## GOALS NURSING NOW

## **CATALUNYA**



Barcelona, 18 July 2019







**Nursing Now** is a three-year global campaign launched by the International Council of Nurses (ICN), the World Health Organization (WHO) and the Burdett Trust of Nurses. It aims at upgrading the position of the nursing profession and empowering registered nurses to lead the health challenges of the 21st century. The purpose of this campaign is to bolster the excellence and centrality of nursing care in order to improve the population's health and reduce inequalities.

This campaign roots in the report issued by the British Parliament's Health Committee in October 2016, named 'Triple Impact', and highlights the need to boost nurses' leadership in health systems and foster their contributions to promote health and prevent disease.

On the 14th of February 2019, the Health Ministry of the Government of Catalonia explicitly adhered to the campaign in a public event held in the city of Barcelona wherein the Health Minister, Alba Vergés, announced the commitments of the Catalan government to promote the contribution of nurses and the group **Nursing Now Catalunya** was introduced. The group includes representative members from public healthcare providers, the Association of Deans and/or Directors of Nursing Faculties and Schools of Catalonia, Balearic Islands and Andorra on behalf of the nursing faculties and schools, of the Catalan Association of Nurse Executives representing nurse managers, as well as research nurses, young nursing students, patient representatives, other health care professionals, the President of the Catalan Council of Nursing Colleges, and the Catalan members in the Board of the campaign and the Executive Board of the International Council of Nurses.

This document includes the proposal defined by **Nursing Now Catalunya** to achieve the operational goals related to each strategic aim of the **Nursing Now** Campaign, as well as the actions and outcome criteria, as well as and the organizations or institutions accountable for the achievements. All of them aligned with the initiatives set by the Health Ministry in order to improve the population's health and boost nursing care excellence.



