The Israeli Association of Cardiac and Critical Care Nurses (http://www.iccil.com)

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Who are we?

The Cardiac Nursing Society (founded in 1986) and the Nursing Intensive Care Society (founded in 1995) merged at the end of the ‘90’s and named ”The Israeli Association of Cardiac and Intensive Care Nursing”.

The baselines for the association’s activities follow ethical rules

- Voluntary - All members of the association are volunteers.
- A-political - The association deals with professional issues related to cardiac nursing and intensive care.
- Independence - Independent of every cause, only aided by volunteer activists.
- Democracy - the members of the association elect the activists by a vote.

The structure of the association

Association’s Chairman: Ofra Ra’anan

Association’s treasurer: Edna Cohen

About 14 years ago, (2006) a small group of nurses decided to meet monthly to conduct joint research. That is how our EBN (Evidence Based Nursing) group started.

EBN Today

- Consists of 25-30 active participants - all volunteers (out of about 800 members)
- EBN Members: educators, dean of a nursing school, head nurses, bedside nurses and researchers including representatives from hospitals throughout the country
- Common interest of improving our nursing care, discuss common problems, crises, and frustrations regarding our daily bedside work
- Representative – MOH (Ministry of Health) National Council for the Prevention of Cardiovascular Diseases
- The Board welcomes new members and promotes new ideas that they bring with them.
The association's activities

- The Committee convenes once every 4-6 weeks to discuss and update its activities.
- EBN is the research group that deals with and investigates issues in intensive care and cardiac nursing that are common to the various units and departments in the various Israeli medical centers.
- Promote nursing research - a decision on which research will take place will be voted on by the association's board.

The association's committee

- Is responsible for organizing national conferences.
- Organizes international conferences on critical care nursing.
- Participates in other international cardiac and intensive care nursing conferences.
- Is responsible for unique courses related to intensive care nursing.
- Initiates studies on professional issues in Israel and is an active participant in international research (co-investigators with CONFLICTICUS, FENCE, EUROPAIN and DecubICUs).

Elections for positions on the association committee

Each cardiac and intensive care department can send a representative to the association's committee. Positions such as chair of the association and various committees (newspaper committee, content, etc. organization) are elected by the committee.

Membership is renewed yearly.

Membership fees fund the association's activities.

Once a year there is an annual conference. Throughout the year, regional conferences are held in various hospitals around the country.

Cardiac and Intensive Care Nursing Association Goals

- Promote cardiac and intensive care nursing in Israel
- Promote and develop professional expertise
- Continuing knowledge update
- Promote organization's representatives and participate in the regular medical/nursing settings (e.g. MOH)
- Policies regarding the nursing profession (Scientific Council)
- Develop standards for quality assurance of treatment (e.g.: oral therapy, mechanical ventilation)

We are benchmarking, developing the highest standards we can for the Israeli Intensive Care nurses.

Our first project

During the first year of the EBN meetings, we started with a systematic review to discover an evidenced based protocol for mouth care for the intubated patient. Since we found such an abundance of literature including contradictory data, we decided to investigate what was being done in our country. This led to our
first evidence-based research publication: DeKeyser Ganz, F et al. (2009) "ICU Nurses’ Oral-Care Practices and the Current Best Evidence" Journal of Nursing Scholarship, 41:2, 132–138

This was done after researching pneumonia in the intubated patient, which was published: Raanan, O et al (2008). Ventilator associated pneumonia in the intubated patient. The Nurse in Israel, 178, 45.

This was important, but what about follow up of guidelines to implement a nation-wide intervention? The aim of this continuing project was to close the gap between best-published evidence and bedside practice. This intervention caused many more nurses to adapt their oral care practices. This effort was published: Ganz, F.D. et al. (2013) "Translation of Oral Care Practice Guidelines into Clinical Practice by Intensive Care Unit Nurses". Journal of Nursing Scholarship, 00:0, 1–8

What else?

We argue the risk benefit of moving our patients out of bed. Where is the evidence?

What is the most current best evidence for nutritional care in intensive care?

What should we do about open or closed visiting hours?

What about Rehabilitation in the ICU / Fluid Bolus in Intensive Care / Gender and MI

Characteristics of patients receiving vaso-active drugs – can nurses intervene, decide and make policies?

Clinical Practice Guidelines for the Management of Pain, Agitation, and Delirium in adult ICU

We compare the difference in our hospital settings and try to help each other find solutions - using systematic reviews, best expert opinion and inviting speakers to help us clear the uncertainties

Another topic that came up for discussion was - does bullying among peers exist in intensive care units?

Do we suffer from bullying in our workplace? This is a very difficult subject to raise.

Nurses from many adult intensive care and cardiology units participated in this study.


Position papers

Protocol for Mechanical Ventilation weaning.

We translated and published in our local journal EfCCNa's* position paper on best weaning practices - nurses note early identification when the patient is ready to be weaned. This publication has led to changes in some ICUs and updated their current practices. It was also published in our national nursing journal: "Weaning from mechanical ventilation. A position paper of the Cardiac Care and Intensive Care Association in Israel”. The Israeli Nursing Journal, January 2013.

