

RESEARCH & INNOVATION

R&I Letter

n° 28 - Winter 2025



La Source.
Institute and School
of Nursing

Hes·so

R&I Letter

Introduction

Together, Further: Two New Laboratories and Enhanced Research Support

We are pleased to present the winter edition of our R&I Letter, starting with the launch of two new laboratories. [Health Data Lab](#) aims to empower healthcare providers and decision-makers to make informed, evidence-based decisions. [Healthcare systems and interprofessionalism Lab](#) focuses on challenges faced by health systems and their optimization. La Source School of Nursing now comprises 5 LERs (Teaching and Research Laboratories) and 4 LABs, operating in close collaboration. Our LABs are agile structures addressing emerging or evolving issues, thereby contributing to the professional identity in nursing and its ongoing transformation. This initiative is supported by new resources dedicated to assisting scientific leaders, enabling them to focus more on research activities.

These developments align with our commitment to anchor research activities within national priorities. Our approach is guided by the [Swiss Research Agenda for Nursing \(SRAN\)](#), which defines strategic priorities for nursing research based on expert consensus. The SRAN is structured around four main axes: new care models, nursing interventions, work and care environments, and quality of care and patient safety, complemented by four transversal axes: research organization, methodologies and technologies, health policy and higher education research in nursing sciences, and public health perspectives including diversity and vulnerable populations. Together, these axes provide a coherent framework to guide nursing research development in Switzerland and strengthen the impact of care on population health.

In this R&I Letter, you will discover seven new scientific projects supported by a wide range of funding organizations, including Innosuisse, the Federal Quality Commission (EQK) and Federal Quality and Safety in Healthcare, and the HES-SO through various competitive calls. Our research community has recently welcomed several new researchers: Anne Despond, Bastien Cheseaux, Dr. Farah Islam, Dr. Marie Leyder, Dr. Noémie Stienne, Benjamin Travaglini, Dr. Eva Yampolsky. A warm welcome!

True to our mission of anticipating societal changes, we observe a marked aging of the population, making access to palliative care more critical than ever. Our "Focus" highlights a recently initiated doctoral thesis in this area, addressing major challenges for nursing science and our institution.

Philippe Golay
Head of Research & Innovation

[Discover our activities](#)

Focus



Sophia Aguet, Teaching Fellow at La Source, begins a doctoral thesis on symptom management in palliative and end-of-life situations in nursing homes.

Why is demand for palliative care increasing in nursing homes?

Nursing homes will host more and more elderly and very elderly individuals with comorbidities, arriving at increasingly advanced ages. These are settings where deaths are frequent and health needs are rising, particularly at the end of life.

What challenges are associated with symptom assessment and management in end-of-life situations?

The primary goal of palliative care is to ensure quality care and improve the quality of life for patients and families. This is especially true in the final phase of life within nursing homes, where the average stay is two years. Despite improvements in palliative care in the region, symptom management remains a major issue. Symptoms such as pain, dyspnea, agitation, or anxiety are common at the end of life and can lead to frequent hospitalizations, reduced quality of life, discomfort for relatives, as well as for caregivers.

Reducing unnecessary hospitalizations through changes in nursing practices is one of your thesis's objectives. How frequent are these hospitalizations?

The aim is not to avoid transfers or hospitalizations at all costs, as they can stabilize situations. However, unplanned transfers or hospitalizations often occur in emergencies. Does this indicate insufficient care and lack of symptom management? It is important to note that 70% of deaths are predictable. The goal is to equip healthcare professionals, particularly nurses who have an autonomous role in nursing homes, to manage these situations more effectively. Existing data show underuse of certain interventions with proven benefits, such as opioid administration. My thesis focuses on implementing palliative symptom management interventions, which are unevenly applied across facilities, to ensure they are fully integrated and sustainable in practice.

Save the date

Tuesdays, March 17, 24 & 31, 2026

Three Toque & Doc webinars – Culinary-Medical Chats

Topics: Hormonal health, stress, and inflammatory conditions, with integrative nutritional approaches.

