



### Special Points of Interest

- \* EfCCNa Research Activities
- \* EfCCNa Congress 2017
- \* EfCCNa Awards
- \* New Representatives
- \* Member Organisations

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## Council Meeting, Krems, Austria

On September 5-6 the Council met in the beautiful Austrian region of Wachau in Krems due to the invitation of ÖBAI and their Council representative Karin Klas. Read a small report about the results of the meeting.

*A new communication strategy* was introduced to promote a transparent and clear communication feedback mechanism.

This formalizes the communication within the board, council to board and vice versa, project leaders to council and board.

*EU engagement:* according to the EfCCNa strategy to improve the recognition of Critical Care Nursing as a specialty in Europe and to influence the EU social and health policies as the voice of CCN in Europe, close cooperation with ESNO is established by a permanent EfCCNa representative in ESNO

*Commercial cooperation:* the set up of a sponsoring brochure is planned

*Standard Development:* the goal is to establish a minimum of two new standards by 2020 (pain management and nutrition)

*Research projects supported by EfCCNa:*

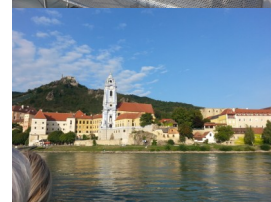
- \* Roles and factors that facilitate/hinder engagement in both: ventilation and sedation practice
- \* Roles of Critical Care Nurses in EOL care across Europe

*EfCCNa endorsed Studies – Prevention of CLABSI:* an international Survey (BE)

*Exchange Programme –* so far more than 40 delegates from 8 different countries have successfully participated

The cooperation with the *World Federation of Critical Care Nurses* will be increased in the future. Paul Fulbrook, a founding member of EfCCNa has been elected as President and the EfCCNa council member Adriano Friganovic from Croatia was elected as Vice-President. The federation is going to publish a critical care e-book to be downloaded for free. Their next Congress is going to be held in Brisbane in April 2016.

The EfCCNa thanks Karin and ÖBAI very much for the invitation to Krems. It was a perfectly organized meeting, very nice facilities, good food and I think we all will remember the evening at the Heurigen with great pleasure.



## EfCCNa Congress 2017



***EfCCNa is pleased to announce the 7<sup>th</sup> conference of the federation.***

The conference will be held in Belfast, Northern Ireland at the Waterfront Conference Hall.

Congress dates are 16 - 18 February 2017.

Belfast Waterfront is an award-winning multi-purpose facility hosting many events including concerts, exhibitions and conferences.

We welcome you to join this international nursing conference with focus of enhancing knowledge through research, education and clinical practice.

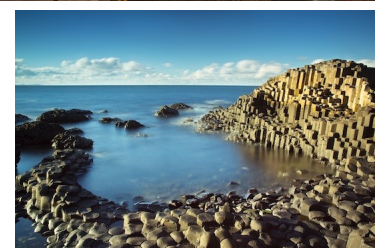
Colleagues from all intensive and critical care disciplines including paediatrics are invited to share their knowledge and expertise with an international auditorium.

More information will be available soon via the EfCCNa congress website [www.efccna.org](http://www.efccna.org)

Belfast is a city with history, culture, exciting events and great food. Waterfront hall is very well located with easy access to centre Belfast and walking distance to city hall and the main shopping streets.

There are also several good hotels nearby with reasonable prices.

Hope to see you all in 2017  
 Eva Barkestad  
 Chair of the congress committee.



