



La Source.

Institut et Haute
Ecole de la Santé

La Source:

School of Nursing Science

University of Applied Science and Arts Western Switzerland

Anne-Laure Thévoz, RN, MSc NSc

Myriam Guzman, RN, MSc NSc

2nd of May 2019

Shanti Ashram, Coimbatore, India

Nursing education in La Source



La Source, today:

- ❑ First secular nursing school in the world (nursing school since 1859)
- ❑ 1050 students (800 pregraduate– 250 postgraduate)
- ❑ One propedeutic year followed by a 3 years bachelor in Nursing Sciences
- ❑ 70 faculties (professors, lecturers, assistants...)
- ❑ 50% of the students who graduated in 2017 had an international experience during their Bachelor

6 Research and Development Lab

- Mental health and psychiatry
- Aging and health
- Child and family health
- Prevention & Health Promotion in the community
- Quality and safety of care
- Health systems, ethics and interprofessionalism



La Source.

Institut et Haute
Ecole de la Santé

Lab of Child and Family Health (Lab CFH)

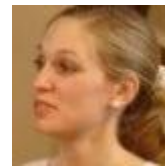


Santé de l'enfant
et de la famille

Laboratoire d'Enseignement
et de Recherche

Teamwork skills

- Seven nurses specialized in the field of child and family health
- Heterogeneity of professional expertise (from perinatal to adolescence)
- Competencies : diversified and complementary covering clinical, community, pedagogical and disciplinary dimensions
- Multiple collaborations with paediatricians, clinical nurses, health managers, and training practitioners in various care settings (including socio-educational)



Main goals

- ❑ Development of professional knowledge in health promotion, disease prevention and clinical interventions specific to children, adolescents and their families
- ❑ Scientific monitoring and continuous training concerning the specific knowledge inherent in the child-family field, with a view to integrating it into teaching
- ❑ Educational reflection (production of adapted and innovative pedagogical tools), transfer of knowledge and professional skills
- ❑ Quality of training by updating the programs on the basis of scientific knowledge related to the most prevalent health issues
- ❑ Strengthen knowledge transfer and skills development of field professionals through service delivery
- ❑ Pool our expertise within national and international networks dedicated to pediatric care and higher education in this field
- ❑ Continue the partnership with the various clinical or community settings providing care for the child and family



La Source.