The Toque & Doc concept

Through Toque & Doc, the Source Innovation Lab (SILAB) combines medical expertise with a chef's culinary skills to explore major nutrition questions holistically, debunking myths and misconceptions.

These informal scientific conferences, held twice a year, offer a unique perspective on nutrition. By opening this event to the public, La Source and the Clinique de La Source pursue a dual goal: raising collective awareness of this major public health issue and encouraging widespread engagement in becoming agents of change.

Event format:

- A conference-debate
 - A tasting session, flavor and knowledge
- Price
- CHF 35.-
 - Free for Foundation de La Source and La Source students and staff.

Registration on [our website](#) soon



Replay available on the [YouTube La Source School of Nursing channel](#)

Thursday, May 7, 2026

08:00-18:00, Beaulieu Site, Lausanne

Unisanté & La Source Symposium on Health and Prevention in the Face of Climate Change.

The health promotion and prevention symposiums organized by Unisanté aim to foster collaboration and synergies among stakeholders committed to promoting healthy lifestyles and environments in the canton of Vaud and across French-speaking Switzerland.

Rooted in the cantonal and federal vision of cross-sectoral integration, these symposiums seek to encourage the exchange of best practices and knowledge in health promotion and prevention, thereby contributing to the development of a shared vision and a common reference framework.

April 1st to May 31st 2026

Palais de Rumine, Lausanne

ExpoHuCare - Humanistic caring: a right for every citizen, the contribution of the nursing profession

An exhibition on the history of nursing care invites visitors on a journey through time to understand the origins of nursing, how it has evolved, and, above all, the essential contribution nurses continue to make to society: an indispensable presence, both discreet and powerful, in the service of life and humanity.

Throughout history, caring has been an act tied not only to survival but also to living together. Care was provided within families, communities, and religious institutions, guided by compassion, mutual aid, and concern for others. This exhibition promoting dialogue between science and society is funded by SNF's Agora funding program. This exhibition aims to showcase the remarkable evolution of nursing. From intuitive acts of healing to knowledge transmission through experience, from the first

hospices to major reforms led by Florence Nightingale and Valérie de Gasparin. Nurses had to fight to advocate for the shift from a role perceived as charitable to a fully recognized profession, to gain access to specialized training, achieve professional status, free themselves from medical or religious authority, and claim autonomy and clear responsibilities. These social achievements, still relevant today, have shaped nursing identity. One of the exhibition's goals is to dismantle false social representations of the profession and allow each visitor to leave with a more enlightened understanding of it.

Contact: [Philippe Delmas](#), [LER QCPS](#)

Funding: SNF

New projects

[Data4Patient - D4P] Nurse Workload Prediction using Machine Learning and LLM Technology to Innosuisse

The D4P project brings together HE-Arc Engineering, La Source, H4, and the Precisia Care Start-Up around an ambitious goal: to develop and refine an innovative tool based on artificial intelligence to predict nursing workload in real time. By leveraging approaches that combine machine learning and large language models (LLMs), this solution aims to enable dynamic scheduling in healthcare services.

In today's context, marked by staff shortages and increasing organizational complexity, anticipating needs is essential to ensure quality of care. Accurate workload prediction not only optimizes resource allocation but also mitigates stress arising from highly volatile schedules. The project team pays particular attention to the impact of this tool on healthcare professionals' well-being, convinced that better-aligned schedules contribute to improved satisfaction, motivation, and staff retention.

Contact: [Jonathan Jubin](#), [LER CHPP](#)

Funding: Innosuisse

[AMCIA] Analyzing Multiple Informant Data on Mental Illness in Children and Adolescents

The AMCIA project (Analyzing Multiple Informant Data on Mental Illness in Children and Adolescents) addresses a critical public health need: improving the assessment of mental health disorders among young people. In Switzerland, as elsewhere, these disorders represent a major challenge, yet no recent national data exist to estimate their prevalence or the extent of care needs. This lack of reliable data limits prevention planning and the appropriate allocation of mental health resources.

