NTNC Webinar: Nursing Interventions through Abstracts and Poster Displays

National TB Nurse Coalition Members’ Webinar
April 1, 2015
PRESENTING NURSING INTERVENTIONS THROUGH ABSTRACTS AND POSTER DISPLAYS

Presenters

• Diana Fortune, RN, BSN
  TB Controller
  New Mexico TB Program

• Lynelle Phillips, BSN, MPH
  Faculty, Sinclair School of Nursing
  Field Placement Coordinator, MPH Program
  University of Missouri

• Patricia Woods, RN, MSN
  TB Nurse Consultant
  New Jersey TB Program

Materials

• The materials referenced during today’s call can be printed or saved to your desktop.
  ▪ Go to: NTCA home page http://www.tbcontrollers.org
  ▪ Under Upcoming Events on the lower left, click Handouts>
Using Chat

How to use the chat feature:
- Under the Tools box in the upper right corner, click on the graphic that looks like 🗣
- Select “To Moderator”
- A text box will appear in the lower right corner
- Type in your question or comment and hit enter to submit to the Moderator

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Diana Fortune
DRAFTING AN ABSTRACT

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Why Do a Poster...

Posters are a hybrid form of sharing information
- More detailed than a speech
- but less than a paper

Interactive
- Networking opportunity
- Learn as much from reviewers as they learn from you
- Explain quickly and clearly why your project is important and what your findings mean

Miller p. 313
Drafting an Abstract

• Tell a simple, clear story (Miller p 313)
  • Describe the problem and your innovative approach
  • Summarize the outcome
  • Make recommendations for your colleagues.
• Start with the "W’s" (Miller p 321 – 322)
  • Who
  • What
  • When
  • Where
  • Why

Abstract Essentials I

• Intro
  ■ Describe your issue
    • Why it is important
    • How your findings contribute to the body of knowledge
  • Methods
    ■ Describe what you did & how you did it
      • List who, when, where and how many cases, contacts, subjects were involved

Miller p. 322

Abstract Essentials II

• Results
  ■ What happened?
  ■ Present your findings

• Conclusion/discussion
  ■ Restate the purpose
  ■ How your findings inform programs or policies related to the issue

Miller p. 322
Title: A New Era of Tuberculin Skin Testing: Pharmacists as Public Health Partners

Background Statement of Problem: New Mexico has a low population density which creates barriers to providing accessible public health care services throughout the state. In addition, decreases in public health dollars and lack of nursing and pharmacist staff severely impacted the ability to provide TB (tuberculosis) skin testing (TST) to low-risk populations (i.e., school/work requirements and change of immigration status).

Methods: The NM TB program, New Mexico Pharmacists Association, and the NM Board of Pharmacy partnered to create a plan to train pharmacists to administer and read TSTs. The NM TB program worked with Heartland National TB Center to provide a regional webinar on September 8, 2011: "Understanding the TB Skin Test: A Primer for Non-TB Staff."

Results: There were 61 registered participants in the webinar. The program provided on-site TST practicums for hands-on practice for pharmacists at locations throughout the state. Three (3) sites received TST training for a total of 29 pharmacists. The Board of Pharmacy adopted a form recommended by the NM TB program when administering the TST: "Tuberculin Skin Testing Health History and Consent Form." As of April 2012, pharmacists have placed approximately 100 TSTs with no positive tests reported. In a survey sent out by the NM Pharmacist Association, participating pharmacists indicated a confidence in their ability to provide skin tests to the public. To further expand the collaboration, a TST practicum has been set for April 2012 to provide training for pharmacists employed by a large commercial pharmacy and others to begin placing TSTs.

Conclusion: This collaborative effort has successfully increased access to TSTs and diagnosis and treatment of LTB. Pharmacists have contacted the local health office with referrals when clients presented with signs/symptoms of TB disease. In the era of declining public health dollars, all avenues of collaboration to ensure sustained TB prevention efforts should be explored.

Unexpected Opportunities….. (Diana)

Contacted by NM Pharmacists Association
- Potential rule change - pharmacists do TSTs
  - Lack of accessible health care many areas
  - Prescriptive authority
- Low-risk clients needing TST - school/work
- TB Program & NM BOP & NMPA collaborated
  - TB Staff provided TST training
Update!!

To be published:
- Journal of the American Pharmacists Association
- Evaluation of a Pharmacist – Performed Tuberculosis Testing Initiative in New Mexico

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Lynelle Phillips

SUBMITTING AN ABSTRACT: AN OPPORTUNITY AWAITS YOU!

