

News from Brussels

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Hospitals could learn from the hotel industry

The 3rd of July, the well-known *Nursing Times* published an article underlining how hospitals could learn from the hotel industry, particularly when it comes to discharge planning for patients. The National Health System of England indeed advocates for a similar approach to the one for the hotel industry regarding patients receiving emergency or elective care with a targeted discharge date to reduce the length of stay, emergency readmission and pressure on hospital beds. Just like hotels that insist on morning check-out, many hospitals have discovered that arranging for a proportion of patients to leave the ward before 11am helps manage the total pressure on beds.

The Health Foundation calculates rising levels of chronic disease and an ageing population will see demand for health services rise over the next decade, putting additional pressure on hospitals that are already seeing bed occupancy rates of close to 90%.

Research by the Foundation's REAL Centre notes the NHS has fewer hospital beds per 100,000 population and shorter hospital stays compared to other comparable countries, but

while it demonstrates efficiency, 'increasing demand is now causing critical pressures in hospitals'. Even if the NHS continues to reduce the length of time people remain in hospital, 23,000 - 39,000 additional beds could be needed in 2030/31, analysis by The Health Foundation suggests.

In this context of an increasing demand for hospital beds, the nurses will have to adapt and embrace a new role in preparing patients for safe and timely discharge or transfer from the ward.



Following this conclusion, the *Nursing Time* proposes a new "learning unit" with the objective to provide the tools for nurses to adapt to this new reality.

The learning unit proposed should help the nurses:

- Identify the core principles of best practice within the discharge or transfer planning process in the UK
- Differentiate between a simple and complex discharge pathway
- Identify key issues to consider if a patient refuses to be discharged
- Instigate appropriate management for patients who self-discharge or abscond
- Describe multidisciplinary teamwork in discharge planning
- Explain how to deal with a complex discharge and with delays for patients

You may find more information <u>here</u>

Report on the European Project "Telenursing"

As you may already know, ENC is a partner of the European Project "Telenursing", aiming to improve the digital skills of nurses by creating training tools that would help

them to manage the increasingly requested "telecare" services (remote care).

The specific priorities of the Project concern contribution to innovation in and vocational education training (VET), adapting vocational education and training to labour market needs, as well as the creation and implementation of internationalization strategies for VET providers as mutual recognition of qualifications and learning outcomes. The objectives of this European Project are numerous and focusing on the development of the digital skills of nurses and the promotion cooperation and coordination among stakeholders in the field of healthcare on a national, and international level. The main desired outcome of the Project is to produce courses and tools that may sharpen the competence skills and facilitate the target professionals with working skills to confront to more technological advanced challenges in the working environment, in the new era of digital health technologies and courses, developed telemetry. All digital tools, reports, and produced material, will be disseminated to all participant countries and beyond, expecting to draw awareness authorities, companies, and institutions who will expectedly utilize and expand further the Project outcomes in the healthcare industry and education.



Since November 2022, ENC is indeed

actively contributing to the success of the project, notably by participating to all online and in presentiam meetings of the Steering Wheel Committee and the Quality Assurance Team, but also by providing all the necessary information of the current state of the profession of nursing and the concerns linked with the need for more telecare.

In addition, thanks to our members and colleagues who have contributed to the project by providing expertise, knowledge, and giving their insights regarding the necessity of Telecare, ENC was able to analyse the results and understand the gap to be filled concerning this topic. The variety of professionals interviewed has allowed the consortium to have a large vision of the lack of competencies of health professionals on this issue.

Our organisation is currently finalising the dissemination plan as ENC is the coordinator of the Working Package focusing on Dissemination, and the responsible for the advocacy, and the promotion of the European Project. *Telenursing* is now entering the second part of its agenda after having analysed the desk research provided by the partner in order to have better insights regarding the need for telecare.

