



Consultative Meeting on Collaborating
Centre Network for Nursing in Europe

Athens, 21-23 November 1983



ICP/MPM 002(4)/6
2231E
9 November 1983

ENGLISH ONLY

*W.H.O. - Col. Centre
Nursing - MS*
W.H.O. - No. 2 - Prog. - Med. - 7 - Proc. -
**COLLABORATING CENTRE NETWORK AND WHO/EURO/NURS
1984-1989 MEDIUM-TERM PROGRAMME
(WHO POLICIES AND PRACTICES)**

INDEXED

The purpose of this communique is to review for your consideration the subject of collaborating and participating centres as established in relation to the multinational nursing care study. Since this study will be completed at the end of 1983, it will be necessary to determine which networking structure, within the context of WHO policy, can most effectively and realistically support and expand the research expertise and demonstration projects developed during this project.

WHO recognizes the great amount of work and considerable resources which have been invested by the countries involved in the nursing care study. It is therefore an important priority of the Nursing Unit of the European Regional Office to utilize and extend the nursing research expertise represented in the collaborating and participating centre network. In order to present you with the background information relevant to the decisions which must be made, the WHO general policy regarding collaborating centres will be outlined. Thereafter, the collaborating and participating network developed in relation to the international nursing care research project will be reviewed.

WHO Collaborating Centre Network

According to WHO policy as of May 1982, a collaborating centre is "an institution designated by the Director General to form part of an international collaborative network carrying out activities in support of the Organization's programme at all levels".^a

Regional directors are ultimately responsible for proposing an institution for designation as a WHO collaborating centre. Staff from WHO/Geneva and the respective regional programme together assess the capacity of the proposed institution to meet the selection criteria and to carry out the functions of a collaborating centre. Regional programme staff are thereafter responsible for the management of collaboration with the centres. This involves close contact with the respective centres and continuous monitoring of the work produced in the context of a plan of work which explicitly states the functions the institution is to perform and the time schedule for completing them.

The selection criteria to assess the capacity of a proposed institution to carry out a plan of activities in support of the WHO programme include:

- the scientific and technical standing of the institution concerned at the national and international levels;
- the place the institution occupies in the country's health, scientific and/or educational structures;
- the quality of its scientific and technical leadership and the number and qualifications of its staff;
- its prospective stability in terms of personnel, activity and funding;
- the working relationship which it has developed with other institutions in the country, as well as the intercountry, regional and global levels;

^a WHO manual XV.2.75.

- its ability, capacity and readiness to contribute to WHO programme activities, whether in support of country programmes or by participating in international cooperative activities.^a

While these are general criteria indicating an institution's qualifications and potential to collaborate in activities which support WHO programmes, the contractual arrangements are specific. The contract, as mentioned, relates to a plan of work. This specificity extends to the title and use of WHO's name. This means that when an institution is designed as a WHO collaborating centre the use of this title in letterheads, references, etc., must be followed by a specific sphere of activity, as for example "WHO collaborating centre for research on...". Each designation is usually for an initial period of four years with the possibility of a renewal for the same or a shorter period.

Expanded Network Established for 1978-1983 Medium-term Programme in Nursing-Midwifery

To meet the goals of the 1978-1983 medium-term programme in nursing-midwifery in Europe and to carry out the international nursing care study, it was considered necessary to establish an expanded collaborating network. The model developed involved a linked series of collaborating and participating centres established at the national level (see Annex I). In addition to collaborating centres of the type discussed above, three categories of participating centres were formally associated with the WHO study programme.

Type I centres. Type I centres were established as formal research arms of the collaborating centres organizationally connected to the Regional Office through the respective national collaborating centres. Working together with the collaborating centre, they were to help develop the research study design and instruments. Their functions were to include experimenting with alternative patterns of organizing, managing and delivering nursing services, as well as the field-testing of research instruments. In the multinational nursing care study Type I centres were the actual settings of the data collection.

Type II centres. The second category of participating centre, Type II centre, was more loosely connected to and coordinated by the collaborating centres. They were to experiment with the nursing process method of nursing care as outlined in the medium-term programme and form a network of groups of nurses for the purpose of improving nursing care using the nursing process method. Thus, these centres were conceived as an organizationally flexible structure which could generate various types of nursing research in the context of the 1978-1983 medium-term programme.

Type III centres. A final category, Type III participating centres, was formally associated with the programme for informational purposes. The least formalized link in the collaboration model, it was anticipated that the establishment of Type III centres was most likely to take place in countries not yet ready to establish a collaborating centre or Type I or Type II participating centres. However, an organizational consequence of the latter situation is that centres which have the primary function of information exchange would not necessarily interact with a collaborating centre. The result then would be an indirect line of interaction between Type III centres and the Regional Office, a deviation from the organizational model presented in EURO/NURS/80.1 (Annex 1).

