

Creating effective education programs on a shoestring budget

Following a few tips will leave clinicians wanting more.

By Jennifer Oakley, BS, RN, WCC, DWC, OMS

It's time again for annual staff education, and you, the certified wound clinician, need to teach the staff at your organization. You dream of staff entering a state-of-the-art classroom with computers at each station, mannequins, wound anatomy models, and enough products for each student to do hands-on demonstrations. But when you open your eyes, you're sitting in a room with ordinary tables and chairs, your laptop, a screen, a brain full of knowledge, and a very tight budget.

It can be challenging year after year to keep staff interested enough to attend these mandatory education sessions. Let's be honest: Staff are busy people. The last thing they want to do is leave all the work they need to do to come to a training session they don't think they need. They may feel they aren't learning anything new because year after year it's the same boring content being taught to them in the same boring way. To avoid that problem, you need to regularly reevaluate how you're teaching and to whom you are teaching, and think of creative ways to present the material.



How we learn

The first thing to consider when teaching staff is how to reach the adult learner. Adults learn in different ways. Some learn by listening (auditory), others by looking (visual), and some through a hands-on (tactile or kinesthetic approach). Each educational session you teach should give your attendees something to listen to, something to look at, and something to do with their hands, or some type of “hands-on” demonstration, to keep everyone involved. (See *Matching techniques to learning style*.)

In addition, consider the background and scope of practice of your audience. For example, your presentation on pressure ulcers might focus on prevention when you're speaking to nursing assistants, but focus on staging, care plan development, and treatment when your audience is a group of nurses.

Tools of the trade

It's important to ask yourself, What do I physically need in the classroom to teach the staff? Be careful, as this is where your “wants” often overtake the actual “needs.” You may not have the funds in your budget to buy that mannequin with 14 wounds and 2 stomas nor the 12 laptops for your classroom. But I bet your budget allows you to afford some fun; after all, fun is free!

Laughter has been shown to prompt dopamine release and stimulate the frontal lobe to enhance thinking. This “feel good” feeling lasts for hours, so the smile you

Matching techniques to learning style

You can incorporate various techniques into your presentation to ensure you're reaching all three types of learners.

Type of learner	Sample teaching techniques
Auditory: Prefer discussion of concepts they have heard	Lecture, discussion groups, question and answer sessions
Visual: Learn by seeing	Pictures, clip art, posters
Tactile (or kinesthetic): Learn by touching, like to perform tasks	Hands-on demonstrations

For more information on learning styles, [access this video](#). Although the setting is a college, the principles still apply.

create in the classroom carries back onto the unit and ultimately to the patient's bedside. Incorporating humor and fun into your education programs will not only keep staff coming back year after year but also build a stronger team.

You don't need the best high-end computer programs, wound models, or mannequins to teach wound or stoma assessment. You can use other budget-friendly methods to provide fun, effective education without breaking the piggy bank.

Start by jumping online. Search for free downloads that allow you to create Microsoft PowerPoint®-based games from templates in *Jeopardy* or other formats, or even make crossword puzzles. Download free pictures and clip art to capture the attention of visual learners and enhance the learning experience. Give handouts for those tactile learners to take notes on, underline, and follow along with your talk.

Enlist sales representatives for help. Frequently, they will provide free education about a product or topic and include hands-on demonstrations. Those lower-extremity wraps or negative pressure modalities are great topics for hosting a lunch-and-learn session with a sales rep. Be sure the rep understands the need to focus on education, not make a sales pitch.

You can also get creative and solve your own budget crisis by making your own training tools. (See *DIY training tools on a budget*.)

Set the stage

Next, take a look at the environment you're teaching in. Do you have enough room? Is there enough seating? How is the lighting? Will everyone be able to see and hear you?

Before your presentation, practice, prac-

tice, practice; try to have one practice session in the room where you will be speaking. Time your presentation so you know you haven't tried to pack in too much information. A way to avoid this problem is to establish one or two overall goals for the typical 60-minute presentation and build in time for questions. Think of questions that might arise so you're ready with answers. If a question comes up that you don't know the answer to, simply say, "I don't know the answer. I'll find out and get back to you."

Stay on task

During the presentation, keep focused on your agenda. If a person raises a question that's off topic, you can say that you'll talk with him or her at the break.

Remain fair and unbiased during the presentation and cite your sources for information. Always be approachable. Remember, you're the staff's source for information and if they don't feel you're approachable, they won't ask questions or

DIY training tools on a budget

Here are examples of do-it-yourself training tools you can create for little cost. Once you open your imagination, the possibilities are endless.



1 Create your own game dice. Attach foam to each side of a six-sided Styrofoam cube. Then attach photos of all six stages of pressure ulcers.

As students roll the dice, ask questions regarding stage, tissue type, treatment, and other facts.



2 Use inexpensive Crayola® Air-Dry-Clay (about \$6 for a 2.5 lb bucket) to create wound and stoma models. (The author

made a stoma model and a 14-cm x 14-cm wound model, and had clay left over.) Allow the models to dry for a day or two; then use acrylic paint and sponges to give color and texture (see progression). You're now ready to assess staff's knowledge. You can even give them scenarios on the wound or stoma and have them select appropriate treatment.



3 Stoma model created with clay



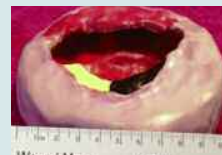
4 Finished stoma model. Participants can measure the height and size of the stoma and assess:

- color of the stoma
- lumen location
- mucocutaneous junction
- peristomal skin.

This model can also be used for learning how to properly fit and apply skin barriers.



5 Wound model created with clay



6 Finished wound model. Participants can measure the length, width, and depth; practice packing a wound;

examine different tissue types; and assess:

- undermining
- tunneling
- epibole.

Participants then document their assessment.

request clarification when they're unclear.

You also need a way to check if participants have learned the main points of the presentation. A brief verbal or written quiz in the format of a question-and-answer session will help you assess this and provides an additional opportunity for reinforcing important information.

Finally, end on time to show you respect the staff's time.

Passion for the profession

We always want staff to feel valued. Helping them stay current in their knowledge will help them keep the same passion for their profession they had when starting out in their careers. If, as the educator, you do your job well, it's likely that staff will do their job that way, too. Pay it forward with a smile. ■

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