Focus  Ra Pra Hir  Operational goals  1.2	ncrease investment in improving working conditions (including professional training and levelopment) of nurses Ratios and number of nurses Practice environment  Hiring improvements	Promote and spread effective and innovating nursing practices  Nursing care process and outcomes data Centres committed to nursing care excellence	3 Increase the influence of nurses in health policies	Increase the number of nurses in leadership positions and professional development opportunities	5 Increase and transfer on areas where nurses have the greatest impact, minimizing the
Focus  Ra Pra Hin  Operational goals  1.1	conditions (including professional training and levelopment) of nurses  Ratios and number of nurses  Practice environment	nursing practices  Nursing care process and outcomes data	Increase the influence of nurses in health policies		
Ra Pro Hir Hir 1.2	Practice environment	0 1			barriers that prevent its application
Pra Hin Hin 1.1	Practice environment	0 1			
Operational goals  1.1		centres committed to nursing care excellence	RN Scope of practice	Nurse Executives	Scientific production
Operational goals  1.1  1.2	Hiring improvements	AL 2.41.415	Information systems	Leadership, political and health economics training	Interlocution nursing research/evidence- decision-making in health policies
1.1		Nurses visibility		APN-CAT + Nursing specialists	Interlocution nursing research/evidence - media
	.1. To increase 0,5 points/year the number of registered nurses per 1.000 inhabitants	2.1. To include nursing data in the Minimum Data Set (MDS) at each setting (hospitals, primary care, elderly/long-term care, mental health)	3.1. To increase the number of nurses in participation and decision-making committees at the Ministry of Health	To update the policies regulating the Scope of practice and accountability of the nurse Chief Officers to guarantee the 1st level of decision-making in institutions	5.1. To increase PERIS resources for nursing research intensification by 10%
1.3	.2. To launch the design and implementation of a RN Staffing Adequation Plan at the different settings (hospitals, primary care, elderly/long-term care, mental health)	To include nursing care process and outcomes data in the Outcomes Central ("Central de resultats")	To provide the Ministry of Health with a nursing management structure with executive capability to promote policies for the provision of nursing care	To reach the Nightingale Challenge (200 young nurses trained in leadership)	5.2. "La Marató 2020" theme "Nursing care for health promotion and prevention of diseases, complications and disabilities"
	.3. To improve by 0,5 over 10 points (annually) the environments of nursing practice (organisational context) based on the Practice Environment Scale-Nursing Work Index (PES-NWI)	To increase the proportion of centres committed to healthcare excellence and the number of guidelines and standards implemented	3.3. To increase the number of electronic health record systems with full representation of the nursing process and its outcomes	4.3. To increase the number of nurses that lead commissions, services, centres, etc.	5.3. To include nurses and women in the Board and the scientific advisory committee of the "Fundació La Marató"
1.4	.4. To stabilise staff (reduce temporary employment)	2.4. To improve the use of terms "nurse" and "nursing"	3.4. To urge authorisation for midwifes to conduct hospital admission/discharge pregnant/labor women without risk (and healthy newborn)	4.4 (a) To visibilize APN-CAT (b) To recognize nurse specialist positions	5.4. To achieve the challenge having 100 nurses trained in media message construction
1.5	5. To participate in the validation of the Catalan and Spanish data in the 'State of Nursing'	S. To enhance the visibility of nursing services provided by the different centres in Catalonia in institutional websites	3.5. To complete nurses' accreditation, protocols and implement nurse prescription	4.5. (a) To create a register for nurse specialist (b) To relate nurse specialists to designated work-positions (c) Category recognition	
Current status					
1.1	.1. 6,09 nurses/1.000 inhabitants (2017)	2.1. Nursing data included in the Primary care MDS but not in use. Hospitals: NO nursing care data on the hospitals MDS. Included in Elderly/-long-term care MDS, but not recognized. Mental health MDS partially included nursing data	3.1. The number of nurses in participation and decision- making committees is still pending	4.1. No regulation	5.1. 3 PERIS editions
1.2	.2. Staff as of December 2018 = 49,321 active nurses in CAT. Source: Ministry of Health	2.2. Published Document: "Proyecto de Consenso e Implementación de los Indicadores de Evaluación de los Cuidados Enfermeros"	3.2. Doesn't exist	4.2. Do not apply	5.2. Since 1992 "La Marató" has been linked to diseases. There has never been an edition of "La Marató" oriented towards the care for health promotion and prevention of diseases, complications and disabilities
1.3	.3. Total PES-NWI: 5,9 (ICS hospitals) / 7,9 elderly/long-term care facilities (2015). No further data available (Adapted to a 1-to-10 scale)	Two accredited centres and one under way. Twelve guides implemented	3.3. No goal data is currently available regarding the representation of the nursing process in the different EHR systems of the various providers. However, it is known that most of the EHR systems used by providers do not allow the representation of the entire nursing process and outcomes, or only do so partially	4.3. The number of nurses that lead services, projects, etc. is unknown. Multidisciplinary	5.3. The employers' association only has one woman and no nurses. The scientific commission has neither a nurse nor a woman.
1.4	.4. Data unknown for temporary or interim structural job openings	2.4. Incorrect use of terms	3.4. Currently, midwifes are not authorised to perform patient admission/discharge	presented this November (b) Nurse specialists are not recognized in the work context, except for midwifes and Occupational Health Nurses	5.4. No training programme for nurse addresses this issue
Catalan Nursing now	.5. We have no knowledge regarding the data procurement process for the 'State of Nursing' requested by WHO	Nursing services scarcely acknowledged by institutional websites	Accreditation is under process. Issue regarding SIRE access using an electronic signature has not been resolved. Protocols have not been validated	4.5. (a) No data available (b) Document: "El COIB y las especialidades enfermeras (2019)" https://pbcoib.blob.core. windows.net/coib-publish/invar/61b15aff-9800-45b9-ba12-3f2581ca82be (c) No data available	RN: Registered Nurse



