

Three themes emerged that related to the simulation sessions: briefing, simulation exercise, and debriefing. The nursing students experienced “briefing: preparation is important,” “simulation exercise: doing is better than listening,” and “debriefing: methods to communicate.”

The findings enrich our understanding of how nursing students develop communication skills in a simulation setting. This study provides valuable information on designing inter-professional simulations to enhance team communication.

### **Nurses’ Perceptions of Difficult Patients and Coping Strategies Used During the Management of Difficult Patients in Medical–Surgical Wards**

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A “difficult patient” is one who engages in undesirable actions which include (i) aggressive, verbal and nonverbal; (ii) uncooperative; and (iii) demanding behaviours. Encounters with difficult patients can negatively affect nurses’ emotional health, affecting their work performance, leading to impaired nurse–patient relationships and patient care. While there have been few programs to equip hospital staff for such situations, as encounters with difficult patients, especially aggressive ones, increase over the years, it is imperative to explore and better understand the experience of nurses with difficult patients and coping strategies that have been utilized. Such information would be valuable in improving existing coping strategies, which could be shared amongst other nurses and facilitate their management with difficult patients. This study aims to explore nurses’ perceptions of difficult patients and coping strategies used during the management of difficult patients in medical–surgical wards in Singapore. A face-to-face semi-structured individual interview was conducted. Ethical approval was obtained. Purposive sampling technique was adopted to develop the sample by selecting 16 registered nurses. This study has revealed the perceptions of nurses on difficult patients, difficult patients’ impact on nurses, nurses self-coping strategies, their perceived support systems available, and challenges faced and suggestions for improvement. There were several aspects which were lacking in terms of organizational support for nurses; hence, improvements could be made to facilitate nurses’ management of difficult patients in the future.

### **Nursing Narratives and Reflective Practice: A Theoretical Review**

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In the context of a theoretical review, the aim of this study was to explore the literature regarding how nursing narratives had

been used to enhance reflective practice. A literature search from 1990 to 2017 was conducted in PubMed, CINAHL, and PsycINFO databases. After applying the selection criteria, 13 studies were identified. The quality of articles was evaluated. Three themes were identified as the main components of an ongoing narrative process based on looking back to past clinical experiences, creating spaces for dialogue and bringing the worlds of theory and practice closer together. In conclusion, this review provides a forum for exploring the use of narratives to enhance reflective practice, which may lead to the acquisition of professional competences.

### **Colorectal Cancer Patients’ and Caregivers’ Views on Self-Management in the Post-Treatment Period: A Qualitative Study**

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Research has highlighted that self-management (SM) has the potential to help with the complex challenges of survivorship. Little is known about colorectal cancer (CRC) patients’ views or preferences for SM in the post–cancer treatment period. To address this, we conducted a qualitative study with CRC patients and their caregivers who had completed treatment within the last 5 years. Data were gathered using focus groups and individual interviews which were recorded and transcribed. Interpretive description was used to guide data analysis and interpretation of results. We included  $n = 19$  patients and  $n = 3$  caregivers. The mean time since diagnosis was 3.2 years. Results of the study revealed that participants were keen to engage in SM behaviors as they saw it as being proactive for their health, yet they needed more support as evidenced in the following themes: (1) Survivors need more structured ways to engage in SM, (2) finding information and support was often haphazard, (3) information and support to manage the long-term physical and psychological consequences of treatment are needed, (4) peer support would help normalize survivorship, (5) sexual health and bowel changes are particularly challenging, (6) health care providers should encourage healthy behaviors, and (7) information and access to programs for healthy behaviors are needed. Aligned with Interpretive Description’s emphasis on informing clinical practice, we highlight the following: (1) CRC patients are keen to take control of their health and well-being through SM and (2) health care providers and cancer systems should support SM to ensure optimal recovery in the posttreatment period.

### **Responses to Gene-Based Personalized Nutrition Information Among Individuals With and Without Depressive Disorders**

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