## Research Activities in EfCCNa — sponsored Studies

### WEANING FROM MECHANICAL VENTILATION

- \* Project lead: Bronagh Blackwood (team includes Frederique Paulus, Claire Kydonaki, Eva Ackerman, Tom Andrews and Louise Rose)
- \* Purpose of the Study. A recent survey of European nurses from seven countries showed variable engagement of nurses in ventilation management, with higher engagement in Western Europe and lower engagement in Eastern Europe. An identification and exploration of nurses' roles and the factors that facilitate and hinder engagement in both ventilation and sedation practice will provide direction for future education and training projects led by EfCCNa.
- \* Methods. 4 focus group interviews were conducted with a sample of Congress delegates from across Europe. The digitally recorded interviews lasted 1-hour and were facilitated by trained researchers. Interviews were transcribed verbatim and will be analysed using thematic analysis.
- \* Progress. Interviews were transcribed and are now being analysed by 3 qualitative research experts in the study team (Claire Kydonaki, Frederick Paulus, Eva Ackerman). We anticipate that the study will be completed by December 2015



### End of Life (EoL) Care Study

- \* Project lead: John Albarran (team includes Julie Benbenishty, Jos Latour, Ruth Endacott, Bronagh Blackwood)
- \* Purpose of the Study. Approximately 19% of patients die in the ICU and the majority of deaths are preceded by a decision to withhold or withdraw life-sustaining therapies. Death generally occurs within the first few days and the transition from curative care to end of life care is often rapid. This places a large emotional burden on the ICU nurse who may not be prepared for the suddenness of preparing the patient and the family for this tragic event. Thus, the aim of this pilot study was to explore the role of Critical Care nurses in EOL care across Europe. The study was supported by EfCCNa as one of its priorities to improve end of life care in the intensive care unit.
- \* Methods. The study involved 6 focus group interviews. The specific objective was to explore experiences of EOL care to identify factors that enhance and detract from providing such care. Focus group interviews were conducted during a Knowledge Café workshop at the 2011 EfCCNa Congress in Belgrade, Serbia.
- \* Progress. A literature review highlighting end of life care in European countries is currently being written up for publication. The analysis of the interviews has been completed and is currently being written up for publication. The projected completion date is December 2015.

## Research Awards granted by EfCCNa

### 2014 - Dandelion: Danish Delirium Study on Neuro-intensive Care Patients

**PI: Lorna Krone**

Background. Several studies on delirium in medical and surgical ICUs have indicated that it increases mortality, length of stay as well as the risk of dementia symptoms after discharge. Only few studies have investigated delirium in the neuro-intensive care unit.

Aim. (1) To investigate the incidence, duration and type of delirium symptoms as assessed by the Intensive Care Delirium Screening Checklist in patients with acute acquired brain injury. (2) To measure the effect of a systematic intervention on delirium symptoms in patients with acute acquired brain injury.

Method A baseline investigation will be conducted in order to establish an average prevalence, duration and type of delirium symptoms. A systematic Intervention protocol will be implemented. The Intervention elements consist of a sedation, sleep, mobilization and pain treatment regimen based. A follow up 6 month after discharge will be conducted measuring quality of life, dementia symptoms and cognitive functions

Progress: The study is now ready to "take off". All ethical approvals and preparation are in order. On Monday 17.th of August - we will start include patients for the baseline study (phase 1). This is the part of the study where the EfCCNa grant of the 4000 euro is used to pay a psychiatric team to assess patients for delirium with the diagnostic criteria DSM-V and ICD-10. From Monday the 17.th august will I, together with my nurse ambassadors in the neuro-intensive care unit, assess included patients with the CAM-ICU and our Danish translation of the ICDSC. The assessments with CAM-ICU and I CDSC will be compared with the psychiatric assessments for validation. We aim to include 70 patients within the next 4 months.



### 2013 - Sleep Disturbances and Sedation Practices in the Intensive Care Unit: an International Survey

**PI: José Hofhuis RN, PhD; Peter Spronk, MD, PhD**

Introduction This survey aims to answer the following two research questions:

- (1) How are the sedation and sleeping practices organized in adult ICUs across different countries?
- (2) What is the responsibility of the ICU staff for key sleep and sedation decisions in adult ICUs across different countries?

Methods: A multi-centre, self-administered survey of adult ICUs across different countries. This survey will identify current sleep and sedation practices on the ICU as reported by nurse managers or a senior critical care nurse.

