ABSTRACT BOOK

The Specialist Nurse in European Healthcare towards 2030

8 and 9 June 2023
Brussels, Belgium

2 Impact of organizational measures on the Management of Midlines / Piccline by nurse anaesthetists

HE Hamley, SF Staikowsky, DJ Desprez, BJ Berga, JW Jalalzai, CS Confais
Centre Hospitalier du Mans Le Mans France

Background and relevance:

Since 2017, the anaesthesia department has offered practitioners the opportunity to use midlines (ML) and picclines (PL) installed by nurse anesthetists (NA).

The intervention:

Requests and installations have been exponential, leading in 2020 to better structure the response thanks to several tools: practice protocolisation, planning NA's availability, hotline for the daily management of carers' requests, acquisition of a portable ultrasound system, computerised management, information leaflets, NA training programme, institutional communication. The study analysed the impact of these measures.

Methods:

The requests and conditions of ML/PL installation were retrospectively analysed between 2018-2022.

Actual or expected results:

For this period, 3,004 ML/PL were installed for 3,572 requests. The average monthly number of requests and installations increased — 28.7 ± 6.4 in 2018, 103.6 ± 10.8 in 2022 and 19.3 ± 5.7 in 2018, 94.0 ± 11.8 in 2022 respectively. Installation cancellation decreased [32.8% requests in 2018, 9.3% in 2022], as did the average time between request and fitting [4.4 ± 5.6 days in 2018, 0.9 ± 3.2 in 2022] with a rapid response [56.6% of MLs fitted within 3 days of the request in 2018, 95.9% in 2022]. 30 to 40% patients returned home with their ML for their treatment.

Conclusions and discussion:

Besides patient comfort and satisfaction, adapting the organisation to the demand has had medico-economic and institutional consequences: length of stay reduction, freeing up nursing time, ambulatory hospitalisation. Hence, the efforts to improve the organisation to better meet the needs were highly conclusive. It brings an impetus for creating a Vascular Access Team, for which studies demonstrate the efficiency and cost-reduction.

3 Strengthening nurse leader decision-making during COVID-19: A European nurse directors' perspective (ENDA)

AS Stievano[1], BM Bruckner [2], IM Meyenburg-Altwarg [3], HS Hinno [4], JF Filkins [5]

[1] Opi Cecri Rome Rome Italy
[2] Krankenhaus Barmherzige Brüder Salzburg Salzburg Austria
[3] Com-P-Tense Germany GmbH Hannover Germany
[4] Viljandi General Hospital Estonia Jameyala Estonia
[5] Former Cumbria NHS Wigton United Kingdom

Background: Achieving good public health requires governments, health systems and policy makers to support nurse leaders and their expertise in all settings where the workforce is deployed. During COVID-19 pandemic nurse leaders had to take difficult decisions about staff assignments from nurses who were vulnerable, or when there was inadequate support for meeting the nurses' personal and family needs.

The intervention:

Aim: To analyze the difficulties met by hospital nurse leaders during the Covid-19 pandemic at the European level.

Methods:

Method
We employed the SWOT (strengths, weaknesses, opportunities, and threats) technique to organize and analyze the data collected from 15 nurse leaders in different European countries through standardized online interviews.

Actual or expected results:

Results: Shortage of nurses and lack of Personal Protective Equipment (PPEs) were outlined as the major problems to be addressed by nurse managers in Austria, Estonia, Germany, Italy and the United Kingdom. Many nurses did not have the appropriate training in the use of PPEs and nurse directors had to ensure that teaching programs on the correct use of them were organized and delivered. Additionally, nursing staff, who had no updated experience of working in intensive care and with infectious patients, was outlined as a significant challenge.

Conclusions and discussion:

Conclusion: The COVID-19 epidemic highlighted the difficulties to deal with an outbreak for clinical nurses but also senior nursing leadership. In many European countries an acute staff shortage emerged. There were not enough nurses in hospitals and nursing homes to deal with the rapidly spreading pandemic. More specifically, nurse leaders dealt with shortages of specialist nurses and contended that careful planning had to be considered regarding the deployment of nurses working outside their traditional roles to take into consideration patient safety. The shortage of PPEs and the need to implement educational strategies to teach how to use it correctly emerged as one of the priorities.

4 Specialist Nurses' Development in Malta 2013-2023
CS Scicluna Ward

University of Malta Balzan Malta

Background and relevance:

In Malta, specialist nurses lost their title in 2013. The title Practice Nurse was given to specialist and practice development nurses, thus today these nurses have one title. The aim of this study was to explore the development of specialist nurses in Malta over the past ten years.

The intervention:

Three focus groups with Practice nurses

Methods:

Using a qualitative case study design, a deep understanding of the complex issues surrounding these nurses was gained. In January 2023 all (N=120) Practice nurses, employed by the National Health Service in Malta and Gozo, were invited to participate in a focus group. Potential participants were provided with an invitation and an information letter through the Director of Nursing in Malta. A total of 15 nurses responded to the invitation and were allocated into three focus groups. The focus groups were recorded and transcribed and a thematic analysis was carried out.

Actual or expected results:

This presentation will outline the main findings from this recent study and highlight the present situation of specialist nurses in Malta. The results will be compared to the findings of my Ph.D. study that was carried out in 2013. From the preliminary results, the major issue of note is the lack of support and understanding of the organization, a finding that was also found a decade ago.

Conclusions and discussion:

A discussion will ensue on what actually changed like the difference in numbers of SNs from 27 to 120 in ten years, and the legal framework but what does this mean to practice nurses working on the shop floor?