Differences Between the Two Models

The extension of the collaborating network concept for the purposes of the 1978-1983 medium-term programme for nursing in Europe deviates from the WHO collaborating centre model in several basic aspects:

(1) The most fundamental difference lies in the wide range of centres formally attached to WHO. Collaborating centres are expected to be selected on the basis of sufficient resources, stability and expertise to independently fulfil specific WHO programme functions. The three types of participating centres, especially the Types II and III centres, vary widely in their potential to fulfil the criteria outlined above.

(2) A second essential difference lies in the managerial aspect of the model. Regional programme staff are responsible for managing the working relationships with collaborating centres. Participating centres attached to the Nursing Unit may or may not have their interaction managed by a collaborating centre.

^a WHO manual XV.2.110.

The historical development of participating centres has resulted in 27 Type I centres, 23 of which are organizationally linked to a collaborating centre. Four Type I centres fulfil functions of both collaborating and Type I centres, as well as having formal links to Type II centres. Sixty Type II centres have formal links to either a collaborating or a Type I centre, while 13 Type II centres exist without organizational linkage to the Regional Office. All but five of the now existing 160 Type III centres have an organizational connection to a collaborating centre. Eighteen countries in the European region were not involved in the nursing care study and thus were not formally integrated into the collaborating and participating centre network. (Annexes II and III summarize the existing network arrangements.)

Issues Related to a Future Collaborating Structure

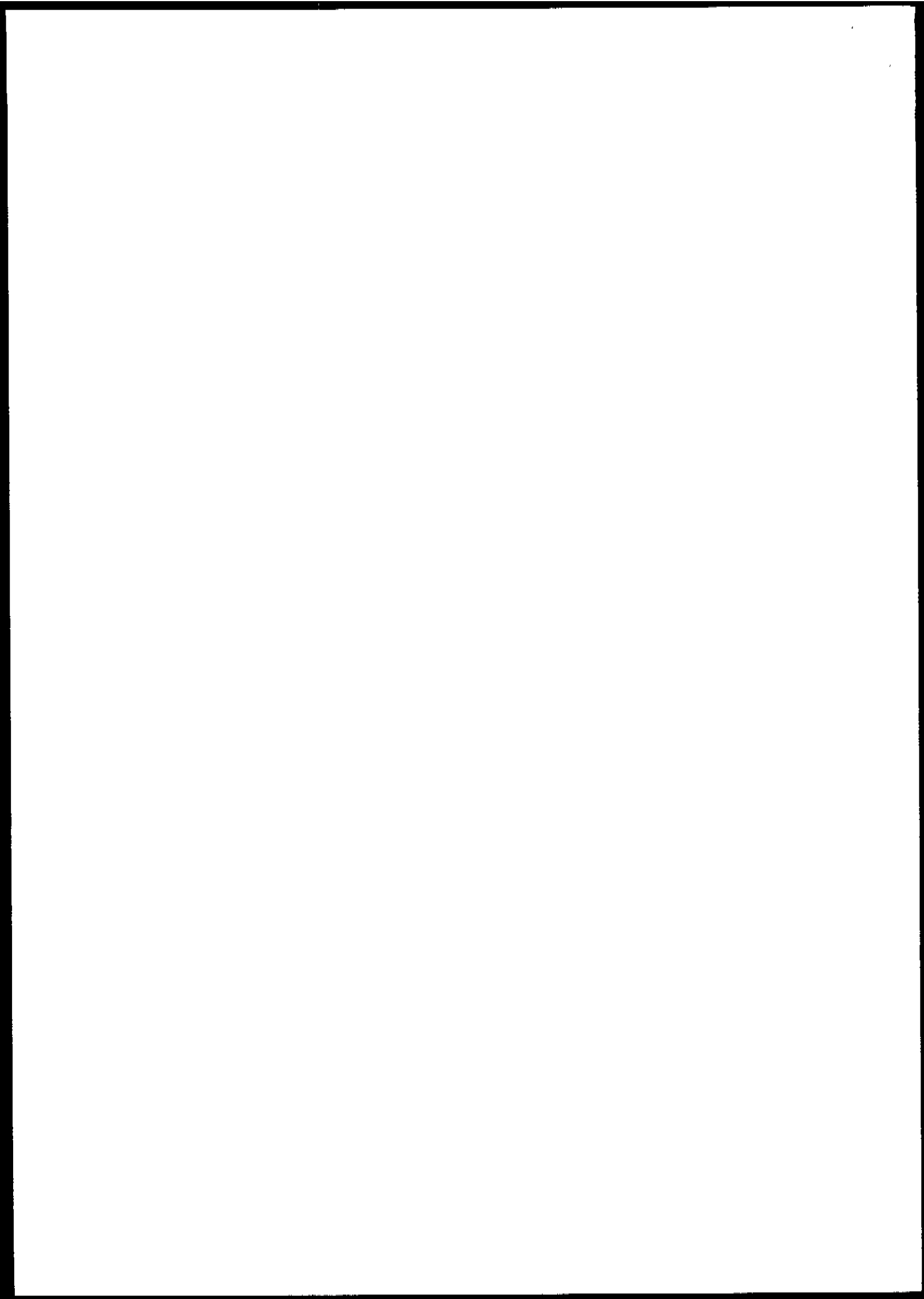
A number of questions and issues have arisen in relation to the expanded network structure created for the nursing care study and other activities of the 1978-1983 medium-term programme. For example inquiries have been received from Type II centres regarding criteria for their becoming Type I centres. General underlying issues inherent in this subject are:

- What would be the function of an organizational unit created for a specific task in a program which will soon be completed?
- How does this issue relate to the need for networking among countries in the Region which have not yet been formally involved in the structure?

An additional concern inherent in expanding network structures is the management function. The regional programme staff are responsible for managing the collaborating centre contracts and relationships. As indicated above not all of the three different types of participating centres have organizational links to collaborating centres. An important managerial question relates to an appropriate networking structure for coordinating future activities of those centres involved in the 1984-89 programme of work. Therefore, now that the 1978-1983 medium-term programme and the multinational nursing study are drawing to a close, a decision must be made about the future structure of a network created to achieve the goals of that programme. Important issues implicit in the decision include:

- (1) - conformity of the collaborating centre network of the Nursing Unit with WHO policy;
- (2) - preserving and extending the expertise and resources developed during this period;
- (3) - effective management of the network structure decided upon;
- (4) - extending the structure and/or participating to countries not yet involved;
- (5) - relating the structure to the priorities of the next medium-term programme.

The Consultative Meeting on the Collaborating Centre Network will consider these issues and work on a plan for a network structure which can build on the progress made during the 1978-1983 period while addressing the goals and activities of the next medium-term programme.



WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR EUROPE



WELTGESUNDHEITSORGANISATION
REGIONALBÜRO FÜR EUROPA

ORGANISATION MONDIALE DE LA SANTÉ
BUREAU RÉGIONAL DE L'EUROPE

ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ
ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

EURO/NURS/80.1
15 March 1980

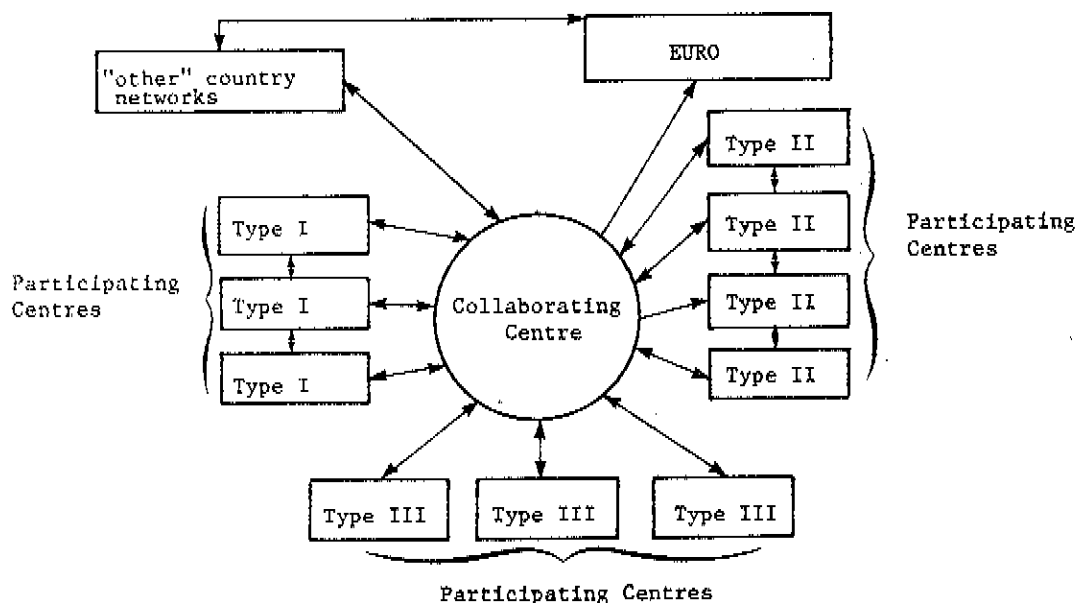
ENGLISH ONLY

MEDIUM-TERM PROGRAMME IN NURSING/MIDWIFERY IN EUROPE
INFORMATION ON COLLABORATING AND PARTICIPATING CENTRES¹

prepared by the Nursing Unit
WHO Regional Office for Europe, Copenhagen

In order to develop the programme in a planned and organized fashion a linked series of collaborating and participating centres has been established at national level and on region-wide basis. These centres form both national and multinational networks and ensure that programme principles and practices are implemented at the point at which nursing care reaches people and where students are educated in nursing. The collaborating and type I centres are directly involved in the study of nursing interventions, which forms the major research thread in the programme.