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Actions					
	1.1. Prioritize 2020 budget chapter to increase RN staffing	2.1. Create a group to prepare the data proposition and include it in the MDS	3.1. Urge the Ministry of Health to include more nurses in participation and decision-making committees	4.1. Urge Managers/General Directors to comply with the established regulations	5.1. Urge the Ministry to increase the contribution to intensifying PERIS nursing
	1.2. Initiate staff adjustment in centres	Increase the number of nursing process and outcomes data and indicators in the Outcomes Central	3.2. Urge the Ministry of Health to create a nursing management structure with executive capability	4.2. Urge nursing directorates to commit to the Nightingale Challenge Program	5.2. (a) To promote an agreement for a "La Marató" oriented towards preventive care (b) Agreement with "Fundació La Marató" for a prevention-oriented "La Marató" foinciding witl 2020, the international year of the nurse
	Include PES-NWI measure in the contract program	Recognition and financial endowment of centres. Training in evidence-based practice implementation	(a) Progress report     (b) To include the mandatory update of existing systems in the contract program or where appropriate     (c) To notify suppliers regarding the mandatory inclusion of this aspect in system procurement tenders	4.3. Understand the current status (number of nurses) that lead projects/services: (a) Visualize the nurses who lead committees (b) Creation of a register of nurses with leadership roles	inclusion of women and nurses in the Board and the scientific advisory committe
	1.4. Urge Ministry of Health, CATSalut, service providers, employers' associations and institutions to regulate the coverage of temporary and interim structural job openings	2.4. Sign an agreement with the "Corporacio Catalana de Mitjans Audiovisuals" regarding the adequate use of terms "nurse" and "nursing"	3.4. Agreements that favour policy amendments	4.4 (a) Creation and linking of nurse specialist positions (midwife positions already exist) (b) Creation and linking of APNs (identification and description of the APN-CAT study)	5.4. Offer this training free of charge to 100 nursing assistants-researchers, clinical nuse specialist an APN, nurse managers, nurse faculty-researchers with teachers from the world of media
	1.5. Participate in the validation of data in the "State of Nursing" Report	2.5. Urge all institutional health websites/communication departments, as well as service providers, to make the image of the nurse visible at either a first or a second level	(a) Operationalisation of accreditation     (b) Agreement to include electronic signature by all responsible parties/organisms     (c) Protocols and/or clinical practice guides recognized in Catalonia as long as state guides are not published	4.5. (a) Creation of a specialist registry (b) Definition of specialist's workplace (c) Category recognition	
Responsible party/ie					
	1.1. Ministry, CATSALUT, service providers, Catalan Council of Nursing Colleges, NN Cat Group	2.1. CATSALUT_CMBD, NN Cat Group, Employers' associations	3.1. Ministry of Health, Catalan Council of Nursing Colleges, NN Cat Group	4.1. CATSALUT, Catalan Council of Nursing Colleges, NN Cat Group	5.1. ACDI, Ministry of Health, Catalan Council of Nursing Colleges, NN Cat Group
	1.2. Ministry of HEALTH and WELFARE, CATSALUT, Service providers, Catalan Council of Nursing Colleges, NN Cat Group	2.2. NN Cat Group, CATSALUT, Catalan Council of Nursing Colleges	3.2. Ministry of Health, Catalan Council of Nursing Colleges, NN Cat Group	4.2. Employers' associations, ACDI, ADEIC, NN Cat Group	5.2. Ministry of Health and Social Welfare
	1.3. Ministry of HEALTH and WELFARE, CATSALUT, Service providers, Catalan Council of Nursing Colleges, NN Cat Group	2.3. Ministry of Health, CATSALUT and service providers	3.3. Ministry of Health, CATSALUT, Catalan Council of Nursing Colleges, TICSALUT, NN Cat Group	4.3. Catalan Council of Nursing Colleges, NN Cat Group	<ol> <li>Biomedical Investigation institutes, Ministry of Economy and Finances, "Corporació Catalana de Mitjans Audiovisuals", "Fundació La Marató"</li> </ol>
	1.4. Ministry of HEALTH and WELFARE, CATSALUT, Service providers, Catalan Council of Nursing Colleges, NN Cat Group	2.4. Catalan Council of Nursing Colleges, NN Cat Group, together with associations	3.4. Ministry of Health, Catalan Council of Nursing Colleges, COMB, ACL, NN Cat Group	4.4. Employers' associations, ACDI, Catalan Council of Nursing Colleges, NN Cat Group	5.4. Ministry of Health and Social Welfare, Ministry o Economy and Finances, "Corporació Catalana de Mitjans Audiovisuals", "Fundació La Marató"
	<ol> <li>Ministry of HEALTH and WELFARE, CATSALUT, Service providers, Catalan Council of Nursing Colleges, NN Cat Group</li> </ol>	2.5. Catalan Council of Nursing Colleges, NN Cat Group	3.5. Ministry of Health, CATSALUT, Catalan Council of Nursing Colleges, COMB, AQUAS, NN Cat Group	<ol> <li>Ministry of Health, CATSALUT, Service providers, Employers' associations, NN Cat Group, Catalan Council of Nursing Colleges</li> </ol>	
utcome criteria					
	1.1. > 6,09 nurses/1,000 inhabitants	2.1. Inclusion of nursing process and outcomes data in the MDS	3.1. To obtain a map showing the number of decision-making and participation positions occupied by nurses in order to plan their increase	4.1. Number of institutions that have applied the new established regulations	5.1. To increase the number of nurses with PERIS at a of a 10% increase in the resources to intensification programs for research projects lead by nurses
	1.2. > 25% of the RN staffing adequation in 2020. For those providers with no initial estimates, a situational analysis report has to be done	2.2. Published data at Outomes     Central on the agreed nursing indicators	3.2. Creation of the nursing management structure with executive capacity	4.2. = 200 nurses <35 years trained in leadership during 2020	5.2. "La Marató 2020 Prevención"
	1.3. Increase score of the PES-NWI scale considering initial starting point. For those providers with no previous measurement, conduct the survey and communication of results	2.3. To increase the number of centres, guidelines and trained nurses	<ol> <li>Annual increase of 20% in EHR systems with complete representational functionalities of the nursing care process and its outcomes</li> </ol>	4.3. Prepare an updated registration report of the number of nurses in leadership positions	5.3. > 2 nurses at "Fundació La Marató"
	1.4. Decrease the number of nurses and nurse aids with interim or interim/part-time contracts progressively. 5% annually	2.4. Commitments with entities	3.4. Agreements for the amendment of implemented policies	competitive process (ICS) for specialist nurses within the next 3 years. Commitment (2020) to create and recognise the remaining providers to carry it out before the next three years (b) To know the number and characteristics of the ANP-CAT 19 and commit to professional recognition (develop a road map for recognition)	5.4. 100 nurses trained in media message construct
7 <b>.</b>	<ol> <li>Obtain the actual data regarding the "State of Nursing" in Catalonia and have said data validated</li> </ol>	2.5. To increase the number of websites with "two clicks" to access "Nursing" information	3.5. Number of accredited nurses, number of nurses with access to the electronic dispensation order, number of protocols and/or validated clinical practice guides	4.5. (a) Registration (b) Job registration (c) Recognition and category attribution	
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# Increase investment in improving working conditions (including professional training and development) of nurses



