Professional Meeting: Strategies to Prevent Ventilator Associated Events

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Abstract

Since the 1950’s nursing has own into a professional organization through meeting several defined characteristics of what a professional occupation means. As part of the characteristics, one step to achieving professional status is through a professional culture that is sustained by formal professional associations. Since the achievement of professional status, nursing associations have grown into the hundreds, nationally. One nursing organization that has been around since 1969, is the American Association of Critical-Care Nurses (AACN). The American Association of Critical-Care Nurses offers an exceptional community of acute and critical care nurses who share knowledge, challenges and inspirations to create solutions for the nursing profession. In an effort to share knowledge, AACN offers a monthly live webinar. This monthly webinar, is considered a professional meeting which gives nurses an opportunity to learn about new evidence base practice and knowledge about their patient population.

Professional Meeting

**Background**

As nursing developed over the years, so has status the status of nursing. In the beginning nursing was viewed as simply an occupation, now it is a professional organization. During the 1950’s, nursing leaders worked tirelessly to establish nursing as a profession based on what had been deemed characteristics of a profession. Some of the characteristics included specialize competencies, dedication to raise the standards of the profession’s education and practice, a code of ethics, self-regulation and having a professional culture that is sustained by formal professional associations (Matthews, 2012). Currently, there are hundreds of nursing associations all over the nation, and several international organizations, as well. It was suggested that professional organizations and associations, among nursing, are considered critical to creating energy, flow of ideas and maintaining a healthy profession that advocates for the patients, nurses and society (Matthews, 2012). Each of the more than one hundred associations speak for nurses and nursing, based on their mission and vision, goals, interests and purpose. The American Association of Critical-Care Nurses (AACN), is just one of many nursing organizations, however it will be the focus of this discussion for the attendance of a professional meeting.

**About AACN**

The American Association of Critical-Care Nurses was first founded in 1969. However, the name of the association was initially American Association of Cardiovascular Nurses. The association was founded based on the new development of intensive care units (ICUs) and in an effort to educate nurses (American Association of Critical-Care Nurses [AACN], n.d.a). In the latter half of the 1950’s, the first ICUs were established (Vincent, 2013). The early development of intensive care units was slightly mysterious and a rather frightening place for not only visitors but nursing staff, as well (Vincent, 2013). As ICUs began to expand and treat even sicker patients, more education, teaching and critical thinking skills were necessary to care for this patient population. Thus, the development of AACN, as a specialized nursing organization in 1971 was indispensable, by developing a commitment to put patients and families first, by optimizing critical care nursing contributions, through education.

The mission of AACN is to drive for excellence because nothing less is acceptable. Driving for excellence is based on the acute and critical nurses whom rely on AACN for knowledge and influences patients and families by keeping their promises. Excellence is also fueled by AACN’s values of accountability, innovation, leadership and collaboration (AACN, n.d.a). In an effort to provide education for critical care nurses, AACN holds annual National Teaching Institute and Critical Care Exposition (NTI) conferences. The National Teaching Institute offers learning, motivation, inspiration and celebration for high acuity and critical care nurse (AACN, n.d.c). By participating in this yearly conference, participants are able to view over 180 recorded sessions that will investing in their education and provide continuing education contact hours.

The American Association of Critical-Care Nurses is a 501(c)(3) nonprofit association that is the nation’s world’s largest specialty nursing organization (AACN, n.d.a). Currently, AACN’s community has over 100,000 memberships with over 200 chapters throughout the United States. There are 6 different membership options to choose from, which range from 52 to 78 dollars annually. Student membership and retired memberships are the cheapest at 52 dollars. Students who are eligible for membership include those in an accredited, professional nursing program and is not currently licensed as a registered nurse (AACN, n.d.b). Holding an AACN membership comes with benefits. Some of the benefits include discounts on clinical resources such as procedure manuals, pocket cards for EKG strips and multiple free ways to earn continuing education credits towards license renewals.

Another benefit through AACN’s website are monthly held webinar series. These webinar series keep members and nonmembers current on latest evidence-based learning and clinical practices in the acute and critical care areas. For the remaining of the discussion, the focus will be placed on a webinar that was presented on June 8th, 2017 on strategies to prevent ventilator associated events.