A model of a system at a country level and where there is a collaborating centre in the country could resemble the following:



Please note that there is no fixed number of any type of participating centres

¹This document brings together and updates information provided in previous documents - (EURO/NURS/78.2, 1978, and ICP/MFM 026, 1979)

The following presents an outline of the types of centres in a national system, how they are established and the work which will be done in them.

1. COLLABORATING CENTRES

1.1 General

1.1.1 Institutes that possess the necessary expertise and facilities may be requested by WHO to fulfil a specific function or range of functions related to the WHO research programme. (The term "institution", as used in this context, is intended to apply to any institute, department or laboratory, whether independent or part of a larger establishment, that is engaged in research). Certain of these institutions may, either from the outset or after a preliminary period during which their value and capacity can be assessed, be designated "WHO Collaborating Centres".

1.1.2 "Designation" of an institution implies that its collaboration with the Organization is formally recognized and that it is entitled to be called "WHO Collaborating Centre". Designation is made with the agreement of the head of the establishment to which the institution is attached or with that of the director of the institution, if it is independent, and after consultation with the national government. An institution is designated initially for a term of three years; the designation may be renewed for a further period of three years. A collaborating centre may be jointly designated by WHO and by another competent and specialized international body, e.g. FAO.

1.1.3 The selection of an institution for designation as a collaborating centre depends not only on its ability to carry out the functions required of it by WHO but also on a number of other factors, in particular those of stability and the capacity to maintain high technical standards over a long period.

1.2 Functions of WHO Collaborating Centres

Examples of the types of function that may be carried out by WHO collaborating centres are listed below: this list should not be regarded as comprehensive:

- research of interest to WHO programmes but not necessarily being financially supported by WHO;
- standardization of methods, terminology, diagnostic procedures, biological substances, reference strains, etc.;
- storage and distribution of standard strains;
- identification of biological material;
- development of new methods and techniques; clinical trials;
- drug screening and monitoring;
- collection, processing and analysis of data;
- provision of consultant assistance to WHO;
- research training in specific areas;
- refresher training for WHO staff;
- organization of scientific meetings on behalf of WHO;
- coordination of collaborative studies;
- publication and dissemination of information;
- assistance to WHO in the implementation of WHA25.60 by undertaking some of the functions listed above in the field of biomedical research.

1.3 Specific criteria for selection of collaborating centres within the medium-term programme in nursing/midwifery in Europe

1.3.1 The centre should employ a nurse or nurses willing and sufficiently proficient to work effectively on the development of designs (protocols) for use in the standardized studies of the nursing process

¹Sections 1.1 and 1.2 are direct quotes from the WHO Manual, Part X.7, pp. 6-7

1.3.2 Centres should have the resources necessary to employ and provide services for the nurse researchers.

1.3.3 Centres should have access to supportive services which may be necessary for developing the designs, e.g. computer services, expert advice in areas such as statistics, economics, sociology, etc.

1.3.4 Centres should agree to the free exchange of information, models, designs, etc. among themselves, the Regional Office, and other centres associated with the programme.

1.3.5 Nurse researchers and other relevant persons involved should be free to attend working groups, meetings, etc. at which problems related to programme developments are discussed.

1.4 Specific work to be carried out in each collaborating centre associated with the medium-term programme in nursing/midwifery in Europe:

1.4.1 working together with other collaborating centres, selected type I participating centres and the Regional Office to develop the study designs including protocols, schedules, etc. which will be used to conduct the standardized studies of nursing interventions using the two study groups previously selected (for more detailed information on the study groups see the study design). The development of protocols and schedules will include the field-testing of these in selected type I participating centres and the subsequent modification as required. The design package will include the entire recording package to be used in the multinational studies. Plans for the study will be developed using the four steps of the nursing process as outlined in the model being used in the medium-term programme in nursing/midwifery in Europe;

1.4.2 where languages other than the official languages (English, French, German and Russian) of the European Region of WHO are concerned, to translate the study design and other programme documents into the national language and to provide the Regional Office with copies of these documents;

1.4.3 to identify and assist in the development of type I participating centres in the country in which the collaborating centre is located. Where countries so desire and the research necessitates, there may be more than one or two type I participating centres. Where there is a larger group of these centres, networks linking all centres in a well-developed chain of communication and interphased activity will require to be developed by the collaborating centre.

