



Practice and Exploration of Teaching Reform Based on CICARE Communication Model — A Case Study of Obstetrics and Gynecology Nursing Comprehensive Training Course

Zhengtong Huangfu, Jingjing Huang, Yuanlin Zhou

Hainan Vocational University of Science and Technology, Haikou 571126, Hainan, China

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Abstract: Obstetrics and gynecology nursing occupies a very important position in the medical care system, it is not only related to the maternal health recovery, but also related to the healthy growth of the newborn. However, the traditional teaching of obstetrics and gynecology nursing often focuses on the teaching of nursing knowledge and skills, but ignores the key element of communication ability. In actual obstetrics and gynecology nursing work, effective communication is the foundation of providing high-quality nursing services. Lack of good communication between nurses and patients may lead to problems such as decreased patient satisfaction, difficulty in carrying out nursing work smoothly, and potential doctor-patient disputes. In order to improve this situation, the CICARE communication model is intended to be introduced into the teaching of the comprehensive training course of obstetrics and gynecology nursing, and a new teaching model is explored to improve students' communication ability and enable them to better adapt to the future nursing work of obstetrics and gynecology. pass this teaching reform, it is expected to train obstetrics and gynecology nursing personnel with professional knowledge, skilled skills and excellent communication skills, so as to improve the overall quality of obstetrics and gynecology nursing.

Keywords: CICARE communication mode; Teaching reform; Obstetrics and gynecology nursing comprehensive training course

1. Introduction

Nowadays, it is very urgent to introduce CICARE communication mode in the teaching reform of obstetrics and gynecology nursing comprehensive training course. The connotation of CICARE mode includes six links: Connect, Introduce, Communicate, Ask, Respond and Exit. The teaching reform practice based on CICARE communication model covers the reform of teaching content (integration of special scenarios communication case analysis and script writing), teaching time method cell (role playing, group discussion, case teaching) and teaching evaluation (establishing a new evaluation system focusing on assessing communication ability). The results of the teaching reform are suggested, such as the improvement of students' communication ability and the effect of comprehensive nursing training. At the same time, the countermeasures to strengthen the teaching reform include teacher training, resource development and integration, guiding and motivating students. Based on this, this paper aims to provide reference value for related education through CICARE communication mode teaching reform.

2. Connotation of CICARE mode

CICARE mode is an effective communication mode. The Connect session emphasizes establishing a connection with the patient, which is the starting point of communication, and approaches the patient in a friendly and professional manner, such as eye contact, appropriate salutation, etc. , to make the patient feel cared for. The introduction part is to Introduce their own identity, role and forthcoming nursing work and other content, so that the patient can clearly communicate with the object and purpose. Communicate focuses on communicating information clearly and accurately, including nursing operations, health knowledge, etc. , in plain language. The Ask part is to ask patients about their feelings, needs and questions, which reflects their respect and care. The Respond part is to give timely and appropriate responses to patients' questions and feedback. The Exit process is to politely inform the patient at the end of the communication that they are leaving, and to ensure that the patient has no others questions or needs, to draw a intact period for the communication.

3. Advantages of CICARE model in nursing education of obstetrics and Gynecology

In the nursing education of obstetrics and gynecology, CICARE model has many advantages. It is helpful to improve the communication ability of nursing students. Patients in obstetrics and gynecology are in a special physiological period and

have sensitive emotions. CICARE mode can help nursing students learn how to establish a trusting relationship with patients and communicate effectively. Enhance patient satisfaction, nursing students through this model can better understand the needs of patients and give responses, thereby decreased patient anxiety, improve the quality of nursing services. From the perspective of teaching, CICARE model provides a standardized communication framework for obstetrics and gynecology nursing education, which facilitates the development and evaluation of teaching. It makes nursing education more systematic, nursing students can identify the tasks and requirements of each link. At the same time, this model is helpful to cultivate the humanistic care quality of nursing students, so that nursing students can deeply understand the importance of caring for obstetrics and gynecology patients in the simulation or actual operation, and improve the overall nursing level.

4. Teaching reform practice based on CICARE communication model — taking the comprehensive training course of obstetrics and Gynecology nursing as an example

4.1 Teaching content of antenatal care scenarios

Connect (establish the connection), pass the pregnant woman's first prenatal examination, the nurse walks to the pregnant woman with a smile and gentle eyes and gently says: "Hello, welcome you to do the prenatal examination. " Then, standing at an appropriate distance from the pregnant woman, the nurse leans forward slightly, eyes level with the pregnant woman, and says in a soft voice, "Hello, how are you today?"

