

PNAE MEETING 5 th JUNE 2015

CHILDREN

Manifesto for the Rights and the Health of Child
and Adolescent in Italy

"Newborns, children and adolescents have the right to be cared and treated both in hospitals and in their local districts by physicians, nurses, healthcare providers and volunteers with a specific education. There must be specific child-friendly settings."

UN - WHO - UNICEF
they promote and
protect Children's Rights

"Children must be protected from risk and suffering situations as child abuse, drugs, alcohol and smoke addictions, from bad behaviours often caused by disadvantaged family conditions such as poverty which affected almost 2 millions children in our country"

WHO
SIN

VIVERE ONLUS
ITALIAN PARENTS' ASSOCIATION

PRETERMS in Italy

**Preterms' Rights Charter- Manifesto
of Preterms' Rights**

**"Right to have the best health care in
a clinical and human level"**

PAEDIATRIC HEALTH ISSUES

IN EUROPE

REQUESTS

INCREASING number of not contagious and chronic diseases like congenital illnesses and mental disorders

DECREASE of contagious and respiratory illnesses

INCREASE IN THE BIRTH RATE due to migrations

15-57 % not emergency situations that came in E.R.

* Lancet 2013 data took from Giornale Italiano IdB

OFFER

Not sufficient services and policies for children especially if they are in economic and social disadvantages

Attempts to move chronic patients care from hospitals to local structures (Holland, Sweden) increasing the number of district nurses

PAEDIATRIC HEALTH ISSUES IN ITALY

REQUESTS

0-14 years old = 13,8% of the total amount of population
Adolescents (15-18) +4%

Decrease in the birth rate 9/1000 per inhabitants
Increase of non-EU migrants childbirth

Obesity, Disabilities, Prematurity, Rare and chronic illnesses

OFFER

Worst country in Europe for politics in favour of children
(Unicef 2013)
But good health results

Healthcare services are good but they are unequally allocated on the national territory

A massive component of district paediatrics

Few local district services

NEONATOLOGY HEALTH NEEDS

IN ITALY

DECREASE IN THE BIRTH RATE

INCREASE OF CAESAREAN SECTIONS
(physicians' decision, woman's request)

INCREASE OF NON-EU MIGRANTS CHILDBIRTH

INCREASE OF TWIN DELIVERY

7% PRETERMS PREGNANCY

40.000 PRETERMS IN ONE YEAR

PAEDIATRIC HEALTHCARE PLACES

PAEDIATRIC DISTRICTS : District areas without specialized health professionals –slowly decrease of the number of paediatricians – very few or total absence of paediatric nurses

HOSPITALS : decrease of paediatric units and birth places
30% of children are treated in adults Units. There are few paediatric hospitals. Mostly not paediatric specialized nursing staff.

LIBERAL PROFESSION : few experience. Management of one cancer or chronic patient.
Only one paediatric association in Piemonte

NEONATAL HEALTHCARE PLACES

IN ITALY

I and II LEVELS BIRTH PLACES

A STUDY CONDUCTED BY **MINISTRY OF HEALTH** HAS SHOWN THAT THE DELIVERY IS STILL AN INSECURE AND DANGEROUS EVENT.
THE RISKS MUST BE REMOVED!

CAUSES:

REGIONAL INEQUALITY

ABSENCE OF MATERNAL AND/OR CHILD TRANSPORT SERVICES

PRIVATE CARE

ABSENCE OF A CONTINUUM OF CARE FROM HOSPITAL TO HOME

IMPORTANT SOCIAL DIFFERENCES BETWEEN NORTHERN AND SOUTHERN
REGIONS

ABSENCE OF A CONTINUUM OF CARE FOR DELIVERY HEALTH CARE AND CHILD
CARE

NEONATAL HEALTH RESULTS

IN ITALY

REDUCTION IN THE RATE OF NEONATAL MORTALITY
(index of GLOBAL maternal health improvement, good prenatal and birth care)

REDUCTION OF BIRTH OF VERY LOW WEIGHT BABIES

IMPORTANT SOCIAL DIFFERENCES BETWEEN NORTHERN AND
SOUTHERN REGIONS

Some hospitals and health centers are excellent, others are badly managed.

SOME ACTS ABOUT DELIVERY AND CHILDBIRTH SAFETY

AGREEMENT between Gouvernement and Regions 16.12.2010

« Guidelines for the promotion and the improvement of health quality, for the appropriateness of health treatments during pregnancy and childbirth and for reducing Caesarean sections.”

