



NP/APN NETWORK BULLETIN

International Council of Nurses • Conseil international des infirmières • Consejo internacional de enfermeras
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Editors: Sini Hämäläinen MHC, NP, RN and Marie-Lyne Bournival BSc, PG Health Sc, MN, NP, Daniela Lehwaldt RGN RNT PhD (Guest Editor)

Dear Colleagues,

We are experiencing a pandemic like no other in our generation. As the ICN NP/APN Network, we are committed to supporting each other as we face these unprecedented challenges. All of us will be impacted whether on the front line or supporting our colleagues, family and friends. It is at times like this that the strength and altruism of nursing comes to the fore. Many of us face the risk of infection, yet we still offer our care for those more vulnerable than ourselves. I am so proud of our profession and the difference we are making during this pandemic. We will continue to post helpful COVID -19 updates from ICN and WHO to support you in your work and hold each of you in our thoughts. Do keep us informed about your experiences as we navigate through this difficult public health crisis.

As you will know, 2020 is the International Year of the Nurse and Midwife. When the time comes, I hope you are able to attend some celebratory events near you.

I want to thank each of you for your contributions to nursing and especially to advanced practice. Advanced practice is continuing to develop and thrive internationally. We know the difference we make to health care, but we need more research and dissemination of our outcomes to add to the literature. This bulletin will share some of the exciting global developments as well as stories from nurse-led services and advanced practice nurses working in a variety of settings.

Even though times are now difficult and some of our planned conferences and events have had to be cancelled, we will look forward to hosting several events in 2021. We hope to hold our first Africa APN Symposium and, of course, our 11th ICN NP/APN Network conference (www.npapn2020.com) will still be in Halifax, Nova Scotia. When we meet together, we will celebrate the Year of the Nurse and hear a huge range of topics related to advanced practice. If you have never attended one of our conferences, I encourage you to. The enthusiasm and excitement of over 1500 APNs and interested parties creates a unique opportunity to network, learn and become more involved in the global community.

In terms of Network, we have some exciting innovations in development, which we will share in the next bulletin. One of the main projects we are working on is a new database to enhance communication with you as members and you can become more involved in the Network projects. Once the database is established, we will be in touch with members to seek ideas of how we can involve you more, so do let us know your ideas. As you know, I am committed to working together to develop our Network. Please do contact me directly at: M.Rogers@hud.ac.uk if you have any ideas or thoughts about the ongoing vision of the Network. As usual, please do keep in touch with us via our social media platforms: Facebook: [ICN Nurse Practitioner/Advanced Practice Nurse Network](#) and Twitter: [@ICNGLOBALAPN](#)



Stay safe, stay strong and we will get through this.

Very best wishes,
Dr Melanie Rogers (Chair)

Advanced Practice Nursing Guidelines published

By Daniela Lehwaldt PhD, Deputy-Chair ICN NP/APN Network

As you may know, the Network has been actively involved in revising the existing ICN APN Definition and the development of the ICN Guidelines on Advanced Practice Nursing. The process of developing the guidelines took over two years and included many drafts and meetings, consultations and negotiations. It is our great pleasure to inform you that the Guidelines have now been published. Please click [here](#) to view them.

On behalf of the Network, I would like to thank everybody who contributed to the guidelines, especially NPs/APN experts and ICN National Nurses Associations, who provided invaluable feedback and advice throughout the process of drafting the document. I would also like to thank ICN for their support and the authors involved for making this important work happen.

In their [Press Release](#) for the guidelines, ICN called for increased recognition and support for APN roles to help fix fragile healthcare systems.

I think that the incredible strengths and contributions of nurses and advanced nurses worldwide are coming to light yet again during the times of the COVID -19 pandemic, and hopefully this will assist in driving further nurse-led improvement initiatives and it will help in achieving our goal of access to healthcare for all.

Recent Awards: Dr. Minna Miller recognised for Excellence in Nursing Leadership

By Minna Miller / Sini Hämäläinen

Dr Minna Miller was recognised on 6 December 2019 for Excellence in Nursing Leadership. The Honourable Judy Darcy presented the award at the Nursing Awards of Excellence gala event hosted by the Association of Nurses and Nurse Practitioners of British Columbia (BC). Dr. Miller is an adjunct professor at University of British Columbia School of Nursing. She has a clinical practice as a Family Nurse Practitioner at BC Children's Hospital Asthma Clinic where she is a founding executive board member of the BC Pediatric Asthma Network. She is leading the standardisation of pediatric asthma care and patient/family education across disciplines and setting in BC. She also leads the Nursing/Allied Health Global Child Health Advisory to the Centre for International Child Health. She has made significant contributions to the development and advancement of the nurse practitioner role and scope of practice in BC and serves on a number of Ministry of Health expert panels for evidence informed implementation and evaluation of primary care teams, including NP-led clinics. Her leadership activities extend beyond Canada as she is also involved with American Association of Nurse Practitioners as the only Canadian NP inducted as a fellow, and served as past co-chair of the Health Policy subgroup while currently serving as project coordinator for the ICN NP/APN Network.