Institut et Haute
Ecole de la Santé

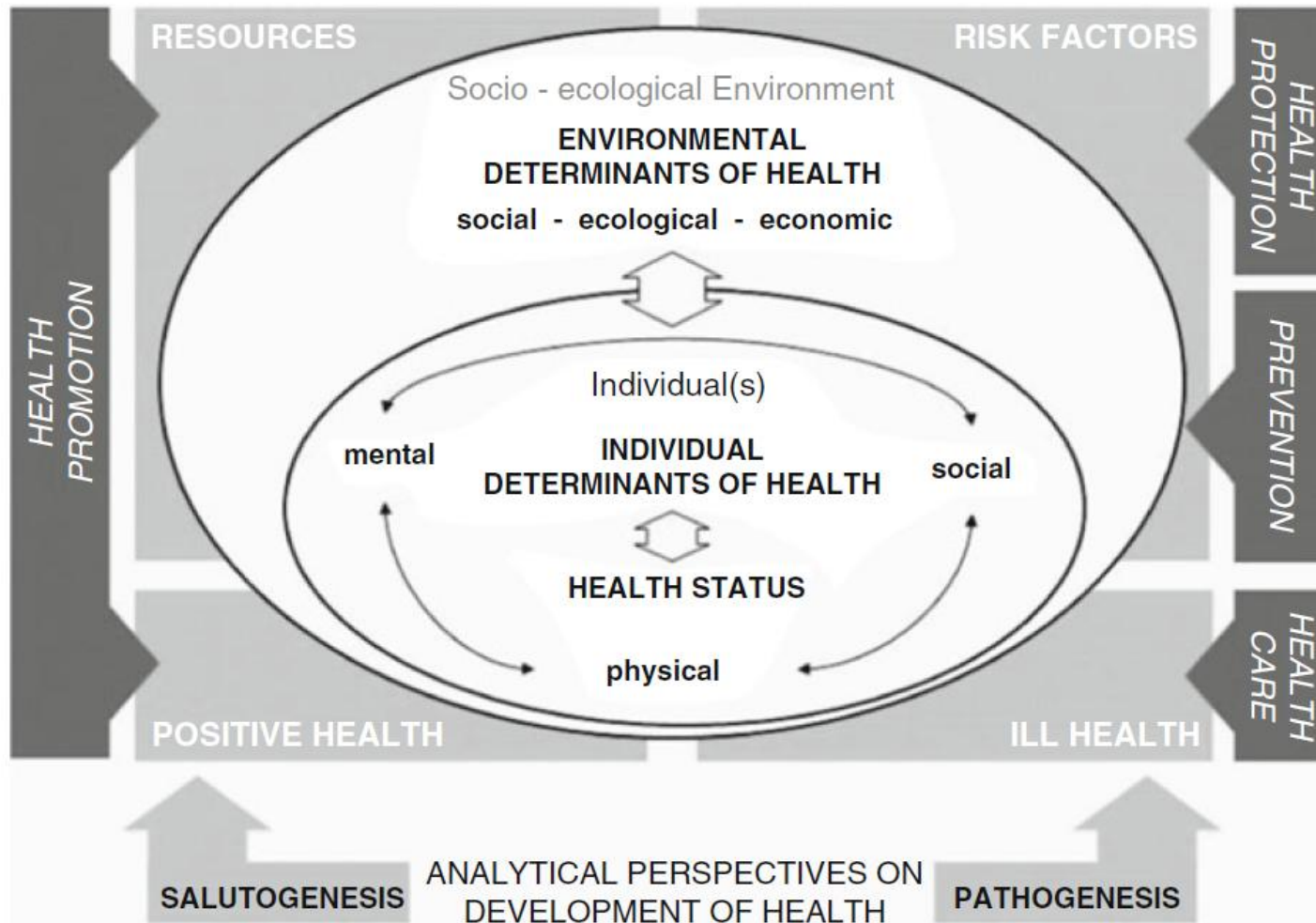
Lab of Health Promotion and Prevention in the