5 A 5-year experience in midline and PICC line placement by nurse anaesthetists

HE Hamley, SF Staikowsky, DD Dugas, BA Bareau, HI Himdi, JW Jalalzai
Centre Hospitalier du Mans Le Mans France

Background and relevance:

Midlines (ML) and picclines (PL) are intravascular devices subject to ever-growing demand.

The intervention:

ML have been inserted under ultrasound for several years by nurse anaesthetists (NA), while skill transfer has been carried out in our hospital for PL insertion with the Sherlock system. In parallel, NA have been trained to use these devices – at the national level, cooperation protocols allow ML/PL insertion by nurses. This work analyses the installation of such intravascular devices by NA.

Methods:

The conditions of ML/PL installation were retrospectively analysed between 2018-2022.

Actual or expected results:

In overall, 2646 ML and 358 PL were installed. The main indications were antibiotic therapy, parenteral nutrition, chemotherapy, vascular access difficulties, hydration and electrolyte supply. The devices were mainly installed on the basilic (66.5%) and humeral (24.2%) veins, – mainly on the left (71.4%) – while a single venepuncture was performed for 57.2% of the placements. Immediate complications were rare: haematomas and bleeding at the puncture site, and failed insertion in 27 cases (0.9%). Over the years, complications and insertion failure decreased. A hotline was made available to respond to the difficulties encountered by carers and patients. The device had to be removed during hospitalisation for venous thrombosis or sepsis for respectively 3.4% and 4.1% of installed ML/PLs; 35.1% of patients were discharged from hospital with their intravascular device for treatment at home.

Conclusions and discussion:

The management of vascular approaches by a trained team represents a major asset in preserving the venous capital of patients. Patient and nurse satisfaction with these devices supports the creation of a vascular access unit.

6 Advanced Clinical Activities Among Nurses in WHO/Europe Member States

SK Kurt, WS Sermeus

KU Leuven Leuven Belgium

Background and relevance:

More evidence is coming available that qualification of nurses have an impact on the quality of care.

The intervention:

The survey included 282 questions, 92 of which were about jobs.

Methods:

Cross-sectional survey among key-informants was performed to explore status of nursing workforce in WHO European member states. Seven advanced clinical activities, being prescribing medication, making diagnoses, ordering tests, seeing a panel of patients, initiating treatments, referring patients, being first point of contact were surveyed.

Actual or expected results:

29 out of 53 countries responded the survey. In 4 out 29 countries (Armenia, Georgia, Turkey, Ukraine) has none of the seven rights. In Switzerland, all seven rights are only allowed for NP/APN nurses. In a few countries, these rights are given to all nurses (e.g. UK, Iceland, Slovakia) with some exceptions requiring some conditions to be filled, mainly on medication prescription rights or ordering tests. Overall, being the first point of contact (18/29 countries) and seeing a panel of patients (15/29 countries) are activities that are mostly granted to all nurses. Medication prescription rights are only given under the condition of extra education (6/29 countries) or only to specialized nurses (3/29 countries), exceptional in UK and Iceland which are given to all nurses. In about half of the countries, the rights of making diagnoses (16/29 countries), initiating treatments (16/29), ordering tests (14/29) or referring patients (14/29) are not given to nurses, even not under condition of extra education or master level qualification.

Conclusions and discussion:

The study shows a high variability in advanced nursing practice activities among WHO/Europe member states

7 Bridging the gap in psoriasis care: developing nurse-led interventions through experience-based do-design to improve lifestyle behaviour and shared-decision making

EDP Deprez [1,] LJ Lambert [1], AVH Van Hecke [2]

[1] University Hospital Ghent Gent Belgium
[2] University of Ghent Gent Belgium

Background and relevance:

Psoriasis can severely impact a person's life, causing physical discomfort, psychological distress and social stigma that limit daily activities and reduce quality of life. To address this, comprehensive management and access to all treatment options is crucial.
Experience-Based Co-Design (EBCD) is a collaborative approach to fill the gap between required and current management and that gathers insights into the needs and perspectives of patients and healthcare professionals (HCP).

The intervention:

In 2 EBCD sessions 5 patients and 4 HCP watched a 30-minute montage of the in-depth interviews, which served as input for a brainstorming session to identify primary gaps. In the second session, participants discussed the properties of the interventions needed to support these unmet needs.

Methods:

https://docs.google.com/document/d/1HD9hdhsyrF40wY6Uwca0C6Hw4SI_U1BjABnVsdvy4CA/edit?usp=sharing

Actual or expected results:

From the 18 interviews, 'shared decision-making' (SDM) and 'lifestyle behavior change' (LBC) were identified as the most significant themes related to unmet needs in current care.
The two sessions resulted in two interventions that were implemented into RCTs. The first intervention involved a nurse-led patient-centered consultation for LBC (smoking, alcohol, stress and/or overweight/obesity). A tailored plan of action, including referral to relevant care providers was developed in collaboration with the patient. The number of referrals, clinical parameters and Readiness Ruler were the outcomes measured.
The second intervention was a nurse-led SDM intervention, incorporated into the specialized consultation program. Patients received a comprehensive appraisal of all treatment options, including an exploration of their preferences utilizing the decision aid. The efficacy of this approach was assessed using the SDM-Q-9 and TSQM.

Conclusions and discussion:

Despite the use of EBCD in other disciplines, its implementation in dermatology is relatively novel. This study presents the first example of EBCD in dermatology, where two nurse-led interventions were developed. The involvement of nurse specialists could enhance SDM and lifetstyle behavior change in psoriasis, while alleviating the burden on dermatologists.