AMCIA aims to analyze discrepancies between diagnoses provided by different informants — clinicians, young people themselves, and their parents — using the computerized KSADS-COMP tool. Drawing on five major studies (N=878), self-administered diagnostic versions will be compared with clinical interviews. Ten common disorders (depression, anxiety, ADHD, etc.) will be assessed using concordance indicators. Predictive algorithms will be developed to estimate individualized diagnoses, and multilevel models will analyze factors associated with discrepancies. These algorithms will then be applied to an ongoing Swiss multicenter study conducted by the same team, to validate the French and German versions of KSADS-COMP and prepare for a future national epidemiological study.

Contact: [Meichun Mohler-Kuo](#), [LER CHPP](#)

Funding: HES-SO

[EVALIPS_VD] Évaluation de l'implémentation du rôle des infirmier·ères praticien·nes spécialisé·es dans les établissements médicosociaux du canton de Vaud : une étude mixte

In response to demographic aging and the growing shortage of healthcare professionals in nursing homes, the canton of Vaud has committed to supporting the implementation of the Advanced Practice Nurse (APN) role to strengthen the quality and continuity of care for residents. Although this model is internationally recognized and well-established, it remains underdeveloped in Switzerland.

The EVALIPS_VD project, supported by the HES-SO Health Domain, Département de la santé et de l'action sociale du Canton de Vaud, Héviva, and the Belle Saison and Pré Pariset Foundations, pursues two main objectives:

To evaluate the implementation of APNs in nursing homes and the impact of this new role on indicators related to residents, interprofessional teams, and institutions.

To develop a best-practice toolkit based on the results obtained, to support the sustainability and dissemination of the APN role in long-term care. EVALIPS_VD will actively contribute to the sustainable integration of this innovative role within the healthcare system, both at the cantonal and national levels.

Contact: Ricardo Salgado, [LER QCPS](#)

Funding: HES-SO, État de Vaud: DGCS, EMS Les 4 Saisons, EMS Pré Pariset

[Digital PCC] Digitalisation du Plan de Crise Conjoint (PCC) à l'attention des adolescent·es souffrant de troubles psychiatriques et/ de problématiques d'addiction et de leur réseau de soutien : co-conception et développement, étude de faisabilité, d'acceptabilité et d'usabilité dans le cadre d'une recherche action participative

The Joint Crisis Plan (JCP) aims to anticipate and better manage psychiatric crises by mobilizing the resources of mental health service users while respecting their care preferences. A JCP that is inaccessible at a critical moment becomes ineffective; its digitalization guarantees a relevant and readily available solution. The innovation of this project lies in digitalizing the JCP to make it accessible at the earliest signs of crisis. Designed in collaboration with adolescents and their support network, the digital solution (web and mobile) will be intuitive, secure, and participatory.

Its aim is to co-design and co-develop a digital prototype tailored to adolescents, integrating the key elements of the JCP into an ergonomic and engaging interface that ensures data confidentiality. The project includes an online questionnaire, co-design workshops, and focus groups to identify needs, expectations, and barriers to adoption. Its ultimate goal: to empower adolescents, improve coordination and responsiveness within the support network, provide clinicians with a dynamic and shared monitoring tool, and prevent crises or relapses.

Contact: Pascale Ferrari, [LER MHP](#)

Funding: HES-SO

[TRI_AIDE] Projet de recherche sur l'engagement des personnes proches aidantes. Engagement de la personne proche aidante auprès de son proche hébergé atteint de la maladie d'Alzheimer : passer de la dyade à la triade

This research project, conducted in collaboration with the University of Québec, Trois-Rivières, aims to support the

engagement of family caregivers (FC) with their relative living in a long-term care facility (LTCF) who has Alzheimer's disease or related disorders (ADRD), exhibits responsive behaviors (such as reactions during personal care, vocal behaviors, wandering, or catastrophic reactions associated with retrograde decline), and resides in a LTCF. A triadic partnership approach (FC, the resident, and LTCF care providers) will be developed.

