

Critical care nursing in the United Arab Emirates: formation of the Nursing Professional Practice Group – Critical Care



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ESPAÑOL

Enfermería en cuidado crítico en los Emiratos Árabes Unidos: formación de un Grupo de Ejercicio Profesional de Enfermería – Cuidado Crítico

Palabras clave

Emiratos Árabes Unidos, cuidado crítico, Organización de enfermería, Profesión de enfermería

Resumen

- Los grupos de ejercicio profesional de enfermería normalmente funcionan bajo el paraguas de una asociación nacional de enfermería u otra organización no-gubernamental similar. Esto se realiza fundamentalmente para enfatizar la experticia profesional en común más que por la naturaleza organizacional o burocrática.
- Hasta el 2003, tales cuerpos no existían en los Emiratos Árabes Unidos, sobre una base interina grupos de ejercicio profesional operan como comités del Departamento Federal de Enfermería del Ministerio de Salud (DFEMS).
- Como la Asociación de Enfermería de los Emiratos está en funcionamiento desde 2003, el DFEMS ha preparado un plan de transición para empezar a movilizar los grupos de ejercicio profesional hacia el marco de la Asociación de Enfermería de los Emiratos.
- Como el Departamento Federal de Enfermería representa solo a enfermeros del Ministerio de Salud y asume responsabilidad por los grupos y sus actividades, los miembros de sector no perteneciente al Ministerio de Salud quedan bajo la responsabilidad de los miembros de tal órgano de autoridad.

- Until 2003, such bodies did not exist in the United Arab Emirates, therefore on an interim basis nursing professional practice groups operate as committees of the Federal Department of Nursing of the Ministry of Health.
- As the Emirates Nursing Association has been operational since 2003, the FDN has prepared the transition plan to start moving the nursing and midwifery professional practice groups under the umbrella of the Emirates Nursing Association.
- As the Federal Department of Nursing represents only Ministry of Health nurses and assumes responsibility for group activities, non-Ministry of Health sector members remain the responsibility of such members' authorising agent.

BACKGROUND

In 1993, in the United Arab Emirates (UAE), the informal Critical Care Interest Group was established when nurses working in different intensive care units across the country identified the need to form a group to build a national network and to develop nursing in this field. The initial group comprised of ten critical care nurses from mainly clinical backgrounds. The main objectives at that time included sharing expertise and supporting each other. However, there were many difficulties at this time when the group wished to establish a formal group. However, with the help and support of the Federal Department of Nursing (FDON) and the commitment of all members, the Nursing Professional Practice Group - Critical Care was finally established in 1997 by Administrative Decree 27/97. A policy was issued from the Department of Nursing defining the purpose, criteria for forming a group, terms of reference, and the role of the Department of Nursing. New objectives were developed and have been maintained to date.

The main focus of the group is to provide a forum to identify and debate issues related to critical care practice, to develop the level of performance of critical care nurses, and to provide expert guidance and support to the nurses working in intensive care units in the UAE. Furthermore, the group aims to enhance professional development through evidence-based learning, research, and practice, and to utilise transcultural decision making in dealing with ethical dilemmas. Another goal of the group is to foster Emirati nurses to join the group. With the establishment of the new Nursing and Midwifery Council in 2010, its main goal for the future is the standardisation of critical care nursing in the UAE.

Over time, the group has become stronger and more critical care nurses have joined the group. Unfortunately, the number of members is restricted to a maximum of twelve by UAE law, although exceptions have been granted in the past by FDN. In 2002 the

SUMMARY

- Nursing professional practice groups normally function under the umbrella of a national nursing association or other similar non-government organisation. This is done primarily to emphasise groups' common professional expertise rather than organisational or bureaucratic nature.

group developed its logo (see figure 1). The lamp and flag reflect the country and the burning flame represents enthusiasm and activity.

After a short period of recession from 2007 to 2008 the group was reactivated in 2009. Currently it has 16 members (see photo 1) and one observer who is a nursing student. It represents most Ministry of Health districts, the Health Authority of Abu Dhabi, Dubai Health Authority, and two nursing colleges. Four members of the group are UAE national nurses. The group conducts six meetings per year at Al Amal Hospital, Dubai (see photo 2).