8 The Roles and the future of nephrology nurses in the prevention of chronic kidney disease within the European healthcare Setting

AL Liossatou [1,] ZS Zyga [2], IdB de Barbieri [3]

[1] EDTNA/ERCA Levathos Kefalonia Greece
[2] The university of Peloponnese Tripoli Greece
[3] EDTNA/ERCA Seestrasse 91, CH 6052 Hergiswil, Switzerland

Background and relevance:

Approximately 850 million individuals are currently suffering by various renal conditions. Up to one in ten persons in the globally suffer from chronic kidney disease (CKD), which is generally incurable and predominantly progressive. The increasing global burden of CKD is of major concern for both patients and society; by 2040, CKD is estimated to be the fifth leading cause of lost years of life worldwide. In Europe, 100 million individuals suffer with CKD, and by 2040, it is expected to become the fifth greatest cause of mortality worldwide. If chronic kidney disease (CKD) stays untreated and the patient survives the cardiovascular and other symptoms of the condition, CKD advances to end-stage renal disease (ESRD), where life cannot be preserved without dialysis therapy or kidney transplantation. Consequently, CKD is a leading cause of catastrophic health costs.

The intervention:

A systematic Literature review was conducted that reveleaded the dynamic roles of nephrology nurses in the eraly detection and CKD prevention field.

Methods:

Kidney disease can be prevented and development to ESRD can be slowed with appropriate access to basic diagnostics and early treatment, including nutritional interventions. It is of the utmost significance to apply a comprehensive EU strategy to CKD in order to increase public awareness, primary and secondary prevention, early detection, screening, diagnosis, and access to optimal care and treatment. Moreover, the EU research agenda should now prioritize investments in novel CKD therapies that are more effective and environmentally friendly. In terms of patient education and early disease detection, it is anticipated that nephrology nurses will play a unique and dynamic role in the future.

Actual or expected results:

A literature review was conducted

Conclusions and discussion:

A plan will be presented on the implementation of prevention programmes, with leading roles through nurses- led clinics as well education programmes in schools.

9 Digital Education in Nursing Challenges and Opportunities

VV Vejzovic[1] BF Filej [2,], MP Parados [3], DS Simin [4], TSK Štemberger Kolnik [2], TS Tomic [4], OV Vori [5], VT Turuk [5], ACB Bramhagen [1]

[1] Malmö University Malmö Sweden
[2] Faculty of Health Sciences in Celje Celje Slovenia
[3] University of Ljubljana Ljubljana Slovenia
[4] University of Novi Sad Novi Sad Serbia
[5] University of Applied Health Sciences Zagreb Croatia

Background and relevance:

A development of digital technology provides new opportunities in both teaching and learning at all educations level. The Covid-19 pandemic forced the responsible for education to make the decisions about the transition from the traditional to digital education. Even the traditional educations, such as the nursing programs, had to change face-to-face teaching to digital. Therefore, it is important to examine experiences of the digital methods that have been used during the pandemic with a view to development opportunities.

The intervention:

The aim of this study was to illuminate the teachers experiences of the digital education at nursing faculties in four countries that participated in the Erasmus+ Digital Education in Nursing project - DEN.

Methods:

The semi-structured focus group interviews in four countries was used for data collection. A total 28 teachers participated in the four focus groups. All interviews were tape-recorded, fully transcribed (four authors), and analyzed initially by two authors. The authors then analyzed the interview transcripts independently first, and then together using the qualitative content analysis.

Actual or expected results:

Three significant themes emerged from the focus groups data: "conflicting feelings" " digital competences", "challenges ". Results from this study have shown that the rapid transition to a digital way of teaching was experienced by teachers as difficult and challenging. At the same time, some advantages of digital teaching were identified, which the teachers wish to retain in the future. The digital competence was perceived as low and more knowledge in digital teaching was requested.

Conclusions and discussion:

The need for further development of the teachers' digital competence was highlighted. A hybrid teaching method may be a solution especially when it comes to the education in program for registered and specialist nurses. This is because some skills cannot be acquired by students only in a digital way.

10 Nursing Informatics Unit: Unlocking Digital Progress in Healthcare

Y. Z Zhitomirsky

Hadassah Medical Center Jerusalem Israel

Background and relevance:

Implementing digital technologies in healthcare can be challenging due to a lack of user adoption and compatibility issues. The field of nursing informatics integrates nursing science, computer science, and information science to manage and communicate data, information, and knowledge in nursing practice. However, practices related to informatics and digitalization are often disjointed among personnel without a cohesive professional framework, leading to issues such as inadequate supervision, prioritization problems, and a lack of professionalism.

The intervention:

A nursing informatics unit is being established to centralize all tasks and resources related to informatics in nursing.

Methods:

The initial step in developing the nursing informatics unit was a lengthy process of motivating the nursing branch administration to recognize its importance. Afterward, Individual meetings were conducted with officials who are involved in nursing informatics-related duties to increase their willingness and commitment to participate in the process. Periodic update meetings are arranged to share information regarding existing programs and projects and understand the diverse needs within the organization.

Actual or expected results:

The unit aims to enhance clinical digital asset management, plan a digital strategy, bridge clinical referent gaps, identify system needs, prioritize projects, build a digital tool database, train teams, centralize assimilation, and provide support. By bridging the clinical and technical divide, the unit can unlock the full potential of digitalization in healthcare.

Conclusions and discussion:

Establishing a nursing informatics unit is challenging, involving addressing resistance to change, identifying appropriate staff, providing training, establishing communication channels, obtaining funding, integrating activities with strategic plans, and staying updated on technological advancements. Change promoters should involve various managerial levels, considering their interests and sensitivities. Despite challenges, the nursing informatics unit's establishment is essential for effective digitalization projects, particularly clinical informatics in healthcare organizations.