Progress: 10 countries participated in the study (UK; Denmark; Norway; Canada; Italy; Germany; Greece; Poland; Sweden; Cyprus).

Data collection is complete and the findings have been analysed.

The paper is presently undergoing review by the co-authors with a view to publication shortly.

## Research Awards granted by EfCCNa

### 2013 - Study of Variability of Care Provided during Non-invasive Mechanical Ventilation

**PI: Marta Raurell**

Research questions: This study has two principal aims:

- 1) To assess health care professionals' knowledge about NIV, in a cross-cutting descriptive study using a validated survey of physiotherapists; nurses in intensive and emergency care units, intermediate care, and hospital floors; and doctors and residents in anaesthesiology, emergency care, intensive care, internal medicine;
- 2) To identify predictors (patient characteristics, unit where NIV was administered, NIV procedures) of NIV success, failure and complications in a prospective cohort study in four public hospitals in Spain.

Progress: The study is completed and an aspect of it was presented in Valencia at the Congress in 2015.

## New EfCCNa Council Representatives 2015

### Kaisa Jakobson, Finland

I am almost 45 years old, married and a mother of three children. In 1993 I graduated my R.N. studies. Since then I have been working in four different ICUs in Finland - mainly mixed ICUs in the middle-part of Finland and in the capital area.



Now I worked for 12 years as a R.N. in Helsinki University Hospital, Jorvi ICU, which is a mixed ICU. In 2011 I graduated proficient ICU nurse-education which is one-year-lasting education organized by Helsinki University Hospital. After that I have had many new assignments in my work.

My area of responsibility in my work is to take care of RRT-treatments. I am as well taking care of the maintenance of our intensive care patient information system. Recently I have organized ICU themed education for nurses and doctors locally in our University area.

In the beginning of this year I started my work as a board member in Finnish Society of Intensive Care as well as a board member in my trade union Tehy Jorvi Hospital.

I am open minded what comes to my new future work in EfCCNa. I hope we`ll have a good international collaboration with all of you.

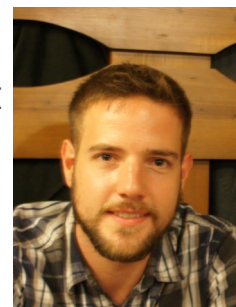
### Víctor Gómez Simón, Spain

My name is Víctor Gómez Simón, I am 29 years old and I live in Barcelona. I work at Parc Tauli University Hospital in Sabadell, Spain.

The hospital has a mixed ICU and I share my work between the ICU and the pre-hospital emergency team. I am a member of the Respiratory Care work group and I participate in the development of protocols and guidelines to ensure good practice and patients' safety in my hospital.

I collaborate in many postgraduate degrees as an expert in mechanical ventilation. Furthermore, I have been involved in a project about early neurocognitive rehabilitation in critically ill patients and another project about protective mechanical ventilation to prevent ARDS development.

I am board member of Spanish Society of Critical Care Nursing (SEEIUC) and the board of the Catalan Society of Critical Care Medicine (SOCMIC). It is my pleasure to become the new Spanish representative for EfCCNa and I will try to do my best for the European Critical Care nurses.



## New EfCCNa Council Representatives 2015

### Biljana Savic, Serbia

Biljana is born in Nis, in the south of Serbia. After trainee internship (Field Service of home medical treatment and Neurosurgery ICU), her working career started in 1999 at the ICU in Clinic for infectious diseases.



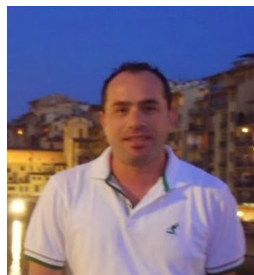
Professional improvement and development through Study visits in Norway, St Olav's Hospital, Trondheim; The Netherlands, The Academic Medical Center in Amsterdam; University Medical Center Utrecht; Clinical Centers in Croatia, Slovenia and Italy (Udine) achieved through Association UINARS.