The purpose of this research is to describe the development and pilot testing of an intervention designed to strengthen FC engagement in supporting their relative with ADRD who lives in a LTCF and exhibits responsive behaviors.

Engagement is defined within a partnership framework of relationship among family caregivers, their relative, and LTCF professionals, emphasizing complementarity, mutual knowledge sharing, and co-construction. This partnership is grounded in respect for the FC's willingness and capacity to engage with their relative. The effects of engagement concern the dynamics of relationships within the triad, the components of the partnership, and the fundamental needs of both the FC and the resident.

Contact: Christine Cohen, [LER AH](#)

Funding: Fonds de recherche du Québec, Ministère de la Santé et des services sociaux du Québec

[Guidelines PVC] National guidelines for improving quality and patient safety in healthcare: An interprofessional participatory project for the adaptation and implementation of a national guideline on peripheral catheters

This national project aims to develop, adapt, and implement Switzerland's first guideline on the management of peripheral catheters — a critical issue for patient safety and quality of care.

It brings together an interprofessional consortium composed of academic partners (OST – Center for Evidence-Based Healthcare, BEST – Bureau for Knowledge Exchange on Exemplary Care Practices, La Source), clinical institutions (university and non-university hospitals, NEVAM), and professional associations (Swiss Nurse Leaders, SBK-ASI, VFP-APSI).

Professor Véronique de Goumoëns leads the project on behalf of BEST, with support from Ricardo Salgado (La Source), Claudia Lecoultre (CHUV), and Professor Nancy Helou (HESAV). BEST promotes Evidence-Based Practice (EBP) as the scientific foundation for healthcare practices, aiming for excellence in care. ([Home - BEST Santé](#)).

The project is based on the ADAPTE methodology and the JBI model, engaging a panel of experts and patients to ensure the relevance and adoption of recommendations. This pioneering initiative, with strong clinical, academic, and associative involvement, will serve as a model for the future development of other national guidelines in Switzerland.

Contact: Véronique de Goumoëns, [Département des Missions](#)

Funding: Commission fédérale pour la qualité (CFQ)

[PgB – Phase 2] Projektgebundene Beiträge Contributions fédérales liées à des projets

As part of Phase 2 of the Special Nursing Program (PgB Nursing Care), La Source School of Nursing plays a significant role across all strategic axes. Internal projects are structured around four major areas of the HES-SO program:

- **Curriculum Flexibility and Innovation (GT1):** Analysis of prior learning recognition, assessment of the feasibility of curriculum flexibility, and design of modular support systems to promote success.
- **Student Success and Dropout Monitoring (GT2):** Development of psychosocial case management tools, observation of dropout trends, and continuation of peer mentoring initiatives.
- **Integrative Alternation and Professionalization (GT3):** Analysis of immersion programs, evaluation of in-situ simulations, and reinforcement of these tools to strengthen professionalization.
- **Attractiveness and Recruitment (GT4):** Development of promotional activities, publication of best practices for recruitment, and evolution of procedures for recognizing prior learning.

La Source's contribution promotes pedagogical innovation, individualized support, and tailoring training to meet beneficiaries' needs, providing a sustainable response to the nursing workforce shortage in French-speaking Switzerland.

Contact: Véronique de Goumoëns, [Département des Missions](#)
Funding: [Swiss universities](#), HES-SO

Our projects are online

Spotlight on our research projects: detailed descriptions of the projects conducted within the La Source School of Nursing are available on our "[Research Projects](#)" webpage (in French). This page is regularly updated.



