

Title:

The Value of Educational Technology in the Nursing Care: Benefits in Clinical Practice

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Session Title:

Improve Nursing Practice: Outcomes, Technologies, and Clinical Supervision

Slot:

J 05: Saturday, 29 July 2017: 1:30 PM-2:45 PM

Scheduled Time:

2:00 PM

Keywords:

educational technology , family caregiving and nursing care

References:

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Abstract Summary:

In the current scenario, it is important that health professionals use innovative educational plans using the new technologies of information and communication to address health problems.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to learn about the innovate interactive tool to improve nursing care	The value of this is to improve nursing care
The learner will be able to learn about the flowchart used in this tool allowing family caregivers to decide which information wants to know and learn about.	The value of this is to learn about the flowchart used in this tool allowing family caregivers to decide which information wants to know and learn about.
The learner will be able to learn about the innovate interactive tool to improve clinical practice	The learner will to be able to learn about the innovate interactive tool to improve clinical practice

Abstract Text:

In the current scenario, it is important that health professionals use innovative educational plans using the new technologies of information and communication to address health problems. There is a need to provide health information to ensure and protect citizens from misleading information and to promote the implementation of useful, reliable and up to date health information. Citizens are increasingly requested to get involved and also become responsible in health care.

Aim of the study:

To assess the influences of the educational technology "Caring for Dependent People" in some clinical indicators.

Methods:

A quasi-experimental study, not randomized, of the before and after type, with a convenience sample of 65 family caregivers, from two Medicine services of a hospital in Porto, Portugal. The Control Group consisted of 33 family caregivers and the Experimental Group of 32, identified by consecutive sampling. The experimental group had access to educational technology at home. Data were collected by socio-demographic, evaluation of clinical indicators questionnaire. The assessment in both groups were made one month after discharge.

Results:

The assessment of the clinical indicators such as: use to the emergency room, unscheduled consultation, home visit request of nurses, use of the INEM (National Institute of Medical Emergency), unscheduled hospitalization and pressure ulcer development, revealed no statistically significant differences between the two groups of dependents. These results, highlights the need to strengthen priority and essential information during the process of immediate recovery at clinical discharge, emphasizing the key role of nurses in the monitoring and management of this process. This technology can be used in health, particularly in hospital and essentially home context, as may be advised by the nurses in the hospital for use after discharge, as well as to remember and take questions following the instruction given.

Conclusion:

We think we have contributed to the development and integration of interactive educational technologies in the clinical setting, providing a technological complement in the preparation of family caregivers by health professionals contributing to the improvement of health care