Completed training for work in ICU, courses of CPR, First Aid (Emergency cases), Course for coach "Mental Health and HIV/AIDS".

In 2011<sup>th</sup> she was elected as a General Secretary of UINARS, Serbia and from 2015 as a Representative of Serbia (UINARS) in EfCCNa. Her own role as representative UINARS in EfCCNa considered as great honor, a privilege and great opportunity to participate in the recognition and developing of nursing and hopes that she will fulfill the expectations in good international collaboration with all members of EfCCNa.

### Manuel Zammit, Malta

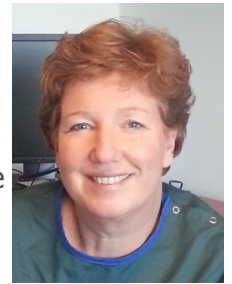
I'm Emanuel Zammit and I'm currently the President of the Maltese Critical Care Nurses Association (MCCNA) for the last 6 months. MCCNA will celebrate its' 5 years since it's launch next March.



I'm a Staff Nurse and have been working in the only Intensive Care Unit on the island for the last 9 years, that is since I graduated. My hobbies are travelling, swimming, cooking and watching documentaries related to travel.

### Frederique Paulus, The Netherlands

I am a critical care nurse and nursing scientist and work at the intensive care unit of the Academic Medical Center in Amsterdam.



The main focus of my research is on evidence based improvements for the mechanical ventilated patient.

Besides my clinical work I am a board member and member of the guideline committee of the Dutch federation of Critical Care Nurses (V&VN-IC).

I am very pleased to become the Dutch representative for EfCCNa and looking forward to working together at European level.

### Besey Ören, Turkey

Besey Ören is working as an Assistant Professor at the Istanbul University in Istanbul, Turkey.



She is a President of Turkish Critical Care Nursing Association.

She has an interest in critical care nursing, emergency nursing and peritoneal and haemodialysis.

She has published papers on those topics. She has a background in medical nursing. She translated to Turkish from English four chapters of EDTNA/ERCA's books.

She has presented her work at many national and international conferences.

She is a member of the Turkey Critical Care Nursing Association and Nephrology Nursing Association

## 20 Years Slovenian Association of Emergency and Critical Care Nursing

On 15 - 16 October 2015 the Slovenian association of Emergency and Critical Care Nursing did celebrate its 20<sup>th</sup> anniversary on their national congress in Terme Čatež, Slovenia with an interesting programme and a wonderful congress party.

One of the invited speakers was EfCCNa vice president Anne Kokko, who forwarded warm congratulations on behalf of the EfCCNa to the Slovenian association of Emergency and Critical Care Nursing.

Interesting to know is that this organisation was one of the EfCCNa founding member association in 1999. Since then representatives from the Slovenian association, namely Slavica Klančar, Marusa Brvar and recently Drago Satosek have been very actively promoting and working for example on educational items in EfCCNa. The Slovenian association of Emergency and Critical Care Nursing can be very proud of all the goals they have achieved so far.

The EfCCNa wishes them a lot of success for the future work and new achievements, too.



President Vida Bračko, EfCCNa vice-president Anne Kokko and EfCCNa treasurer Drago Satosek



## Critical Care Doctoral European Nursing Group



The EfCCNa is committed to advancing the art and science of critical care nursing across the European countries; therefore it is facilitating a Critical Care Doctoral European Nursing group (Critical Care DEN) to bring together nurses across Europe engaged in critical care research. The group welcomes nurses who are either undertaking or who have completed a Doctoral programme in any European country (e.g. PhD; DPhil; DNS; Professional Doctorate or similar).

Since the inaugural meeting in Valencia this January the group counts almost 50 members. If you are interested in joining the group please send your name, qualifications, affiliation and country, and email address to [b.blackwood@qub.ac.uk](mailto:b.blackwood@qub.ac.uk).