**Presentation**

On June 8th, 2017, a live webinar was held for a presentation on strategies to prevent ventilator associated events. The key presenter on the subject was John Gallagher, DNP, RN, CCRN, CCNS, RRT. John Gallagher is a trauma program manager and is a clinical nurse specialist for the division of trauma, surgical critical care and emergency surgery at the Penn Presbyterian Medical Center in Philadelphia (AACN, 2017). John Gallagher has worn many hats throughout his career in the medical field. In addition to being a registered nurse, Gallagher is a registered respiratory therapist (RRT) and has practiced as a paramedic in the state of Pennsylvania. What makes Gallagher qualified to speak about ventilator associated events is his career experiences as a RRT and practicing as a nurse in a variety of clinical settings such as the trauma resuscitation unit, surgical intensive care unit and pulmonary step-down unit (AACN, 2017). Additionally, Gallagher has taken interest in acute respiratory distress syndrome (ARDs), mechanical ventilation and endpoints of resuscitation.

All of information mentioned above, about John Gallagher, was provided during the introduction of the webinar. The introducer of the speaker did not announce their name. However, Gallagher did thank the introducer by the name of Mike. Prior to viewing the webinar, resources are provided such as the presentation viewed. This portable document format (PDF) that is provided is considered the outline or agenda that was followed throughout the presentation. The main objective of this meeting was to define ventilator associated event (VAE) and associated pneumonia, identify strategies to prevent VAE and list nursing interventions that can help prevent VAE in patients on mechanically ventilators (AACN, 2017).

Since the webinar is completely virtual, attendance of the webinar is unknown. However, if the webinar was viewed live on June 8th, then participants did have the opportunity to ask questions throughout the meeting. The questions were electronic based through the webinar’s platform. Some of the questions ranged from, how often suction equipment be changes and how often should this equipment be changed. The answer to these questions should be available in hospital policies. However, at times it is difficult to navigate policies to find answers. The webinar, strategies to prevent ventilator associated events, holds valuable resources and interventions that could be utilized within the community, this will be discussed in the following section.

**Community**

Ventilator-associated events was initially defined by the Centers for Disease Control and Prevention’s National Health Safety Network (NHSN), in 2012. One study conducted, viewed 3,028 mechanically ventilated patients, for VAEs. Of the 3,028 individuals, 77% were found to have one ventilator-associated condition and 29% had one infection-related complication (Diiulio, 2015). Ventilator-associated events are not only abundant but costly, as well. An additional studied found that VAE cost an estimated $19,000 to $29,000 additional to the individuals mounting hospital bill (Diiulio, 2015). Rumors have sparked that VAEs could be added to the “never” event list. This list particular event list leads to hospitals not being reimbursed for care required to treat VAEs (Biiulio, 2015). Therefore, hospitals should put more time and investment on preventing VAEs.

Community wise, this particular webinar on strategies to prevent ventilator associated events, can impact not only the community’s inpatient population but home health nurses and family caregivers. Patients can be at home on ventilators, with the primary care provider of the ventilator being their family. Therefore, education about ways to prevent VAE is important for family caregivers. Education is a key component to reducing the rates and preventing VAEs. Families could be educated on the importance of oral care and frequency, checking the ventilator’s cuff, fluid management, exercise or mobilization and keeping the ventilated patient’s head elevated. With meticulous care, hospital readmission rates could also be reduced for patients at home on ventilators due to possible VAEs.

**Summary**

Researching and viewing a professional nursing meeting has brought new profound insight into nursing professional organizations and associations. Personally, little was known about American Association of Critical-Care Nurses and the way nursing associations developed. On the conquest to achieve professional status, nursing leaders began following the well-developed characteristics required to label an occupation as professional. One of the key factors that led to nursing associations, was based on the characteristic of having a professional culture that is sustained by formal professional associations. Hundreds of national nursing associations have been developed to address specialties, patient care and continued nursing education. American Association of Critical-Care Nurses was initially developed in 1969 due to the need of nursing education related to patients in the intensive care units. With evolving times, AACN offers continued education through monthly webinars for acute and critical-care nurses. It was interesting to learn more about the presenter of this particular webinar, especially to see their qualifications on the subject being presented. For each webinar, the presenter’s accreditation is listed to assure their knowledge behind the subject. If interest arises to watch the June 8th, 2017 webinar on strategies to prevent ventilator associated events, the professional meeting can be viewed virtually at the following URL: https://www.aacn.org/education/webinar-series/wb0040/qa-strategies-to-prevent-ventilator-associated-events. Creating an account and logging in is required to view the webinar.

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