Community (Lab HPPC)



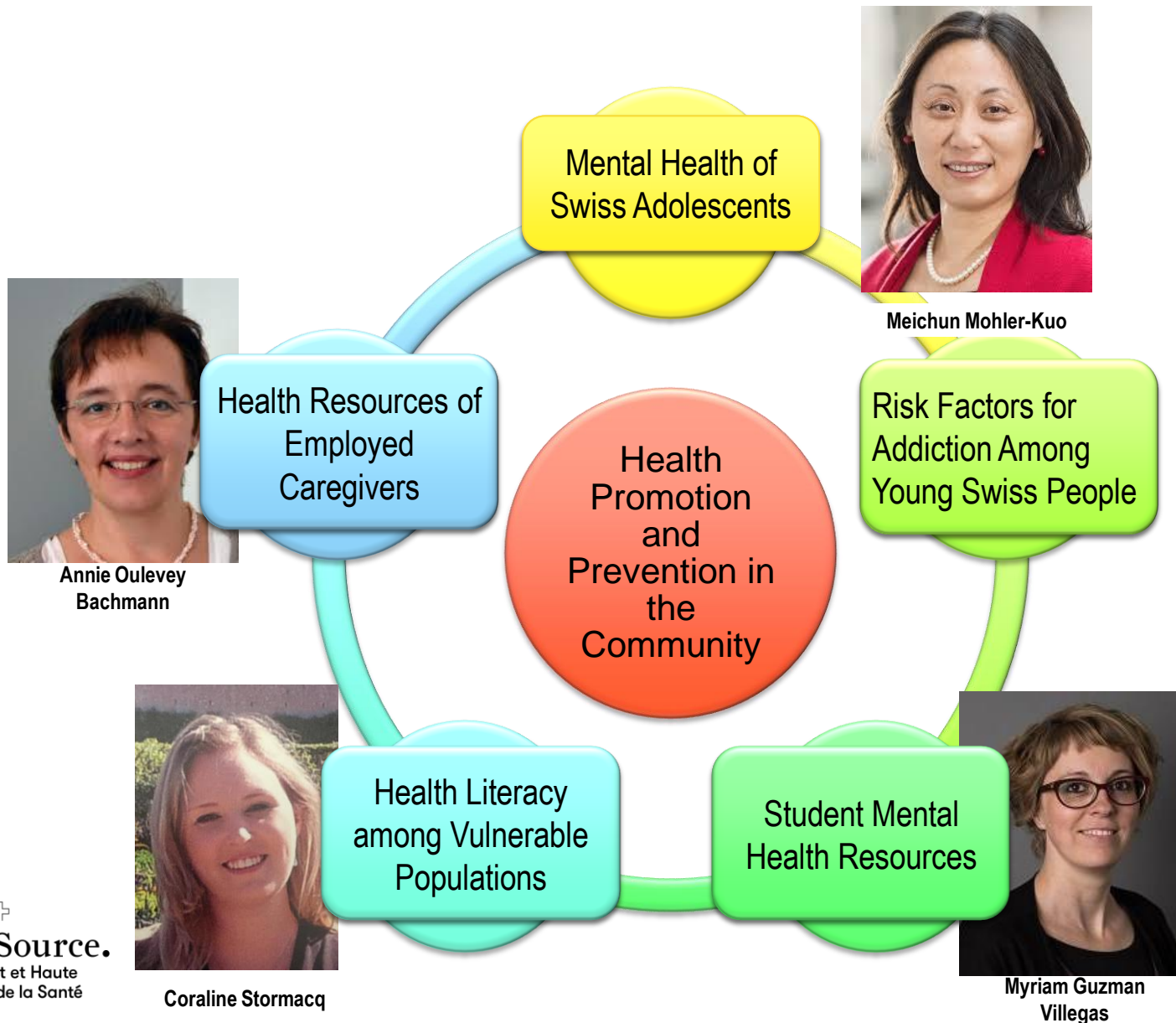
Prévention et
Promotion
de la Santé dans
la Communauté