11 Digital Education: The opportunity in the education for specialist nurses

VV Vejzović [1,] BAC Bramhagen [1], PD Dahav [1], VD Dolinaj [2], BF Filej [3], BI Ilić [4,] GKM Kamceva Mihailova [5], JM Meža [3], DM Milutinović [2], GP Panova [5], MP Poredoš [3], ER Renmarker [1], DS Simin [2], MS Smrekar [4], BS Smrke [3], ST Tomić [2], VT Turuk [4], OV Vori [4]

[1] Malmö University Malmö Sweden
[2] University of Novi Sad, Faculty of Medicine Novi Sad Serbia
[3] Faculty of Health Sciences in Celje Celje Slovenia
[4] University of Applied Health Sciences Zagreb Croatia
[5] Goce Delchev University Štip Macedonia

Background and relevance:

Advancements in digital technology have had a significant influence in transforming modern society, economy and our everyday lives. The COVID-19 pandemic has accelerated the adoption and improvement of digital education. In order to successfuly respond to these challenges, it is neccessary to develop and expand digital outlets and modify educational methods, as well as to support teaching staff in offering new and innovative pegagogical approaches.

The intervention:

The aim of this project was to modernize the existing higher education nursing curriculum, by including modules with digital lectures and examinations.

Methods:

A SWOT analysis of different digital education methods was conducted at the Nursing Departments of five Universities, in five different European countries: Croatia, Serbia, Slovenia, Sweden and North Macedonia. This generated a selection of five digital tools where the pedagogy was adapted, tested and evaluated by both higher education professionals and students, during intensive workshops.

Actual or expected results:

The end result of this project was to provide higher education professionals with resources required to increase their knowledge level on available digital tools in the education of nursing students, and to provide them with motivation and ideas for their successful implementation.

Conclusions and discussion:

In conclusion, meeting the challenges of this evolving technological era in education requires the development and expansion of digital outlets, the modification of educational methods, and support for teaching staff in providing new and innovative pedagogical approaches. This project represents an important step towards modernizing and improving the existing higher education nursing curriculum, and ensuring that both students and higher education professionals are equipped with the required skills and knowledge required to maintain a quality, competitive and engaging education process.

12 Using data from medical journals to plan nursing care of older people at emergency departments

TT Þorsteinsdóttir [1], I Sigurþórsdóttir [2,] E Guðmundsdóttir [2], G Halldórsdóttir [2]

[1] Faculty of Nursing and Midwifery, University of Iceland Reykavík Iceland
[2] Landspítali University Hospital Reykavík Iceland

Background and relevance:

Older people at emergency departments may not receive adequate care based on their needs but come to emergency departments repeatedly. It is important to increase knowledge on the specialised nursing of this group at appropriate service levels to prevent unnecessary emergency revisits. The aim was to study the characteristics of older people visiting emergency departments to build evidence-based care.

The intervention:

Evidence-based nursing

Methods:

Retrospective study from the electronic medical records of all 67-year-olds and older who came to Landspítali University Hospital's emergency departments from 2013-2021. Data were analysed using descriptive statistics and appropriate significance tests of differences between groups.

Actual or expected results:

There were 130,138 visits by 34,339 individuals, 99.8% had fewer than 30 visits in total, one individual had 136 visits. Most visits were during morning shifts, more women than men, but the proportion of men compared to the general population was higher. The most common ICD-10 classification were symptoms diagnoses, cardiovascular causes decreased. Older age groups had more frequent visits over time, the number of visits increased in line with the population demographics. The percentage of admissions was 31-36%.

Conclusions and discussion:

Older people are a large and diverse group who seek emergency care for different reasons. Data from electronic medical records are a valuable source in reviewing nursing and planning care accordingly. It is important to empower nurses who care for older people at busy emergency departments with evidence-based knowledge for planning specialised care.

13 Geriatric Emergency Nurse intervention at Landspitali University Hospital's Emergency Department

TT Þorsteinsdóttir [1], I Sigurþórsdóttir [2,] E Guðmundsdóttir [2], G Halldórsdóttir [2]

[1] Faculty of Nursing and Midwifery, University of Iceland Reykavík Iceland
[2] Landspítali University Hospital Reykavík Iceland

Background and relevance:

The disease-oriented approach in emergency nursing may not be appropriate for acutely ill or injured older people. Their complex situation may not be addressed leading to fragmented care and revisits. In 2016, a care-model including screening 75 years and older people for care needs and referring those to be discharged to geriatric emergency (GEM) nurses was implemented at Landspítali Emergency Department (ED).

The intervention:

Evidence-based specialised care

Methods:

A retrospective medical journal review of ED visits of 67 years and older between 2013 and 2021. Patient characteristics, causes of visits, service needs, GEM nurse interventions and outcomes after visits were analysed statistically.

Actual or expected results:

There were 130,138 arrivals by 34,339 individuals. By time, higher proportions stayed over 24 hours, the longest stay was 9 days. For those to be discharged GEM nurses performed 4-5 interventions per day, or around 1500 per year since 2016. Their interventions included on-site consultations and assessments, telephone calls and interdisciplinary consultations.

Conclusions and discussion:

Researchers around the world are looking for the most appropriate and effective emergency care for older people aiming at a balance between a safe admission and a safe discharge home. Our results reveal that the decision of admission often leads to long boarding at the ED. The implementation of the GEM-nurse model may have resulted in more older people receiving adequate care at home after discharge from the ED. Continuing developing services in the future and study the effects of specialised nursing care is important for the care of acute ill or injured older people.