#### **Focus**

- · Ratios and number of nurses
- Practice environment
- Hiring improvements



#### **Operational goals**

- 1.1. To increase 0,5 points/year the number of registered nurses per 1.000 inhabitants
- 1.2. To launch the design and implementation of a RN Staffing Adequation Plan at the different settings (hospitals, primary care, elderly/long-term care, mental health...)
- 1.3. To improve by 0,5 over 10 points (annually) the environments of nursing practice (organisational context) based on the Practice Environment Scale-Nursing Work Index (PES-NWI)
- 1.4. To stabilise staff (reduce temporary employment)
- 1.5. To participate in the validation of the Catalan and Spanish data in the 'State of Nursing'



- 1.1. 6,09 nurses/1.000 inhabitants (2017)
- 1.2. Staff as of December 2018 = 49,321 active nurses in CAT. Source: Ministry of Health
- 1.3. Total PES-NWI: 5,9 (ICS hospitals) / 7,9 elderly/long-term care facilities (2015). No further data available (Adapted to a 1-to-10 scale)
- 1.4. Data unknown for temporary or interim structural job openings
- 1.5. We have no knowledge regarding the data procurement process for the 'State of Nursing' requested by WHO







#### **Actions**

- 1.1. Prioritize 2020 budget chapter to increase RN staffing
- 1.2. Initiate staff adjustment in centres
- 1.3. Include PES-NWI measure in the contract program
- 1.4. Urge Ministry of Health, CATSalut, service providers, employers' associations and institutions to regulate the coverage of temporary and interim structural job openings
- 1.5. Participate in the validation of data in the "State of Nursing" Report



### Responsible party/ies

- 1.1. Ministry, CATSALUT, service providers, Catalan Council of Nursing Colleges, NN Cat Group
- 1.2. Ministry of HEALTH and WELFARE, CATSALUT, Service providers, Catalan Council of Nursing Colleges, NN Cat Group
- 1.3. Ministry of HEALTH and WELFARE, CATSALUT, Service providers, Catalan Council of Nursing Colleges, NN Cat Group
- 1.4. Ministry of HEALTH and WELFARE, CATSALUT, Service providers, Catalan Council of Nursing Colleges, NN Cat Group
- 1.5. Ministry of HEALTH and WELFARE, CATSALUT, Service providers, Catalan Council of Nursing Colleges, NN Cat Group