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Submitting an Abstract (1)

<table>
<thead>
<tr>
<th>ABSTRACT</th>
<th>(1) Describe title, list of authors, and affiliations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(2) Background statement of problem or objectives</td>
</tr>
<tr>
<td></td>
<td>(3) Methods</td>
</tr>
<tr>
<td></td>
<td>(4) Results and findings</td>
</tr>
<tr>
<td></td>
<td>(5) Conclusions, consistent with the background and findings</td>
</tr>
</tbody>
</table>

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Submitting an Abstract (2)

Abstract must be received by April 11, 2008.
Use space above - limit to 350 words or less.

Cutting Down Word Counts

"If every school had the walking school bus program it would help keep children active and can then help decrease obesity rates within the school and district; therefore each school district should start a walking school bus to help improve children's health and improve obesity rates." (46 words)

- read sentence aloud
- acronyms (walking school bus = WSB)
- active verbs (NOT words like "occur" or "it has been shown")

Suggested Change...

Evidence shows WSB programs promote exercise and decrease childhood obesity. More schools should implement WSB. (15 words)

- 15 words - easy to read aloud
- WSB - walking school bus
- active voice - (eg "shows", "promote", "decrease", "implement")
Final Word Count...

Discussion

Intensive training based of TB control and proved also commented favorably Texas to the Heartland

Abstract Submission

Abstract

Abstract: This study evaluated the feasibility and outcomes of providing postpartum counseling and support to women receiving services at a community health center located in a rural area in the southeastern United States. The study aimed to assess the impact of the intervention on maternal mental health, breastfeeding outcomes, and overall maternal satisfaction with care.

Methods: A randomized controlled trial was conducted. Women who met the inclusion criteria were randomized into two groups: intervention (n=120) and control (n=120). The intervention group received postpartum counseling and support, while the control group did not. Maternal mental health was measured using the Edinburgh Postnatal Depression Scale (EPDS), breastfeeding outcomes were assessed using the National Breastfeeding Report Card, and maternal satisfaction with care was evaluated using a Likert scale.

Results: The intervention group had significantly lower EPDS scores compared to the control group (mean difference: -1.5; 95% CI: -2.3 to -0.7). Breastfeeding duration was also higher in the intervention group (mean difference: 0.5 months; 95% CI: 0.2 to 0.8). Maternal satisfaction with care was higher in the intervention group compared to the control group (mean difference: 2.0; 95% CI: 1.5 to 2.5).

Conclusion: Providing postpartum counseling and support to women at a rural community health center led to significant improvements in maternal mental health, breastfeeding outcomes, and overall maternal satisfaction with care. These findings highlight the importance of incorporating postpartum support into routine care for women in rural areas.

Diana Fortune

TOOLS TO MAKE A POSTER
Abstracts

Table 1: Potential conference specifications for posters

<table>
<thead>
<tr>
<th>Conference specification</th>
<th>Points to consider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poster</td>
<td>Format and size of the poster</td>
</tr>
<tr>
<td></td>
<td>Will the poster be freestanding, or attached to a wall or cork board</td>
</tr>
<tr>
<td>Conference space</td>
<td>Location (conference room, hotel lobby, hall)</td>
</tr>
<tr>
<td></td>
<td>Expected number of poster presenters</td>
</tr>
<tr>
<td></td>
<td>Expected number of conference attendees</td>
</tr>
<tr>
<td>Materials to bring</td>
<td>Copies of abstracts</td>
</tr>
<tr>
<td></td>
<td>Contact information</td>
</tr>
<tr>
<td></td>
<td>Push pins</td>
</tr>
<tr>
<td></td>
<td>Business cards</td>
</tr>
<tr>
<td>Due dates</td>
<td>Exact dates that poster must be delivered electronically or in hard copy</td>
</tr>
</tbody>
</table>

Cristenbery p. 17

Table 2: Your project description

<table>
<thead>
<tr>
<th>Project title</th>
<th>Your name and credentials</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>What were the driving forces that led to the design of the project — how significant was the problem to your organization and nursing?</td>
</tr>
<tr>
<td>Project description</td>
<td>Provide an overview of the design of your project, including specific initiatives implemented, methods involved, and timeline of the study</td>
</tr>
<tr>
<td>Findings</td>
<td>Use graphic or textual means to present main points when possible</td>
</tr>
<tr>
<td>Conclusions and Implications</td>
<td>Impact on your organization and the implications for nursing</td>
</tr>
<tr>
<td>Acknowledgments</td>
<td>Acknowledge grant funding and critical partnerships</td>
</tr>
<tr>
<td>Literature Review</td>
<td>Where should readers seek to move information?</td>
</tr>
</tbody>
</table>

Sherman p. 13

Title that grabs our attention and gives us some idea of what you did (please no boring titles)

Your name(s) and title (include School of Nursing, Columbia, Missouri 65211)
Poster Design Tips

• Leave adequate white space
• Convey your message clearly
  • 300 – 500 total words on poster (Cristenbery et al)
• Use visual images
• Make it readable
• Pick fonts carefully
• Use color sparingly
• Ask colleagues for help

LEARNING A NEW SKILL

Patty Woods

Where Do I Start?

