

2017

Results from a Questionnaire exploring Critical Care Nursing practice issues



European federation of
Critical Care Nursing
associations –
EfCCNa



European Federation of Critical Care Nursing associations

Introduction to EfCCNa

The European Federation of Critical Care Nursing Associations (EfCCNa) is a formal network of critical care nursing associations from across Europe. The Federation was formed in 1999 and currently has 28 member associations from different European countries, which collectively represent around 25,000 critical care nurses. EfCCNa aims to promote collaboration and equity among the national critical care nursing associations, in order to improve the nursing care delivered to critically ill patients and their families. The Federation provides a unique opportunity for European critical care nurses to contribute to the advancement of European critical care practice, education, management and research.

Questionnaire background

The need to generate a brief ‘snap-shot’ of critical care and critical care nursing delivery, education and resourcing was articulated by members of the EfCCNa Council and governing Board. The intention was to capture data from a number of European countries that were represented by EfCCNa Council members. To facilitate this, a questionnaire was drafted by members of the EfCCNa Board, and then during the autumn 2014 EfCCNa Council meeting which was held in Warsaw, a questionnaire was circulated and completed by attendees (n=16).

Issues explored within the questionnaire included:

- Health service organization
- Critical care organization
- Staff structure and workload within the critical care unit
- Pre and post-registration education and training
- Workforce culture
- Use of specific guidelines/policies within critical care units.

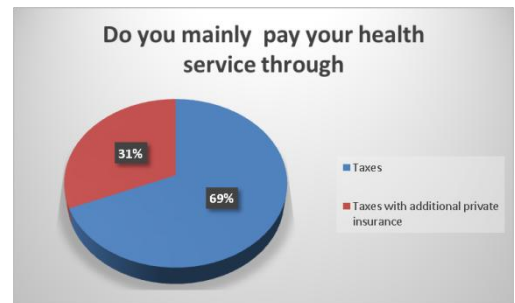
Only 15 responses were generated, these came from the following European country representatives:

- Austria
- Belgium
- Denmark
- Finland
- France
- Germany
- Iceland
- Israel
- The Netherlands
- Norway
- Poland
- Slovenia
- Spain
- Sweden
- Switzerland
- United Kingdom

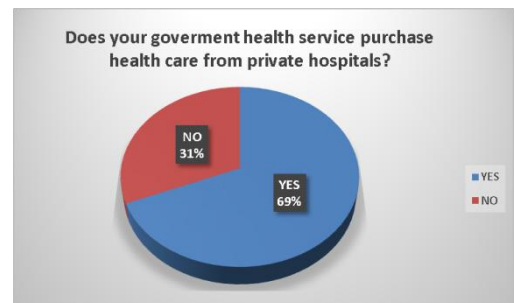
Results

Health Service Organization

1. Do you mainly pay your healthcare through:
 - a. Taxes - 11
 - b. Taxes with additional private insurance - 5
 - c. Taxes with compulsory private insurance - 0
 - d. Private - 0

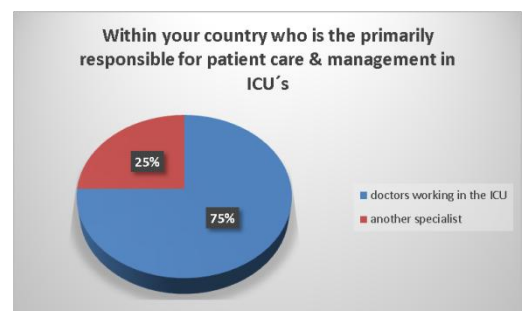


2. Does your government health service purchase health care from private hospitals?
 - a. Yes – 11
 - b. No – 5

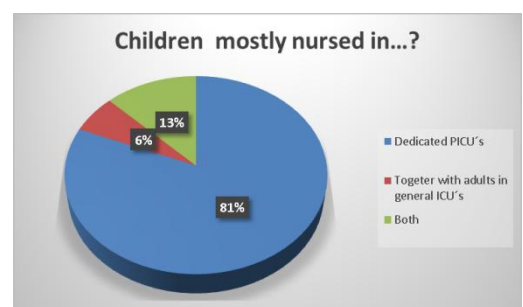


ICU Organizational Context

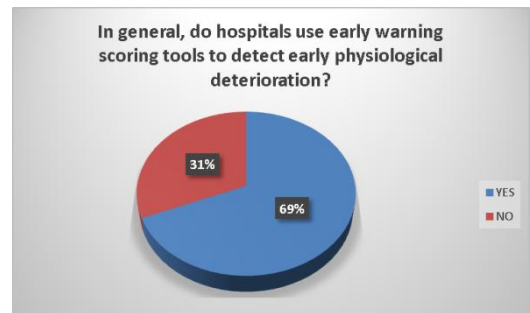
3. Within your country, who is primarily responsible for patient care & management in ICU's (tick one).
 - a. Doctors working in ICU – 12
 - b. Another specialist (i.e. specialty doctor/surgeon/medical physician) – 4
 - c. Both – 0



