



Paul Fulbrook - joint editor



Lynne Harrison - joint editor



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What in the world have we done?

Paul Fulbrook

Some time ago I was asked to write an editorial for Critical Times, which is published by the Australian College of Critical Care Nurses (ACCCN). At the time I had just returned from the World Federation of Societies of Intensive and Critical Care Medicine (WFSICCM) World Congress, which was held in Sydney in 2001. During the Congress a historical event in critical care nursing took place: the founding of the World Federation of Critical Care Nurses (WFCCN). Several representatives from the European federation of Critical Care Nursing associations (EfCCNa), including myself, were there to participate in and witness the occasion, during which an inaugural WFCCN Council of eight member countries was elected. I chose to write about this event for ACCCN by reflecting on the question, "What in the world are we doing?" (Fulbrook, 2001). Now, just over five years since that event, perhaps it is timely to reflect upon this question in the past tense: "What in the world have we done?"

Perhaps the first area to clarify is, who is the we in the above question? I think, for the purpose of this editorial, I will talk about the achievements of both EfCCNa and WFCCN, since their histories are linked. Although EfCCNa was established formally in 1998, the constitution on which WFCCN was founded in 2001 was based on the EfCCNa model, and several leading figures in EfCCNa played lead roles in setting up WFCCN. Furthermore, subsequent to the founding of WFCCN this journal (which was published originally as Connect: Critical Care Nursing in Europe in association with EfCCNa) became its official journal, necessitating a title change that reflected better its world-wide readership: Connect: The World of Critical Care Nursing. On establishing Connect as its official journal one of the stated aims of WFCCN was immediately realised.

EfCCNa has gone from strength to strength and now has around 25 member countries, many of whom are also represented in WFCCN. At the last count, WFCCN had a membership of 30 countries (Williams et al., 2007). During the years that these two organisations have been functioning there has been a number of achievements. Both organisations have developed websites and have held international conferences. EfCCNa held its inaugural conference in Paris, France in 2002 and followed it up with a second conference in Amsterdam, The Netherlands in 2005 thus establishing a three-year cycle. Its next conference in 2008 will be hosted in Florence, Italy. WFCCN, on the other hand, has chosen to hold an annual conference event. By linking with member countries who are hosting their own conference events WFCCN has achieved a cost-effective solution to the financial challenge of conference organisation. Furthermore, each annual conference provides an opportunity for the host country to facilitate a full Council meeting of WFCCN. To date WFCCN has co-hosted conferences in Cambridge, UK (with the British Association of Critical Care Nurses), Buenos Aires, Argentina (in association with WFSICCM), and in Manila, the Philippines (in association with the Critical Care Nurse Association of the Philippines). The next conference in August 2007 will be held in Sun City, South Africa co-hosted with the Critical Care Society of Southern Africa.

Both organisations have been active on the research front as well. EfCCNa has conducted a series of European surveys relating to critical care nursing education and practice. The findings from these surveys have been presented at many international conferences and published in several journals (Baktoft et al., 2003; Fulbrook et al., 2005; Fulbrook et al., 2007). As a direct result of one of these surveys a European position statement has been produced about the presence of family members during cardiopulmonary resuscitation. WFCCN has conducted an international survey of critical care organisations (Williams et al., 2007) and has produced two position statements to date: on critical care nursing workforce requirements (WFCCN, 2005a) and education (WFCCN, 2005b).

As a direct result of WFCCN leaders' initiatives two new critical care nursing federations have been established. In 2003 the Asia Pacific Federation of Critical Care Nurses was established and in 2006 the Latin American Federation of Intensive Care Nurses was founded in Venezuela. These achievements have helped to open up the dialogue between critical care nurses throughout the world in a way that would not have been possible even five years ago.

The dedicated work of leading critical care nurses throughout the world has helped to achieve some really positive outcomes, which will have a major impact on the care of critically ill

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people throughout the coming years. The saying that from a little acorn grows an oak tree is very meaningful in this context. And whilst, for some, it is hard to see how the work of large international organisations translates into meaningful care of patients 'at the bedside' it must be remembered that EfCCNa and WFCCN are still saplings, in the process of establishing their root systems and green branches. But from deep roots and healthy branches grow strong, protective trees.

So, in answer to the question, "What have we done?" the answer has to be, "A lot!" And, if we take the acorn analogy a step further, just think what will have been achieved when these young organisations mature as mighty oaks.

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