



# EUSEN

## European Society for emergency Nursing

**EuSEN e-newsletter, number 2 , 2021**

Dear EuSEN members,

After a very hard 2020 for the board and silence for you as a member from our side, we were very happy that on May 27<sup>th</sup> we were able to reconnect with some of our members during the General Assembly.

On a very special day like the Emergency Medicine Day, which takes place every year on the 27<sup>th</sup> May, we felt it was a good day to meet and greet.

<https://eusem.org/news/emergency-medicine-day>



<https://youtu.be/GDBnDa7O1co>

We were delighted that in total 16 people found the time to attend the meeting.

The attendees were from Belgium, the Netherlands, Island, Turkey, Malta, Croatia, Slovenia, Poland and Switzerland.

With two short but interesting and informative presentations (see abstracts in this newsletter) we rounded our small but valuable General Assembly up.

Further ahead in this newsletter you will find some information about it.

**Future events** organized by or in collaboration with EuSEN are coming up in 2021 and 2022.

We listed them for you dear member:

### 2021

- **Congress Association of Emergency Nurses Turkey** 4 – 6 June 2021 *Virtual conference*
- International virtual congress of emergency medicine - **ICEM21** 8 -12 June 2021 Abu Dhabi, *Virtual conference*
- **EuSEN** Webinars 1-2 till end 2021 *Virtual seminar*
- Emergency Nursing conference **ENA** 20-25 September, Florida ( USA) *Hybrid conference*
- **EUSEM** 27 -31 October 2021 Lisbon (Portugal) *Hybrid conference*

### 2022

- **ICEM22** 14 – 19 June 2022 Melbourne (Australia) *Hybrid conference*
- **EuSEN Webinars in 2022** *Virtual seminar*
- **EuSEN** 10 years anniversary Congress (date will be announced soon) *Live conference*
- **EUSEM** 15-19 Octobre 2022: Berlin (Germany) *Live conference*
- **4th Global conference on emergency and trauma nursing** 10-12 November 2022, Gothenburg (Sweden) *Live conference*

Find the links to the conferences on the next page.

Hope to meet soon again, preferably in person and maybe at one of the conferences!

*Your EuSEN Board*

# Future events 2021/ 2022

## 2021

- <https://ahemder.org.tr/emergency-nursing-congress/#>
- <https://www.icem21.com/>
- <https://eusem.org/congress/the-congress-2020/the-congress>
- <https://www.ena.org/events/emergency-nursing-2021>

## 2022

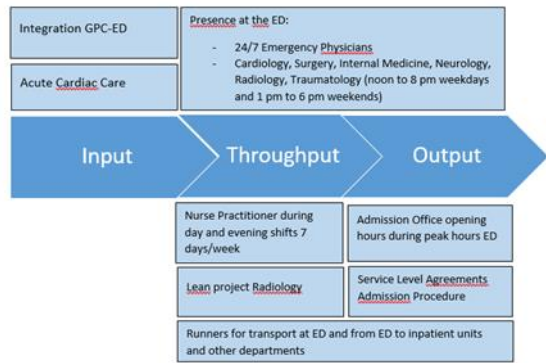
- <https://icem2022.com/>
- <https://eusem.org/congress/the-congress-2020/upcoming-congresses>
- <https://www.elsevier.com/events/conferences/global-conference-on-emergency-nursing-and-trauma-care>

Geesje van Woerden & Christien van der Linden

In the Netherlands, as in many other European countries, there is discussion about a future-proof design of the acute care landscape, in which acute care remains accessible and affordable. Centralization of emergency care would make it easier for a hospital to meet quality requirements, and it could be a solution to staff shortages. In the city of The Hague in the Netherlands, one of the EDs closed its doors in 2017, and another one in July 2019. Patients and staff were welcomed at the remaining ED, HMC Westeinde: an inner city, level one trauma centre with approximately 68,000 ED visits annually (2019). There were some concerns beforehand: centralization and an increased input of patients could increase workload and excessive crowding at the ED.

Therefore, several interventions were installed to accommodate the expected increase in patients at the remaining ED (van der Linden et al., 2019). To decrease the input, a First Heart Aid and a General Practitioner Cooperative (GPC) were built at the ED. To improve throughput and outflow, 5 medical specialists were dedicated to the ED during peak hours, working side by side to the 24/7 available emergency physicians. The radiology department went through a lean project (de Kok et al., 2020) and we extended the opening hours of the admission agency to better match with the ED peak hours. Service level agreements ensure that admitted patients are collected from the ED within 30 minutes, and we appointed runners for transport of patients. All interventions were installed to be able to care for an additional 15 to 20 thousand patient visits (Figure 1).