## European Critical Care Nursing Competencies


The EfCCNa competencies in Critical Care Nursing document is now available for the German speaking countries.

Follow the link: [German version](#)



## EfCCNa and its member Societies - ÖBAI Austria


### Austria

<i>Name of the organization</i>	ÖBAI – österreichischer Berufsverband für Anästhesie und Intensivpflege Council Member: Karin Klas	
<i>Total number of members</i>	approx. 350	
<i>Other professionals besides nurses accepted as members?</i>	Yes, for example intermediate Care Nurses	
<i>Congress (frequency; is there a usual month &amp; if so, which month?)</i>	Yes, annual congress, usually between end of May/ mid of June	
<i>Journal (if yes, name)</i>	no	
<i>Membership fee</i>	€ 20,- per year	
<i>Approximate salary (€) for junior CCN in your country</i>	€ 1800,-	
<i>Average working hours per week</i>	40	
<i>In your country are there critical care courses that are available after registering as a nurse? If so, please describe their level/s (e.g. diploma, bachelor, master)</i>	In Austria every Nurse who works in intensive care, critical care or Anaesthesia has to finish a special education course within 5 years working in this field. These courses include minimum 480 theoretical hours and a minimum of 800 practical training hours. This is regulated by the Austrian Nursing law and is obligatory. At the moment most of these trainings end with a diploma but some are already offering an academic expert degree.	
<i>Approximate Number of hospitals with adult Intensive Care Units (accepting mechanically ventilated patients)</i>	110	
<i>Average Nurse: Patient Ratio during day shift for mechanically ventilated patients</i>	During the day shifts: 1,5-2 Patients/Nurse During night shifts: 2-3 Patients/Nurse	
<i>Most important activity/achievement of the association in the last year</i>	New Website since 1,5 years. Invitation to work in the development group for the new Nursing Law in Austria	
<i>Hot topics in Critical Care in your Country</i>	<ol style="list-style-type: none"> <li>1. New Nursing Law – prevent the falling of the obligation for the special education for critical care nurses</li> <li>2. in the new Nursing Law competencies for educated critical care nurses have to be defined broader to fit the needs in the daily work</li> <li>3. Critical Care Education has to be moved forward to an academic level in general as a logical consequence based on the transferral of the general nursing education in the academic field (Bachelor level)</li> </ol>	





## EfCCNa and its member Societies - CNSARICT Croatia

Croatia	
<i>Name of the organization</i>	Croatian Nurses Society of Anaesthesia, Reanimation, Intensive Care and Transfusion Council member: Adriano Friganovic 
<i>Total number of members</i>	850
<i>Other professionals besides nurses accepted as members?</i>	
<i>Congress (frequency; is there a usual month &amp; if so, which month?)</i>	Congress in April, Symposium in October
<i>Journal (if yes, name)</i>	
<i>Membership fee</i>	100 HRK, approx. 15 EUR
<i>Approximate salary (€) for junior CCN in your country</i>	750 EUR
<i>Average working hours per week</i>	40
<i>In your country are there critical care courses that are available after registering as a nurse? If so, please describe their level/s (e.g. diploma, bachelor, master)</i>	There's no special training for critical care nurses
<i>Approximate Number of hospitals with adult Intensive Care Units (accepting mechanically ventilated patients)</i>	60
<i>Average Nurse: Patient Ratio during day shift for mechanically ventilated patients</i>	1:2
<i>Most important activity/achievement of the association in the last year</i>	Stop Sepsis - Campaign
<i>Hot topics in Critical Care in your Country</i>	1. Education 2. Nurses regulation 3. Salaries
<i>Any other news from your association</i>	The vice president of World Federation of Critical Care Nurses is a member of CNSARICT

## Paediatric & Neonatal Acute & Critical Care Research School

An increasing number of neonates and children are surviving critical illness and many have complex healthcare needs. Recovering from critical illness can be a long-term process and children and their families face many challenges.