- 1.1. > 6,09 nurses/1,000 inhabitants
- 1.2. > 25% of the RN staffing adequation in 2020. For those providers with no initial estimates, a situational analysis report has to be done
- 1.3. Increase score of the PES-NWI scale considering initial starting point. For those providers with no previous measurement, conduct the survey and communication of results
- 1.4. Decrease the number of nurses and nurse aids with interim or interim/part-time contracts progressively. 5% annually
- 1.5. Obtain the actual data regarding the "State of Nursing" in Catalonia and have said data validated





## Promote and spread effective and innovating nursing practices



#### **Focus**

- Nursing care process and outcomes data
- Centres committed to nursing care excellence
- Nurses visibility



## **Operational goals**

- 2.1. To include nursing data in the Minimum Data Set (MDS) at each setting (hospitals, primary care, elderly/long-term care, mental health...)
- 2.2. To include nursing care process and outcomes data in the Outcomes Central ("Central de resultats")
- 2.3. To increase the proportion of centres committed to healthcare excellence and the number of guidelines and standards implemented
- 2.4. To improve the use of terms "nurse" and "nursing"
- 2.5. To enhance the visibility of nursing services provided by the different centres in Catalonia in institutional websites



- 2.1. Nursing data included in the Primary care MDS but not in use. Hospitals: NO nursing care data on the hospitals MDS. Included in Elderly/-long-term care MDS, but not recognized. Mental health MDS partially included nursing data
- 2.2. Published Document: "Proyecto de Consenso e Implementación de los Indicadores de Evaluación de los Cuidados Enfermeros"
- 2.3. Two accredited centres and one under way. Twelve guides implemented
- 2.4. Incorrect use of terms
- 2.5. Nursing services scarcely acknowledged by institutional websites







#### **Actions**

- 2.1. Create a group to prepare the data proposition and include it in the MDS
- 2.2. Increase the number of nursing process and outcomes data and indicators in the Outcomes Central
- 2.3. Recognition and financial endowment of centres. Training in evidence-based practice implementation
- 2.4. Sign an agreement with the "Corporació Catalana de Mitjans Audiovisuals" regarding the adequate use of terms "nurse" and "nursing"
- 2.5. Urge all institutional health websites/communication departments, as well as service providers, to make the image of the nurse visible at either a first or a second level



#### Responsible party/ies

- 2.1. CATSALUT\_CMBD, NN Cat Group, Employers' associations
- 2.2. NN Cat Group, CATSALUT, Catalan Council of Nursing Colleges
- 2.3. Ministry of Health, CATSALUT and service providers
- 2.4. Catalan Council of Nursing Colleges, NN Cat Group, together with associations
- 2.5. Catalan Council of Nursing Colleges, NN Cat Group



- 2.1. Inclusion of nursing process and outcomes data in the MDS
- 2.2. Published data at Outomes Central on the agreed nursing indicators
- 2.3. To increase the number of centres, guidelines and trained nurses
- 2.4. Commitments with entities
- 2.5. To increase the number of websites with "two clicks" to access "Nursing" information





## Increase the influence of nurses in health policies



#### **Focus**

- RN Scope of practice
- Information systems



### **Operational goals**

- 3.1. To increase the number of nurses in participation and decision-making committees at the Ministry of Health
- 3.2. To provide the Ministry of Health with a nursing management structure with executive capability to promote policies for the provision of nursing care
- 3.3. To increase the number of electronic health record systems with full representation of the nursing process and its outcomes
- 3.4. To urge authorisation for midwifes to conduct hospital admission/discharge pregnant/labor women without risk (and healthy newborn)
- 3.5. To complete nurses' accreditation, protocols and implement nurse prescription



- 3.1. The number of nurses in participation and decision-making committees is still pending
- 3.2. Doesn't exist
- 3.3. No goal data is currently available regarding the representation of the nursing process in the different EHR systems of the various providers. However, it is known that most of the EHR systems used by providers do not allow the representation of the entire nursing process and outcomes, or only do so partially
- 3.4. Currently, midwifes are not authorised to perform patient admission/discharge
- 3.5. Accreditation is under process. Issue regarding SIRE access using an electronic signature has not been resolved. Protocols have not been validated







