

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Innovative Ways to Teach Infection Prevention – continued

- Simulation
  - Staging of "infractions" in a mock room
  - Challenge staff to spot the errors
    - Urinary catheter tube on the floor
    - Soiled dressing on an IV site
- Education cart
  - Demonstration cart displaying educational materials/ DVD
  - Placed on unit for access by all shifts
  - Handouts, sign-in sheet
  - Good for changes in policy or equipment
  - Do not use if topic complex or a demonstration required

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Formal Presentations

If a formal presentation is necessary, assess your readiness and get prepared

- Are you comfortable with public speaking?
- Know your material very well so you are "sharing," not "lecturing"
- For new presenters
  - Practice in front of a mirror
  - Record yourself to hear "hums" and "haws"
  - Note any annoying mannerisms
  - Humor can be is good…but if you are not skilled at comedy, you may want to bypass this at first.

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PowerPoint Tips -1

- Keep it simple
- Font sizes
  - 32-36 point fonts for headings
  - 20-28 points for text
  - Use a clean font for easy reading
- Colors
  - Cool colors have good contrast
  - Warm colors can be difficult to read

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Bad slide……bad slide

- Here is an example of a font that is too small (12 font)
- And font that is difficult to read
- other font that is difficult to read – this is 28 font as opposed to this 28 font
- *Oh this color hurts my eyes !!*
- *Consider your use of colors (red and green appear grey to color-blind audience members)*
- **Don't have too many "fly –ins"**

Hint: If you place the slide on the floor by your feet, you should be able to read it clearly

PowerPoint Tips – 2

- Know how to work audio visual equipment yourself
- Do a practice run
- Check your timing so you stay within the allotted time
  - A good estimate is about one minute per slide
- Always, always have a paper and an electronic backup (flash drive) copy of your presentation
- Don't "read" the slides to the audience
  - Follow the slide outline
  - Elaborate or give examples for each point
  - Speak to the audience, not to the screen

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A Successful Presentation

- Must be personal for the learner
  - "What's in it for me?"
- Make sure learners' time is well spent
- Be sure topic is relevant to learners and their work
  - Give them something that can be put into immediate use
  - People tend to learn what they can use

Questions?

For more information, please contact any HAI Liaison Team member

Thank you

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