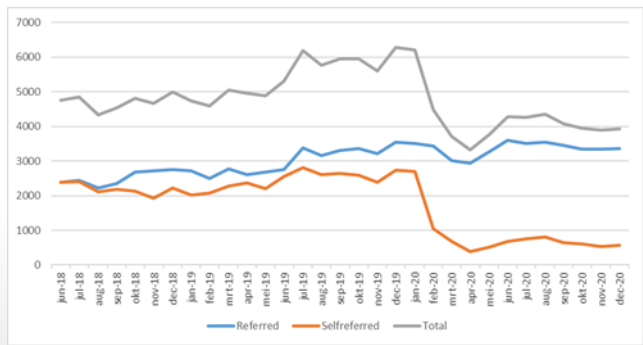
Figure 1: Interventions



Evaluation

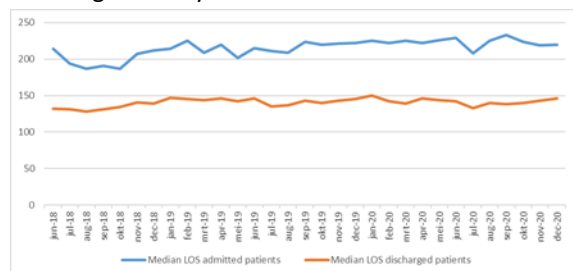
For this evaluation, we used the period June 1, 2018 to December 31, 2020 (n = 148,429 ED visits). Just after the closure of the second ED, in July 2019, the number of visits at the remaining ED increased sharply to more than 6,000 visits per month between July and January 2020 (Figure 2). In February 2020, we see a significant decrease in the number of self-referrals; the moment the GPC took over the triage of the self-referrals. The number of referred patients continues to increase over the study period from about 2.3 thousand patients in June 2018 to over 3.3 thousand patients in December 2020. From March ongoing shows the ED during the pandemic, with lower patient numbers.

Figure 2: Number of ED visits



The number of patients aged 80 and older increased significantly, from 289 (in June 2018) to 516 patients (in December 2020). The proportion (and number) of patients transported by ambulance has grown from 23.7% (June 2018, n=859) to 42.2% (December 2020, n=1480). The number of patients admitted through the ED increased during the study period, from 995 inpatient admissions in June 2018 (27.5%) to 1,131 inpatient admissions in December 2020 (33.6%). Despite these changes in the population, we observed little or no change in the mean length of stay of admission patients (around 215 minutes) and that of non-admission patients (around 140 minutes) (Figure 3).

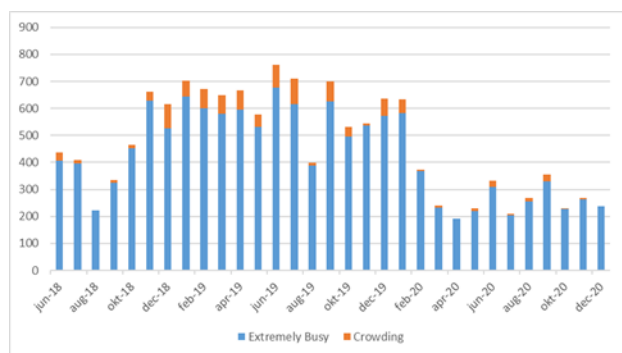
Figure 3. Length of stay at the ED



Both the number of times it was extremely busy and the number of times that it was crowded decreased significantly since February 2020 (Figure 4). This is not surprising because the total number of patients decreased significantly: about 1500 patients are redirected to the GPC. The NEDOCS measures crowding, room occupancy and the different process times. A number of important aspects of workload, such as staffing levels and psychosocial workload, are not measured with the NEDOCS.

The perceived workload has been high since March 2020, since the Covid-19 pandemic, although there are usually enough rooms available at the ED. Staff shortages and a sicker patient population increases the workload considerably, but are not visible in the NEDOCS measurements.

Figure 4. Crowding at the ED



Exit block remains an important point of attention. This outflow blockage occurs about 450 times a month. Exit block was most common in patients who had to be admitted for internal medicine, in people over 80, and in patients with abdominal pain, shortness of breath and general malaise.

By concentrating emergency care in one location, we are much better able to match ED staffing to the inflow of patients. Thanks to the various interventions and staffing efforts, crowding has decreased. However, we still have a challenge. It is an ongoing process to handle exit blocks and the increased perceived work pressure.