14 Increasing the skills of specialist nurses: a booklet on "How to read a scientific paper for nurses - types of Scientific papers

LA Apuzzo [1], EB Brioni [2], CM Magnaghi [3]

[1] Italian Agency for Regional Health Services Rome Italy
[2] Vita Salute San Raffaele University Milan Italy
[3] IRCSS San Raffaele Hospital Milan Italy

Background and relevance:

The nursing profession is continuously evolving, and nurses need to keep themselves updated to ensure safe and effective clinical care. Reading scientific publications is an important part of exchanging knowledge in the national and international scientific community. The aim of this work is to increase the knowledge of nurses and their ability to orient themselves in the vastness of the scientific literature, but also to consolidate the method of evidence based medicine, according to which we work on the basis of clinical trials present in the literature and beyond referring to direct experience in the workplace, learned over the years.

The intervention:

Systematic literature research

Methods:

To write our guide, we conducted a systematic literature review and comparison with a panel of nursing experts of research methodologies.

Actual or expected results:

A booklet has been developed to guide nurses in understanding a scientific article: "How to read a scientific article for nurses - types of scientific articles"

Conclusions and discussion:

The evolution of nursing into an evidence-based profession has made nurses more aware of the role of research in supporting their practices. More nurses are studying at the postgraduate level, creating a growing pool of clinically grounded research nurses who advance knowledge for the benefit of patients. **Conclusion:** Critical reading of a scientific article allows us to understand how the study is conducted, whether the data are complete and valid and the conclusions reflect the results, whether the study is ethical, and how the study will impact clinical practice. It is essential for specialist nurses towards 2030 and this guide represents essential support for nurses in Europe and beyond.

16 Competency and training program for ED nurses: Tactic and benefits?

A.H. Kristinsdottir

Landspitali - University Hospital of Iceland Reykjavik Iceland

Background and relevance:

Competency training is an important factor in job satisfaction and retention. The development of a formal competency program for nurses at the general Emergency Departments (ED) of Landspitali University Hospital was started in 2013. The implementation of electronic competence program or competency management system (CMS) has been in place since 2017. Definition of competency-categories were from Patricia Benners´ ideology from Novice to Expert.
The aim of the program has been to support the professional development among emergency nurses at ED with a structured of competency program. It is important to seek different routes to strengthen expertise within emergency nursing.

The intervention:

To assess if well-defined requirements of competence and focused professional development have certain benefits and what are these benefits were, if any.

Methods:

Nurses who had finished the novice and advanced beginner competency competency-program steps were asked five open open-ended questions on their experience of the program and other relevant training in an online survey program. The answers were analyzed into positive or negative feedback and future benefits. The results are used to further develop the program and related training within the Emergency Department.

Actual or expected results:

Over one hundred nurses have been registered in the competency program. They agree that the competency management system is helpful to strengthen their expertise within emergency nursing. Knowing that competency development and training is an integral part of once position matters for job satisfaction and in retention. Other training methods, such as in situ simulation, and pop-up skill stations, have shown positive influence on employers' fulfilment in their professional roles.

Conclusions and discussion:

The results reveal both negative and positive aspects of the program that can be used for its further development. Competency management programs for professional development and continuous education within specialties of nursing are important for expertise development, recruitment, and further development of the field.

17 Magnet Hospital concept to develop advanced nurse practitioner framework : A proposition

YM MAULE

University of Liege LIEGE Belgium

Background and relevance:

Belgium is currently engaged in developing a legal basis for advanced nursing practice.
There are different conceptual frameworks in the literature that have been proposed for the development of this practice.The structure of the Belgian health system does not allow the use of these concepts without local adaptation

The intervention:

As part of his doctoral thesis, the researcher set out to identify the needs of the field and match them with the existing conceptual frameworks.

Methods:

Thanks to the use of focus groups involving nursing staff who already have daily practice that can be qualified as ANP like but without the appropriate legislative framework, the researcher was able to identify a series of indicators which, according to the professionals involved in the field, are necessary to the emergence of this new nursing function.A comparison was made between these collected indicators and the indicators referenced in the conceptual frameworks currently available.

Actual or expected results:

The results of this qualitative study demonstrate that the conceptual frameworks currently available and used in other countries do not adapt optimally to the Belgian situation. The researcher therefore proposed to study the needs of the field from the angle of the conceptual framework of the Magnetic Hospital and more precisely by having a particular focus on the professional practice model described in the Magnet concept.

Conclusions and discussion:

The Professional Practice Model described in the conceptual framework of the Magnetic Hospital can be used to describe a framework for implementing advanced nursing practice taking into account the specificities from the point of view of nurses, patients, physicians and other healthcare professionals.

18 Strategies used by international nursing students to overcome barriers during the internship

ML Lommi [2], ACA Abieyuwa [3], NG Giannetta [3], SB Badolamenti [3]

[1] Fondazione Policlinico Universitario Campus Bio-Medico Rome Italy
[2] Local Health Authority Roma 2 Roma Italy
[3] UniCamillus International University Roma Italy

Background and relevance:

Due to globalization, an increase of mobility among nurses and nursing students is observed across European Nations. Literature on international students reported difficulties related to language, communication, adaptation to a foreign environment, or conflicts in social and moral values. In nursing education, those difficulties increase especially during the internship. Students in the clinical practice are expected to achieve proficiency in knowledge, and skills related to nursing education, to increase critical thinking, analysis, communication, and management skills and confidence while implementing nursing. However, the success of clinical education of international students is affected by many factors like language barriers or tutoring availability. A limited number of studies have investigated the internship barriers and strategies used by international nursing students.