A number of disciplines have an interest in critically ill children and research collaborations across disciplines have the potential to improve healthcare practices and inform methodological developments. The IMPNACC research school provides both essential skills and knowledge for methodological and content issues and the opportunity for researchers to collaborate with other researchers in the field.

After the success of the 1<sup>st</sup> IMPNACC research school held in Preston UK in 2014, this 2<sup>nd</sup> research school will focus on team science and personal branding with the following goals:

- Build national, European and international research collaborations in the paediatric & neonatal fields.
- Create networks of early career and senior researchers in these fields.
- Provide high quality methods teaching opportunities.

For more information: 0041 021 314 05 88 [laura.marques-rio@chuv.ch](mailto:laura.marques-rio@chuv.ch)

### 2<sup>nd</sup> International Multidisciplinary Paediatric & Neonatal Acute and Critical Care Research School

Institute of Higher Education and Research in Healthcare – IUFERS  
14<sup>th</sup>-15<sup>th</sup> January 2016, Lausanne, Switzerland



## BRAVO-EPIC Study



The Respiratory Failure and the Nursing Science sections of the European Society of Paediatric & Neonatal Intensive Care have launched an exciting collaborative project!

BRAVO - EPIC is an easy and quick questionnaire to fill out on weaning practices in European PICUs.

VESPER aims to study the current practice of paediatric mechanical ventilation throughout Europe through a point-prevalence study with three two-week periods of patient inclusion: October 2015, January 2016 and April 2016. This exciting project needs the participation of all intensive care units throughout Europe taking care of

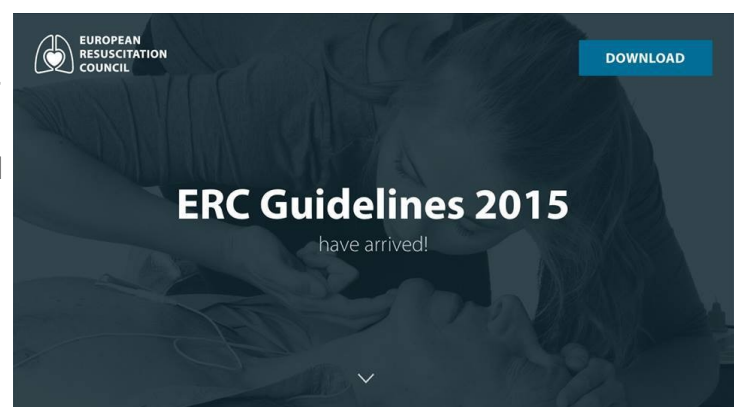
mechanically ventilated children (both invasive and non-invasive). If you would like to participate or need more information, please contact Martin Kneyber (chair section Respiratory Failure) by email at [m.c.j.kneyber@umcg.nl](mailto:m.c.j.kneyber@umcg.nl).



## ERC Guidelines 2015 published

The European Resuscitation Council Guidelines for Resuscitation 2015 provide specific instructions for how resuscitation should be practiced and take into account ease of teaching and learning, as well as the science. They were developed by Europeans and have been specifically written with European practice in mind.

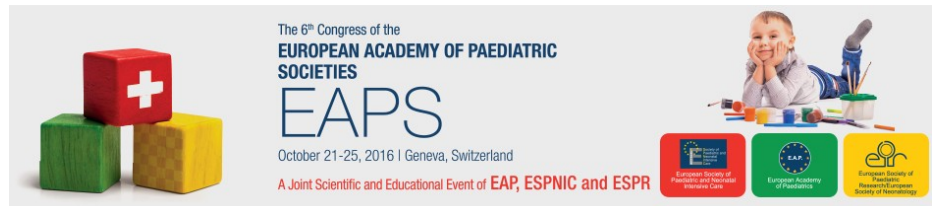
Find the guidelines under <http://www.cprguidelines.eu/>



**Congress Calendar 2016** - *click on the logos to get linked*



1-5 October 2016, Milan, Italy



24-25 September 2016, Reykjavik, Iceland

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