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Being creative in the face of adversity

Annual #creativeHE collection 2021



Edited by Nathalie Tasler, Rachelle O'Brien and Alex Spiers



Annual #creativeHE collection 2021

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27. Use of digital video communication platform (zoom) by British Indian nurses to upskill Indian nurses for managing COVID-19 patients

By Roslyn Mattukoyya, Leena Koshy Vinod, Manju Pallam and Emmima Angelina Manoharan

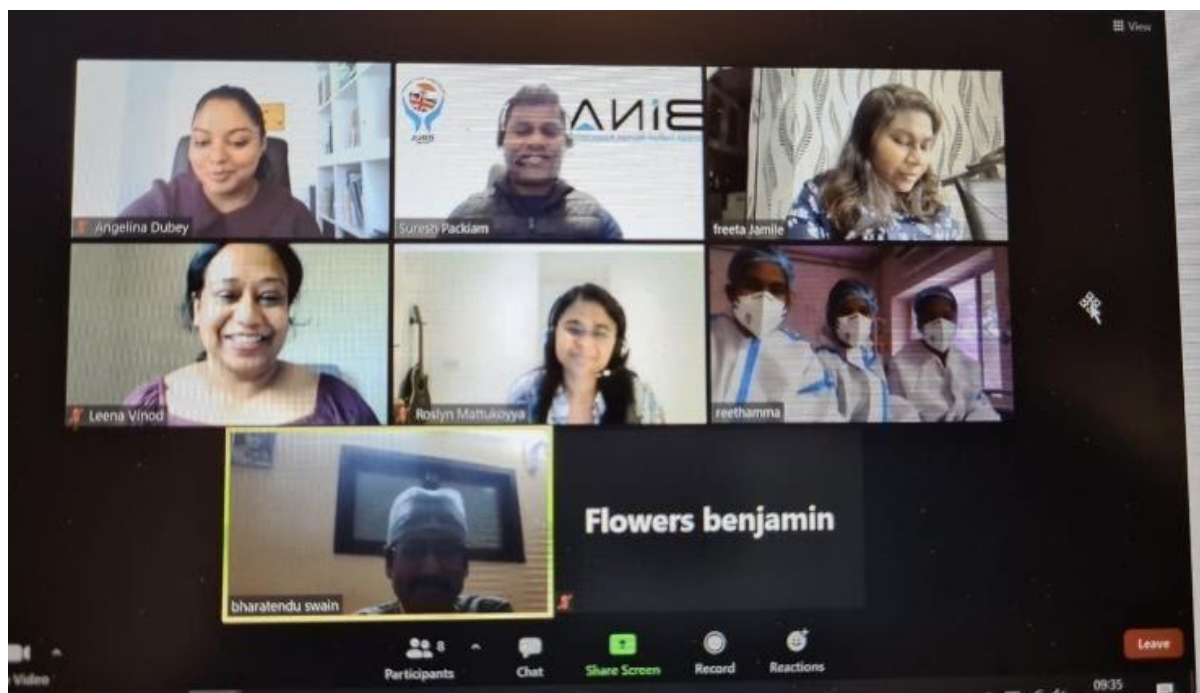


Image 1 British Indian Nurses upskilling Indian nurses using digital Platform (Zoom)

COVID-19 outbreak, a severe respiratory infection, was an international public health emergency. Like many other countries, the crisis shattered most states of India, and Indian healthcare professionals lacked skills, knowledge, and resources for managing the scale and severity of the pandemic. The British Indian Nurses Association (BINA) took the initiative of offering support to Indian Nurses to address this massive skills and knowledge gap issue and asked for volunteers. Around 65 British Indian Nurses (clinical nurses, educators and researchers working across the UK) showed interest. These Indian origin UK nurses felt the moral and social obligation to volunteer to share their expert knowledge to provide cross-cultural digital educational support to the Indian nursing workforce (Ford, 2021). The authors volunteered to become the programme development team and co-ordination team and led to the successful completion of the project.

