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Evidence Based ICU Nursing

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The population in Israel is a little above 7 million people. At the end of 2007 there were 54,899 registered nurses in the country; 4.4 registered nurses per 1000. There are a total of 12 919 nurses completing post graduate courses of which 52% have successfully completed the national 1 year intensive care for nurses course.

The Israeli Cardiology and Critical Care Nursing Society is a professional group encompassing many fields: general intensive care, cardiac, cardio-thoracic surgery, neurosurgery, paediatric, and post anaesthesia. The society has one national congress a year in collaboration with the Physicians Intensive Care conference. In addition, there is another nursing conference day organised at a different hospital each year. The hosting nurses organise the day focusing on the specialties of the nurses in that hospital. The society's active members have developed a specialty branch calling themselves the Evidence Based ICU Nursing (EBN) group. This group meets once a month with the objective of investigating nursing procedures that need to be refreshed and updated. The members are ICU nurses from 5 major Israeli hospitals. In the spring of 2004, the group began by identifying specific areas of evidence based investigation which representatives from all types of intensive care were interested in developing. Several studies had been published that found that poor oral hygiene might be associated with increased risk for ventilator associated pneumonia (VAP) (Bergmanns et al. 2001; Hubmayr 2002; Kollef et al. 2004; van Nieuwenhoven et al. 2004) and that VAP was found to be a major cause of morbidity and mortality in the ICU (Bercault and Boulain 2001; Elward et al. 2002, Rello et al. 2002). One specific article caught the attention of the group (Grap et al. 2003). The authors reported that ICU nurses' oral care practices were not documented nor were they in accordance with the most recent evidence. Oral care was then chosen as the topic for the project. After an exhaustive review of the literature, it was also found that nurses based their oral care practices on tradition, used many different techniques and products for oral care; had no uniform method of oral assessment and that there was no unified consensus as to an evidence based oral care protocol (Munro and Grap 2004; Munro et al. 2004; Stiefel et al. 2000; White 2000). Since there was no information as to the current state of practice in Israel, the group decided to conduct a survey describing the current oral care practices of ICU nurses with intubated patients and to compare those practices with the current evidencebased literature. A prospective survey was conducted to determine the oral care practices of critical care nurses of intubated patients. A convenience sample of 216 practicing ICU nurses was obtained.

While nurses ranked oral care of high priority, many did not implement the latest evidence into their current practice. The level of research utilisation was not related to the type of nursing education, age, work status or other factors. We also found that even nurses working on the same unit varied widely in their oral care practices partially due to the fact that there were no known written oral care protocols. Most did not brush their patients' teeth. The results of a survey of oral care practices in 59 European intensive care units were similar to those found in our study (Rello et al. 2007). We then proceeded to develop an oral care protocol based on our literature search, critical reading of the material and adaptation to our culture. We are currently in the process of distributing this protocol to all intensive care units in the country. We are initiating 2 new projects. The first endeavour is to review the literature for the best evidenced based care protocols for the mechanically ventilated patient, including nurses driven weaning, tight glucose control, nutrition, sedation, and suction protocols. Our second project is investigating the relation between nurses' level of moral distress and the Israeli ICU work environment.

The Israeli EBN group was the driving force behind the international CONFLITICUS study preformed in Israel; all members were proactive in promoting this study in our country and data collection in our units which resulted in excelent Israeli representation in the research.

Conclusion

The Evidence Based ICU Nursing (EBN) group is a network of serious and expert ICU nurses devoted to excellence in intensive care nursing in our country. We are determined to strive for uniform, standardised and evidenced based level of nursing care for all severely ill. The Israeli EBN group would be very interested in networking with other such groups in other countries in order to broaden our scope and collaborate with like groups internationally.

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