

ASSOCIATION FOR COMMON EUROPEAN NURSING
DIAGNOSES, INTERVENTIONS AND OUTCOMES



A C E N D I O

ACENDIO 2007

6th European Conference of Acendio

Nursing Communication in Multidisciplinary Practice
Pflegerische Kommunikation und multidisziplinäre Praxis
Communication infirmière et pratique multidisciplinaire

.....
Oud Consultancy

ACENDIO 2007

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Proceedings of the 6th biennial European Conference of the Association for Common European Nursing Diagnoses, Interventions and Outcomes held in Amsterdam, the Netherlands

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Foreword

The book that you have in your hand is the proceedings of the 6th ACENDIO conference, this time held in Amsterdam. The Association for Common European Nursing Diagnoses, Interventions and Outcomes is a membership organisation that was established in 1995 to promote the development of nursing's professional language and provide a network across Europe for nurses interested in the development of common terminology to describe the practice of nursing.

I am convinced that healthcare will gain from ICT being applied to areas such as patient care, administration, education and research by enabling the synthesis of evidence, provision of guidelines for practice, providing information for consumers via the Internet and the development of decision support systems for use in close connection to patient care.

ACENDIO has, for more than ten years now, in many ways promoted and facilitated this work in nursing through the provision of conferences, seminars and workshops, as well as via its newsletters and website (www.acendio.net). It is therefore a great pleasure to present this book to you.

The content is a mirror of the current situation primarily in Europe, but also to some extent internationally. This book will provide you with an understanding of our position today and from this you may ponder the huge development that has taken place since the beginning of ACENDIO.

The theme of this meeting "Nursing Communication in Multidisciplinary Practice" has been carefully chosen by the board and the scientific committee as an area of crucial importance to our time, to challenge your thinking and to stimulate further development in this area of nursing. It is an impressive body of knowledge as confirmed by the papers in this book.

Many people have been involved in the work of ACENDIO during the years, and most recently in the compilation of this book and preparing for this conference. Most of them are giving of their time and efforts on a voluntary basis using a lot of their spare time. They are all devoted to the utmost idea of providing a better care for the patients by using the existing knowledge paired with the best technology. They all have my deepest respect and reverence and it is an honour for me to count them among my friends.

Let this conference and the content of this book be a challenge for you all to increase your participation in the shaping of our common future!

Örebro, April 2007

Professor Margareta Ehnfors
President of ACENDIO
University of Örebro, Sweden

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1. – Introduction to standardisation of nursing language (for beginners)

By Anne Casey (UK)

No abstract available

2. – Introduction to nursing informatics

By Charles Docherty (UK) & Anneli Ensio (Finland)

No abstract available

3. – Introduction to ICNP[®] version 1.0 – International Classification for Nursing Practice: a unified nursing language system

By Amy Coenen (USA), Nicholas Hardiker (UK), Claudio Bartz (USA), Kay Jansen (USA) & Élvio H. Jesus

No abstract available

56. – The refinement of financing criteria for hospital nursing care: an application of the use of Belgian NMDSII

By Van Herck, P., Sermeus, W., Michiels, D., Van den Heede, K., Delesie, L., Laport, N., Thonon, T., Gillet, P., Vanden Boer, G., Grietens, J. and Tambeur, W. (Belgium)

Introduction

There is a requisite for a needs-driven financing system in healthcare. Nursing minimum datasets (NMDS) and hospital discharge datasets (HDDS) can be used to investigate those needs, and the comparison with reality, if scientific evidence and clinical contextual experience can also be taken into account.

Background

The Belgian Healthcare Knowledge Centre commissioned a research project to construct a refined financing model for hospital nursing care in Belgium. It concerns a one-year feasibility study, initiated in February 2006. In the current hospital financing system, two nursing care indicators that are based on B-NMDS are used: an average cost-weight for surgical, internal medicine and paediatrics departments; and a weighted intensive care ratio (ZIP/ZAP) for intensive care departments. This financing system is criticized for the following reasons:

1. it is not linked with DRGs;
2. cost-weighting is based on actual staffing ratios, which favours nursing wards with high nurse staffing levels;
3. except for technical care, cost-weights are not sensitive enough for changes in nursing practice;
4. nursing intensive departments, such as geriatrics, are not included in the complementary financing scheme.

At present there is no link between financing criteria and patient centred nursing intervention needs, nor with the complementary staffing needs.

Study objective

The aim of the study is to develop a refined model of financing nursing care that makes the shift from financing current nursing activities and nurse staffing levels to a system that is based on appropriate nursing activities and appropriate nurse staffing levels. A further integration with DRG is also envisioned.

Methodology and procedure

The study encompasses two distinct parts, which are integrated in the final modelling: intervention needs based on evidence; and staffing needs based on perceptions of nursing personnel, in combination with multidimensional statistical analysis (CATPCA).

Intervention needs

During the first months, 9 nursing interventions were selected based on frequency, variability, and staffing and evidence related criteria in concert with expert opinion. A strict evidence based approach

was used to summarize the current state of the art in the application of these interventions. Proven indications and contra indications for combinations of these and other nursing interventions are extracted. Based on aggregated NMDS and HDDS analysis the relations between the concerned patient problems, nursing interventions and outcomes and events can be investigated to construct an algorithmic rule set. Different levels of evidence are taken into account. The effects in staffing and financial terms of diverse applications are clarified based on real patient cases.

Staffing needs

More than 100 real life patient cases from 38 hospitals were constructed based on comprehensive patient records analysis and clarification by involved nurses. A subdivision was made between general wards, paediatric wards, intensive care wards and geriatric wards to account for inherent staffing differences. More than 200 charge nurses distributed over all Belgian general hospitals applied for the rating of these cases, using a Delphi approach, with regard to staffing needs. External validation by means of the rating of separate nursing interventions in function of staffing needs effects is also tested.

Results

In the final stage both needs assessments, interventional and staffing related, will come together to construct a coherent financing model of hospital nursing care. NMDS and HDDS will be further integrated in this application. A literature review will also compare the model with hospital financing systems abroad.

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