Creative intervention

The main aim of the project was to swiftly upskill Indian nurses by sharing the best practices learnt during the UK COVID-19 waves to meet the demand of the hour. The creative intervention was implementation of a cross-border collaborative virtual training programme (Elsevier, 2020). It involved the use of video communication platform (Zoom) to offer timely and high-quality educational training programme to upskill around 400 nurses working in small to large multi-speciality hospitals in 3 states of India to address the massive skills and knowledge gap issue around managing COVID-19 patients (NHS England, 2020).

Despite having no prior connections, the authors worked cohesively and collaborated with ICU Nurse Educators/Leads across the UK to create a training package of 16 topics in a week's time. This was a massive achievement as the project was a voluntary activity and each member had their busy day job. In addition, the authors acted as the key liaison between the Nurse Leads from the Indian Hospitals and the BINA volunteering trainers.

The innovative education programme was carried out by using zoom to provide tailored support to 3 hospitals located in 3 different states (Kerala, Andhra Pradesh and Maharashtra) and recordings were made available on you tube following due consent. Three 1-hour sessions were delivered weekly for 4 weeks and the training reached out to hundreds of nurses as most sessions were projected in auditoriums with mass attendance of nurse leaders, educators, nurses, and student nurses. This was a complex activity as the hospitals varied in size and capacity. The staff who attended the educational programme differed in their knowledge, experience, skillset and had diverse linguistic background. English was the main medium of delivery but local language was utilised as per the situational requirement. The training contained a range of evidence based COVID-19 management skillsets, patient safety guidelines, and infection control resources (Almomani et al., 2020). Emphasis was given to practical information and post session; relevant posters and guidance were sent for reinforcement of safe care provision.

Lessons learnt

The sessions evaluated extremely well, and the Indian nurse leaders really valued the outstanding contribution. It enabled them to upskill their nursing workforce to deliver care safely and bridge the knowledge-skills gap. One nurse lead's comment capture this, 'Well coordinated, excellent and friendly faculty, apt topics and for those who attended, it is a life-time learning.' The project team's vision was to ensure that the training was relevant and of high quality. Challenges included time pressures, mixed level of audience proficiencies and finding guidance relevant to Indian practice setting (Ford, 2021; Elsevier, 2020; NHS England, 2020; Almomani et al., 2020).

On reflection, one of the key factors that enhanced the teaching and learning process was the social and cultural connections that the trainers and co-ordinators made with the attendees. This was evident in the pre and post informal conversations with the Nurse Managers, as well the formal evaluations (Baran & AlZoubi, 2020). The previous experiences of the co-ordinators and trainers in India enabled them to deliver the sessions at a level that was most suitable for the learners (Baran & AlZoubi, 2020). In addition, expertise in nursing practice, education, and research in combination with working flexibly, a strong passion and a partnership approach led to the success of the project. The authors consider this whole

process of developing a detailed educational programme and implementing it effectively to meet the challenges of the crisis as novel (Shivangi, 2020). Some of the unintended positive outcomes includes further collaboration and networking amongst the co-ordination team and Indian Nurse Leaders for sharing good practices and to influence future practice.

The cross-border collaborative virtual training programme was a creative output to combat the pandemic in a developing country. The positive outcomes have inadvertently met United Nation's various Sustainable Development Goals; including 3 (health and wellbeing), 4 (quality education), 10 (reduce inequalities) and 17 (partnership goals). Organisations in affluent countries can implement the same robust model to set up virtual training programs to promote best clinical practices, policies, procedures, guidelines, and curriculum globally to reach the SDG set goals by 2030 (The Commonwealth Education Hub, 2021).

Conclusion

The authors came together at the peak of COVID-19 pandemic in India in May 2021. The approach taken in this project to use digital video communication platform (zoom) by British Indian Nurses to upskill Indian Nurses for managing COVID-19 patients has enhanced networking across borders, allowed to share best practice across borders and impacted all involved for the better in the field of nursing practice and education. This type of collaboration is globally replicable, with its potential to offer flexibility in meeting the education and training needs in any acute crisis posed during situations such as COVID-19. The project coordination team will be more than willing to share and support anyone interested.

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Links to some of the training sessions delivered

[Session 1](#) and [Session 2](#)