

## **Introducing the Critical Care Nurses Association of Zambia**

The Covid-19 pandemic highlighted the crucial role of critical care nurses globally. In my own practice, I have had the privilege of working with critical care nurses in both Zambia and the UK. Having been seconded to be a Matron for a critical care unit in London during the UK first wave, I then chose to return to Zambia in September 2020 to support our partners and have spent a major part of my time here. In December 2021, I was awarded a BACCN membership grant, to support the newly formed Critical Care Nurses Association of Zambia (CCNAZ), which included the development of the first national guidelines on safe staffing in critical care and supporting their first national CPD event.

Zambia is a low-middle income country in sub-Saharan Africa and this project builds on over seven years of partnership working and was in direct response to an expressed need identified by critical care nurses. Our health partnership has focused on capacity building emergency, trauma and critical care nursing. Over the years, we have been involved in several successful projects, which have seen both Emergency and Trauma, and Critical Care Nursing programmes move to Bachelor of Science level. The development of Faculty through pump-priming with a Master of Science programme is its final phase and currently we are enhancing and extending practice through a series of quality improvement projects in identified hospitals.

The BACCN project has progressed well, with the CCNAZ being formally registered, the executive committee established and work commencing on several projects. The Association recognises the silent epidemic caused by the Covid-19 pandemic in terms of the hard-won gains in reducing communicable and non-communicable diseases. The Association acknowledges that in many hospitals, critical care nurses may be the only trained specialists available, therefore, it is uniquely placed to support the nationally dispersed workforce. Projects have included a literature search on safe staffing and a draft statement has been agreed. A bonus output is the Executive team have identified due the high burden of trauma, there is urgent need to develop a trauma workshop for critical care nurses completing the specialist practice programmes. This is an exciting development as the programme is due to be delivered shortly.

As BACCN members I am sure we value and recognise the benefits a nationally recognised organisation provides and CCNAZ are delighted they are now in position to represent critical care nurses in Zambia and share knowledge and good practice much as BACCN do.

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