* EfCCNa- European federation of Critical Care Nursing associations.

One of our recent projects was to investigate what nurses know about their role in early identification of the septic patient - once we analyze the results we will plan another nationwide intervention to close the gap between what we should be doing according to the evidence and what we are truly doing. Our results were published in our national nursing journal: “The vital role of nursing in the identification, diagnosis and treatment of severe sepsis and septic shock” The Israeli Nursing Journal, 2016

We have started working on a new project. Families of intensive care patients are in crisis. According to the literature, families report the presence of symptoms of PTSD, loneliness, poverty and a feeling that their lives
are falling apart. The literature has found a number of nursing activities that reduce and alleviate the difficult experiences of the families and also meet their needs. One of the ways that has been found to reduce loneliness and lack of support is nursing training and conversations conducted by the unit’s nurses with the family during visiting hours in the intensive care unit. No related literature was found on the Israeli population. Therefore, we decided to start a national study to examine the relationship between nursing training and family members in the ICU and family needs.

**Educational Programmes**

1. **PALLIATIVE ICU CARE COURSE**

   Through one of our multi-center, multi country research projects*, we found that nurses feel that they lack skills when caring for the ICU patient at the end of life. We investigated what their opinions and perceptions regarding the exact skills that they need and accordingly created an end of life Palliative ICU Care course for critical care teams. This curriculum has been recognized and accepted as a post educational program by the MOH, giving nurses credit hours. So far, we have done three courses, in 2014, 2015 and 2018.


2. **ADVANCED INTENSIVE CARE COURSE**

   Nurses in intensive care and cardiac units have to undergo/take/study an intensive care course (today the program lasts a year and is meant only for registered nurses with a bachelor’s degree). After finishing this course, there is only academic continuing education (MA, PhD) but nothing specific for intensive care / cardiac nurses. The accelerated development of nursing, medicine and medical technology poses a challenge to nurses who studied an integrated ICU course many years ago and who must catch up with extensive theoretical knowledge. Therefore, our association built/ constructed a new educational programme of Advanced Intensive Care Course, which is continuing education for nurses with an intensive care course. This curriculum has been recognized and accepted as a post educational program by the MOH, giving nurses credit hours. So far, we have done three courses (2017, 2018 and 2019) and the fourth one is on its way sometime in 2020.

**National congresses**

The founding conference was held in 1987. Ever since then, we have one to two national congresses yearly. Each time a different hospital hosts it.

**International congresses**

Every two years our association organizes an International Conference on Critical Care Nursing which cooperates with the Physician International Conference on Acute Cardiac Care. We have two full days of critical care nursing sessions, with speakers from both Israel and abroad (Barbara McLean, USA, Tiny Jaarsma, Sweden, M. Georgiou, Cyprus and more).

Our next congress is 11th International Conference on Acute Cardiac Care, Critical Care Nursing, Tel Aviv, Israel. June 28-30, 2020. All abstracts are welcome. Abstracts to be submitted before 1st February 2020 to ofra.raana@sheba.gov.il. More information can be received at www.acute-cardiac-care.com

**Participation in International congresses**

- EfCCNa congress (European federation of Critical Care Nursing associations) 2011, 2013, 2015, 2017, 2019
- MICE-ICU symposium (multicultural nursing care on ICU), 2018
- World congress on Medical Law and Bioethics, 2018
Collaboration with other nursing associations

EfCCNa - The European federation of Critical Care Nursing associations is a formal network of critical care nursing associations in Europe. EfCCNa provides a unique opportunity for European critical care nurses working as equal partners on the advancement of European critical care practice, education, management and research. [https://www.efccna.org/](https://www.efccna.org/)

The last EfCCNa congress was in February 2019 in Ljubljana, Slovenia. Next congress, due to be held in 2021, is yet to be published. All abstracts are welcome. [https://www.efccna.org/congress](https://www.efccna.org/congress)

ACNAP - Association of Cardiovascular Nursing & Allied Professions. Recently we have joined the ACNAP’s national societies committee. ACNAP provides a unique opportunity for European cardiac nurses and allied health professionals to deliver the best care to patients with cardiovascular disease and their families, developing a programme of education, research and mentorship. Membership is free. First sign up to the ESC (European society of Cardiology) and then to the ACNAP. [https://www.escardio.org/Sub-specialty-communities/Association-of-Cardiovascular-Nursing-&-Allied-Professions/About](https://www.escardio.org/Sub-specialty-communities/Association-of-Cardiovascular-Nursing-&-Allied-Professions/About)

EuroHeartCare Congress is organized by the ACNAP. The next congress coming up is in Seville, Spain, 4-6, June 2020. All abstracts are welcome. Abstract submission deadline 4th February 2020. [https://www.escardio.org/Congresses-&-Events/EuroHeartCare](https://www.escardio.org/Congresses-&-Events/EuroHeartCare)