Left to right:

The Honourable Judy Darcy, Minister of Mental Health and Addictions, Dr Minna Miller and Dani Daigle, BC NP Council President.

Year of the Nurse and Midwife 2020 - Reflections on Nursing

By Ivy Muya, BSc, RN /Sini Hämäläinen

Year 2020 is the Year of the Nurse and Midwife. Kenyan Advanced Practice Nurse Ivy Muya reflected her thoughts on nursing and what grounds nurses. Ivy is a member of the Network's Communications Subgroup.



Ivy Muya holds a Bachelor of Science and is a Registered Nurse and currently studying for both, the Master of Public Health at the University of Nairobi and the Master's in Philosophy of Emergency Medicine at the University of Cape Town.

She has nearly ten years' experience in ambulatory, travel, remote site and aviation medicine respectively with special interest in emergency education and research in austere lands or conflict-stricken environments. Countries of expertise include Kenya, South Sudan, Somalia, Mali, Haiti and currently the Democratic Republic of Congo. She has contributed to the development of Emergency Medicine Synod with both the Africa Federation of Emergency Medicine (AFEM) and the Global Emergency Nursing Conferences. She has also published a baseline analysis on emergency nursing education in Somalia and has been Co-Spearheading at AFEM Nurses Group Global Mentorship Programme (Muya et. al.2018).

It is difficult to describe what and who a nurse is. I come from the school of thought that learning is a process that could never come to an end. In this regard, I would like to explain my experience, knowledge and skills through a process known as Mentorship. For the last ten or so years, since I graduated, nothing surprises me at all when it comes to being a nurse. Having been primarily set-up in remote, rural, conflict and post-conflict setting respectively, I have indeed met a massive pool of nurses from different backgrounds.

Does nationality set us apart? I think not! The International Council of Nurses (ICN) is a clear indication that we are united in the world of nursing. But then, the fundamental question lies herein "What sets us apart?" Geographical boundaries, academic structures, technology, ideologies, health policies and regulations etc, I believe, set us apart. At the same time, the patient remains the same regardless of the setting.

Is it the environmental setting? I have vast experience in conflict and post-conflict settings where the 'ideal' is often only read or heard of in literature and media. Whilst the nursing profession is being defined as a universal, distinct differences are seen based on available resources. However, the principles of nursing should remain the same in my opinion.

Switching to research for a moment, research conducted by nurses has made a tremendous contribution to the nursing body of knowledge and skills. However, lack of funding and lack of understanding of the research process is evident in some middle- and low-income countries in my view. There is a huge gap in this field and perhaps this is what divides us. During my travels to international forums, at some of which I am the only individual from Sub-Saharan Africa, I have observed that it is mainly a lack of understanding coupled with resource constraints that limits nurses from engaging in research activities.

How do I see it? Basically, it is not a financially driven endeavour. I believe that with the right resources and frame of mind nursing research on a wider, systematic scale is achievable. The first thing to do is contact a National Association or affiliate, and express your interest in networking with an international Nursing Forum like the ICN NP/APN Network. What this does in my view is to open your mind to learn and observe what your fellow nurses are engaged in. Secondly, I think it's about finding the time to interact with these nurses, especially those who are not in your home-country. This will give you context on what to expect outside of your own understanding. Thirdly, I would say investigate where you are yourself in own nursing career, assess yourself and determine what you want to achieve. Once you have worked on your goals and you have achieved them, it is time to give back! Find a mentee, someone who you can nurture and teach. Do not keep it to yourself, because 'paying it forward' is indeed what sets us apart.

Reference: Muya, I., Garside, J., Van-der Plas, M. & Mohammed, A. (2018) Emergency health education in a conflict stricken environment: A situational analysis. *African Journal of Emergency Medicine* 8/2018, 129-133.

COVID-19: Nurse-led services and services for during extraordinary times

By Daniela Lehwaldt

As we face these challenging times of COVID-19 globally, we need to support one another. This can be done by developing new nurse-led services and by supporting these nurses and volunteers. Below are two examples from Ireland, depicting some initiatives developed during the COVID-19 pandemic.

