



Research paper

Activities undertaken by Intensive Care Unit Liaison Nurses in Argentina



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ABSTRACT

Background: The Intensive Care Unit Liaison Nurse (ICULN), also known as an outreach nurse, is an advanced practice nursing role that emerged in the late 1990s in Australia and the United Kingdom (UK). Little is known about this role in less developed economies.

Objective: To describe the activities undertaken by ICULNs in Argentina.

Methods: Prospective, descriptive, observational, single site study in an Argentinean metropolitan tertiary referral hospital. Adult patients under ICULN follow up were included in the sample. Data on ICULN activities and patients were collected using an established tool developed by The Australian Intensive Care Unit Liaison Nurse Forum. Descriptive statistics were used to summarise the findings.

Results: Two hundred patients were visited by the ICULNs during the study period. The mean age of patients was 52.5 years (SD 17.7). Cardiovascular disease ($n = 104$, 52%), respiratory disease ($n = 90$, 45%) and diabetes ($n = 40$, 20%) were the most common comorbidities. 110 (55%) patients had surgical procedures. The primary reasons for ICULN visit were follow up post ICU discharge ($n = 138$, 69%) and ward referral ($n = 46$, 23%). 136 (68%) patients received up to 3 visits; the remaining 64 (32%) patients received ≥ 4 visits. In those patients in need of ≥ 4 visits ICULNs initiated more non-medical treatments (100%), referred to escalate treatment (35%) and to a higher level of care (13.8%) than in those who were visited up to 3 times.

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Conclusions: This study is the first to document ICULN activity in Argentina using an international framework and data set. These findings can assist with understanding an advanced practice nursing role in Argentina. It may facilitate future comparisons with other contexts and could help managers implementing the role in similar settings. Further investigation will help develop this practice and document its influence on patient outcomes.

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1. Background

The Intensive Care Unit Liaison Nurse (ICULN), also known as an outreach nurse, is an advanced practice nursing role that emerged in the late 1990s in Australia^{1,2} and the United Kingdom (UK).³ ICULN practice has been described as a bundled intervention and a treatment package of care.⁴ Primary duties of ICULNs are the review of patients at risk of clinical deterioration, provision of transitional care for patients discharged from the intensive care unit (ICU) and practical support for patients, family and ward staff.^{2,5–8} ICULNs practice is also described as a key component of rapid response systems (RRS).^{6,8,9} A RRS is an institutional, multidisciplinary response to address clinical deterioration and emergency in acute care settings.^{10,11}

ICULNs are an example of an advanced practice role in nursing and may be designated as nurse practitioners, clinical nurse specialists or consultant nurses. There is a body of research demonstrating the positive impact advanced practice nurses have on patient care and outcomes in developed countries.^{12–14} For example, use of clinical nurse specialists in acute care settings can reduce length of stay, reduce cost of care for hospitalised patients, and expand access to care.¹⁴ Evidence is emerging about the benefits of the ICULNs. Australian and British researchers have demonstrated ICULN services can reduce mortality in hospital wards, hospital length of stay, ICU readmission rate,^{4,15–17} ICU discharge delays⁴ and adverse events.¹⁸ Researchers in the UK identified that outreach services were perceived to improve critical care services, communication and teamwork and to enhance training opportunities.¹⁹ Australian ward nurses perceive ICULNs as key clinical liaisons, who can perform in a demanding context to provide patient, family and staff support.²⁰ Finally, a 2014 review found ICULN were associated with a reduced risk of ICU readmission.¹²

While in Westernised countries advanced practice nursing is well developed,^{21,22} and particularly the ICULN role is well described,^{1,2,4,6} this is not the case in less developed economies. A recent Argentinean report described the ICULN service as a clinical resource for ward staff, emphasising patient surveillance as a key activity to identify early signs of clinical deterioration and to provide staff education.⁷ Staff management (i.e. dealing with absent staff) was reported as one role of Argentinean ICULN, whereas this is not the case of Australia or the UK.

In summary, the body of evidence on ICULN practice suggests they provide care and support to patients with complex needs and/or those in danger of clinical deterioration, assisting in the ICU to ward transition, and providing staff and patient education and support. These practices have positively influenced patients' outcomes, such as hospital length of stay, adverse events and mortality. However, there is little evidence about the ICULN role and activities in settings other than Australia and the UK. It is important to identify ICULNs' contribution to care in these other contexts. The aim of this study was to describe the activities undertaken by Argentinean ICULNs utilising a data collection tool developed by The Australian Intensive Care Unit Liaison Nurse Forum. This research emerged as an international cooperation with Australian colleagues. These findings may help to inform the development of strategies that focus on improvements in transitional

care and recovery from a critical illness in countries similar to Argentina.

2. Method

This was a prospective, descriptive, observational, single site study. The Institutional Review Board approved the study protocol. Informed consent was waived because similar data was collected as part of the usual ICULN service operation. Data was de-identified and compliant with local regulatory requirements.

2.1. Setting and ICULN services

The setting was an Argentinean metropolitan tertiary referral hospital supported by the Commerce Union Health Insurance scheme. The Commerce Union is a non-governmental organisation that represents workers employed in commercial and trade industries. Besides union representation, the organisation also provides a health insurance scheme and runs hospitals to provide acute care services to their members. The hospital started operation in 2010; it has 224 beds and has both a 15-bed adult and a 15-bed paediatric ICU. A comprehensive range of medical specialties is provided: Cardiac surgery, neurosurgery, bone marrow/kidney transplant, hemodialysis, orthopaedic/spinal surgery, as well as vascular diagnosis/treatment and outpatient care.

ICULN service was provided 24/7 by experienced critical care nurses with good communication and management skills. As a result there was always an ICULN on duty. ICULNs reported to the Head of the Nursing Department (similar to a Director of Nursing in other countries). Their role included assessment of all patients discharged from the ICU once per shift and the provision of complex direct care if necessary. They also provided clinical support and education to ward nurses. Non-ICU patients were assessed as requested by ward nurses, doctors or nurse unit managers. If the ICULN considered a patient required complex care or the patient was at risk of clinical deterioration, the patient was included in the ICULN caseload. All patients were discharged from ICULN service when their clinical condition improved, when ward nurses were able to provide safe care or if the patient was transferred to a higher level of care.

2.2. Sample

Adult patients aged 18 or above under ICULN follow up from 1 April to 31 July 2012 were included in the sample.

2.3. Data collection tools and analysis

Data collection tools used in this study were developed by The Australian Intensive Care Unit Liaison Nurse Forum for conducting a multi-centre prospective observational study to describe practice variation in ICULN services in Australia.²³ Members of the Argentinean research team translated the data collection tools into Spanish. Terms were checked between English and Spanish speaking members of the research team in order to provide a

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