1.4.4 to assist with the development and use of teaching/learning packages related to the programme;

1.4.5 to conduct in-service education programmes with staff in type I participating centres who will be directly involved in either the field testing of research designs, the implementation of the research, or both;

1.4.6 to assist and supervise, in the appropriate type I centres, the implementation of the study and to act as the initial receiving centre for data coming from type I participating centres; to carry out certain steps in the management of this data (e.g. checking for errors in data entry, etc.) and to send the data in an appropriate form to national and/or Regional Office centres;

1.4.7 on request from the Regional Office, to make available programme managers and/or others involved in the programme to attend meetings to be called by the Regional Office as part of the development of the programme;

1.4.8 to participate, by giving leadership at the local/regional/national level, in the conduct of concurrent and terminal evaluation of the research carried out;

1.4.9 at the request of the Regional Office and with agreement of the national governments concerned, to accept responsibilities to be specified by the Regional Office with regard to the development and participation of type I and/or type II centres in countries of the European Region which do not have collaborating centres but wish to participate in the programme through the development of the types of participating centres mentioned above;

1.4.10 to carry out other programme activities as requested by the Regional Office and/or the national governments concerned, on the basis of agreements to be drawn up by all parties concerned and specific to the work involved.

1.4.11 where requested by national authorities, or where it is desirable and there is no objection from national authorities, to identify and develop a network of type II and III participating centres in the country in which the collaborating centre is located or in the section(s)/region(s) of that country in which the centre works, taking into consideration federal types of national organization;

1.4.12 to develop the managerial and information systems necessary to effective conduct of the work outlined above and to keep relevant national, regional and/or local authorities informed of programme developments;

1.4.13 to provide relevant journals, other publications, professional groups, schools, etc. with suitable information concerning the medium-term programme in nursing/midwifery in Europe as a whole and items such as the nursing process, assessment and evaluation methods, quality control, etc., in particular.

2. PARTICIPATING CENTRES

2.1 Type I - centres formally associated with the programme and agreeing to participate in the multi-national studies using standard research instruments. Such centres should also agree, as part of the study, to experiment with alternative patterns in the organization and management of nursing services.

2.1.1 Criteria for appointment

- there must be an established nursing service within the centre, school, etc.;
- the service referred to above should have nurse leadership and the nurse in charge should have authority to make decisions relative to nursing;
- in the case of service centres (hospital wards, health centres, etc.) the centre should be one which is currently providing nursing service to groups of patient/clients which fall into the classification within which the medium-term programme will conduct its studies (the elderly and/or people having selected types of elective surgery);
- preference will be given to service centres which have affiliation with a nursing school;
- the staff of the centres and related management persons should have a strong commitment to programme goals.

2.1.2 General comments

With the foregoing as basic criteria in mind, type I centres will be identified and developed in different ways in different countries depending on the resources available and the involvement of national and regional authorities in the programme. For example, in Finland there is likely to be a country-wide network of these centres. In the Netherlands and Switzerland there may only be one or two. The span of control which can be effectively exercised by the relevant collaborating centre should be a major criterion in deciding the extent of network development.

Where design development is concerned, it is evident that selected type I centres in each country or region where a collaborating centre exists will have to be used as centres for field testing the designs. Again, the decision regarding which centre or centres should be used should be left to the good judgement of the programme managers in the collaborating centres in discussion with the participating centre(s) concerned and relevant national authorities.

When the design protocols and the entire data collection and management system, have been field tested and finalized and when all type I participating centres have completed the introductory in-service training programme, a date or series of dates will be set on which all centres will identify the study groups and begin to provide nursing care using the standard protocols and schedules, study data will then begin to be collected,

In countries where the national language is not one of the four official languages of the European Region of WHO, or is not the language of the country in which the collaborating centre with which the type I centre works, type I centres would need to be responsible for translating into the national language all material relevant to the conduct of the studies.

2.2 Type II - centres formally associated with the programme and agreeing to experiment with the provision of nursing care using the nursing process method as outlined in the medium-term programme in nursing/midwifery in Europe.

In the context of the medium-term programme in nursing/midwifery in Europe, these centres are much more loosely connected to and/or controlled by the collaborating centres. They are intended to form a network of health service centres and/or schools in which groups of nurses and their colleagues decide they would like to come together for the purpose of improving nursing care in an organized, collegial fashion using the nursing process method as it is defined by the medium-term programme in nursing/midwifery in Europe. It is anticipated that these centres would form a network linked by common purpose, a sound knowledge and acceptance of medium-term programme concepts and methods. These centres will have access to and will be free to adapt standard study designs prepared for use in the type I participating centres. Their investigations can be carried out on a local, regional and/or national level as decided by relevant national authorities. The results of work done in these centres should routinely be sent to the Regional Office. The results of these projects may also, in the long term, provide very useful information which will help clarify areas in which multi-national studies need to be conducted. If studies carried out in these centres are well done they could result in the development of new knowledge in nursing.