New publications

Scientific Publications

- Boloré, S., Ciavarella, L., Stern, F., Daudet, V., **Roulin, M.-J.**, & Verdon, M. (2025). Transition vers la pratique infirmière et développement des compétences en sécurité des patients : Protocole d'une étude longitudinale à méthodes mixtes. *Science of Nursing and Health Practices*. [Link](#)
- Bonsack, C., Richter, D., **Golay, P.**, **Rexhaj, S.**, Warnke, I., Stulz, N., **Suter, C.**, Kaech, F., Burr, C., & Favrod, J. (2025). Social Psychiatry: The Future of Psychiatry? *World Social Psychiatry*, 7(2), 141. [Link](#)
- Cloutier, L., **Delmas, P.**, & Vay-Demouy, J. (2025). L'examen clinique ciblé et continu pour assurer la surveillance clinique. *Soins*, 900, 57-60. [Link](#)
- Curreri, N. A., Corna, L., **Poncin, E.**, Van Grootven, B., Huang, J., Osinska, M., Sibilio, S., Kästner, L., **Thuillard, S.**, **Vittoz, L.**, Baumann, S., Benkert, B., Rüttimann, A., Brambilla, A., Cafaro, G., **Wellens, N. I. H.**, & Zúñiga, F. (2025). Strengthening quality of care in partnership with long-term care facilities: Protocol of the Swiss National Implementation Programme NIP-Q-UPGRADE. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing*, 62, 1-10. [Link](#)
- Empson, L. A., **Golay, P.**, Baumann, P. S., Favrod, J., Söderström, D., Codeluppi, Z., & Conus, P. (2025). Refining targets for urban remediation in early psychosis. *Schizophrenia Research*, 284, 186-194. [Link](#)
- Frey, M., Silva, B., **Golay, P.**, Morandi, S., Bonsack, C. & Chambaz, A. (2025). Alliance thérapeutique, entre rupture et jeux de pouvoir, une étude qualitative. *Santé mentale au Québec*, 50(1), 319-340. [Link](#)
- Gastens, V.**, Tancredi, S., Bonnan, D., **Kiszio, B.**, Del Giovane, C., Tsuyuki, R. T., Paradis, G., Chiolerio, A., Guénette, L., & **Santschi, V.** (2025). Pharmacist interventions to improve hypertension management among patients with diabetes: A systematic review and meta-analysis of randomized controlled trials. *BMC Health Services Research*, 25(1), 1268. [Link](#)
- Jendly, M., **Santschi, V.**, Tancredi, S., von Wyl, V., & Chiolerio, A. (2025). Primary care physician digital health profile and burnout: An international cross-sectional study. *European Journal of Public Health*, ckaf106. [Link](#)