National Institutions are aware of the importance to BORN SAFETY

Technical Annexes define:

STANDARD OF SAFETY, CARE LEVELS,
OPERATIVE AND TECHNOLOGICAL STANDARDS FOR NEONATOLOGIES,
OBSTETRICS AND PEDIATRICS.

PROFESSIONALS for HEALTH in PAEDIATRICS

PEDIATRIC NURSES in ITALY: 12.000

1,2 / 1000 children (birth to 18 years old)

2, 1/ 1000 children (birth to 14 years old)

PEDIATRICIANS: 1,5 /1000 (birth to 18 years old)

2,6 (birth to 14 years old)

GENERAL NURSES:

6,5 /1000 adults

GENERAL PRACTITIONAR : 4,1/1000 adults

*data from OCSE

PROFESSIONAL STANDARDS

AMERICAN AND CANADIAN PROFESSIONAL STANDARDS
DEFINE THE MINIMUM NURSE-TO-PATIENT RATIO FOR
NEONATOLOGY AND PAEDIATRICS UNITS

IN ITALY, THERE ISN'T ANY CLEAR RULE ABOUT THE SAFETY
STANDARDS FOR THIS TOPIC.

THIS IS AN IMPORTANT FIELD WHICH NEEDS TO BE
DISCUSSED AND DEVELOPED

*SOME PROFESSIONAL PRECEDURES AND ACTIONS INTRODUCED BY FNC
IPASVI for neonatal and paediatric nursing care*



Guidelines of academic schedules for post-graduate courses in paediatric nursing care

Good practices books

Partecipation at PNAE

Partnership with different NICU for educational projects

XVI Conference IPASVI- paediatric nursing sessions

Education of the population about health topics

PROFESSIONAL SOURCES OF STRENGTH in neonatal and paediatric nursing care areas

SPIRIT OF UNITY BETWEEN PROFESSIONAL AND PAEDIATRIC NURSES WHICH HAS REPRESENTED A VERY IMPORTANT ELEMENT AND STRENGTH DURING THESE YEARS

TRADITIONS, SKILLS ,COMPETENCE AND ACADEMIC KNOWLEDGES OF THE PAEDIATRIC NURSES ARE A PRECIOUS ELEMENT AND METHODOLOGICAL HERITAGE. THEY MUST BE DEVELOPED FOR THE FUTURE.

FNC'S CHOICES

**A PULL WAS ADDRESSED TO *VIGILATRICI DI D'INFANZIA*
AND PAEDIATRIC NURSES ABOUT THE FUTURE OF THEIR
PROFESSION IN ITALY during the elections for the Governing
Councils**

An initiative proposed by IPASVI

**The results were published in January and
OPZION 2 OBTAINED THE MAJORITY OF VOTES**

FNC'S CHOICES

THIS IS A BRIEF SUMMARY OF THE THREE OPTIONS OF THE PULL FOR VI/IP

1. MAINTAINING THE CURRENT SITUATION:

- PROFESSIONAL NURSES
- PAEDIATRIC NURSES

2. DEVELOPMENT OF THE CURRENT SITUATION:

- INTERCONNECTIONS BETWEEN NURSES AND PAEDIATRIC NURSES for their education
- IDENTIFY A way FOR THE ACQUISITION OF A PAEDIATRIC QUALIFICATION for NURSES AND adult qualification FOR PEDIATRIC NURSES,
- KEEP THE DEGREE IN PEDIATRIC NURSING

3. CHANGING OF THE CURRENT SITUATION

NO MORE A FIRST LEVEL DEGREE IN PAEDIATRIC NURSING

- DEFINING FORMS OF PROFESSIONAL AND CONTRACTUAL PROTECTIONS FOR THE PEDIATRIC NURSES ALREADY OPERATING,
- IDENTIFYING AND FACILITATING UNIVERSITY COURSES FOR A NOT COMPULSORY ACQUISITION OF NURSING DEGREE BY PEDIATRIC NURSES.

*ADAPTATION OF LAWS
ABOUT HEALTHCARE PROFESSIONS
WHICH ARE STILL PENDING IN ITALY*

GOVERNMENT- REGIONS AGREEMENT ABOUT SKILLS AND RESPONSABILITIES OF NURSES AND PAEDIATRIC NURSES. THE FILE HAS BEEN SIGNED BY THE HEALTH MINISTER AND IS ACTUALLY UNDER REVISION BY MINISTRY OF ECONOMICS AND FINANCE.

TURNING OF THE BILL APPROVED 14 MARCH 2014 ABOUT THE ESTABLISHMENT OF A NURSING PROFESSIONAL ORDER INTO LEGISLATION.