Laboratoire d'Enseignement
et de Recherche

Theoretical background of the Lab HPPC



Research themes of our team

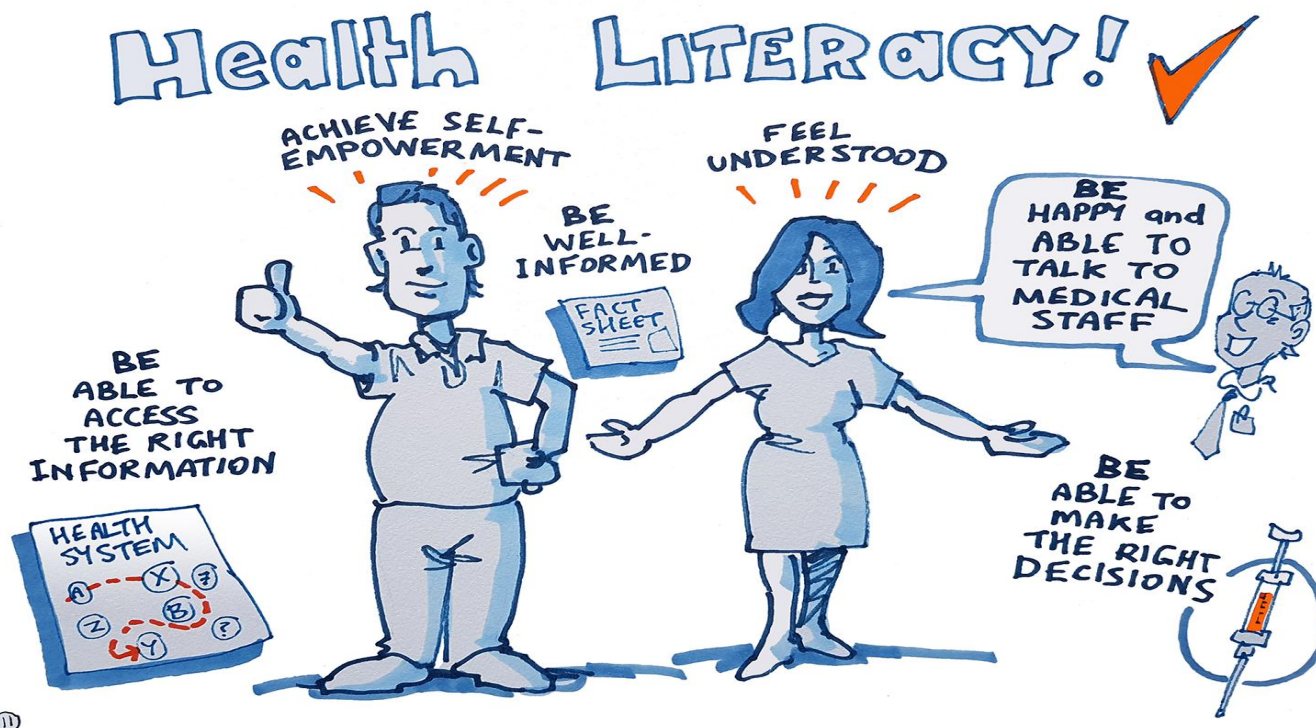


HEALTH LITERACY

“Health literacy is linked to literacy and entails people’s knowledge, motivation and competences to access, understand, appraise, and apply health information in order to make judgments and take decisions in everyday life concerning healthcare, disease prevention and health promotion to maintain or improve quality of life during the life course”. (Sorensen et al., 2012)

- **Access:** ability to seek, find and obtain health information
- **Understand:** ability to comprehend the health information
- **Appraise:** ability to interpret, filter, judge and evaluate the health information
- **Apply:** ability to communicate and use the information to make a decision to maintain and improve health

Consequences: what health competencies influence



Good level of HL



improve health

(Mancuso & Rincon, 2006; Ishikawa & Yano, 2008 ; Bo et al., 2014 ; Osborn et al., 2011 ; Lee et al., 2004 ; Geboers et al., 2014 ; Bohanny et al., 2013 ; Sun et al., 2013 ; Adams et al., 2013 ; Tsai et al., 2014 ; von Wagner et al., 2007 ; Mitic & Rootman, 2012 ; Sentelle et al., 2013 ; Bennett et al., 2009)

patients with low
HEALTH LITERACY...



Are more likely to visit an
EMERGENCY ROOM



Have more
HOSPITAL STAYS



Are less likely to follow
TREATMENT PLANS



Have higher
MORTALITY RATES

www.cdc.gov/phpr



Low level of HL



Low health outcomes

What to do in practice?

Multi-level actions:

- Simplification of the communication
- Accent on the quality of written information
- Audio-visual tools
- Decision support tools
- Caregiver-patient communication (e.g., teach-back communication)
- Creation of "health literacy friendly" environments
- Improving health systems
- ...

«Health literacy friendly hospital»

Make the hospital more accessible:

- Work on the physical environment: telephone exchanges, reception staff, interpreting, simplified signage, etc.
- **Written communication:** simplification of written forms (instructions, consents, etc.), plain language
- **Oral communication:** teach-back communication during the patient-caregiver relationship

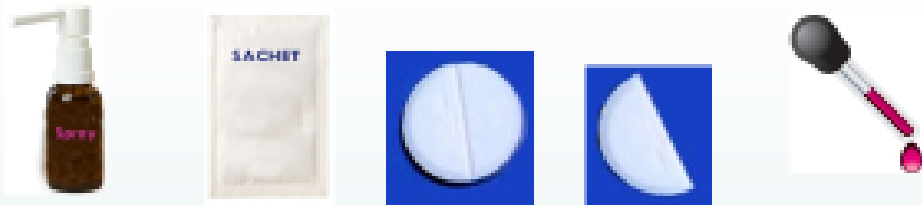
Example of tool: visual prescription

L'ordonnance visuelle

Un outil pédagogique favorisant l'autonomie des personnes dans l'accès aux soins

- ✓ *accessible*
- ✓ *mémorisable*
- ✓ *sécurisante*
- ✓ *document unique à généraliser dans toutes les officines*
- ✓ *moins de difficultés dans la prescription des médicaments génériques*
- ✓ *gain de temps en explication pour le pharmacien*

Un autre code de lecture : pictogrammes, pastilles de différentes couleurs, repères temporels