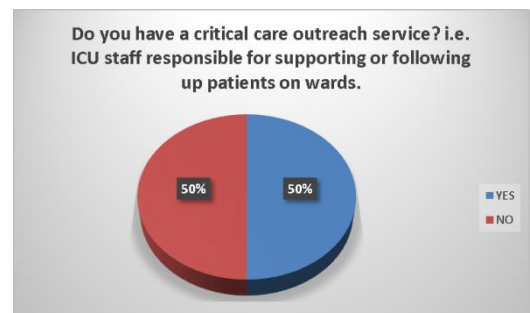
4. Children are mostly nursed in:
 - a. Dedicated Pediatric ICU's – 13
 - b. Together with adults in General ICU's – 1
 - c. Both – 2



5. In general, do hospitals use early warning scoring tools to detect early physiological deterioration?
- Yes – 11
 - No – 5

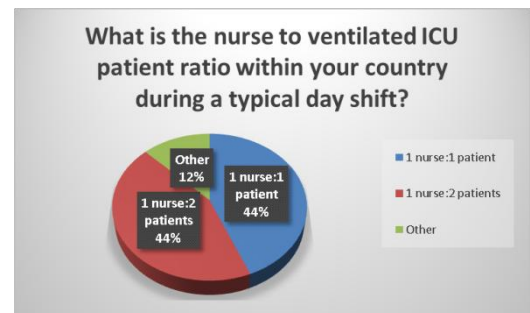


6. Do you have a critical care outreach service? i.e. ICU staff responsible for supporting or following up patients on wards.
- Yes – 8
 - No – 8

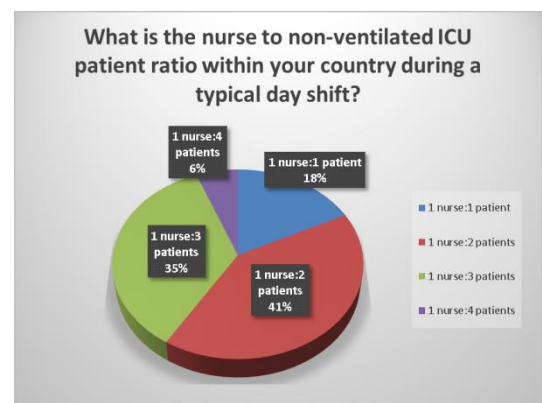


Staffing Structure & Workload

7. What is the nurse to ventilated ICU patient ratio within your country during a typical day shift?
- 2 nurses:1 patient – 0
 - 1 nurse:1 patient – 7
 - 1 nurse:2 patients – 7
 - 1 nurse:3 patients – 0
 - 1 nurse:4 patients - 0
 - Other - 2

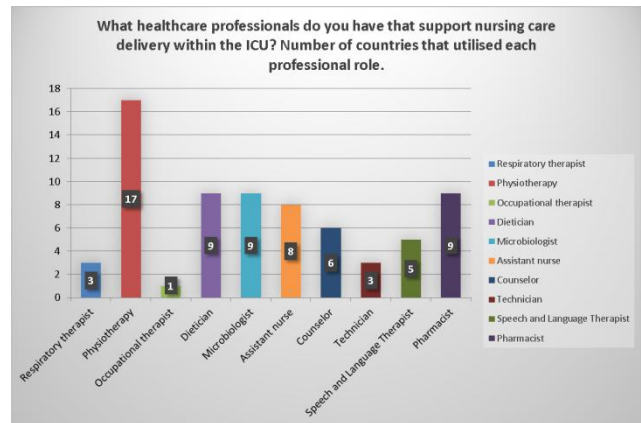


8. What is the nurse to non-ventilated ICU patient ratio within your country during a typical day shift?
- 2 nurses:1 patient – 0
 - 1 nurse:1 patient – 3
 - 1 nurse:2 patients – 7
 - 1 nurse:3 patients – 6
 - 1 nurse:4 patients - 1



9. What healthcare professionals do you have that support your nursing care delivery within the ICU? Number of countries that reported utilizing each professional role.

