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## To explore pre-registration nursing student experiences and perceptions about public involvement in their education

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**Background:** In the UK public involvement in health education has become an important part of pre-registration nursing programmes. This involvement is predicated on a belief that it can provide these students with opportunities to learn from 'service users' of health and social care services about their experiences of health and illness. Despite this belief, little is known about how students engage with public members and patient groups within their education. Thus, this study aims to explore, describe and explain pre-registration nursing students' experiences and perceptions of public involvement in their education. Public involvement ensures and brings a valuable alternative perspective to a discussion or a decision making process that will influence future practitioners.

**Aim:** Aim of this study is to explore pre-registration nursing student experiences and perceptions about public involvement in their education.

**Methods:** This is a three phase sequential multiple method study. Phase one and phase two are informed by grounded theory and located within the interpretivist paradigm.

**Results:** The potential outcomes of this study are the development of model/s of public involvement to inform pre-registration nursing programmes at all levels of the curriculum. This study will contribute to experiential learning theory.

**Conclusion:** Findings derived from data collected from one cohort of pre-registration student nurses will inform pre-registration nurse education in the UK and beyond as to the best methods to adopt in public involvement within nursing education.

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## Assessing involuntary transport of mental health patients by NSW Ambulance paramedics

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**Introduction:** Involuntary transportation of people with a mental illness requires paramedics to balance the protection of the civil liberties of the person with the need to get them to definitive care. Involuntary transport is an intervention of last resort and is only used when all other strategies have been unsuccessful. The power to transport persons against their will was first granted to NSW Ambulance paramedics under the NSW Mental Health Act 2007. Paramedics could only use this power after successful completion of a training program that was incrementally rolled out over a period of five years.

**Objective:** The study evaluated the extent to which involuntary transport was necessary since paramedics were first given this power under the Mental Health Act 2007.

**Methods:** Data were collected by NSW Ambulance from 3 databases—patient history care record (PHCR), electronic medical record (eMR) and computer aid dispatch (CAD) from 2011/12 to 2014/15. Descriptive analysis was used to analyze the 4 years' data.

**Results:** There were over 194,000 mental health related incidents transported over the last 4 financial years; 4,724 (2.5%) of these patients were involuntary transports. The involuntary mental health transport rate increased every year and was 2.9% in 2014-15.

**Conclusions:** This low rate of involuntary transport of persons with a mental illness implies that most patients are willing to be transported to hospital voluntarily and that paramedics are discerning in their use of involuntary powers and only use it where clinically indicated.

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