Nurse-led services for people from socially marginalized backgrounds

By Dr Briege Casey, Academic Lead – Community Health, School of Nursing, Psychotherapy and Community Health, Dublin City University

COVID-19 presents health/healthcare challenges worldwide, including the imperative to protect individuals/communities vulnerable to attendant health issues and to limit contagion to/from these populations.^{1,2,3} Within socially marginalised groups (for example those who are homeless, migrants/asylum seekers, people from ethnic, sexual/gender minorities, those with addictions, mental health issues/disabilities, criminality), there are significant risks of both COVID-19 related health damage and population spread. Health vulnerabilities identified among socially marginalised groups include immunosuppression, respiratory, liver and cardiovascular conditions.^{4,5} Additionally, contagion risks arise from poor adherence to infection control measures among this often geographically mobile population who have poor healthcare access.⁶ Congregated/unstable accommodation, for example residential homes, hostels, rough sleeping,

asylum centres, inhibits social distancing and self-isolation.¹ There may be limited understanding/motivation regarding infection control requirements. Mental health/disability/addiction issues may further compromise adherence and self-care.⁷ These issues are often augmented by poor government investment/planning in inclusion healthcare resulting in patchy health promotion/health intervention support.

Nurses are at the forefront of planning, delivering and evaluating health promotion/ healthcare among these hard to reach populations; these interventions are central to Inclusion Health provision internationally.^{7,8} The level of nurse-led innovative and efficacious interventions with marginalised groups in the context of COVID-19 continues to be impressive. In Ireland, examples of nurse-led COVID-19 related projects include:

- The development and implementation of an emergency nurse-led COVID-19 response in an inner-city street medicine/primary health service aimed at homeless people and rough sleepers. This intervention addresses three distinct elements – triage, testing and follow-up care: www.primarycaresafetynet.ie/
- Inclusion health liaison nursing – co-ordinating hospital admission, discharge planning and community support for marginalised groups (currently in relation to COVID-19): www.who.int/news-room/feature-stories/detail/nursing-homeless-people-in-ireland
- Co-ordinating the health care response for those experiencing homelessness during the COVID-19 crisis. Ensuring health equity and identifying at-risk groups who may require cocooning: www.healthequity.ie/depaul
- Providing harm reduction and health promotion/infection control support to people with addiction issues in the COVID-19 pandemic: mqi.ie/primary-healthcare/

Many of the inclusion health nurses leading these projects are part of an Irish national network: [*Nurses and Midwives for Inclusion Health: Partnership in Practice*](#). We will be shortly commencing a research study examining the characteristics and efficacy of a range of nurse-led projects with marginalized groups in relation to COVID-19 prevention and intervention. For more information about this research, please contact briege.casey@dcu.ie

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2. Canady, V. A. (2020). Advocates for the homeless seeking funding for COVID-19. *Mental Health Weekly*, 30(11), 7-8.
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Psychotherapy support services for contact tracers and redeployed student nurses



By [Dr Gerard Moore](#), Academic Lead Psychotherapy, School of Nursing Psychotherapy and Community Health, Dublin City University

The COVID-19 pandemic has created worldwide changes in how we interact with others. Social distancing leads to social isolation and the normal human contact and support that we experience in daily life are not available outside the immediate circle of people with whom we cohabit. In some cases, due to infection with the virus or while waiting for a test result, we are being asked to restrict contact even within cohabiting units. The Minister for Health, the Health Service Executive (HSE) and many mental health organisations in Ireland recognise the mental toll that the COVID-19 pandemic is having on our citizens (see www.gov.ie/en/campaigns/together/?referrer=/together/)

People are adapting to new work practices and in some cases are redeployed to support the effort to flatten the curve. Workers from a variety of backgrounds have volunteered to work in contact tracing. Since 19 March, Dublin City University staff from the [School of Nursing, Psychotherapy and Community Health](#) in conjunction with colleagues from across the University and outside agencies have responded to the Irish national effort by providing a contact tracing centre. The [DCU Centre](#) is led by three academics (one with Nurse Practitioner background), who oversee and coordinate the effort. Staff from various grades, including nurses, from University, HSE, Defence Forces Personnel and redeployed Environment Protection Officers volunteer.

Contact tracers have reported the challenging aspect of their work including the stress of making calls to people concerned about a loved one they cannot visit in hospital, those who have just experienced a bereavement and cannot avail of the normal supports of a funeral service and those who are anxious, frightened and stressed about their own health or safety. This work is stressful and anxiety provoking for contact tracers with no formal training or experience in dealing with the emotional toll of these calls. The [Psychotherapy Academic Group](#) in DCU's School of Nursing,

Psychotherapy and Community Health has created support services for contact tracers. This is an online support group, which provides a regular opportunity for contact tracers to access facilitated peer support and access a psychotherapist for a private call regarding the emotional demands of the work. The aim is to provide a supportive, restorative space for contact tracers to engage with a listening and guiding psychotherapist. Many of our student nurses have also responded to the call to take up work as Health Care Assistants in the hospital system and we have extended the support group and phone line to include supporting their frontline work.