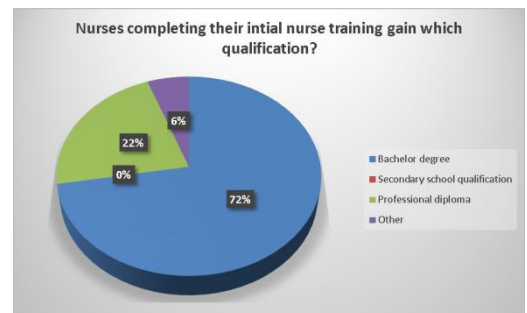
- a. Respiratory therapist – 3
- b. Physiotherapist – 17
- c. Occupational Therapist – 1
- d. Dietician – 9
- e. Microbiologist – 9
- f. Assistant Nurse – 8
- g. Counselor – 6
- h. Technician – 3
- i. Speech & Language Therapist – 5
- j. Pharmacist – 9



Education and Healthcare Organizational Culture

10. Currently in your country, nurses completing their initial nurse training gain which qualification?

- a. A bachelor degree – 13
- b. A secondary school qualification – 0
- c. A professional diploma – 4
- d. Other - 1



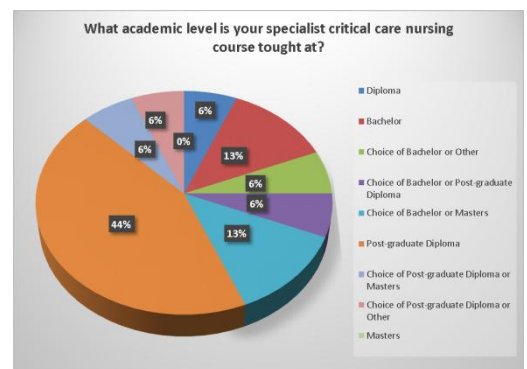
11. In your country, are specialist critical care nursing courses available?

- a. Yes – 14
- b. No – 2



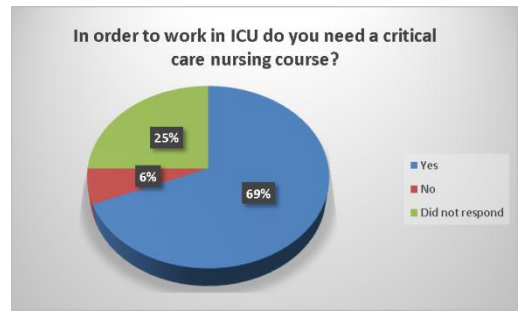
12. If Yes to Q11 (n=14 from sample of 16), what academic level is your specialist critical care nursing course taught at?

- a. Diploma level – 1
- b. Bachelor level – 4
- c. Postgraduate diploma level – 10
- d. Masters level – 3
- e. Other - 2



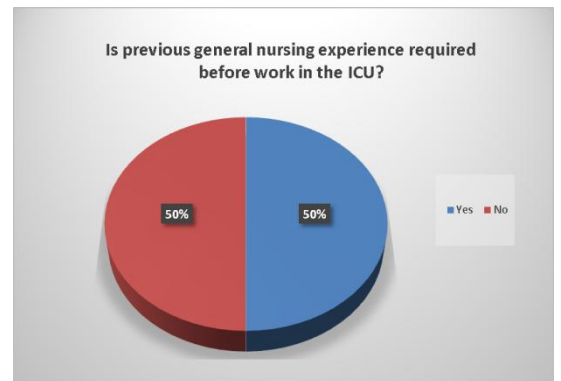
13. In your country, in order to work in ICU do you mainly need a critical care nursing course?

- a. Yes – 11
- b. No – 1
- c. Did not respond - 4



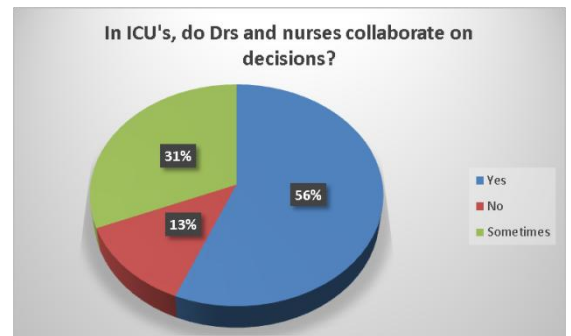
14. In your country are you required to have previous general nursing experience before you are allowed to work in the ICU?

- a. Yes - 8
- b. No – 8



15. In general, in the ICU's in your country, do nurses and doctors make decisions collaboratively?

- a. Yes – 9
- b. No – 2
- c. Sometimes - 5



16. In ICU's in your country, would you rate team work as:

- a. Excellent – 1
- b. Very good – 6
- c. Good – 8
- d. Poor – 1
- e. No team work – 0



ICU Policies Related to Practice

17. In your country, do ICU's have protocols or guidelines for the following:
- Early mobilisation
 - Opening visiting
 - Assessment for delirium
 - Weaning from mechanical ventilation
 - Adjustment of analgesia
 - Assessment of pain level
 - Adjustment of sedation
 - Assessment of level of sedation.

