

**15<sup>th</sup> Meeting**  
**Paediatric Nursing Associations of Europe**

**Notes 5<sup>th</sup> March 2010, Hotel & Palais Strudlhof, Vienna, Austria**

Attendees

Martha Böhm, Paediatric Nurses Association, Austria [MB] [Host]  
Ulrike Vujasin, Vice President, Paediatric Nurses Association, Austria [UV]  
Dragica Bestak, President Croatia Nurses Association of Paediatric Nursing Society [DB]  
Ivana Horvat, Croatia Nurses Association of Paediatric Nursing Society [IH]  
Majda Oštir, Pediatric Nurses Association of Slovenia [MO]  
Ingrid Hankes Drielsma, Dutch Association of Paediatric Nurses, Netherlands [IHD]  
Corry van den Hoed-Heerschop, Dutch Association of Paediatric Nurses, Netherlands [CvH]  
Anne-Marie Bangels, President Paediatric Nurses Association, Belgium [AMB]  
Dijana Otasevic, President, Pediatric Section of Serbian Sisters Association [OD]  
Branca Bajic, Udruzenje Sestara Srbije Pediatatpijska Sekcija [BB]  
Birget Patzmann-Sietas, Vice President, Germany [BPS]  
Maria Arminda Costas, President FINE [MAC]  
Konstantinos Petsios, President Pediatric Nurses Sector of Hellenic Nurses Association [KP]  
Immacolata Dall'Oglio on behalf of Italian Nurses Association [ID]  
Orsola Gawronski, on behalf of Italian Nurses Association [OG] ([orsola.gawronski@opbg.net](mailto:orsola.gawronski@opbg.net))  
Fiona Smith, Royal College of Nursing, United Kingdom [FS]

Apologies

Britt Marie Ygge, Swedish Pediatric Nurses Association, [BMY]  
Siw Fossan, Norwegian Paediatric Nurses Association [SW]  
Heidi Killenberg, Norwegian Paediatric Nurses Association [HK]  
Simona Calza'll on behalf of Italian Nurses Association [SC]

1. Welcome/introductions

MB welcomed attendees to Vienna and highlighted a number of facts about Austria and Vienna [see attached]

2. Berufsverband Kinderkrankenpflege Österreich

The Paediatric Nursing Association of Austria (Berufsverband Kinderkrankenpflege Österreich) was founded in 1997. The Association is independent from the Austrian Nurses Association but works jointly. The Association organises conferences, works nationally and internationally to improve care for children and young people [see attached].

3. Update of Paediatric Nursing in Austria

General information about nursing in Austria – up until 1997 nurses were assistants to doctors. 1997 provided a field of responsibility for nurses. Have to have 10 year of school prior to entering nurse education. Entrants must be at least 17 prior to entering nurse education. Nurses are educated in colleges of higher education. Some are linked with universities. Possibility of studying nursing at Masters level at university. For paediatric nurses there are two ways – 3 year programme (2,000 plus 2,048 practice) and 2<sup>nd</sup> way is 3 years general nursing and then 1 year paediatric nursing (600 theory and 1,000 hours practical). There are lots of applicants but not enough places. In Austria there is no register for nurses at the current time but estimate around 3,000 hours. Nursing schools are located in the hospitals. The Government is

not willing to drive quality of education. It is the hospitals that are pushing for improvements. Some specification in relation to nurse education required to practice such as intensive care and anaesthesia.

#### 4. Matters arising from notes of meeting November 2009

##### 4.1 *Written update for websites*

Changes made to website as requested

[\[http://www.rcn.org.uk/development/communities/specialisms/children\\_and\\_young\\_people/forums/other\\_forums\\_and\\_groups/paediatric\\_nursing\\_associations\\_of\\_europe\]](http://www.rcn.org.uk/development/communities/specialisms/children_and_young_people/forums/other_forums_and_groups/paediatric_nursing_associations_of_europe)

##### **Action:**

- Members of PNAE asked to look at website and to forward electronically to FS any updates/additional information to be posted on the website – **All**

##### 4.2 *Links with ESPNIC & Competency Framework development*

Fiona Lynch [FL] reported work is in progress. It is hoped that work will be completed later in the year and an addendum will be made to the PNAE framework for nurses working in paediatric and neonatal intensive care.

##### **Action:**

- Seek update from FL prior to next PNAE meeting – **FS**

##### 4.3 Feedback from ESNO

ICN document 'Competencies of Nurse Specialist' circulated to attendees at the November 2009 PNAE meeting.