#### Actions

- 3.1. Urge the Ministry of Health to include more nurses in participation and decision-making committees
- 3.2. Urge the Ministry of Health to create a nursing management structure with executive capability
- 3.3. (a) Progress report
  - (b) To include the mandatory update of existing systems in the contract program or where appropriate
  - (c) To notify suppliers regarding the mandatory inclusion of this aspect in system procurement tenders
- 3.4. Agreements that favour policy amendments
- 3.5. (a) Operationalisation of accreditation
  - (b) Agreement to include electronic signature by all responsible parties/organisms
  - (c) Protocols and/or clinical practice guides recognized in Catalonia as long as state guides are not published



### Responsible party/ies

- 3.1. Ministry of Health, Catalan Council of Nursing Colleges, NN Cat Group
- 3.2. Ministry of Health, Catalan Council of Nursing Colleges, NN Cat Group
- 3.3. Ministry of Health, CATSALUT, Catalan Council of Nursing Colleges, TICSALUT, NN Cat Group
- 3.4. Ministry of Health, Catalan Council of Nursing Colleges, COMB, ACL, NN Cat Group
- 3.5. Ministry of Health, CATSALUT, Catalan Council of Nursing Colleges, COMB, AQUAS, NN Cat Group



- 3.1. To obtain a map showing the number of decision-making and participation positions occupied by nurses in order to plan their increase
- 3.2. Creation of the nursing management structure with executive capacity
- 3.3. Annual increase of 20% in EHR systems with complete representational functionalities of the nursing care process and its outcomes
- 3.4. Agreements for the amendment of implemented policies
- 3.5. Number of accredited nurses, number of nurses with access to the electronic dispensation order, number of protocols and/or validated clinical practice guides





# Increase the number of nurses in leadership positions and professional development opportunities



#### **Focus**

- Nurse Executives
- · Leadership, political and health economics training
- APN-CAT + Nursing specialists



#### **Operational goals**

- 4.1. To update the policies regulating the Scope of practice and accountability of the nurse Chief Officers to guarantee the 1st level of decision-making in institutions
- 4.2. To reach the Nightingale Challenge (200 young nurses trained in leadership)
- 4.3. To increase the number of nurses that lead commissions, services, centres, etc.
- 4.4. (a) To visibilize APN-CAT
  - (b) To recognize nurse specialist positions
- 4.5. (a) To create a register for nurse specialist
  - (b) To relate nurse specialists to designated work-positions
  - (c) Category recognition



- 4.1. No regulation
- 4.2. Do not apply
- 4.3. The number of nurses that lead services, projects, etc. is unknown. Multidisciplinary
- 4.4. (a) The results of the ANP-CAT study have been presented this November
  - (b) Nurse specialists are not recognized in the work context, except for midwifes and Occupational Health Nurses
- 4.5. (a) No data available
  - (b) Document: "El COIB y las especialidades enfermeras (2019)" https://pbcoib.blob.core.windows.net/coib-publish/invar/61b15aff-9800-45b9-ba12-3f2581ca82be
  - (c) No data available







#### Actions

- 4.1. Urge Managers/General Directors to comply with the established regulations
- 4.2. Urge nursing directorates to commit to the Nightingale Challenge Program
- 4.3. Understand the current status (number of nurses) that lead projects/services:
  - (a) Visualize the nurses who lead committees
  - (b) Creation of a register of nurses with leadership roles
- 4.4. (a) Creation and linking of nurse specialist positions (midwife positions already exist)
  - (b) Creation and linking of APNs (identification and description of the APN-CAT study)
- 4.5. (a) Creation of a specialist registry
  - (b) Definition of specialist's workplace
  - (c) Category recognition



## Responsible party/ies

- 4.1. CATSALUT, Catalan Council of Nursing Colleges, NN Cat Group
- 4.2. Employers' associations, ACDI, ADEIC, NN Cat Group
- 4.3. Catalan Council of Nursing Colleges, NN Cat Group
- 4.4. Employers' associations, ACDI, Catalan Council of Nursing Colleges, NN Cat Group
- 4.5. Ministry of Health, CATSALUT, Service providers, Employers' associations, NN Cat Group, Catalan Council of Nursing Colleges