## References

- Morley, C., et al., Emergency department crowding: a systematic review of causes, consequences and solutions. *PloS one*, 2018. 13(8).
- Van der Linden, M.C., et al., The impact of a multimodal intervention on emergency department crowding and patient flow. *International journal of emergency medicine*, 2019. 12(1): p. 21.
- de Kok, B.M.E., Bram; van der Linden, M Christien; van Ufford, Henriette ME Quarles., Lean-driven interventions, including a dedicated radiologist, improve diagnostic imaging turnaround time and radiology report time at the emergency department. *Emergency Radiology*, 2020: p. 1-7.

## CLINICAL PLACEMENT EXPERIENCE OF NURSING STUDENTS DURING THE COVID-19 PANDEMIC: A CROSS-SECTIONAL STUDY

Full citation: Ulenaers D, Grosemans J, Schrooten W, Bergs J. Clinical placement experience of nursing students during the COVID-19 pandemic: A cross-sectional study.

Nurse Educ Today. 2021 Apr;99:104746. doi: 10.1016/j.nedt.2021.104746.

**Background:** The impact of the COVID-19 pandemic on our society is profound, not least for the healthcare sector. On the one hand, this exceptional situation created unprecedented learning opportunities for nursing students. Yet, on the other hand, this situation can jeopardise nursing students learning trajectory.

**Objectives:** To study nursing students' experiences during clinical placement during the COVID-19 pandemic.

**Design:** Cross-sectional survey design.

**Settings:** Clinical placements during the COVID-19 pandemic.

**Participants:** Nursing students from nine Belgian nursing schools.

**Methods:** All students enrolled in nursing education are eligible to participate. The survey consists of five dimensions: demographics, risk perception, self-efficacy, support and communication, and resilience.

**Results:** The gaps that were identified by students focused on the need for more psychosocial support, establishing (regular) contact with their clinical placement supervisor, recognition of the difficult work situation, and the need for more space to unwind.

**Conclusions:** Nursing students expressed a strong need to be heard, prepared, and supported. Most students felt supported by their nursing schools. Because of COVID-19, the role of the preceptor became more important. However, due to several reasons, the preceptor did not always meet the student's expectations. Preparing students for specific competencies is needed. In spite of the efforts of nursing schools and clinical sites, students often got lost in the chaos of the pandemic. This resulted in practical worries, fewer learning opportunities, and even fundamental doubts about their choice to become a nurse. Finally, it crucial that nursing schools and clinical sites communicate about matters such as the responsibility for testing nursing students, the provisions of uniforms and personal protective equipment, and structurally sharing guidelines with students to provide safe patient care.

The article can be accessed free of charge via the following link:  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7803623/>



During the EuSEN General Assembly a short presentation was given on the results of the survey about 'recognition of child maltreatment in Europe.  
You can here find the slides of this presentation:

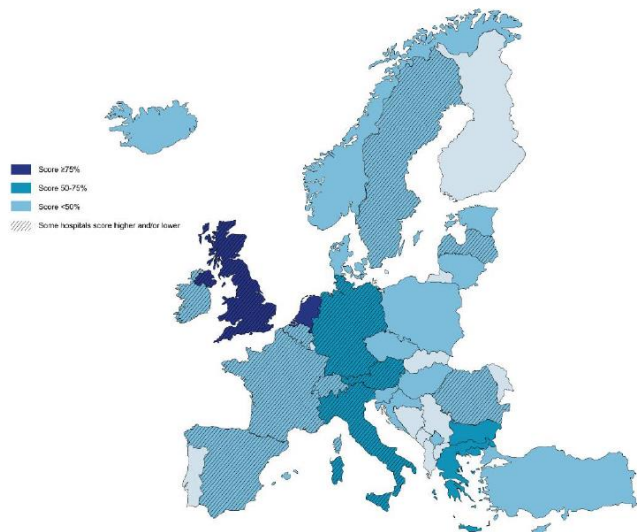
## Recognition of child maltreatment in Europe

- Child maltreatment is a worldwide public health problem with a huge socio-economic impact
- Previous survey to evaluate the policies to recognize child maltreatment in EDs in Europe in order to define areas of improvement
- Distribution through EUSEM, REPEM and EuSEN
- Hospitals scored based on the NICE guideline on child abuse & neglect



## Results European survey on child maltreatment

- Total 185 completed surveys of 148 hospitals from 29 countries
- Only 26% of EDs in Europe conform to most of the NICE guideline recommendations
- Lack of:
  - Screening tools and guidelines on parental risk factors
  - Training
  - Clear hospital policy
- 72% of respondents reported need for (more) training



