

“EFN EU Lobby Priorities – Making Nurses Voice Heard”

by

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Dear Colleagues,

The EFN is delighted to participate in the 2nd Congress of Latvian Nurses and Midwives. The first thing I would like to do is to convey best wishes from the President of the European Federation of Nurses Associations, Grete Christensen, and from all National Nurses Associations of 32 Member States represented in EFN, to which the Latvian NNA belongs.

The presentation accompanying this speech will commence with an overview of EFN, its mission and governance, followed by a presentation of its key lobby priorities.

The European Federation of Nurses Associations (EFN) was established in 1971 and is the independent voice of the nursing profession in the EU. The EFN consists of National Nurses Associations from 32 EU Member States and its work has an effect on the daily work of 6 million nurses throughout the European Union and Europe.

EFN’s mission is to work and lobby towards “strengthening the status and practice of the profession of nursing for the benefit of the health of the citizens and the interests of nurses in the EU & Europe.”

The EFN governance structure consists of two annual General Assemblies, in which 32 National Nurses Associations meet to discuss and endorse key Policy and Position Statements, and to work on several EU projects. This work is supported by two annual Executive Committee meetings (and two extra meetings on the evening prior to the General Assemblies), as well as by the recommendations formulated by the Professional, Workforce and Public Policy Committees which convey during the General Assemblies. Additionally, the EFN members decided to establish expert platforms to facilitate in preparing from a technical point of view the EFN Policy and Position Statements.

Within the current climate of economical uncertainty, resulting in a rise of social deprivation issues, the quality of healthcare delivery must be safeguarded via a close collaborative multidisciplinary team effort between all allied partners. However, delivering quality services will not happen by chance alone – it will

happen only by choice, focused lobby actions, and leadership for strategic workforce planning and effective EU policy making.

Taking a closer look at the contemporary role of EU law, it is clear that it has a direct effect within the legal systems of its Member States, and may in fact override national law in many areas, especially those covered by the Single Market. It is therefore critically important to set EU affairs as top priority and work towards developing a strong policy advocacy strategy for Nursing.

EFN within its aim of bringing to the attention of the EU the current and potential collaboration of nurses to meeting the health needs of the population, is focussing on 3 key priority areas to achieve maximum effect: Nurse Education, Nursing Workforce, Quality of Health Services.

Therefore, EFN is following closely and providing timely contribution to the various legislative processes including the so called "hard laws" such as the Directives on "Mutual Recognition of Professional Qualifications" and "Patients Rights in Cross-Border Care", and "softer law" such as the "Council Recommendation on Patients Safety and Healthcare Associated Infections" and the "Green Paper on the EU Health Workforce".

To ensure effectiveness and efficiency of EFN lobby work, the EFN works closely with the three most important institutions of the EU: the Commission, the European Parliament and the Council of Ministers. More specifically within the Commission, EFN is in close contact with the Directorates General for Health and Consumer Protection (SANCO), Internal Market, and Employment. Some of EFN more recent activities include:

- **Nurse Education** – With the Directive 2005/36/EC on the Recognition of Professional Qualifications in place, the EFN is lobbying for Synergy between the Directive, Bologna, and the European Qualifications Framework (EQF). Moreover, the European Commission DG Internal Market is about to commence a report on Directive 36, and the EFN remains proactive and closely engaged in order for EFN members positions and concerns to be adequately represented. A concrete example of action to the above has been the establishment of expert platforms to discuss the TAIEX Peer Review missions in the ongoing enlargement of the EU and the nursing education curricula accreditation within the 27 Member States of the European Union.
- **Nursing Workforce** – Last December 2008 has seen the launch of the Green Paper on EU Workforce for Health, to which EFN actively contributed by providing evidence and working closely with the authoring team. Workforce planning, recruitment and retention and working conditions will stay a high priority for EFN as 6 million nurses in Europe will be affected by the Commission initiative. As a way of furthering this work EFN has been involved with the High Level Working Group on EU Workforce for Health, which aims to encompass the workforce capacity issues and human resource strategies required to care for an ageing population.

- **Skill Needs and Skill Mix** – The future of EU Healthcare needs to reflect the changing health and illness patterns as well as changing health needs of an aging population. To this end DG Employment has commissioned a study about the elaboration of future Health Services scenarios and implications on new skills for jobs, to which EFN was invited to provide input. The Commission has identified Nursing as a sector in need of investment, particularly for worker recruitment, retention, and skills development. EFN provide amendments to the skills needed for the future with problem solving skills for nurses seen as particularly important. Moreover, EFN has actively lobbied for cultural change and investment in human capital including recruitment and retention, working conditions, salary and gender.
- **Patient Safety and Healthcare Associated Infections (HCAIs)** – Patient safety is amongst the highest priorities in the EFN political agenda as is also a serious concern in the European Union evident by the numerous policy actions in progress. As an active contributor to this debate the EFN participates in the European Commission Patient Safety and Quality of Care Working Group of the High Level Group on Health Services and Medical Care, side by side with the 27 EU Member States and EU Health Stakeholders such as CPME, PGEU, EPF, and HOPE. Furthermore, EFN is an associate member on the 30 months EU project “European Union Network for Patient Safety (EUNetPaS)” involving the 27 EU Member States and the key EU Health Stakeholders CPME, PGEU, EPF, HOPE and EFN. EFN is highly active in EUNetPaS contributing to the development of guidelines for patient safety culture and education, while supporting field testing of good practice examples from EFN members. Another concrete example of EFN lobby work has been the development of the EC proposal for Council Recommendations on Patient Safety including the prevention and control of Healthcare Associated Infections where EFN experts met with representatives of DG SANCO to share their expertise as a reality check. As a result, the Council Recommendations are in line with the EFN Policy and Position Statement.
- **Patients Rights in Cross-Border Healthcare** – This high priority Directive, recently voted in favour by the European Parliament plenary in Strasbourg, aims to clarify and promote the right of patients to gain access to healthcare in another EU country by ensuring high quality and safe cross-border healthcare. The EFN welcomed this Directive but asked for improvements in ensuring its implementation is based on the common values and principles of solidarity, accessibility, and sustainability. The EFN main concerns related to “upfront payment”, “top-up payments”, and “independent point of contact to provide information to patients” which were all finally addressed within the proposed amendments. In addition, next to patients’ rights the EFN considers the development of EU Quality Standards, in reference to article 5 of the Patients’ Rights in Cross-border Healthcare Directive a high political and professional priority. To this end various meetings with the Commission and its experts took place and the European Commission is considering putting in place a project on Quality Standards to which EFN would be involved.

Last but certainly not least, especially now in light of the global financial crisis, we need to get on the train of the EU Social Cohesion Funds for supporting innovations and developments in Nurse Education as well as supporting the Recruitment and Retention of our Nursing Workforce. In support to its members EFN has developed 4 generic social cohesion funds project proposals while achieving a political commitment from the European Commission, DG Sanco and DG Employment, as it is finally realised that EU policies can only become alive there where people work and live out their lives.

Thank you for your attention.

Paul De Raeve
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