- Jotterand Chaparro, C., Bertoni Maluf, V. A., Pabion, C., Stern, F., Moullet, C., **Kiszio, B.**, Pugliese, M.-T., Ramelet, A.-S., Morice, C., Valla, F. V., & Tume, L. N. (2025). The effectiveness of high versus lower enteral protein intake, considering energy intake, on clinical outcomes in critically ill children: A systematic review and meta-analysis. *Clinical Nutrition*, 54, 220-232. [Link](#)
- Laffely, M., Grosu, C., Laaboub, N., **Golay, P.**, Alameda, L., Conus, P., & Eap, C. B. (2025). Childhood trauma and relationship with the parents: Associations with lipids, glucose, and prolactin levels during antipsychotic treatment in patients with first-episode psychosis. *Frontiers in Psychiatry*, 16. [Link](#)
- Lavoie, A., **Truchot-Cardot, D.**, & Dubé, V. (2025). Older Adults' and Healthcare Professionals' Perspectives on Web-Based Interventions to Promote Healthy Lifestyle Habits. *Nursing Administration Quarterly*, 43(11), e01339. [Link](#)
- Ortoleva Bucher, C. O.**, **Martin, L. A.**, Santo, A. D., Pluchino, N., & Rio, L. (2025). Symptom tracking for endometriosis: A systematic review protocol for mobile applications focused on content, inclusivity and features. *BMJ Open*, 15(10). [Link](#)
- Prod'hom, L., Mahé, S., **Lequin, P.**, Drozdek, D., & Perrenoud, B. (s. d.). Preventing aggression in psychiatric settings: A best practice implementation project. *JBI Evidence Implementation*, 0.1097/XEB.0000000000000535. [Link](#)
- Rahban, R., Santa-Ramírez, H.-A., Senn, A., Stettler, E., Guessous, I., **Joost, S.**, Nef, S. (2025). Exploring geographical differences in semen quality of young men using spatial dependence analysis, *Human Reproduction*, deaf182, [Link](#)
- Rodilla, E., Aichberger, M., Ardelt, F., Baixauli, V., Cinza, S., Fernández, M. S., Fernández, V., García-Ortiz, L., Guzmán-Aguayo, A.-K., Hametner, B., Jiménez, A., Lugones-Sánchez, C., Mayer, C. C., Montalar, Z., Pereira, T., **Santschi, V.**, Danning, K., Weber, T., & the TOGETHER-Project Research Group. (2025). Role of Community Pharmacies in Spreading the Concept of Vascular Aging in Daily Clinical Practice. *Artery Research*, 31(1), 14. [Link](#)
- Salgado, R.**, Fernandes, H., **de Goumoëns, V.**, **Kiszio, B.**, Costa, P., **Delmas, P.**, & Padilha, M. (2025). Effectiveness of self-management digital interventions in improving health-related outcomes in patients with chronic obstructive pulmonary disease: An umbrella review protocol. *JBI Evidence Synthesis*. [Link](#)
- Spanevello, C., Alameda, L., Solida, A., Empson, L. A., Alerci, L., Mebdouhi, N., Conchon, C., Vieira, S., **Golay, P.**, & Conus, P. (2025). Correlates and trajectories of alcohol and cannabis misuse in the early phase of psychosis: Do we need substance specific interventions? *Schizophrenia Research*, 285, 349-359. [Link](#)
- Weber, O., Semlali, I., Wenger, V., **Ferrari, P.**, Mota, S. F., Almeida, S. R., **Brodard, A.**, & **Dutray, F.** (2025). Challenges of Joint Crisis Plans with Migrant Patients: Focus Groups with Mental Health Professionals and Interpreters. *Community Mental Health Journal*. [Link](#)
- Zahnd, C.**, **Zoni, S.**, Gontheuey, M.-A., Bucher Andary, J., & **de Goumoëns, V.** (2025). The health experience of children, adolescents and their families during the COVID-19 pandemic: An exploratory qualitative study in pediatric homecare. *Frontiers in Pediatrics*, 13. [Link](#)
- ## Books or Chapters
- Ferrari, P.**, **Suter, C.**, & Leroy, A. (2025). Les freins et les leviers à la mise en œuvre des déclarations anticipées en psychiatrie. In A. Tinland (Ed.), *Le guide des directives anticipées psychiatriques : mettre en pratique les soins centrés sur le patient, la décision partagée et l'empowerment* (p. 115-137). Doin. [Link](#)
- Quénun, Y., Goulet M.H., & **Ferrari, P.** (2025) Plan de crise conjoint. In A. Tinland (Ed.), *Le guide des directives anticipées psychiatriques : mettre en pratique les soins centrés sur le patient, la décision partagée et l'empowerment*. Doin. [Link](#)
- Schusselé Filiettaz, S.**, Berchtold, P., & Peytremann-Bridevaux, I. (2025). Switzerland: Successes and Challenges in a Federal State. In V. Amelung, V. Stein, E. Suter, N. Goodwin, R. Balicer, & A.-S. Beese (Éds.), *Handbook of Integrated Care* (Vol. 2, p. 913-925). Springer Nature Switzerland. [Link](#)
- Vuilleumier, S.** (2025). Enjeux environnementaux des soins de santé. In S. Hotz, A.-S. Dupont, & M. Levy (Éds.), *Avenir des soins de santé : Défis et changements à l'ère de la durabilité* (p. 162-170). Helbing & Lichtenhahn. [Link](#)
- ## Professional Publications
- Bachelard, M., **Lequin, P.**, El-Sanie, Y., & Morandi, S. (2025). De la contrainte vécue en psychiatrie à la justice réparatrice dans un contexte de formation interprofessionnelle en sciences infirmières et en médecine. *Nouvelles pratiques sociales*, 34(2), 1 10. [Link](#)
- Berger, E.**, Favrod, J., **Frobert, L.**, & **Nguyen, A.** (2025). Apprendre à initier une rencontre avec les patient·e·s dans un jeu de rôles : Quelles compétences interactionnelles ? Éducation et socialisation. *Les Cahiers du CERFEE*, 77. [Link](#)
- ## Guidelines
- ARTISET, CURAVIVA, senesuisse, Benkert, B., Möckli, N., Zúñiga, F., Huang, J., Braun, D., Corna, L., Curreri, N., **Wellens, N. I. H.**, **Brodard, A.** (2025, septembre). *Fiche d'information : Indicateur de qualité médical « Escarre » pour les soins stationnaires de longue durée*. ARTISET, CURAVIVA, senesuisse. [Link](#)
- ARTISET, CURAVIVA, senesuisse, Huang, J., Möckli, N., Zúñiga, F., Kästner, L., Braun, D., Benkert, B., Corna, L., **Wellens, N. I. H.**, **Brodard, A.** (2025, septembre). *Fiche d'information : Indicateur de qualité médical « Revue de la médication » pour les soins stationnaires de longue durée*. ARTISET, CURAVIVA, senesuisse. [Link](#)
- ARTISET, CURAVIVA, senesuisse, Ritz, S., Möckli, N., Huang, J., Zúñiga, F., Kästner, L., Braun, D., Benkert, B., Corna, L., Curreri, N., **Wellens, N. I. H.**, **Brodard, A.** (2025, septembre). *Fiche d'information : Indicateur de qualité médical « Projet de soins anticipé » pour les soins stationnaires de longue durée*. ARTISET, CURAVIVA, senesuisse. [Link](#)