The intervention:

To explore how international nursing students lived the internship experience and what strategies they used to overcome barriers.

Methods:

We are conducting a phenomenological study which is ongoing. The content analysis is performed to identify categories and themes

Actual or expected results:

Preliminary findings are presented here. Three focus groups were conducted so far involving 15 international students of the last year of the Nursing Bachelor Degree on one university in Italy. Themes identified were: language barrier, being put aside, proactivity behaviors and motivation to continue.

Conclusions and discussion:

International students describe that the internship environments are not friendly and hinder their learning process and skill development. To overcome barriers and to be confident in their nursing skills students need to be highly motivated to go to internship and to be proactive in clinical settings to learn and achieve proficiency in nursing. Educators, nurse managers and nurses should consider these findings to create better internship environments for international nursing students.

19 How working context affects nurses physically, mentally and emotionally: three Italian hospitals compared

DT Tartaglini [2], RG Gualandi [1], ML Lommi [3]

[1] Fondazione Policlinico Universitario Campus Bio-Medico Rome Italy
[2] Fondazione Policlinico Universitario Campus Bio-Medico Roma Italy
[3] Local Health Authority ROMA 2 Roma Italy

Background and relevance:

Nursing workload is increasing in the last years. International literature described that workload can be perceived non only physically but mentally and emotionally as well. Only a few studies have monitored work context variables in relation to physical, emotional and mental workload on nurses.

The intervention:

This study aimed to describe how work contexts can influence physical, mental and emotional workload on nurses.

Methods:

A prospective descriptive study was conducted. Nurses working in medical and surgical units of three hospitals in Italy answered an online survey. To measure physical, mental and emotional workload we used the QEEW 2.0 © SKB questionnaire. ANOVA and correlational analysis were performed.

Actual or expected results:

We received 233 completed questionnaires. Overall, mental and emotional workload was reported higher than physical workload. Moreover different work context variables related to nurse, patient and workflow were correlated with physical, mental and emotional workloads. Statistically significant similarities and differences were observed among hospitals.

Conclusions and discussion:

Our results indicate that nurses perceive workload on physical, mental and emotional dimensions and differences exist among settings on variables correlated with each dimension. Nursing workload is an old concept and an actual concern. Exploring context aspects that generate turbulence in nursing work and workload is essential and this can help managers to improve work environments, sustain nurse well-being and prevent nurses' disenchantment and intention to leave organization or profession. Interventions should address not only staffing resources adjusted to patients' complexity of care but workflow aspects as well. These interventions should be tailored to the settings and should be multidimensional.

20 Appraisal and Evaluation of the Learning Environment Instruments of the Student Nurse: A Systematic Review Using COSMIN Methodology

M.L. Lommi

Università di Roma Tor Vergata Roma Italy

Background and relevance:

Nursing education consists of theory and practice, and student nurses' perception of the learning environment, both educational and clinical, is one of the elements that determines the success or failure of their university study path.

The intervention:

This study aimed to identify the currently available tools for measuring the clinical and educational learning environments of student nurses and to evaluate their measurement properties in order to provide solid evidence for researchers, educators, and clinical tutors to use in the selection of tools.

Methods:

We conducted a systematic review to evaluate the psychometric properties of self-reported learning environment tools in accordance with the Consensus-based Standards for the Selection of Health Measurement Instruments (COSMIN) Guidelines of 2018. The research was conducted on the following databases: PubMed, CINAHL, APA PsycInfo, and ERIC

Actual or expected results:

In the literature, 14 instruments were found that evaluate both the traditional and simulated clinical learning environments and the educational learning environments of student nurses. These tools can be ideally divided into first-generation tools developed from different learning theories and second-generation tools developed by mixing, reviewing, and integrating different already-validated tools.

Conclusions and discussion:

Not all the relevant psychometric properties of the instruments were evaluated, and the methodological approaches used were often doubtful or inadequate, thus threatening the instruments' external validity. Further research is needed to complete the validation processes undertaken for both new and already developed instruments, using higher-quality methods and evaluating all psychometric properties.

21 Linguistic and cultural validation of the Ambulance Nurse competence scale (ANCS) in the Italian context

IN Notarnicola [1,] BD Duka [2], GR Rocco [3], AS Stievano [3]

[1] Research Centre of Excellence for Nursing Scholarship ROME Italy
[2] University of Rome "Tor Vergata" Rome Italy
[3] Research Centre of Excellence for Nursing Scholarship Rome Italy

Background and relevance:

Pre-hospital care in the literature is described as early and high-quality first aid provided to sick or injured patients, also based on the alarm call and action taken on site or during ambulance transport to a hospital. In recent decades, pre-hospital care in Italy has undergone important changes, particularly with regard to the nursing competence of pre-hospital care.

The intervention:

In recent decades, there has been a gradual transformation of pre-hospital care from being predominantly a transport service to becoming an advanced emergency medical assistance service. Much of this change has been the requirement of ambulance personnel to improve their education in both nursing and medical sciences.
There were also many factors that influenced the skill set required within the ambulance service.

Methods:

The aim of this study is to validate a new tool for measuring the self-declared professional competence of nurses working in pre-hospital care.

Actual or expected results:

It is important to define competence requirements, to define the role and professional activities of specialized nurses in pre-hospital care.

Conclusions and discussion:

Today, pre-hospital care is considered a significant part of a patient's total care experience and therefore it is essential to consider that pre-hospital health care workers have the same level of competence as staff working in hospitals; this is to ensure the provision of safe and high quality nursing care in ambulances for patients and relatives.

