

(1) "Nurses views on the EU Challenges for Long-term Care"

by

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**II International Congress on Long Term Care and Quality of Life
11-13 May 2009 – Pamplona**

Dear Colleagues,

The EFN is delighted to have been given this opportunity to speak on the topic "EU Challenges for Long-term Care", which is of high priority for EFN members.

(2) 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. (3) EFN policy advocacy needs to be interpreted in relation to its mission: "To strengthen 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."

(4) As we all know, delivering quality services to our communities will not happen by chance. It will happen only by choice, determined lobby actions and leadership for strategic planning and effective EU policy-making. The EFN believes that, 30 years after the Declaration of Alma-Ata, it is obvious that a hospital based, curative and traditional management approaches, often medically oriented, to health care services cannot meet the health needs of the European population. The shift from a disease to determinants approach, from a hospital based service to a community based approach is way too slow due to the lack of appropriate policies to enable change.

(5) If progress is to be made, it is crucial that health professionals facilitate a paradigm shift with a focus on 'accessibility', 'quality' and 'sustainability of the workforce'. The EU Member States should therefore reward and support innovative efforts to ensure high quality long term care. But how do we achieve this?

- (6) In relation to accessibility, it is clear that acute care continues to receive more funding than long-term care and both sectors do not work well together. Therefore, Member States should reward and support innovative efforts to ensure people can receive care and support in the setting of their own choice.
- (7) Concerning Quality of Long Term Care, we have still a long way to go. Therefore it is of paramount importance we put in place EU standards of care, standards in education and standards in health outcomes, which once in place, should be met at EU level.
- (8) Finally, when it comes to developing a sustainable health workforce, we know the nursing workforce is aging. (9) EFN members data indicate that in the coming 15 years the nursing workforce will decline on average with 15%. The data also show that the entrance, the attractiveness to the nursing profession is problematic. A long tradition of low pay and shift work makes working in the health sector unattractive resulting in a difficult recruitment environment and a system in which "Peter is robbing Paul". Furthermore, current European trends in health system reform, with their overarching concern for cost-containment, have a downside for nursing in many European countries. This is reflected in cuts in nursing budgets and posts, the loss of a nursing voice in governmental decision-making processes, increases in nursing workloads, and serious concerns about patient safety and the quality of care. Therefore an EU initiative of the 'Green Paper on EU Workforce for Health' is timely.

(10) But the health professionals' community should be much more proactive. EFN believes that being innovative in skill mix and extending roles and responsibilities is one element of the equation, next to working in multi-disciplinary teams, wider health teams and learning from each other. Legislation and regulatory arrangements in most European countries are not adapted to recognise the new forms of healthcare and the position and responsibilities of the health care professions must be clearly and transparently defined. (11) An EU initiative on skill mix, skill needs should be an opportunity to promote good models for practice already acquired in some European countries.

(12) Last but not least, especially now we are all facing the global financial crisis, we need to get on the train of the EU Social Cohesion Funds for supporting innovation in long term care and quality standards. EFN members discussed in April 5 generic social cohesion funds project proposals with the emphasis on synergies. We have achieved a political commitment from the European Commission, DG Sanco and DG Employment, as they realise EU policies can only become alive there where people live and work out their lives.

(13) Nevertheless, coming back to stakeholder approach, building a strong voice within the Health Community, building solid synergies between key

health stakeholders, focussing on joined strengths instead of our individual weaknesses, is therefore urgently needed at EU level. Exploring these partnerships requires a new way of leadership in which the EU can be a major facilitator.

(14) Thank you very much for your attention.

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May 2009