Where to find relevant information?

By Melanie Rogers / Marie-Lyne Bournival

There are many excellent resources available, many of which are country specific. We have provided a link to the ICN and WHO resources below which we hope will be helpful. Take care of yourselves and your families as we navigate COVID-19. If you have helpful information that will support the APN community do let us know via social media or email.

By the time the May Bulletin goes to press, the Network will put in place different initiatives to ensure that our community is supported. Dealing with COVID-19 is not a sprint but rather a marathon and this will be outlined as 2020 progresses.

You will find the information on the website <http://icn-apnetwork.org/> and on social media <https://www.facebook.com/ICNGlobalAPN/> and <https://twitter.com/ICNGlobalAPN>. Make sure you follow-us!

In the meantime, you will find up to date information on these useful links of different social media platforms.

International Council of Nurses (ICN):

[ICN website](#)

[ICN COVID-19 portal](#)

[ICN Twitter feed](#)

[ICN LinkedIn page](#)

[ICN Facebook page](#)

[ICN YouTube channel](#)

World Health Organization (WHO):

[WHO COVID-19 webpage](#)

[WHO Twitter feed](#)

[WHO LinkedIn page](#)

[WHO Instagram feed](#)

[WHO Facebook page](#)

Upcoming conference: 11th ICN NP/APN Network Conference postponed



New Dates: 29 August – 1 September 2021

Halifax, Nova Scotia, Canada

By Ruth Martin-Misener NP, FAAN, PhD, Tracy Kinch, MN NP, Carolyn Mitchell, MN-NP, DNP, Josette Roussel, RN, M.Sc, M.Ed and Anne Keller

Due to the global pandemic situation of COVID-19, the 11th ICN NP/APN Network conference will be postponed to **August 2021**.

The Nurse Practitioner Association of Nova Scotia, the Canadian Nurses Association and the Conference Executive Organizing Committee are looking forward to welcoming ICN President Annette Kennedy and Mr. Howard Catton, Chief Executive Officer, delegates, sponsors and exhibitors from around the globe to the Halifax Convention Centre in the beautiful port city of Halifax, Nova Scotia on Canada's breathtaking east coast. It has been 12 years since the conference was in Canada and while we were excited to host it in 2020 - the Year of the Nurse and Midwife and 200th birthday of the founder of our profession, Florence Nightingale – we are hopeful that the Year of the Nurse will be extended until 2021. What a perfect time to come together to learn from each other as advanced practice nursing continues to spread and scale up in more and more countries throughout the world.

In fact, it was the continued growth of advanced practice nursing that was the inspiration for the theme of this year's conference, "Envisioning advanced practice nursing beyond 2021: wider reach, bigger impact". The conference sub-themes build on ICN's strategic priorities and the United Nations' Sustainable Development Goals to examine progress and future directions for nurse practitioners, clinical nurse specialists and other advanced practice nurses towards addressing the current and future health needs of populations. Now, more than ever, people around the world need the specialized expert knowledge, skills and capabilities of advanced practice nurses.

We are delighted to host high-profile keynote speakers from around the world as well as many concurrent oral and poster presentations on the key health issues and advances in healthcare from conference participants. The conference programme brings something for everyone including presentations, networking opportunities and pre-conference workshops with clinical, educational, policy and research topics.

We are excited to share that NP/APN 2021 goes green to reduce the carbon footprint of the conference. This means introducing eco-friendly approaches in various areas. One of these is that all posters will be presented as an interactive e-poster using a platform called 'Learning Toolbox'. The platform enhances poster profile, allows presenters to include a wide range of multimedia and interactive material in their e-poster, such as videos, surveys, presentations, and web links. The e-posters will be available to view beyond the conference dates to enable participants to contact authors with questions or to connect on joint research topics. The highest ranked poster abstracts will be given the chance to present their e-poster in a two-minute poster pitch during a dedicated session.

There will also be lots of opportunity for some authentic east coast food, entertainment and fun. For up-to-date information about the conference and to register, please visit our new website www.npapn2021.com and follow us on [Facebook](#), [Twitter](#), [LinkedIn](#) and [Instagram](#), using the new hashtag #NPAPN2021. We look forward to gathering together as a global Advanced Practice Nursing community.

See you in Halifax in 2021!



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