In this context, we would like to invite you to complete the following survey available in various European languages: https://form.jotform.com/230613858964062

E-learning courses provided by the WHO

The 6th of July, the World Health Organisation (WHO) published an article on their website regarding the launching of two new e-courses on national strategic planning for tuberculosis (TB), and systematic screening for TB disease, at a meeting of its Strategic and Technical Advisory Group (STAG-TB). The new WHO e-courses have been added to the End TB Channel in OpenWHO. The latter brings together courses designed to build strategic and operational knowledge. It provides critical training on essential skills to facilitate the implementation of WHO's End TB Strategy based on sound ethics principles and due protection of human rights. Through this interactive platform, you may learn about the latest WHO TB guidelines on TB diagnosis, prevention, treatment and care, and what practical steps can be taken to ensure equitable access to quality and timely care for those most in need.

Using the latest adult learning principles, the courses consist of a combination of videos, presentations, quizzes and case studies and build on information provided in WHO operational handbooks on TB and other WHO guidance documents. They are free of charge and can be taken at your own pace. A certificate can be downloaded if you achieve a 80% score or higher in the final assessment.

"The End TB Channel in OpenWHO now features eight courses and has over 25,000 unique users registered", said Dr. Tereza Kasaeva, Director of WHO's Global TB Programme. "The new e-courses will serve as an important tool for national stakeholders, technical staff of WHO and partners, and consultants to build their strategic and operational knowledge on the latest developments in TB prevention and care, and contribute to efforts towards ending TB."

The two new e-courses are the following:

E-course on systematic screening for TB disease (duration: 2.5 hours): In this course you will learn about the role of screening for TB disease in global TB care, new approaches, tools and algorithms. You will also learn more about the WHO recommended risk groups for screening and how to prioritize risk groups. An important feature of this e-course is the interactive case-study that will give you the opportunity to put your new knowledge and skills into practice.

#END TB Channel
E-LEARNING COURSE ON
SYSTEMATIC SCREENING
FOR TUBERCULOSIS
DISEASE

#END TB Channel
E-LEARNING COURSE ON
NATIONAL STRATEGIC
PLANNING FOR
TUBERCULOSIS



E-course on National Strategic Planning for TB (duration: 1.5 hours): A national strategic plan (NSP) for TB is a key document that guides national authorities and stakeholders in how to comprehensively address the

TB epidemic through interventions within the health sector and in other sectors towards achievements of the health-related Sustainable Development Goals.

You may find more information <u>here</u>

European Commission wants to guarantee a fast response to future health crisis

The 30th of June, on behalf of the Health Emergency Preparedness and Response Authority (HERA), the European Health and Digital Executive Agency (HaDEA) has signed a framework contract with four contractors setting up the EU FAB network for sufficient and agile manufacturing capacities for different vaccine types (mRNA-based,

vector-based, and protein-based). These capacities will be kept operational and can be activated quickly, securing a total of 325 million doses per year in case of a public health emergency.

The EU FAB network comprises vaccine producers in the EU (Belgium, Ireland, the Netherlands, Spain) with



the objective of closing the gap between manufacturing and scaling up of vaccine production, while ensuring the capacity of the industry to produce life-saving medicines.

In this context, EU FAB will reserve manufacturing capacities for the EU to produce vaccines in case of public health emergencies and work as follows:

- 1. **Preparedness phase**: EU FAB reserves the necessary manufacturing capacity. The EU FAB facilities ensure their constant readiness to respond to a crisis by keeping their facilities up to date, ensuring staff is trained, and monitoring their supply chains, including stockpiling where necessary.
- 2. **Crisis phase**: Following the recognition of a public health emergency, the Commission decides to purchase vaccines and activate EU FAB. The EU FAB facilities will then rapidly start production and deliver the vaccines according to the deadlines set in the purchase contracts.

The network shall cover manufacturing capacities for mRNA, vector-based and protein-based vaccines. The selected vaccine manufacturers are:

- 1. Vector-based vaccines: Bilthoven Biologicals B.V
- 2. Protein-based vaccines: LABORATORIOS HIPRA S.A; CZ Vaccines and Laboratorio Reig Jofre SA
- 3. mRNA vaccines: Pfizer Ireland Pharmaceuticals and Pfizer Manufacturing Belgium

You may find more information <u>here</u>.