• Lose the fear
• Decide on a topic
  • Start with anything that you find worth sharing
  • It does not have to be complicated
• Look at other peoples posters
• Find a template
  • www.posterpresentations.com/html/free_poster_templates.html
  • www.makesigns.com/download/style_b_24_48_wide.ppt
Lessons Learned

- It is not as hard as it looks
- Ask for help
- When in doubt Google
- Great way to network
EXAMPLES OF POSTER REVISIONS

Examples of Poster Revisions

- Converting dense narrative
- Communicating data through graphics
Other Issues

- Authorship
- Consent
- Referencing
- Printing tips

Example of Tabletop Poster Display

Introduction
According to the CDC, the obesity rate among children has nearly tripled (2012). Approximately 17% of children living in the United States are obese (2012). This number is even higher among children that come from families with low incomes. These families experience a number of barriers that prevent healthier eating habits, including the lack of availability of healthy food options in the surrounding area, the affordability of healthier food choices, the lack of transportation to stores, and markets with healthier food options. The Access to Healthy Food (AHP) program at the Columbia’s Farmers’ Market is designed to increase income families obtain fresh fruits and vegetables at an affordable rate. The AHP Program in Columbia, SC is designed for families who receive food stamps (EBT) and is income-eligible. Families that are participants of the AHP program are able to double the value of food EBT at Columbia’s Farmers’ Market. The program is designed as a childhood obesity prevention program, helping those families who are socioeconomically disadvantaged to obtain healthier eating choices.
After: Improved Problem Description...

Introduction
Childhood obesity/act
- According to the CDC, the obesity rate among children has nearly tripled since 1980 (1).
- Approximately 17% of children and adolescents ages 2 to 11 are overweight (1).
- 1 in 5 preschool aged children is obese (1).
- Approximately 44% of children in the U.S. with at least 100 pounds in the 7th-12th have childhood obesity rates of 15% or more (1).
- 13.9% of children ages 2 to 5 years living in households are overweight or at risk of being overweight (1).

Barriers to Preventing Childhood Obesity
Low-income families experience a number of barriers that prevent healthier eating habits, including:
- The lack of availability of healthy food options in the surrounding area
- The lack of healthy food options
- The lack of transportation to supermarkets with healthier food options

Our Project
- Designed to assist low-income families obtain fresh fruits and vegetables at an affordable cost
- Participants are recipients of food stamps (EBT)
- Participants are WIC-eligible
- Pregnant women
- New mothers
- Infants and children up to age 5 years
- Participants double the value of their EBT at the Farmer’s Market up to $25 each week ($25 → $50)

Goal: The program is designed as a childhood obesity prevention program - helping those families who are socioeconomically disadvantaged to obtain healthier eating choices.

Before: Key Data...

2011
- 55 total registered participants
- 25 active participants
- 30 non-active participants
- 45.5% active participation

2012
- 65 total registered participants
- 56 active participants
- 9 non-active participants
- 86.2% active participation
After: Graphic Representation of Key Data...

2011 - Participation
- Active participants: 36%
- Non-active participants: 64%
(100 registered participants)

2012 - Participation
- Active participants: 14%
- Non-active participants: 86%
(100 registered participants)

DISCUSSION: EXAMPLES OF POSTER REVISIONS

Lynelle Phillips

Discussion Instructions

Press 01 on your phone to join the queue to ask your question or make your comment.
### Evaluation Criteria

- Display attracts viewers attention
- Words are easy to read
- Well organized, easy to follow
WHAT’S NEXT?

Patty Woods
Putting Knowledge into Action

National TB Nurse Coalition Annual Conference
- June 8, 2015 (Monday)
- Atlanta, Georgia
For Nurses only:
- Abstract & Poster Display
- (4) Four posters selected for "lightning talks" to informally share experiences
- Looking forward to seeing your poster

Call for Abstracts

NTCA and NTNC are accepting abstracts for presentation at the 2015 National TB Conference.
- Instructions are available on the NTCA home page Noteworthy announcements at www.tbcontrollers.org
- NTNC abstracts are due by April 30, 2015

Travel Grants

The National TB Nurse Coalition (NTNC) offers travel grants for nurses and student nurses.
- Applications are due April 17, 2015.
- For more information and to apply, go to the NTCA home page Noteworthy announcements at www.tbcontrollers.org
SAVE THE DATE

- 2015 National TB Conference: Managing TB in a Global Society
  - June 9-11, 2015
  - Atlanta, Georgia
- NTNC Annual Meeting on June 8

REGISTRATION IS NOW OPEN

Feedback

We need your feedback!

- Links to a feedback form for the webinar will be sent to each of you by email at the end of the webinar.
- Please complete the feedback form by April 3, 2015.
Thank you for participating in today’s webinar.