President's Message

Dear EFN Members and Colleagues,

I hope that you all had a very good summer break and are now full of energy to face the challenges of this second semester.

Following up the very positive meeting we had during the first half of the year with the Health Commissioner, Vytenis Andriukaitis, with your endorsement at our last General Assembly, on your behalf we have remained focused on driving the principles enshrined in the European Pillar of Social Rights to inform fit for purpose EU policies, this includes guaranteeing better access to health and social care for all EU citizens/people and in parallel create fairer working conditions for the 3 million nurses throughout the EU.

Challenges for the health and social care systems all over Europe, cannot be underestimated with nursing education remaining a central priority concern for the EFN, against the policy direction of some governments persisting to downgrade nursing education that is the key to quality and safety of healthcare for all the citizens of Europe. The correct implementation of the Directive on Recognition of Professional Qualifications (Directive 2005/36/EC) and the update of Annexe V (Art.31) continue to be our priority within our collective EFN agenda.

In addition, EFN Members are committed and determined to ensure that quality and safety in care delivery remains high on national and EU political agenda. In particular, frontline nurses' expertise in delivering safe and effective care directly influences, end-user frontline experiences, which is key to making a difference in a society that is rapidly changing.

Therefore, the EFN will continue to focus on education, workforce and quality and safety, with digitalisation as a cross cutting item to achieve better outcomes. Therefore, it is crucial to continue to demand that EU Institutions support and promote the work of 3 million nurses in the EU and ensure fair working conditions to support the delivery of the best health and social care outcomes for all.

The EFN Members will have the chance to discuss these ongoing political challenges during the EFN General Assembly that will take place in Slovakia on 11-12 October. This is an important meeting to ensure you reflect your Members opinions, priorities, expertise and ideas to inform and shape the EFN strategy to lobby the EU policy process in co-designing health and social policies that impact positive on citizens, patients and nurses.

Collectively and in solidarity we can make a difference.

Elizabeth Adams
EFN President

"One of the main potentials the nursing profession sees in blockchain is the development of a network that will allow patients/citizens having access to synchronised databases, visible to anyone with validated access to the patient/citizen continuity of care pathway, giving unprecedented benefits for frontline care provision" available in Health Europa, 2018

News from EFN

EFN brings the nurses voice at Digital Assembly 2018

The Digital Assembly 2018 took place in Sofia, gathering more than 1,000 stakeholders and policymakers to debate the Digital Single Market policies and recent technological developments. The EFN, represented by Milka Vasileva, President of the Bulgarian Association of Health Professionals in nursing (BAHPN), and EFN Executive Committee member, brought the ENS4care guidelines to the pollical debate, making sure EU policies and tools become more end-user co-designed. It is key to engage nurses since the start of the co-design process, with specific attention to gender sensitivity. This is confirmed by the EESC opinion SOC/587 "Digital gender gap".

Put a human face on blockchain

Advocating for engaging nurses in the co-creation of health technologies is a main priority for the EFN. This concept has been emphasized also during the OECD Blockchain Policy Forum, where the EFN has explained how a co-designed blockchain can support nurses in continuity of care. The OECD valued the input of the nurses.

Challenges/Opportunities for nurses in the EU

During a conference held in Poland, in September 2018, the EFN Secretary General, Paul De Raeve, together with the Polish Nurses Association, stressed that the nursing workforce is suffering from hard working conditions that have substantially worsened due to cuts in salaries and job. It is time for the National and EU political leaders to enact concrete policies supporting 3 million EU nurses!

Health stakeholders discuss future of health in the EU

In preparation for the European Parliament elections in May 2019, the healthcare stakeholders are joining forces to call on the EU policy makers to work on health policies from which all citizens in Europe can benefit. Within this framework, the EFN has joined the working group "Future of Health - Financing & Organisation", calling for a stronger coherence in approach and implementation between the different policy levels, including the organisation and financing of current and future healthcare.

News from the EU

Health in the EU long-term budget

Last Spring, the European Commission has presented its proposal for the EU budget 2021-2027. In terms of the efforts devoted to the healthcare sector, health-related resources will fall under several priority areas, such as social protection, research and innovation, the digitalization of society, cohesion and global responsibility. In particular, Health policies will get EU funding through various instruments: European Social Fund Plus (ESF+); European Regional Development Fund (ERDF); Horizon Europe (the new EU framework programme for research and innovation); the Digital Europe Programme; and the InvestEU Fund.

Proportionality test Directive adopted by the EU Parliament

The Directive has been adopted by the Council and published in the EU Official Journal. Member States will have two years to transpose the Directive into national law. The adopted text recognises the special nature of health professions and gives authorities discretion to ensure that a high level of health protection is respected when regulating such professions.

Work-life balance proposal weakened by Council position
The negotiating position on the Work-Life Balance for Parents and Carers Directive adopted by the Council last June removes the reference to five days minimum leave for carers and the need to have it paid at least at sick-pay level. Furthermore, the Council has kept the key points included in the Commission's proposal on flexible working arrangements for carers, even if this does not include any specific definition of what kind of arrangements are to be considered.