22 The competencies required of ambulance nurses in Italy: a Delphi study
Ippolito Notarnicola, Italy

IN Notarnicola [1], BD Duka [2], GR Rocco [3], AS Stievano [3]

[1] Research Centre of Excellence for Nursing Scholarship ROME Italy
[2] University of Rome "Tor Vergata" Rome Italy
[3] Research Centre of Excellence for Nursing Scholarship Rome Italy

Background and relevance:

Ambulance nursing is a new area of nursing. where it is growing and also defining a new field of specialist nursing. In Italy there is still no point of view on the desired competence for the ambulance nurse, there is a lack of valid and effective guidelines. For all this it is important to hear some experts in the extraterritorial emergency sector, trying to describe what skills an ambulance nurse should possess.

The intervention:

the objective of this study will be to define the basic skills of the ambulance in Italy, according to some experts.

Methods:

Through a e-Delphi study we will try to identify the basic skills of the ambulance nurse.

Actual or expected results:

Try to outline the skills of the ambulance nurse, to define the responsibilities of the pre-hospital care nurse and thus improve the quality of nursing care provided.

Conclusions and discussion:

This study can outline what contents the training programs must have within a university course of an advanced level specialized nurse.

23 Cognitive survey on nursing skills on evidence-based practice: An observational study

IN Notarnicola [1,] BD Duka [2], DI Ivziku [3], GR Rocco [4], AS Stievano [4]

[1] Research Centre of Excellence for Nursing Scholarship ROME Italy
[2] University of Rome "Tor Vergata" Rome Italy
[3] Fondazione Policlinico Universitario Campus Bio-Medico Rome Italy
[4] Research Centre of Excellence for Nursing Scholarship Rome Italy

Background and relevance:

Evidence Based Nursing (EBN) is the process by which nurses make decisions using the best research results, integrated with the clinical experience gained and patient preferences. In addition to ensuring quality care, it allows a continuous self-learning process of the nurse who is stimulated to search for clinically relevant information.

The intervention:

The study aims to investigate whether nurses use the Evidence-Based Practice (EBP) approach for decision-making in clinical care practice and their relationship with nursing research.

Methods:

Longitudinal observational study was conducted from October 2022 to January 2023. Involved 317 nurses, 65.3% females and 34.7% males, using a questionnaire that investigates 21 areas of knowledge.

Actual or expected results:

The sample analyzed recognized EBP as a fundamental element for clinical practice, with some distinctions with respect to the care setting. From the data collected it emerged that in the last 8 working weeks: 22.4% of the sample uses EBP to change clinical practice.

Conclusions and discussion:

The results lay the foundations for further insights and reflections that could be useful to colleagues involved in projects implementing specialized skills, as they highlight which are the most perceived obstacles. All effective strategies to implement the use of EBP require an evidence-based multidimensional approach to provide professionals with the best evidence for clinically effective practice and support them in understanding and using these tests in order to minimize the risks related to lack of specific training so as to ensure patient safety.

24 How many nursing students graduate within the expected duration?

MR Mazzotta [1], DMD De Maria [2], BG Bulfone [4], SF Scerbo [1], SA Stievano [3], AR Alvaro [1]

[1] University of Rome Tor Vergata Rome Italy
[2] University of Rome Tor Vergata Roma Italy
[3] University of Messina Messina Italy
[4] University of Catania Catania Italy

Background and relevance:

Academic failure can negatively impact on the student, the university, and the nursing workforce in the short term. The aim of this study is to analyze the characteristics and predictors of academic success in two cohorts of students of Nursing Degree Programs.

The intervention:

This longitudinal study enrolled students who attended the 21 Nursing Degree Programs at several Sanitary Institutions of a university in central Italy.

Methods:

Two cohorts of students were enrolled, and data were collected at baseline (T0), at the end of the first year (T1), at the end of the second year (T2), and at the end of the third year (T3) of the course. The outcome variable was academic success,defined as graduation on time. A logistic regression was performed to identify predictors of academic success.

Actual or expected results:

30.6% of students graduated on time and so achieved academic success, and 38.4% graduated after more than three years. Pre-admission test grade (OR: 10.0, 95% CI: 10.020-10.054) and internship exam grade in the second and third years (OR: 10.0 95% CI: 10.027-10.139; OR: 10.2 95% CI: 10.171-10.294) predicted academic success.

Conclusions and discussion:

Only one-third of the students in the Nursing Degree Program in nursing achieved academic success, while the internship exam grade of the second and third years predicted academic success. The clinical internship should be improved, and the quality of internship wards, as learning environments, should be monitored.

25 Professional Identity of Family and Community Health Nurses

GG Gasperini [1], SA Stievano [4], MA Massimi [2], DMM De Maria [1], RE Renzi [2], CA Cianciulli [3], MR Mazzotta [5], VP Villari [2]

[1] University of Rome Tor Vergata Rome Italy
[2] Sapienza University of Rome Rome Italy
[3] Sapienza University of Rome Rome Italy
[4] University of Messina Rome Italy
[5] University of Rome Tor Vergata Rome Italy

Background and relevance:

Family and Community Health Nurses (FCHNs) are likely to experience emotional exhaustion and low personal accomplishment feelings. A variable to be able influences these experiences is professional identity. FCHNs would benefit from nurses' evaluation of professional identity. This study aimed to evaluate the psychometric properties (validity and reliability) of the Nurses Professional Values Scale—Revised (NPVS-R) on FCHNs**.**

The intervention:

A cross-sectional validation study was conducted in a convenience sample of 202 FCHNs enrolled in out-of-hospital settings from Italy.