Potential PROFESSIONAL developments

IT IS NECESSARY TO DEVELOP A DEEPER NURSING POST-DEGREE EDUCATION ABOUT PAEDIATRIC CARE, FUNDAMENTAL TO WORK IN HIGH LEVEL PAEDIATRIC CARE CENTERS AND OTHER HOSPITALS AND SETTINGS.

THE CARE MUST BE FAMILY CENTERED ESPECIALLY FOR CHILDREN AND ADOLESCENTS WITH CHRONIC CONDITIONS.

THE NURSING EDUCATION MUST IMPROVE THE DISTRICT PRIMARY CARE

Potential PROFESSIONAL developments -2

IT IS MORE AND MORE NECESSARY A SHIFT FROM AN OPERATIVE AND CLINIC CARE APPROACH TO AN EDUCATIONAL ONE WHICH TAKES CARE OF FAMILIES AND PATIENT'S EMPOWERMENT.

THIS NEW APPROACH REQUIRES MORE COMMUNICATION AND RELATION SKILLS BY THE HEALTHCARE PROVIDERS .

MORE ATTENTION MUST BE ADDRESS TO ADOLESCENTS AND TO THE PASSING FROM PAEDIATRIC TO ADULTS CARE STRUCTURES.

POTENTIALS SOLUTIONS
– POSSIBLE SCENARIOS –
SOME PROPOSALS OF A PAEDIATRIC NURSING
TECHNICAL GROUP

PURSUIT OF THE PROFESSIONAL ACTIVITY - 1

- 1) Definition of minimum professional standards to operate in contexts with differentiation between I and II level and in district areas (art. 3.5 and 22 of the Health Agreement of 07.10.2014)) in order to ensure adequate pediatric and neonatology nursing care

Development of innovative organizational solutions that protect paediatric patients and their families and let work paediatric specialized professionals. It could be launched pilot projects and studies in collaboration with Universities.

POTENTIALS SOLUTIONS
– POSSIBLE SCENARIOS –
SOME PROPOSALS OF A PAEDIATRIC NURSING
TECHNICAL GROUP

PURSUIT OF THE PROFESSIONAL ACTIVITY - 2

- 3) Development of primary and district nursing care for children .Paediatric nurses must be part of a multi-professional groups with paediatricians. In this way, the care of children with chronic diseases is better ensured, and the number of hospitalized patients can decrease.

- 4) Regional competitions for pediatric nurses in relation to the real working needs.

POTENTIALS SOLUTIONS
– POSSIBLE SCENARIOS –
SOME PROPOSALS OF A PAEDIATRIC NURSING
TECHNICAL GROUP

PROFESSIONAL PROFILE AND NURSING ORDER

1) It's important to maintain two distinct professional profiles (GN, PN)

Paediatric nurses are numerous and they have an important function due to their specific skills and knowledge of the growing children. They make possible a confrontation with other health providers.

2) Bill of the Health Minister Mrs Lorenzin which deals with the establishment of a nursing order. It must be necessary a particular formula to whom who have two nursing profiles (nursing and paed. Nursing)

3) Family have the right to know if their child health provider has a paediatric education and abilitation (PNAE concept).

POTENTIALS SOLUTIONS
– POSSIBLE SCENARIOS –
SOME PROPOSALS OF A PAEDIATRIC NURSING
TECHNICAL GROUP

EDUCATION

- 1) Maintenance of the two different 1- level degrees (nursing and paediatric nursing).
- 2) Post-degree courses with some elements in common and other different (i.e. apprenticeships).
- 3) Research, education and organization post- degree courses must have common elements

Next PROFESSIONAL appointmeint

LOOK TO THE FUTURE

I THINK THAT A VERY STRONG ATTENTION OF THE SOCIETY TOWARDS NEONATOLOGY, PAEDIATRIC AND TOWARDS CHILD HEALTH (AN INVESTMENT FOR THE FUTURE) SHOULD CONTINUE AND BE SUPPORTED.

SOME TOPICS ARE GETTING MORE AND MORE IMPORTANT LIKE SAFETY, QUALITATIVE STANDARDS, AND NURSING CARE OUTCOMES

WE MUST ALL TOGETHER CONTINUE TO DEVELOP INNOVATIVE SOLUTIONS FOR HEALTH CARE AND ORGANISATION ALSO HAVING A LOOK TO THE REST OF EUROPE IN ORDER TO BUILD A SHARED DEVELOPMENT PROJECT