FS raised issues from PNAE members at ESNO meeting. There was support to draft and send a letter to DG Education, DG Internal Market and EFN General Secretary. Letter drafted.

##### **Action**

- Send copy of draft letter to PNAE representatives to gain agreement to send from PNAE – **All**

#### 5. Paediatric quality indicators and satisfaction tools

Position statement finalised, placed on PNAE website and circulated to representatives. Attendees reported this had been translated and placed on websites. In addition many reported that this information had been included in nursing conferences in individual countries.

#### 6. Patient Safety Medication error

KP provided an outline of feedback from the survey results. Additional information provided by Italy since November 2009 [see attached presentation]. Draft1 position statement presented.

##### **Action:**

- PNAE representatives to review draft position statement and to identify key areas – **All**
- PNAE representatives to identify specific medication issues which need to be raised with pharmaceutical industry - **All**

7. ESPNIC/PNAE conference October 2010 Copenhagen  
PNAE stream scheduled for 23<sup>rd</sup> October 2010. Day delegate rate for PNAE is 100 Euros. The conference website is [www.espnic.de/](http://www.espnic.de/). Discussion held about potential contacts in Copenhagen to arrange a PNAE meeting on 22<sup>nd</sup> October 2010.

**Action:**

- Identify contacts in Denmark to arrange a PNAE meeting on 22<sup>nd</sup> October 2010 – **All**
- Call for papers and abstract flier to be resent – **FS**

8. PNAE meetings update  
KP provided visual highlights from PNAE meetings

**Action:**

- Presentation to be circulated - **FS**

9. Support roles

*Netherlands*

Ward assistants – make the beds, stock checking

*Belgium*

Logistic – distribution of the food

Play worker

Student nurses

*Italy*

Nurse assistants – currently being defined, give meals, make beds, store, wash and care for equipment

*Slovenia*

Nurse assistants – limited competencies

Housekeepers

Assistants who have no direct patient contact, cleaning incubators and equipment and porter/transport children, blood etc

*Germany*

Assistants to clean incubators

*Portugal*

Medical assistants – clean, wash – equipment, ward

*Croatia*

Porter – deliver blood etc

Cleaner for beds and environment

Kitchen deliver food but nurses give food to children

Helpers who assist transfer of children to diagnostics

*Serbia*

Cleaner

Distribute food but feeding undertaken by paediatric nurses

Secretary who undertakes paperwork

Porter – transport blood etc.

#### *Greece*

Hospital – ward assistants, nurse assistants, cleaners, porters, laundry, student nurses

Community – housekeepers, volunteers, student nurses

Ambulatory – paramedics (rescuers)

#### *Austria*

Nurse auxiliary – administration of oral medication, could wash and feed babies and children (no role in intensive care) (1 year education – 800 theory and 800 practice)

Ward assistant – no direct patient contact, cleaning incubators and equipment

Secretaries (often nurses)

Directly responsible to ward sister

Others i.e. porter – transport for patients, transport of blood, housekeeping

#### *UK*

Play specialist

Non-clinical – housekeeper

Clinical - Nursery nurses, health care assistant, health care support worker, assistant practitioner

#### **Action:**

- Draft notes to be circulated and attendees. FS to be advised of any amendments required – **FS**
- Topic to be placed on a future agenda. Representatives to bring information about educational (theory and practice) preparation individuals receive for support roles – **All**

#### 10. **FINE Program and FINE Lisbon Conference**

MAC presented update information from FINE. There is a need to synergise across Europe. FINE is an association established in 1995 – European Federation of Nurse Educators. The aim is to promote the continuing development of excellence in nursing education in Europe (27 countries). Issues discussed include comparison of curricula, study programmes and education structures. Aim to influence policy on national and international level. This has included a focus on nurse educator competencies [see presentation attached]. Need to differentiate roles and titles within the nursing team i.e. assistant practitioners as opposed to registered nurse (autonomous practitioners) and to ensure this is clear within society

Bologna process will enable convergence of different educational systems. Future desirable development of Nursing Studies – entry into nursing studies – basic and secondary education of 12 years - undergraduate programme at least 180 ECTS plus 240 ECTS = Nursing Studies (level 6). With additional 60 ECTS - Masters level. Nurse can be at level 5 or level 6; PhD 180 ECTS (level 8) (see slide from MAC).