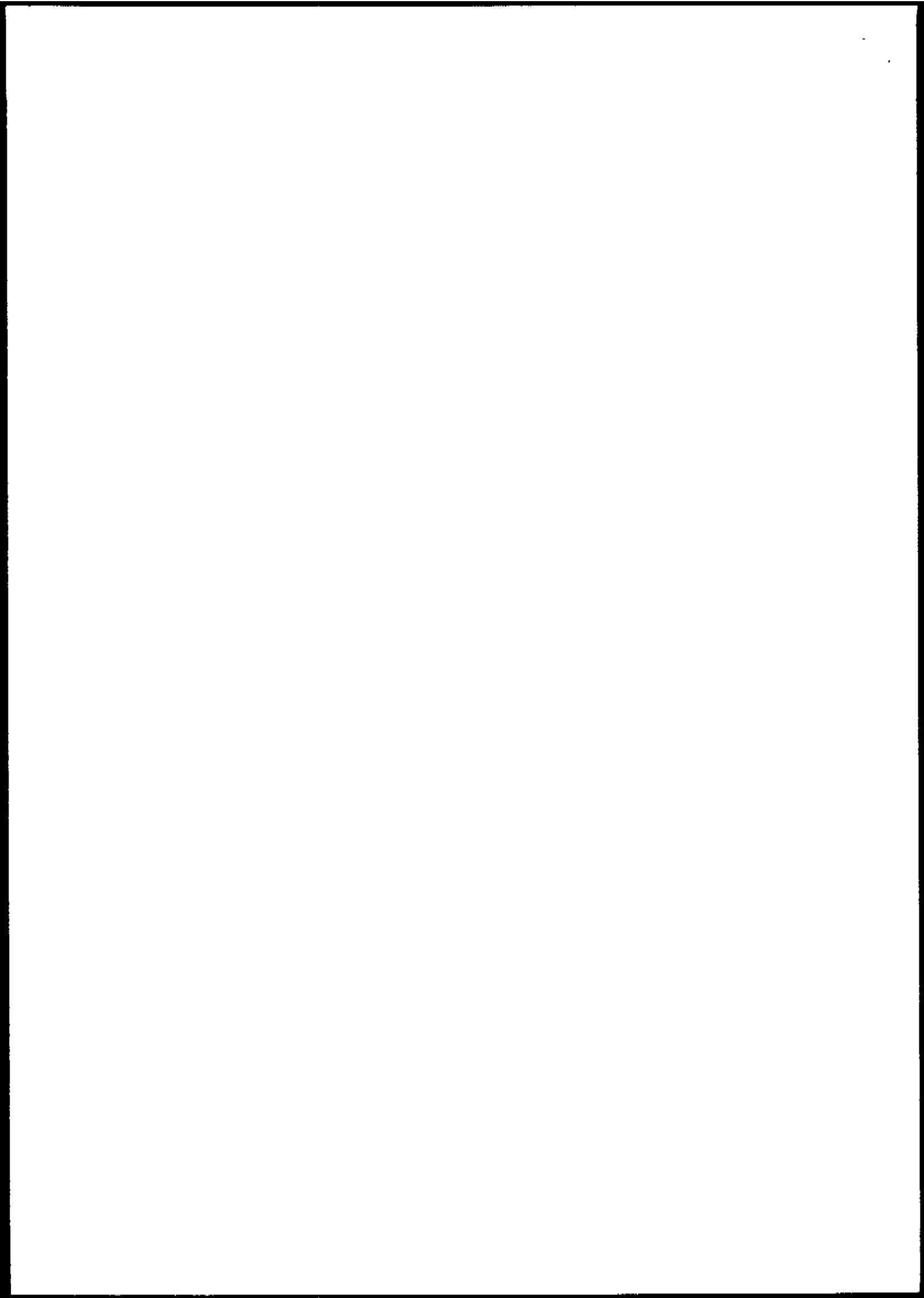
These centres could, in exceptional circumstances, be used in place of a type I centre to field test designs.

2.2.1 The links among these centres, and from these centres to collaborating centres will differ from country to country, depending on:

- the existence of a national collaborating centre and its role in national nursing development;
- the overall involvement of the country in the medium-term programme in nursing/midwifery in Europe.

2.3 Type III - centres formally associating themselves with the programme and wishing only to be kept informed on a regular and supplementary basis of programme development. Such centres would also agree to inform the Regional Office of the results of the use of programme concepts or methodologies.

