

# **Erratum**



# Erratum: Correction of Abstract. Development and Effects of Simulation Practice Program about Family centered Delivery Care

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► This corrects the article "Development and Effects of Simulation Practice Program about Family centered Delivery Care" in volume 23 on page 52.



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We found abstract and key words errors in our published article. We apologize for any inconvenience that this may have caused.

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### **Before correction:**

**Purpose:** This study was conducted to investigate the relationship of knowledge, attitudes and needs of sex education in high school students.

**Methods:** There were 258 participants who were high school students in S high school in G city. Data were collected from October 1 to October 31, 2011, and analyzed using SPSS/WIN 19.0.

**Results:** The mean score for sexual knowledge was 69.78, sexual attitudes was 63.66, and needs of sex education was 75.37. Sexual knowledge had positive correlation with needs of sex education (r=.17, p=.007).

**Conclusion:** The findings of this study indicated a need to develop programs for high school students to increase appropriate sexual knowledge, and to encourage appropriate sexual attitudes, and to reflect needs of sex education.

Key Words: Obstetric delivery, Family practice, Patient simulation, Nursing students

### After correction:

**Purpose:** This study was conducted to examine the effects of simulation practice program about family centered delivery care on knowledge of delivery care, clinical performance ability of family centered delivery, problem solving ability and team efficacy of nursing students.

**Method:** This study used a non-equivalent control pretest-posttest design. Data were collected from August 24 to August 28, 2015 and the participants were 53 junior nursing students, 27 in the experimental group, and 26 in the control group. Team based simulation practice program

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about family centered delivery care consisted of team based learning, nursing assessment and intervention for mother and family during labor and clinical performance training.

**Result:** The experimental group showed higher level of knowledge of delivery care (p=.041), clinical performance ability of family centered delivery (p<.001), problem solving ability (p=.007) and team efficacy (p=.005) compared to the control group.

**Conclusion:** The simulation practice program about family centered delivery care is an effective learning method for obstetrical nursing and can be used as the alternative for clinical practice. With application of diverse clinical situation scenarios and various teaching methods are also recommended for maternity nursing practicum to empower the competency of the students.

**Key Words:** Obstetric delivery, Family practice, Patient simulation, Team based learning, Nursing students