#### **Action:**

- To lobby for the protection of the title ‘nurse’ and in particular the title of ‘paediatric nurse’ – **All**

- Letter to be sent to EU commission - DG Sanco Internal Market, DG Sanco Education EFN on behalf of PNAE – **FS to circulate draft to attendees for agreement and to check with Carol Hall prior to sending**

11. Nurse Education programme (Serbia)

DO highlighted key aspects of nurse education training in Serbia with translation by BB (see attached presentation). High school specific for nurses - entry age 14/15 years (do not undertake practice with patients until 16 years). After high school obtain a diploma (theory and practice), then works in practice as an internship. Complete programme at 18 years. There is a need for a complete analysis of educational policy. Proposals include different levels of education and training for different nursing roles i.e. assistant nurse, level 1 (high school) – basic level care

12. Nurse Education re-survey

Responses received from approximately 12 countries. FS reported that she was waiting for responses from many countries before analysing. Reminders will be sent requesting information.

**Action**

- Send reminder with survey - **FS**
- Collate and present information at next PNAE meeting in Copenhagen - **FS**

13. Regulation and re-validation survey

Survey will be circulated in due course. Questions will focus on whether a regulation system is in place, whether this differentiates between a registered nurse and a registered paediatric nurse and whether there is a system of periodic revalidation in order for nurses to remain on the nursing register.

**Action**

- Questionnaire to be compiled for circulation to paediatric nursing associations and national nursing associations to identify the current position across Europe - **FS**

14. Code of ethics for paediatrics

KP presented a short introduction to ethics in nursing.

*Holland* – national body has set professional code of ethics for all nurses. Professional bodies have indicated how this applies to speciality

*Belgium* – code in existence for all nurses

*UK* – code of professional conduct for all nurses – there is also specific guidance for pre-term low birth weight babies and also for the withdrawal lifesaving treatment

*Italy* – new code for all of the nursing profession which applies to paediatric situations

*Slovenia* – a code of ethics for nurses. Not specific code of ethics for paediatric nurses. Ethics is a mandatory content for licence renewal every 7 years

*Germany* – have a code of ethics for all nurses - not necessary for specific code for nurses. Paper with doctors re pre-term low birth weight babies

*Portugal* – national code of ethics for all nurses – all institutions must have an ethical commission

*Croatia* – code of ethics - translated from international code. It is known by all nurses. Must be able to identify specifics for paediatrics within paediatric nursing education

*Greece* – code of ethics (code of nursing deontology) all nurses but has 2 specific articles for paediatric nursing. Every nurse is aware of the code and is included within nursing education programmes

*Austria* – no national code in Austria - ICN code is used.

*Serbia* - - Paediatric nurses have a special code of ethics, but to adhere to its work Ethics koeksa is for all nurses who passed the Chamber of Nurses and Technicians of Serbia

### **Action**

- PNAE representatives to bring examples of ethical guidance to next meeting – **All**

### 15. Any other business

- Agenda item for a future meeting – care of children with complex health needs, palliative care and end of life care - **FS**
- Family centred care benchmarking tools and then to identify further work – **all to bring to future meeting.**
- IPAN conference in 2013 will include a paediatric nursing programme - **all to note**

### **Action**

### 16. Future meeting dates/venues

- 22<sup>nd</sup> October 2010 – **Copenhagen linked to conference**
- 3<sup>rd</sup> and 4<sup>th</sup> March 2011 - Slovenia
- 3<sup>rd</sup> and 4<sup>th</sup> November 2011 – Belgrade, Serbia
- Spring 2012 - Germany (*dates to be confirmed*)
- Autumn 2012 – *to be confirmed*
- Spring 2013 - *to be confirmed*

### **Action**

- Liaise with Paediatric Nurses Association in Denmark to see whether a meeting could be hosted on 22<sup>nd</sup> October 2010 prior to the conference on the 23<sup>rd</sup> October 2010 – **FS/IHD**

### **Action: Host countries to be identified**

PNAE meetings are held in different venues/countries to enable as many representatives from Paediatric Nursing Associations/National Nursing Associations to attend and participate in activities. We appreciate that financial implications of travel and accommodation may prevent several members from attending PNAE meetings. If your country has not yet attended a PNAE meeting but you would be interested in hosting a meeting in your Nursing Association/Country please contact Fiona Smith – [Fiona.smith@rcn.org.uk](mailto:Fiona.smith@rcn.org.uk) ASAP

*16.05 Meeting closed.*

**NOTE**

- If documents are circulated with request for comment/agreement and no response is received it will be assumed that there is agreement.
  
- ***Please ensure receipt of emails is confirmed.***