

Using ICNP to enhance ICHI

Ensuring the contribution of nursing is accurately reflected in resource management systems across the world

The International Classification for Nursing Practice (ICNP), a product of the International Council of Nurses (ICN), is an agreed terminology, or dictionary of terms, that enables nurses to describe and report their practice in a systematic way. The resulting information is used to support care and effective decision-making, and to inform nursing education and health policy.

Nurses are the largest group of health workers in most health care systems. While databased information can provide a powerful means of characterising nursing care activities and costs, and demonstrating the value of nursing, the actual use of data-based information for these purposes has been patchy, making local, national or international comparisons difficult, if not impossible.

The World Health Organization's (WHO) International Classification of Health Interventions (ICHI) is being developed as an international standard for collecting, reporting and analysing data on health interventions. ICHI spans all sectors of the health system and a wide range of potential applications are envisaged, including use of the classification as a building block for international case mix development. Inclusion of interventions in ICHI is essential to ensure that nursing is represented in the international health information infrastructure of the future.

ICN is working with WHO, contributing to the development of ICHI, using ICNP as a resource for nursing content. In comparing content between ICNP and ICHI, gaps in ICHI were identified.

This work, involving a comparison of content and a gap analysis, has served as a useful starting point for enhancing our understanding of nursing and case mix, involving an exploration of a) the ability of ICHI to capture existing data-based ICNP-encoded data, in order to concentrate attention on those interventions that nurses **actually** perform in practice, rather than on a potentially much larger group of interventions that nurses **might** perform, and b) the potential contribution of ICHI to existing tried-and-tested systems for nursing resource management.

It also provides a vehicle for piloting the transformation of ICNP-encoded data into ICHI-encoded data (e.g. an ICNP concept recorded by a nurse locally can be converted into its corresponding ICHI concept for potential use in a national case mix system).

Additional validation work has explored coverage for community-based nursing interventions.

There are an estimated 16 million nurses and midwives across the world whose contribution remains largely hidden within today's health information systems. The collaborative work between ICN and WHO on the further development and application of ICNP and ICHI seeks to help expose the true value (and true cost) of nursing.

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