Figure 1: Nursing Professional Practice Group – Critical Care logo

Because members are based all over the country and the provision of transportation poses a problem, it was a group decision to select a central venue which made it easier for everybody to attend the meetings. The group also attempts to invite a specialist or representative from a different health care specialty to present a relevant educational topic at each meeting. The group selects the topics at the beginning of each year. At the end of each year the group offers an educational event with invitations to non-members all over the UAE. As the events are free of charge, the group has to rely on the provision of sponsorship. Initially, attendance was limited to fifty participants. To date this number has reached 150 to 200 participants. These educational events aim to further professional development and to improve or maintain the knowledge and skills of the participants. Topics such as management of a trauma patient, intracranial pressure monitoring and management, mechanical ventilation, coronary artery disease, are just a few that have been provided over the last few years.

In 2000, the group participated in the 6th Pan Arab Conference in Abu Dhabi with a very successful workshop addressing ethical dilemmas in intensive care, with over 100 nurses in attendance.

In 1997 the first very important concern of the group was the compromised standard of nursing care due to unavailability of disposable and non-disposable items. Our voice was heard and a letter to all medical districts was issued by the Undersecretary of the Ministry of Health to purchase all necessary items through direct order on a monthly basis. Another important activity was the development of a standardised flowchart for intensive care units in all Ministry of Health facilities.

In 2003 the Ministry of Health moved towards International Organization of Accreditation (ISO) accreditation, resulting in many changes occurring within the various facilities. The employees in the hospitals felt insecure, afraid, threatened, nervous and some even reluctant to change. Such behaviour was also observed by the group members in their respective facility. Therefore, in May 2004 a research project entitled The perception of nurses working in ICUs in the UAE towards ISO and change was conducted by the group, with ethical clearance given by FDON. The findings were presented at the 5th National Ministry of Health Nurses Initiative Symposium: Comfort

with Change – Change with Comfort, which was held in May 2004, in Abu Dhabi. The group provided strategies for effective change and managing resistance.

In 2004, 2006 and 2009 the group conducted surveys to address safe staffing standards in mainly Ministry of Health hospitals. Safe staffing is a global issue and is of major concern. Fewer nurses were working longer hours and caring for sicker patients, resulting in poor patient outcomes. The findings of the initial survey (2004) were alarming: there were no critical care nurses with postgraduate degrees, inappropriate use of ICU facilities, and two to three ventilated patients per nurse per shift. Follow up surveys in 2006 and 2009 demonstrated a slight improvement in only two hospitals.

To communicate with nurses, from May 2002 until 2006, the group issued a quarterly newsletter. Information was provided about important and relevant topics. It also included information on upcoming national and international events. After identifying main concerns affecting intensive care units around the UAE, new topics have been approved for the 2011 newsletters such as sedation and the use of muscle relaxants in intensive care, non-invasive ventilation, and inter-hospital transfer of patients.

Since the establishment of the group, seven Safe Practices for Adult Critical Care Procedures have been developed and distributed throughout the hospitals in the UAE. These provide guidelines for the development of hospital intern policies and procedures.



Photo 1: Some Members of the NPPG – Critical Care, January 2010



Photo 2: During a meeting, January 2010

The Future

Several strategic plans for 2011 have been developed and agreed upon by the group. The most important issue will be the transition process to move the group to the Emirates Nurses Association (ENA). The ENA has developed sections to meet the needs of its members who have diverse practice needs. The primary aim of each section is to promote excellence within a specific practice area through the exchange of best practices, development of targeted education programs thus improving the care provided to patients.

With the support of the ENA the group/section will establish more strength and power in decision making and the implementation of evidence-based practice.

Another focus will be the development of core competencies for adult critical care. During several meetings the group identified the needs for their development and implementation. However, approval should come from a higher authority such as FDN and/or ENA.

In collaboration with ENA and the Nursing and Midwifery Council, Safe Staffing and Educational Standards is a high priority in the strategic plan. Safe staffing affects intensive care units especially, and should be the most important part of the provision of critical care services. As a consequence of the surveys conducted by the group the need to develop safe staffing standards for UAE intensive care units was clear. The major goal in the development of educational standards requires that at least 25% of all staff working in an intensive care

unit should hold a postgraduate degree and be qualified in advanced life support. This could be accomplished by establishing formal links with higher education institutes, as there is currently no postgraduate training available in UAE.

CONCLUSIONS

There are still many issues pending to advance the development of critical care nursing in the UAE. The Nursing Professional Practice Group will do much to enhance further development and hopefully be the launching pad for a national critical care association. With this group we can support and motivate other colleagues to achieve our goal of excellence in the provision of nursing care to patients in the most vulnerable states of health. We believe it is important to continue with the development of nursing science and the professional contribution we can make in the UAE and the world.