Methods:

The factor structure of the NPVS-R was tested through confirmatory factor analysis. The reliability was evaluated through Cronbach's alpha and composite reliability coefficients. Pearson's correlations were tested for concurrent validity purposes.

Actual or expected results:

The sample mean age was 41.11 (±10.55) years, and 78.2 % were male. The Confirmatory factor analysis supported the one-factor structure of the NPVS-R and yielded acceptable fit indexes. Reliability, in terms of internal consistency, was satisfactory. The concurrent validity of NPVS-R with the Job Satisfaction scale was supported

Conclusions and discussion:

The NPVS-R is an instrument able to assess the level of Professional identity in FCHNs with adequate validity and reliability. The NPVS-R can be used in clinical practice, research, and educational settings. Because professional identity is a modifiable variable, the NPVS-R can be used in clinical practice, research, and education settings to improve the care quality provided by FCHNs.

26 Simulated in-service training experiences for the branch in nursing: the case of Turkey

SKA Koç Aslan [2,] GB Bozkır [1], AGT Gençoğlu Toprak [2]

[1] Acıbadem Mehmet Ali Aydınlar University Istanbul Turkey
[2] Acıbadem sağlık grubu Istanbul Turkey

Background and relevance:

Competence in nursing refers to the ability of nurses to apply their knowledge, skills, and experience to provide safe, effective, and compassionate care to their patients.
Competence in nursing also involves ongoing professional development and learning. Nurses are expected to continuously develop their knowledge and skills to keep up with the latest advancements in
healthcare and to provide the best possible care to their patients.
Specialty nursing simulated in-service training experiences are one of the valuable tools for improving nurses' knowledge and skills in a particular field of practice.

The intervention:

Acıbadem Healthcare Group started work for health care in 1999 and today it continues its activities in 18 hospitals in Turkey with a total of 4181 nurses. Nursing orientation training has been given to all nurses since 2001, and branch-specific training were given theoretically to strengthen the competencies of nurses working in the specific fields.

Methods:

The universe of the retrospective descriptive study consisted of the trainings for four branches and the evaluations of the participants.

Actual or expected results:

137 operating rooms in 18 hospitals

There are 4 competency levels in operating room nurses
170 people (36%) at Level 1 competency
101 people (23%) at Level 2 competency
62 people (15%) at Level 3 competency
103 people (27%) at Level 4

Conclusions and discussion:

Emergency Nursing Simulation Training:Number of attendants: 156, Pretest points average :69, Post
test points average: 87, Satisfaction from education: 98,8
Intensive Care Nursing Education: Number of attendants: 148, Pretest points average :65,Post
test points average: 80,Satisfaction from education: 98,1
Newborn Intensive Care Nursing Education: Number of attendants: 144, Pretest points average : 70, Post
test points average: 82,Satisfaction from education: 97,8
Operating Room Simulation Training: Number of attendants: 277, Pretest points average :71, Post
test points average: 88,Satisfaction from education: 97

Detail result will be given at presentation.

28 The Caregiver Contribution to Self-Care of Chronic Illness Inventory: Evaluation of psychometric proprieties in Albanian

SA Aderaj [1], AA Arapi [1], EP Prendi [2], IE Erba [1], EV Vellone [1], RM Mazzotta [1], AS Stievano [3], GR Rocco [4], MDM De Maria [1]

[1] University of Rome "Tor Vergata" Rome Italy
[2] Our Lady of Good Counsel University Tirana Albania
[3] "University of Messina" Messina Italy
[4] Our Lady of Good Counsel University Albania Tirana Albania

Background and relevance:

The caregiver contribution to Self-care of of Chronic Illnes Inventory is used to measure the caregiver contribution to patient self-care, but an Albanian version does not available

The intervention:

Evaluation of the psychometric propreties (as factorial structures, internal consistency reliability and concurrent validity) of Albanian version of Caregiver Contribution to Self-Care of Chronic Illnes Inventory

Methods:

Cross sectional study. Between August 20-April 2021 a sample with 250 patients with chronic illnesses and their caregivers was enrolled from outpatients clinics, and at home in Albania. Patients completed the Self Care of Chronic Illness Inventory while caregivers completed the Caregiver Contribution to Self Care of Chronic Illness Inventory. It is a modification of the Self-Care of Chronic Illness Inventory, which includes three scales as follows: the Caregiver Contribution to Self-Care Maintenance, the Caregiver Contribution to Self-Care Monitoring and the Caregiver Contribution to Self-Care Management. Of each scale, we tested the factorial structure with confirmatory factor analysis and reliability with the composite reliability coefficient and the global reliability index for multidimensional scale. Also, we used Pearson's correlations for concurrent validity purposes.

Actual or expected results:

Confirmatory factor analysis confirmed the two-factor structure of the Caregiver Contribution to Self-Care Maintenance (with Health promoting behaviors and Illness-related behaviors factors) and Management (Autonomous behaviors and Consulting behaviors factors) scales and the one-factor structure of the Caregiver Contribution to Self-Care Monitoring scale found in Italian sample. Reliability estimates ranged between 0.827 and 0.961 across the three scales. Concurrent validity of Caregiver Contribution to Self-Care of Chronic Illness Inventory with the Self-Care of Chronic Illness Inventory was supported.

Conclusions and discussion:

The Albanian Caregiver Contribution to Self-Care Of Chronic Illness Inventory (AL CC_SC CCII) features sound psychometric properties. It is a valid and reliable instrument for assessing C to patient self-care behaviors in the Albanian population as a representative of Low and Middle Income Country.