- 4.1. Number of institutions that have applied the new established regulations
- 4.2. = 200 nurses <35 years trained in leadership during 2020
- 4.3. Prepare an updated registration report of the number of nurses in leadership positions
- 4.4. (a) Commitment (2020) to carry out a public competitive process (ICS) for specialist nurses within the next 3 years. Commitment (2020) to create and recognise the remaining providers to carry it out before the next three years
  - (b) To know the number and characteristics of the ANP-CAT 19 and commit to professional recognition (develop a road map for recognition)
- 4.5. (a) Registration
  - (b) Job registration
  - (c) Recognition and category attribution





## Increase and transfer on areas where nurses have the greatest impact, minimizing the barriers that prevent its application



#### **Focus**

- Scientific production
- Interlocution nursing research/evidence-decision-making in health policies
- Interlocution nursing research/evidence media



#### **Operational goals**

- 5.1. To increase PERIS resources for nursing research intensification by 10%
- 5.2. "La Marató 2020" theme "Nursing care for health promotion and prevention of diseases, complications and disabilities"
- 5.3. To include nurses and women in the Board and the scientific advisory committee of the "Fundació La Marató"
- 5.4. To achieve the challenge having 100 nurses trained in media message construction



- 5.1. 3 PERIS editions
- 5.2. Since 1992 "La Marató" has been linked to diseases. There has never been an edition of "La Marató" oriented towards the care for health promotion and prevention of diseases, complications and disabilities
- 5.3. The employers' association only has one woman and no nurses. The scientific commission has neither a nurse nor a woman
- 5.4. No training programme for nurse addresses this issue







#### **Actions**

- 5.1. Urge the Ministry to increase the contribution to intensifying PERIS nursing
- 5.2. (a) To promote an agreement for a "La Marató" oriented towards preventive care
  - (b) Agreement with "Fundació La Marató" for a prevention-oriented "La Marató" coinciding with 2020, the international year of the nurse
- 5.3. Urge "Fundació de La Marató" to consider the inclusion of women and nurses in the Board and the scientific advisory committe
- 5.4. Offer this training free of charge to 100 nursing assistants-researchers, clinical nuse specialist and APN, nurse managers, nurse faculty-researchers with teachers from the world of media



## Responsible party/ies

- 5.1. ACDI, Ministry of Health, Catalan Council of Nursing Colleges, NN Cat Group
- 5.2. Ministry of Health and Social Welfare
- 5.3. Biomedical Investigation institutes, Ministry of Economy and Finances, "Corporació Catalana de Mitjans Audiovisuals", "Fundació La Marató"
- 5.4. Ministry of Health and Social Welfare, Ministry of Economy and Finances, "Corporació Catalana de Mitjans Audiovisuals", "Fundació La Marató"



- 5.1. To increase the number of nurses with PERIS at a rate of a 10% increase in the resources to intensification programs for research projects lead by nurses
- 5.2. "La Marató 2020 Prevención"
- 5.3. > 2 nurses at "Fundació La Marató"
- 5.4. 100 nurses trained in media message construction





## **Composition Grup Nursing Now Catalunya**

Núria Cuxart Ainaud	Dean of the Catalan Council of Nursing Colleges
Maria Sardà Raventós	General Director of Health Regulation and Regulation by the Ministry of Health
	of the Catalan Governmen
Adelaida Zabalegui Yárnoz	Member of the Steering Committee of the Nursing Now campaign
M. Eulàlia Juvé Udina	Member of the Steering Committee of the International Nursing Council
Margarita Esteve Ortega	President of the Associació Catalana de Directores Infermeres (ACDI), for nurse
	management
M. Dolors Bernabeu Tamayo	Representative of the Associació de Direccions d'Escoles i Facultats
	d'Infermeria de Catalunya (ADEIC), by the Universities
Montserrat Artigas Lage	Care Director of the Institut Català de la Salut (ICS), for public providers
Mercè Estrem Cuesta	Representative of the providers of health and social services, arranged and
	private (UCH-CSSC-ACES-ACRA)
Ester Risco Vilarasau	Young nurse, under 35, acting as secretary (until Nov 2019)
Andrés Aristayeta Blas	Young nurse, under 35, acting as secretary (since Dec 2019)
Eva M <sup>a</sup> Arroyos Calvera	Nursing student
Carmen Cabezas Peña	Deputy Director General of Health Promotion, as a non-nurse professional
M. Dolors Navarro Rubio	Patient representative