Introduce, the nurse then said, "I'm the nurse in charge of assisting you with your antenatal examination today. My name is [name] and I will accompany you through a series of check procedures. " Then, "I am the nurse [name] in [department], and I will be in charge of helping you to complete all the items in the examination today. "

Communicate (communication), the nurse told the pregnant woman in detail about the pregnancy test project, such as "we will do B-ultrasound today, blood routine and other check, B-ultrasound is to check the development of the baby. " Then, "Today's birth inspection item has [specific item], like [item name], for [explaining purpose]. "

When the nurse asks the pregnant woman, "Do you have any special medical history or allergies?" Then, "Have you had any previous medical problems? Are you allergic to anything?"

The pregnant woman said she had a history of mild anemia. The nurse replied, "Then we will pay special attention to your hemoglobin levels during the check. You can eat more iron-rich foods. " Then, if the pregnant woman mentions [the situation], the nurse responds: "Then we will [respond] and you can [suggest]. "

After the check, the nurse said, "Today's labor examination is finished. If you have any questions, please feel free to contact us. I wish you and your baby good health. " Then, "That's all for today's check. Feel free to call us if you have any questions. Bye. "

4.2 Teaching content of postpartum nursing scenarios

Connect: The nurse enters the postnatal ward, sees the mother feeding the baby, and whispers, "You look very skilled. The baby is eating very well. " Then, the nurse gently knocks on the door to enter the ward, walks to the mother's bed, and says with a smile, "Hello, look at the warm interaction between you and the baby. "

Introduce: The nurse said, "I'm the nurse in charge of your postpartum care today. My name is [name] and I've come to see how you and the baby are doing. " Then, "I'm your postpartum nurse [name], and I'm here to do a quick check for you and your baby. "

Communicate: The nurse informs the postpartum care matters, "pay attention to personal hygiene after delivery, pay more attention to lochia, and tell us if the amount suddenly increases or there is a bad smell. " Then, "postpartum you should pay attention to [specific nursing matters], like lochia, if [situation], be sure to tell us oh. "

Ask: The nurse asks the woman, "Do you still have pain? Did your nipples feel uncomfortable when you were nursing?" Then, "Are you experiencing any pain [in your body] right now? Did you experience any abnormalities [in your body part] while nursing?"

Respond: The woman said the wound hurt a little. The nurse replied, "That's normal, but we're going to give you some care to reduce the pain. You can sleep on your side to relieve the pressure. " Then, if the mother says [the situation], the nurse responds: "This is [explain the reason], we will [respond], and you can [suggest]. "

After the nurse finishes nursing, the nurse says, "Then you have a good rest and ring us at any time if you feel uncomfortable. I hope you and the baby are healthy. " Then, "Take a rest and ring if you have any problems. I wish you and the baby good health. Bye. "

5. Practical countermeasures of teaching reform based on CICARE communication mode

Strengthening teacher training and inviting experts to conduct CICARE model training and guidance is a key measure to improve the quality of obstetrics and gynecology nursing education. Experts can deeply interpret each link of CICARE model and share experience and skills in practical application. pass theoretical explanation, let teachers clear the connotation of the model. At the same time, case study is carried out to improve teachers'ability to use this model in different scenarios. Experts can also conduct simulated teaching demonstrations, so that teachers can intuitively feel how to integrate CICARE model into teaching, so as to better guide students to master effective communication skills.

6. Conclusion

In conclusion, this study based on CICARE communication model in obstetrics and gynecology nursing comprehensive training course teaching reform practice has achieved many results. Through the reform of teaching content, teaching method and teaching evaluation, the CICARE model is successfully integrated into the curriculum teaching. In terms of teaching content, the addition of special scenarios communication case analysis and script writing provides students with rich learning materials. The reform of method, such as role playing, group discussion and case teaching, has effectively improved students'participation and understanding and application ability of CICARE model. pass teaching evaluation can comprehensively and accurately measure students' communication ability and comprehensive nursing level. From the results, students' communication ability has been significantly improved, and they can proficiently use CICARE model to effectively communicate with patients in actual simulation or clinical practice, and patient satisfaction has been significantly improved. At the same time, the overall performance of the students in the comprehensive nursing training course has also made great progress, including the improvement of nursing operation skills and the enhancement of the rationality of nursing plan formulation. In the future, the application of CICARE model in obstetrics and gynecology nursing teaching can be further deepened, for example, it can be extended to others courses of obstetrics and gynecology nursing or others related nursing professional courses. In addition, the teaching resources can be further optimized, and the case base and multimedia resources can be constantly updated to adapt to the changing clinical nursing needs. At the same time, it can strengthen the cooperation and exchange with others colleges or medical institutions, share the experience and results of teaching reform, and jointly promote the improvement of the quality of obstetrics and gynecology nursing education.

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