These are the least formalized and most loosely linked of the three types of participating centres. Their establishment is most likely to take place in countries which are not ready to establish a collaborating centre or type I or type II participating centre. In countries where those other types of centres are present, there is nothing to prevent a collaborating centre taking type III centres into its overall programme network. On the other hand, a group of nurses or an institution may contact the Regional Office direct and ask to become a type III participating centre. Where there is a collaborating centre in the country from which such a request comes, the Regional Office will inform the collaborating centre concerned and the linkage will then be worked out between the group requesting type III association, the collaborating centre and the Regional Office. In countries where no collaborating centre is located, the Regional Office will undertake to service type III participating centres.

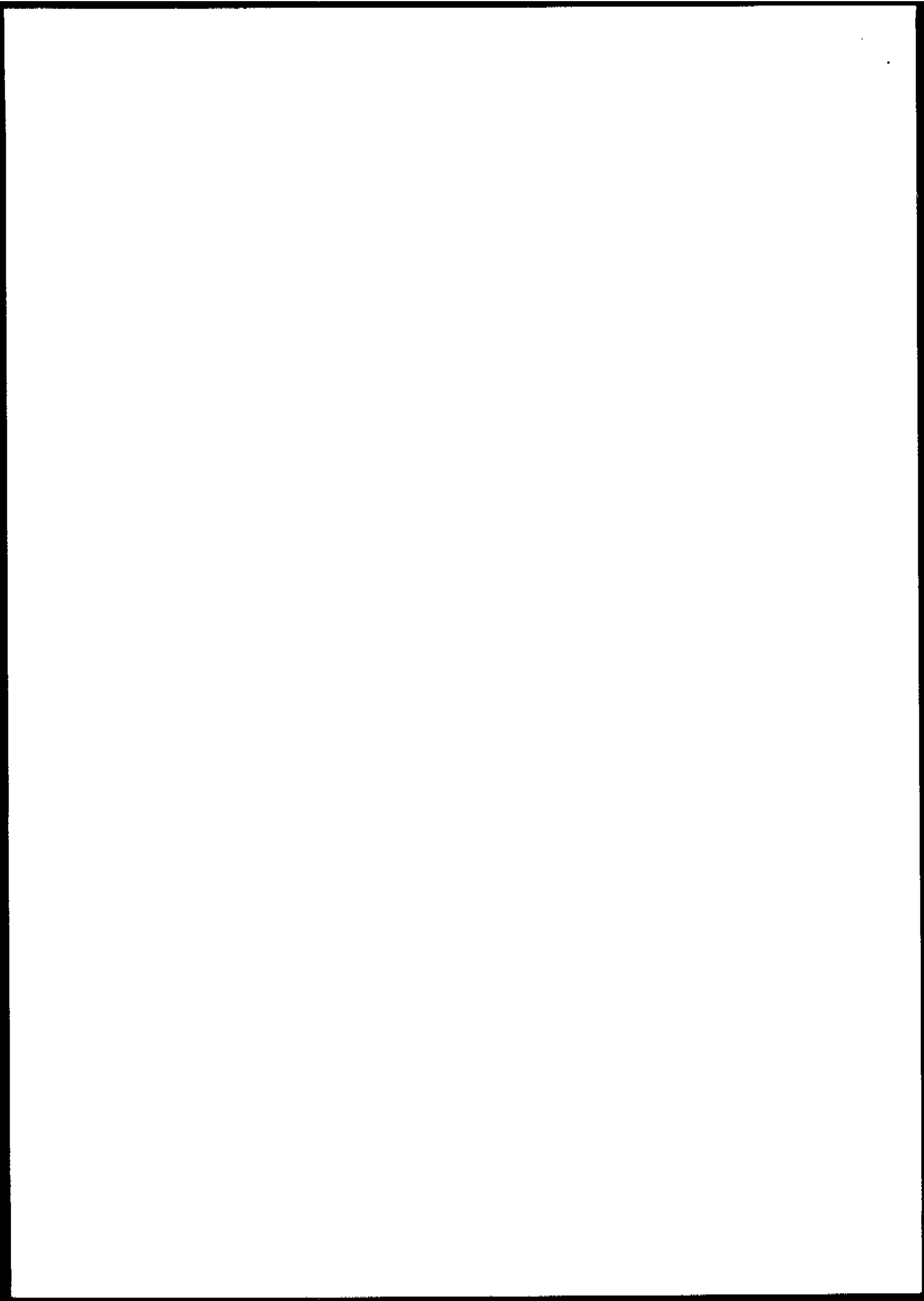


MTP NURSING/MIDWIFERY

W.H.O. EUROPEAN REGION

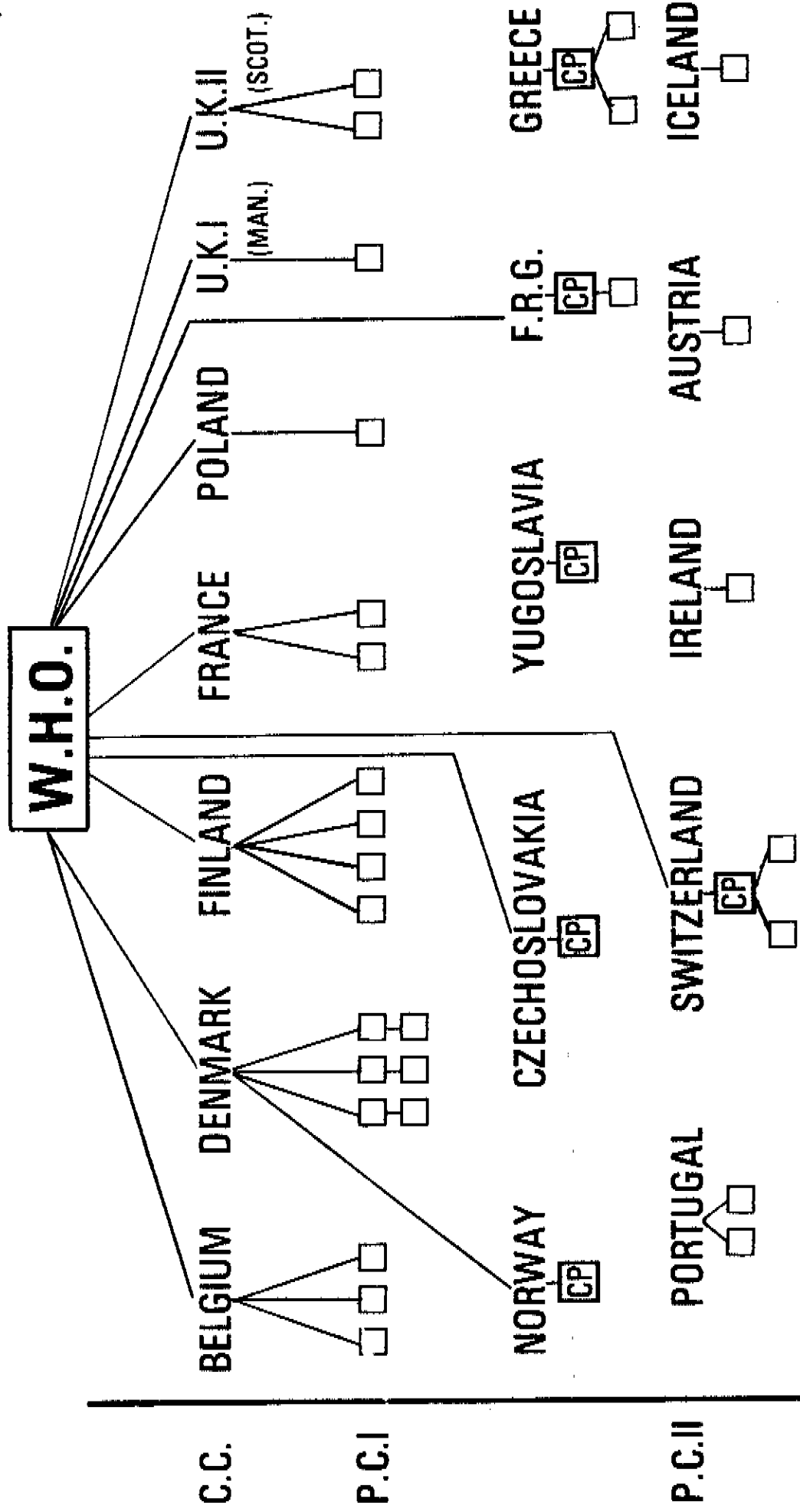
MULTINATIONAL STUDY		COUNTRIES IN MULTINATIONAL ORGANIZATIONAL NETWORK NOT IN MULTINATIONAL STUDY		REMAINING COUNTRIES IN EURO
7 COLL. CENT.	(6 COUNTRIES) BEL - POL - DEN - FIN - FRA - U.K.	TYPE II APPROX. 67 ⁺	(5 COUNTRIES) SWI - POR - IRE - AUS - ICE	15
27 TYPE I CENTRES	(5 COUNTRIES) NOR - CZE - FRG - GRE - YUG	TYPE III APPROX. 150 ⁺	(2 COUNTRIES) DDR - HUN	
<u>34 CENTRES</u>	<u>11 COUNTRIES</u>	<u>251⁺ CENTRES</u>	<u>18 COUNTRIES</u>	<u>33</u>
TOTAL COUNTRIES IN EURO:				

A.C. COOPER 1982



MULTINATIONAL AND NATIONAL NETWORKS FOR COLLABORATING AND PARTICIPATING CENTRES 1982-83

A.C. CHAKRABARTY



P.C.III →