



## **COLLABORATIVE RESPONSE to the NURSING TUNING BROCHURE**

The European Federation of Nurses Associations (EFN), the European Federation of Nurse Educators (FINE), the European Federation of Nursing Regulators (FEPI), the European Nurse Directors Association (ENDA) and the International Council of Nurses (ICN), who are referred to in this document as the organisations, have all consulted the Nursing Tuning Brochure and together are responding to the draft Nursing Tuning Brochure.

Overall, the organisations felt that Tuning has followed and worked on important developments that are particularly well-timed for the nursing profession. The organisations believe that Tuning can provide a framework structure to implement and recognise the value of the education experience for nurses across the 27 member states of the EU and beyond.

The organisations consulted have come up with key points and recommendations relating to four key areas “Credits for Theory and Practice”, “Resources”, “Patient safety” and “Stakeholder Approach”.

The organisations believe it is necessary that the points below are addressed and clarified in the brochure. The organisations will then be in the position to consider endorsing the final document, so it can be validated at the Validation Conference EU in June 2007.

### **1. Credits for Theory and Practice**

Nursing education varies from one European country to another. Although the profession has developed greatly over the past years from vocational training to Higher Education, this is not the case in all European countries. The organisations believe that the Nursing Tuning Brochure should reflect this reality. The organisations also understand that for this reason it is probably more difficult to ‘tune’ higher education structures for nursing, compared to other disciplines.

Since 1977 (77/452/EEC, 77/453/EEC, 2005/36/EEC), nursing education is inextricably linked to professional practice. It is the EC Directive for the Recognition of Professional Qualifications (EC2005/36) that outlines the practice learning experience and the minimum education requirements that professionals need to achieve in order to practise the profession within Europe. As the brochure makes reference to minimum credits with practical competence, it is important for the profession that the role and the credits associated with practice based education are fully acknowledged and secured in any revised system leading to academic award registration as a nurse and seen as an integral part in developing a competent practitioner. Similarly, clinical learning experiences should be recognised in both Cycle 2 and Cycle 3.

The organisations would also welcome further development of the issues in relation to the current system related to the restricted mobility of specialist nurses in Europe, as in the study there is very little evidence on the mobility of specialist nurses within Europe. There is a lack of mutual recognition concerning the level of experience and academic qualification that leads to the role of a specialist nurse. This area needs to be discussed in greater detail. It is unlikely that there will be greater mobility of specialist nurses until there is an acceptance of 1st degree level competences across Europe.

## **2. Resources**

Page 15, second paragraph of the Brochure states that “When available, resources are now being allocated to support learners in practice”. Whilst the sentence reflects the reality in many countries, the text should clearly state what is needed in order to support student nurses during their period of study. It should also mention the role and preparation of mentors in practice settings.

Dependent on the existing educational system in place within each EU Member State, additional workload will be required in redesigning programmes that are based on competencies and which are aligned to the new European Credit Transfer System. In some countries this will stretch already overworked faculties.

The organisations call for the development of tools to facilitate the conduct of country based impact assessment. This impact assessment will need to take into account the impact on university and non university sectors, the availability of teaching staff and mentors, and the capacity (in terms of resources) to transfer significant numbers of students to degree programmes.

## **3. Patient Safety**

Safe effective practice is an essential element of nursing education and the organisations believe further exploration of this within the brochure would be beneficial. Quality of care and patient safety by skilled competent professionals are paramount to delivering effective healthcare..

The organisations consulted have analysed the subject specific competencies developed by the Tuning nursing group in comparison with those available in EU Member States (and beyond, namely ICN's Framework of Competencies for the Generalist Nurse). The organisations identified some gaps that needed to be filled, as well as some areas that needed to be strengthened if patient safety and excellence in professional development and practice are to be assured.

Although the organisations understand that the competencies presented by Tuning are the minimum set of requirements, the organisations believe that the Tuning brochure could also refer to the following areas (which organisations feel are absent from the current version of the Brochure):

- The need to articulate a theoretical perspective in relation to theory and practice;
- Health promotion;
- Concepts associated with personal and professional development and managing a scope of practice within a sphere of accountability;
- Research and evidence-based practice;
- Inter-professional health care working; and,
- Competencies expected of those generalist nurses who are mentors for student nurses.

## **4. Stakeholder Approach**

It is noted that certain stakeholders are identified and mentioned in the brochure. However, the organisations consider that the involvement of relevant stakeholders is essential in the development, testing, assessment, validation and implementation of Tuning.

The organisations believe that regulators, professional associations, employers and patient organisations, as well as a wider group of academic institutions, all have a role to play in the official consultation process.

## Nursing in a European context

Nurses, of all health professionals, are the most constant presence in the health care environment, providing care to patients 24 hours a day, 7 days a week. The OECD identified nursing as an added value to healthcare (2005 p.13 para 21). On reviewing a number of studies, OECD found that better health outcomes are associated with higher densities of nurses.

Nursing professionals provide services within a regulatory framework. They need to register with a competent authority/regulatory board in the country where they practise. Registration is compulsory in the majority of EU member states and beyond. Registration across Europe depends on compliance with the minimum standards outlined in EC Directives.

Therefore the importance of ensuring highly competent, professional and comparable standards of practice throughout Europe is dependent on the educational preparation of the professional being in line with existing EC Directives specific to nursing, which are to be replaced by EC Directive 2005/36/EC.

Statistically, nursing professionals are a highly mobile professional group across Europe; 'Tuning' the educational systems that underpin their training is thus of great importance as it strengthens the understanding of recognition and harmonisation of the nursing education.

Demographic changes, the ageing population in Europe, the complexity of health problems and the need for multidisciplinary team work are current challenges for the profession. These complex needs, along with the challenges of changing technology, increased expectations of practice and meeting social needs including cultural diversity require professionals to have the necessary skills to adapt and embrace change.

## Stakeholders



*The European Federation of Nurses Associations (EFN) was established in 1971. The EFN represents over one million nurses and is the independent voice of the profession. The mission of EFN is to safeguard the status and practice of the profession of nursing and the interests of nurses in the EU and Europe.*

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*The International Council of Nurses (ICN) is a federation of 129 national nurses associations representing the millions of nurses worldwide. ICN is the international voice of nursing and works to ensure quality care for all and sound health policies globally.*

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*The European Federation of Nursing Regulators (FEPI) was set up in 2004 due to the need for regulators of nursing to be represented at European level following the abolition of the Advisory committee on nursing. FEPI focuses on patient safety and public protection by promoting and safeguarding excellence in nursing education and practice.*

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*The European Federation of Nurse Educators (FINE) was established in 1995 and its objective is to promote the continuing development of excellence in nursing education in Europe.*  
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*The European Nurse Directors Association (ENDA) was established in 1995 in order to support nursing leadership. The key aims for the Association are to strengthen the nursing contribution to policy making in the context of healthcare management in Europe, to further the development of the art and science of nursing leadership and management in Europe and to establish formal links between Nurse Directors across Europe to support a communication network of experts.*  
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*The European Specialist Nurses Organisations (ESNO) is a collective group of specialist nursing organisations within Europe. ESNO is associate member of the European Federation of Nurses Associations (EFN). ESNO aims is to facilitate and provide an effective framework for communication, co-operation and co-ordination between both specialist nursing organisations and specialist nurses interest groups within Europe. ESNO consists of 12 European federations with a variety of nurse specialties representing more than 100,000 members from all countries within the greater European Union. A primary goal of ESNO is to strengthen the recognition of specialist nurses and demonstrate their unique contribution in providing quality patient care.*