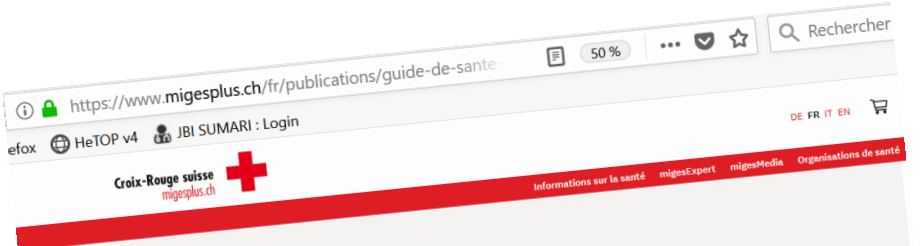


Prénom :

Référence couleur de médicament	Matin	Midi	Soir	 (Surligner la durée du traitement)						
				1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31						
	7h 8h 9h 10h 11h 12h	13h 14h 15h 16h 17h 18h	19h 20h 21h 22h 23h	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31						
	7h 8h 9h 10h 11h 12h	13h 14h 15h 16h 17h 18h	19h 20h 21h 22h 23h	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31						
	7h 8h 9h 10h 11h 12h	13h 14h 15h 16h 17h 18h	19h 20h 21h 22h 23h	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31						

migesplus

portail pour l'égalité des chances en matière de santé



BROCHURE

Guide de santé pour la Suisse

4ème édition complètement remaniée

Le guide, édité en 18 langues, entend aider en particulier les migrants à se repérer dans le labyrinthe du système de santé suisse. Nouveautés de cette réédition: suggestions, adresses et indications relatives aux caisses-maladie dans chaque chapitre, contenus élargis des chapitres consacrés aux droits et devoirs des patients, à la santé psychique, à l'interprétariat communautaire et aux sans-papiers, possibilité d'y annexer des adresses et des informations supplémentaires. En plus vous pouvez télécharger des fiches descriptives sur les différents thèmes abordés par le guide de santé en 18 langues.

AUTEUR
Katja Navarria / Katharina Liewald

ÉDITEUR
Bundesamt für Gesundheit BAG
Croix-Rouge suisse, Santé et Immigration

PUBLIÉ
2017

- BILLETTS**
- Quelques
 - Suivi
 - Alcool
 - ASB
 - Autres maladies psychiques
 - Exercice physique
 - Dépression
 - Alimentation
 - Prénatal
 - Secours
 - Migration forcée et santé psych.
 - Dépendance et crises
 - Tabagisme
 - Grossesse et accouchement

VERSIONS	TÉLÉCHARGER	ORDRE
Allemand	PDF ↓	- 0 + gratuit
Français	PDF ↓	- 0 + gratuit
Italien	PDF ↓	- 0 + gratuit
Anglais	PDF ↓	- 0 + gratuit

Guide de santé pour la Suisse

Le système de santé suisse en bref - un manuel à l'intention des migrants vivant en Suisse

Disponible en 18 langues - à commander sous: www.migesplus.ch



Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra

Département fédéral de l'intérieur DFI
Office fédéral de la santé publique OFSP

Croix-Rouge suisse
Schweizerisches Rotes Kreuz
Croce Rossa Svizzera



18

S·SO
:ole Spécialisée
isse occidentale

Patient- and family- centered care (PFCC)

- **Innovative approach** : ground a mutually beneficial partnership between patient-family & professionals
- **New paradigm** in the way health care is provided : family is the child's primary source of strength and support
- Patients and family are essentials and integral **partners with the health care team** => allies for quality improvement, safety initiatives, education of health professionals, research, facility design & policy development

(American Academy of Pediatrics, 2012; Institute for patient-and-family centered care: <http://www.ipfcc.org/>)

Core principles of PFCC



Outcomes

Child & family :

- ↘ anxiety
- ↗ satisfaction, use of strenghts

Professionnals :

- ↗ satisfaction

Healthcare system:

- ↘ health care costs, use more efficient of ressources

(Joint commission, 2011)

Take home message

17 recommandations ...

- Collaboration – collaboration - collaboration 😊
- Peer to peer support
- Be creative
- Advocate for research
- Incorporate concepts in practice

● Thank you for your attention !

● Any questions ?

● m.guzmanvillegas-frei@ecolelasource.ch

● Head of the Lab HPPC:

● a.oulevey@ecolelasource.ch

● al.thevoz@ecolelasource.ch

● Responder of the Lab CFH:

● ag.meylan@ecolelasource.ch



La Source.

Institut et Haute
Ecole de la Santé