ARTISET, CURAVIVA, senesuisse, Zúñiga, F., Braun, D., Osinska, M., Baumann, S., Barco Rüttimann, A., Benkert, B., Corna, L., Curreri, N., **Wellens, N. I. H., Brodard, A., Rebetez, N.**, & Guerbaai, R. A. (2025, septembre). *Fiche d'information : Indicateur de qualité médical « Malnutrition » pour les soins stationnaires de longue durée*. ARTISTET, CURAVIVA, senesuisse. [Link](#)

ARTISET, CURAVIVA, senesuisse, Zúñiga, F., Braun, D., Osinska, M., Baumann, S., Barco Rüttimann, A., Benkert, B., Corna, L., Curreri, N., **Wellens, N. I. H., Brodard, A., Rebetez, N.**, & Guerbaai, R. A. (2025, septembre) *Fiche d'information : Indicateur de qualité médical « Polymédication » pour les soins stationnaires de longue durée*. ARTISTE, CURAVIVA, senesuisse. [Link](#)

ARTISET, CURAVIVA, senesuisse, Zúñiga, F., Braun, D., Osinska, M., Baumann, S., Barco Rüttimann, A., Van Grootven, B., Benkert, B., Sibilio, S., Corna, L., Curreri, N., **Wellens, N. I. H., Roulet Schwab, D., Brodard, A., & Rebetez, N.** (2025, septembre). *Fiche d'information : Indicateurs de qualité médicaux « Mesures limitant la liberté de mouvement » pour les soins stationnaires de longue durée*. ARTISET, CURAVIVA, senesuisse. [Link](#)

ARTISET, CURAVIVA, senesuisse, Zúñiga, F., Braun, D., Osinska, M., Baumann, S., Barco Rüttimann, A., Benkert, B., Corna, L., Curreri, N., **Wellens, N. I. H., Brodard, A., & Rebetez, N.** (2025, septembre). *Fiche d'information : Indicateurs de qualité médicaux « Douleur : auto-évaluation et évaluation par des tiers » pour les soins stationnaires de longue durée*. ARTISET, CURAVIVA, senesuisse. [Link](#)



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