# Follow-up survey toolkit child maltreatment

- Need for better signalling of child maltreatment by implementation of toolkit containing:
  - Validated screening checklist
  - Training program
  - Written hospital policy
- First barriers & facilitators on implementation of such a toolkit needs to be studied
- This will be performed by a new follow up study survey developed by Erasmus MC Sophia Children's Hospital and the Augeo foundation.
- We hope our partners of EUSEN, EUSEM and REPEM will join us again in this battle against child maltreatment by distributing this survey.
- You can also send your email to [childmaltreatment.toolkit@erasmusmc.nl](mailto:childmaltreatment.toolkit@erasmusmc.nl) for the survey link (coming up soon)!




## PLOS ONE

OPEN ACCESS PEER-REVIEWED

RESEARCH ARTICLE

### Recognition of child maltreatment in emergency departments in Europe: Should we do better?

F. Hoedeman, P. J. Puiman, A. W. Smits, M. I. Dekker, H. Diderich-Lolkes de Beer, S. Laribi, D. Lauwaert, R. Oostenbrink, N. Parri, L. García-Castrillo Riesgo, H. A. Moll 

<https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0246361#ack>

### Acknowledgments

For distribution of the survey, we are especially thankful to members of the REPEM research network, members of the EUSEM research network, M. de Bisschop (CEO EUSEM) and local contact peoples of the member associations of the EuSEN.

## CONFERENCE " MENTAL HEALTH AND THE PANDEMIC: LIVING, CARING, ACTING!"

EuSEN participated in the conference " Mental health and the pandemic: living, caring, acting!", hosted by Commissioner Kyriakides on May 10 2021.

Our office received this letter of gratitude and to inform that all videos are available online (see link):

*Dear Mr Lauwaert,*

*It is with gratitude and pride that we are looking back on the high-level conference " Mental health and the pandemic: living, caring, acting!", hosted by Commissioner Kyriakides on May 10.*

*Close to 2000 attendees connected with us on the day: a clear indication of how this topic touches the hearts and minds of many.*

*We would like to thank you very much for sharing your personal experience with the audience and with us. By doing so, you have made a very valuable and unique contribution to our event, for which we are very grateful.*

*The testimonial videos you so kindly recorded and shared with us were instrumental in giving a face to the very real and complex impact of the pandemic on the lives of European citizens. Our ambition was to put people centre stage: something we could not have done without your personal contribution. For the purpose of the conference, we had to shorten your video message before sharing it with the audience. By doing so, we aimed to honour the core and integrity of your original message, and we hope we succeeded in doing so.*

*We are very pleased to inform you that all testimonial messages shown during the conference are now available online via [https://ec.europa.eu/health/non\\_communicable\\_diseases/events/ev\\_20210510\\_en](https://ec.europa.eu/health/non_communicable_diseases/events/ev_20210510_en) , along with recordings of all sessions, a short report of the conference (highlighting the key outcomes), and an electronic leaflet on the promising approaches presented at the breakout sessions. You can also read about the event in the latest "Health and Food Safety - Newsletter" published online SANTE - Newsletter Archives (europa.eu). We hope that you will find this material helpful and encourage you to share it widely.*

*With kind regards,*

*Donata Meroni and the whole conference team*

*Donata Meroni*



*European Commission*

*DG SANTE*

*Head of Unit C1 'Health promotion, disease prevention, financial instruments'*



## Special announcement of ESNO

12 May 2021 – International Nursing Day  
Decade of the Specialist Nurse 2020 – 2030

First of all, we wish to thank you for your participation and your commitment in all fields of activities during the 2021 'International Nursing Week'. Next week a summary video will be ready and presentations online, but more importantly, those who participated in our celebratory event have heard about the announcement by our Executive Director, Maria-Teresa Parisotto, introducing the ESNO campaign:

### "DECADE OF THE SPECIALIST NURSE 2020-2030"

#### Background

During the last ESNO General Assembly in April 2021, it was decided that it is time to scale up in creating visibility of the role and position of the Specialist Nurse in Europe. 2020 was the 'Year of the Nurse and Midwife,' and established a foundation and created visibility with the ESNO Caring4Nurses campaign. The campaign was a good start and highlights that one year is not enough to reach our goals, especially in the context of the global health crisis. The health crisis was mainly driven by the COVID-19 pandemic but the simultaneous impact on many other fields should be taken into consideration because of the increased healthcare needs associated to a lack of recognition of the role and the position of the Specialist Nurses in Europe with the huge impact due to shortage of specialist nurses. This discrepancy is also a result of not being enough visible on European level. In 2020 we had hoped to raise the visibility of the specialist nurse

profession and we all expected we could do this in 2021. But today's reality shows that we need to raise our profiles not just this year but also for at least the next ten years. The other motivation is related to the global crisis due to the shortage of nurses in all specialties and health domains.

