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Nursing Care Field

CNC

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COLLABORATION®

Podcast Starter Pack

Introduction

The main mission of the CNCF is to increase the use of the Cochrane Library by nurses and others involved in nursing care. One way we are doing this is through our evidence transfer initiative which involves developing short summaries of Cochrane Systematic Reviews that are relevant to nursing care and publishing them in a range of international journals. We also want to develop a library of audio podcasts that nurses can access and use at the coalface based on the findings of Cochrane Reviews. For this to happen though we need volunteers!

The Cochrane Library has been involved in producing podcasts since 2008 and their popularity continues to grow. The podcasts developed by the CNCF are distinct in that they focus exclusively on topics relevant to nursing care and are written and narrated in a fashion to try to engage nurses (and others in nursing care) to utilise the evidence from Cochrane Reviews in their daily practice.

How can I be involved in CNCF Podcasts?

There are a few options on how to get involved in our podcast program. You may choose to:

- Deliver/narrate a predeveloped podcast script based on the review summaries that we develop
- Translate a podcast script into a language other than English

What is in this guide?

This guide is a resource for people volunteering to be involved in any of the above podcast activities. It contains:

- An example of a podcast script
- Tips on how to narrate a podcast script

What happens from here?

If you decide you want to be involved in a podcast you need to email the podcast editor (cncfpodcasts@adelaide.edu.au) and let her know how exactly you want to be involved .i.e. delivering scripts, translating or both.

- Once a summary is published in a journal it is sent to the podcast editor who develops a script using the attached template as a guide. Each podcast aims to go for approximately 3-4 minutes. Podcasts need to be simple and to the point. Too much detail will lose the listener's attention

- The podcast editor then sends the script to the summary author for their comment and also invites them to be involved in narrating the podcast.
- The podcast editor also sends the script to the relevant Cochrane Review Group involved in authoring the original review to provide feedback. This process may take up to a month.
- Once the script is finalised you will be asked to narrate. If you do not want to be involved in this process the podcast editor will distribute it to another volunteer to narrate.
- You should practice reading through the script before the podcast is recorded. It may take you a few times to read the podcast without any mistakes
- The podcast editor will organize a suitable time to skype call the narrator where she can guide the narration of script in real time. To do this you will need access to a computer and the internet. Skype can be downloaded for free at http://www.skype.com/intl/en/home
- The podcast editor who will then edit the podcast and add in the standard introduction etc

<u>Does it matter if I have had no experience in podcasts before?</u>
No, the podcast editor will be able to direct you through this process and resources like this will also help guide you. We are looking for enthusiastic people who want to have a go

Developing a Podcast Script

CNCF Podcast Script Example

1. **Intro music jingle: 30- 60 seconds**

2. **CNCF Co-ordinator (Professor Alan Pearson) intro monologue: 30-60 seconds**

3. **Topic Introduction: 30-60 seconds**
- Hello my name is Suzi Robertson-Malt and I am the Podcast Editor for CNCF

4. This Podcast is based on a Cochrane Review published in the Cochrane Database of Systematic Reviews, 2009, Issue 4 by Sudha Jayaraman and Dinesh Sethi titled: Advanced trauma life support training for hospital staff.

5. **Interlude (music break): 30 seconds**

6. **Evidence Summary**
   The primary objective of the review was: To quantify the impact on trauma victims of ATLS training for hospital staff in hospitals with and without such a training program.

- **The Importance of this Review for Nursing:**
  Competency in the skills required to provide trauma care is a minimum expectation of emergency personnel from hospital administrators, patients and health care accreditation agencies. ATLS is taught and accepted in more than 60 countries as the standard of care for initial assessment and treatment of the trauma victim[2]. The ATLS training is a formal programme of learning developed by the American College of Surgeons and specifically designed to impart to the participants the necessary knowledge, attitude and psychomotor skills to later demonstrate competency in the critical first hours of care for the trauma patient. According to the aim of the programme, successful participants will improve the trauma victim's outcomes through the appropriate timing and use of specific interventions in the first hour of admission to the hospital such as: fluid replacement, endo-tracheal intubation, chest drainage and emergency surgery[3]. The Advanced Trauma Care for Nurses (ATCN) is a programme of learning developed specifically for nurses from the curriculum of the ATLS and is often run in parallel[4]. A reduction in the degree of disability (morbidity) or death (mortality) suffered by the victim(s) of trauma is an assumed performance indicator of this competency.
- Hospital administrators need to be assured that the money spent on sending nursing personnel to these training programmes will positively impact patient outcomes.

- The authors completed a comprehensive search for any randomized controlled trials, clinical trials or before / after studies about the effect of ATLS on patient morbidity and mortality. From a total screening of 2007 citations, only five (5) studies looked specifically at the effectiveness of ATLS as an educational tool; the costs of running courses, and/or the subjective experiences of the trainees. None of these studies reported on patient outcomes and therefore could not be included in the review.

- *From this review, the implication for Nursing* is that presently, there is no evidence to conclude that educational interventions such as ATLS positively impact patient outcomes. This review highlights the lack of rigorous evidence to show that ATLS training results in improved patient outcomes from injury and highlights the complexity of conducting such research.

- The authors recommend that in order to establish a sound evidence base for this and similar types of questions related to the effect of training on victims of trauma, both within hospitals and at the health system level, a large cluster randomization trial or a controlled, sequential before-and-after study is needed.

7. **Interlude (music or break): 30 seconds**

8. **Closing remarks (thank audience for listening, and encouraging them to look out for the next CNCF podcast alert): 60 seconds**

9. **Closing remarks about CNCF podcasts: 60 seconds**

Delivering and Narrating Podcast Scripts

Is my voice and accent clear enough to deliver a podcast?
The CNCF is a truly international collaboration and we are looking for a variety of voices and accents to use in our podcasts. The main issue relates to clarity of your voice in the recording and the podcast editor will be able to provide you with some pointers on how to enhance your voice in a way to make it clearer. After reviewing the podcast the podcast editor may ask you to record the podcast again or look to find an alternate narrator if the accent/clarity causes difficulty in understanding

Do I need to download special software?
The podcast editor will record the podcast via a Skype call. Skype is free software which can be downloaded at http://www.skype.com/intl/en/home

Are there any other resources I can access to learn about podcasts?
http://www.how-to-podcast-tutorial.com/index.htm