EU Council focuses on future of health in the EU
Following up the EPSCO (Employment, Social Policy, Health and Consumer Affairs) Council meeting, that focused on the future of health in the EU, the health ministers outlined various areas where EU cooperation can be beneficial for Member States such as exchange of best practices in the areas of prevention and non-communicable diseases, cross-border health threats, patients' safety, AMR, eHealth, research, and cooperation between specialised centres or voluntary cooperation between groups of Member States on issues which are important to them. Although the informal meeting of health ministers, 10-11 September 2018 in Austria, focussed on drugs, the second day highlighted the 'Investment in digital health'.

Steering Group on Health Promotion, Disease Prevention and Management of Non-Communicable Diseases
The Commission adopted a Decision which establishes the Steering Group as a formal expert body. The objective of the Steering Group is to help the Member States reach the Sustainable Development Goals related to health and to reduce premature mortality from non-communicable disease. It is key to get connected with your national expert and inspire them with frontline best-practices!

MEPs call for action on Anti-microbial resistance
The European Parliament has taken another step to tackle AMR by adopting its resolution "European One Health action plan against antimicrobial resistance". In the text, MEPs urge the Commission and member states to restrict the sale of antibiotics by human and animal health professionals, **and to remove any incentives for prescribing them**. The text highlights that preventive measures, such as good hygiene, should be scaled up in order to reduce the human demand for antibiotics. Nurses are one of the most influential actors to combat AMR frontline. Therefore, AMR can only be tackled frontline by 'fit for purpose' health policies and national AMR Action Plans co-designed with frontline nurses.

Gender dimension in carcinogenic exposures
With its recent opinion on Protection from carcinogens or mutagens at work, the EESC has highlighted the importance to give more systematic consideration to occupational carcinogenic exposures affecting women in further revisions of the Directive. The EESC acknowledges that many types of work in which women are concentrated (including health) involve exposure to carcinogenic substances. Therefore, binding prevention measures should be set out in this regard (e.g. negative-pressure cabinets for the preparation of cytostatic products for injection by staff in healthcare institutions).

Publications

Assessment of stakeholders' experience with the European Professional Card (EPC) and the Alert Mechanism procedures
The European Commission has published an assessment of stakeholders' experience with the European Professional Card and the Alert Mechanism procedures. According to the report, a total of 3.997 EPC applications were submitted during the period between 18 January 2016 and 30 November 2017, with nurses responsible for general care representing a share of 26% (1.037) of the total applications (second most active after physiotherapists). The report also shows that the vast majority of the alerts submitted during the analysed period were for cases where a professional was restricted or prohibited from practice. So, the system works!

European Commission Report on Primary Care
The European Commission EU Expert Group on Health Systems Performance Assessment (HSPA) has published the report "A New Drive for Primary Care in Europe: Rethinking the Assessment Tools and Methodologies". The report confirms that performance assessment in primary care paves the way for better health outcomes and improves the overall health system. There are three main challenges to advance performance assessment in primary care: 1. the complexity of the performance aspects of primary care; 2. difficulty in integrating assessments into policies; and 3. pitfalls associated with a culture of excellence. The report recommends some essential elements for building primary care performance assessment: a. Improve primary care information systems; b. Embed performance assessment in policy processes; c. Institutionalise performance systems; d. Ensure accountability; e. Consider patients' experience and values; f. Take advantage of adaptability, which performance assessment can support in the moment of change for primary care; g. Support a goal-oriented approach through the better use of professional and contextual evidence.

Cross-border healthcare data
As a follow-up to the implementation of the Directive 2011/24/EU on patients' rights in cross-border healthcare, the Commission has published an overview of the data on patient mobility, collected from July to November 2017. The data collected demonstrate that uptake of patient rights to cross-border care as provided for under the Directive is growing, albeit slowly. One significant trend that emerges is that most mobility is across shared borders. In parallel, the Commission Report on the operation of Directive 2011/24/EU on the application of patients' rights in cross-border healthcare shows that after the transposition deadline, the Commission launched 26 infringement procedures for late or incomplete notification of transposition measures. Following this process, all Member States finally notified their complete transposition measures. Additionally, the requirement for professional liability insurance came up during the completeness checks as a problematic issue in several Member States. Even if healthcare providers de facto have liability insurance, in practice, there was often a lack of legislation requiring such systems to be in place.

National contact points and patients' rights
According to the Commission study on cross-border health services: enhancing information provision to patients, European patients are mostly unaware of the role of National Contact Points (NCP), as well as their rights and the possibility to access health services in other EU Member States, although an improvement has been registered. practice-orientated toolbox and training material to help the NCPs improve the quality of information for patients, as well as a set of Guiding Principles and indicators for establishing an NCP service that is more uniform, patient-centred and in line with the legal requirements. This will contribute to high level information provision to patients.

Report on delivering quality health services
The OECD, World Bank and WHO released a joint Report on Delivering quality health services. The study describes the current situation with regard to universal health coverage and global quality of care, and outlines the steps governments, health services and their workers, together with citizens and patients need to urgently take. A strong emphasis in put on the importance of quality of care, without which universal health coverage will remain an empty promise.

"There is a real tangible opportunity with the Social Pillar to make a significant difference, engaging frontline nurses, co-designing 'fit for purpose' health and social care systems" available in Open Access Government, 2018

Agenda
To view the upcoming meetings' dates, click here.

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