#### Campaign goals:

The ESNO is convinced that as long the shortage of nurses is approached as a generic issue, and not addressed by their specificities, nothing will change and it's time to be more confident and decisive in our approach. This campaign will be explicit on the 'why' the Nursing profession is so rich by the specialisation and 'how' and 'where' to engage in of our health projects to engage. We will especially communicate the zoomed-in perspectives and possibilities in diversity, the health domains and specialties with long term career opportunities and specialist nurses become by 2030 a natural phenomenon in all health levels, clinic, management and policy and above all in the society heart and mind.

For the next month to come, ESNO is going to work on a planning with key activities and we will keep you update on these activities and other campaign news. For any question or interest to participate and engage, please contact our ESNO team and,

THANK YOU AGAIN FOR YOUR SUPPORT AND  
ENGAGEMENT DURING THIS FANTASTIC  
INTERNATIONAL NURSING WEEK 2021

# **Official Journal** of European society for Emergency Nursing **EuSEN**

**Subscription available with a  
45% discount for EuSEN members**





# **EuSEN**

## **European Society for emergency Nursing**

**Are you interested in Emergency Nursing?  
Then join the European Society for Emergency Nursing NOW!**

The society's aim is to promote nursing activities in the field of emergency care

The Society's purpose is:

- to promote science and art of nursing in emergency care
- to promote contacts, exchange and cooperation between European emergency nursing associations
- to represent emergency nurses within and outside of Europe
- to draft and promote standards for training, implementation of the profession and management in the field of emergency nursing
- to harmonize the training of emergency nursing across Europe
- to promote cooperation with all healthcare professionals, institutions and organizations with a professional interest in emergency care
- to promote basic knowledge about emergencies throughout the population.

EuSEN is a NON-Profit association. To be a member with EuSEN you need to be a member of a local or national emergency nurse association. The association needs to have local standards and official statutes.

Do you want to learn more about the EuSEN Please contact :

***The President of EuSEN***

***Door Lauwaert***

Post address: UZ Brussel, Emerg. Dpt, Laarbeeklaan 101, 1090 Brussels, Belgium

Or [door.lauwaert@uzbrussel.be](mailto:door.lauwaert@uzbrussel.be)

To join us - Fill in the admission form on the next page.

**[www.eusen.org](http://www.eusen.org)**



# **EUSEN**

European Society for emergency Nursing

## Application form EuSEN

*Name of the Association*

.....

*Country*.....

*URL Website*.....

*Number of members*.....

*Does the association follow official statutes*      **Yes**      **No**

*The associations main purpose in emergency care*

.....  
.....  
.....

*Name of the President*.....

*Contact address, E-Mail and phone number*

.....  
.....

*Second contact person of the association (if not the President is the contact person)*

.....

*Contact address, E-Mail and phone number*

.....  
.....

*Send the application form and relevant documents presenting your organization to:*

***The President of EuSEN Door Lauwaert***

Post address: UZ Brussel, Emerg. Dpt, Laarbeeklaan 101, 1090 Brussels, Belgium

Or [door.lauwaert@uzbrussel.be](mailto:door.lauwaert@uzbrussel.be)

# **www.eusen.org**

# Individual membership EuSEN

Dear future member,

If you want to support us developing EuSEN, you can become an individual EuSEN Member.

Membership fee for individual member had been fixed to **15€/year** by the EuSEN Board . This money help us to promote the association throughout Europe.

As an Individual Member, you'll be informed of any evenemential action of EuSEN and every publication, you'll also have member price for Congress supported by EuSEN and any promotional action held by EuSEN.

Individual Membership don't give the right to vote at the General Meeting Assembly ( Only for the Association ) and membership of EuSEN don't mean that you are member of all the European nurses associations.

WE NEED YOU, if you want to help us by becoming a individual member, fill the form (see website EuSEN) and the treasurer will contact you as soon as possible to give you information about the procedure to pay the annual fee.

- NEW !!! To avoid high transaction fee, you can now pay by PayPal

# [www.eusen.org](http://www.eusen.org)





# EUSEN

European Society for emergency Nursing



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