



European Federation of Nurses
Associations

EFN UPDATE

February-March 2015

President Message



Dear EFN Members and Colleagues,

First of all, let me wish you all a Happy New Year. I hope you enjoyed a nice and relaxing break, and that you are now ready for an exciting and successful 2015.

For the EFN and its members, 2015 will be another stimulating year. The EU Member States are striving to respond to a growing demand for healthcare quality, safety, equity and access, and are encouraged to be innovative as regards the organisation and sustainability of their healthcare system.

On the 13th January, Matteo Renzi, the Italian Prime Minister, ended a very successful Italian Presidency of the Council of the European Union, by stressing in his speech to the European Parliament the need for Europe "to invest in success" in order to end the crisis and the recession. EFN totally agrees, as EFN builds its political lobby by investing in success, the success of the grass root policy! The bottom up approach helps us being practical oriented.

Within this context I want to make reference to our recent meeting with the Commissioner for health, Dr Vytenis Andriukaitis. He is practical and supports EFN practical approach, and he wants concrete results, like we nurses do. There is not time to waste by postponing and postponing. We need to act, knowing actions will never be perfect! We are not perfect!

The EFN will continue in 2015 lobbying the key EU players for appropriately educated and developed nursing workforce in the right numbers to deliver person-centred care and promote health in the EU, through concrete actions in the three EFN main priorities: Education, Workforce and Quality and Safety. The Commissioner for health expressed passionately the challenges of brain drain, nurses, doctors and social workers. We need to act now!

Following Matteo Renzi speech, when nurses lead change, success follows, innovation happens. As he explained, it is vital for EFN to invest in change.

Meeting on 27 February 2015, the EFN Executive Committee will discuss further these key priorities and prepare recommendations for the next EFN General Assembly that will take place in April 2015, in Brussels.

Marianne Sipilä
EFN President

"Modernising healthcare and educational systems becomes a political priority to boost productivity, growth and EU citizens' access to services. But any health system reform must make sense for the citizens and professions concerned since they will be the driving force for implementation and deployment. Yet, research findings are available, recommendations are written down, but the professionals working in the field are not adequately consulted and engaged to make change possible in daily practice. Change is needed to bring the citizens and in particular, the nurses voice at the heart of the policy reform and implementation".

EFN Article "Evidence Based Policy-making for Health System Reform in the EU", published in the Diplomatic World Magazine, winter edition (December 2014).

News from EFN

Meeting with the Health Commissioner

On 19 January, the EFN President, Marianne Sipilä, and the President of the International Federation of Social Workers (IFSW) Europe, Cristina Martins, met the European Commissioner for Health, Dr Vytenis Andriukaitis, to discuss key issues of common concern for both professions. The focus went to Ebola and the capacity building needed in all the EU Member States to select the appropriate material and implement protocols, a key for preparedness, safety and trust in the health systems in the EU. The Delegation discussed the importance of eHealth and the EFN ENS4Care EU project, developing EU guidelines in prevention, clinical practice, integrated care, ePrescribing and advanced roles for nurses and social workers, and showing the importance of practical approaches to policy-making, which the Commissioner highly valued. Although they discussed patient safety & quality of care, including the workforce needed in the health and social care sector, the Commissioner expressed his deep concern about the brain drain of nurses and social workers from the East to the West. It became clear from that dialogue, which will continue, that politicians are sensitive to what goes on frontline.

ENS4Care

On 23 January, the EFN met the European Commission DG Connect for the 1st review of the EFN project [ENS4Care](#), together with the project Work Package leaders Pat Hughes (C3 Collaborating for Health, UK) – Lead WP2: Prevention; Tine Lyngholm (Danish Nurses' Organisation) – Lead WP3: Clinical Practice; Marianne Sipilä (Helsinki Metropolia University of Applied Sciences) – Lead WP4: Integrated Care; Pamela Hussey (Irish Nurses and Midwives Organisation) – Lead WP5: Nurse ePrescribing; Dorota Kilanska (European Nursing Research Foundation) – Lead WP7: Sustainability; and Marina Lupari (Expert). The purpose of the meeting was to evaluate the ongoing developments of the project, namely the methodology used to develop the project, the good practices collected, and the process to develop the guidelines that will be submitted to the Commission by February 2015. The evaluators and Commission highly valued the work done and encouraged partners to write more about the success of ENS4Care.

Ebola

Following the event in Madrid in October 2014, the EFN was invited by DG SANTE (former DG SANCO) to participate in the meetings held in Luxembourg in November and December, to exchange experiences and discuss best practices in terms of safety, infection prevention, and control measures from experiences with first contact of suspected Ebola Virus Disease (EVD) cases. Several DG SANTE and ECDC meetings, bringing together national coordinators on Ebola, concluded that nurses and nursing need to be more engaged to overcome bottlenecks. Everybody agrees that it is very difficult to work on a disease on which there is very limited experience and scarce scientific evidence-based information. Although different levels of preparedness exist, "zero tolerance" of staff infection is key for concrete actions. From an EFN perspective, the next step will be the launch of a survey, led by EFN, to gather data to map the needs of all the nurses working with and confronted with questions surrounding "Ebola" specifically, but also on infection diseases of high consequences and risks in communities. Although the European Commission [announced](#), on 16 January, the launch of eight research projects on Ebola (funded with a total of €215 million), they aim to develop vaccines and rapid diagnostics tests, when more research is needed from a caring and preparedness perspective, including stigmatisation.

On another note, the Committee on Women's Rights and Gender Equality published a [draft opinion](#) on the "Ebola Crisis: the long-term lessons and how to strengthen health systems in developing countries to prevent future crises", calling on the Committee on Development, as the committee responsible, to incorporate in its motion for a resolution some key points linked to the realities women and girls are facing every day, as more and more are exposed to Ebola Virus Disease in their role as principal carers, and to underline the importance of gender-balanced health specialist teams.



News from the EU

Latvian EU Presidency

As from the 1st of January, Latvia is holding for the first time-ever the [EU Presidency](#). Part of the Italian-Latvian-Luxembourgish Trio Presidency, Latvia will focus on three overarching priorities: Competitive Europe, through the facilitation of EU competitiveness as a key to economic growth and jobs; Digital Europe, through the full exploitation of the digital potential of the European economy; and Engaged Europe, through the reinforcement of the role of the European Union in the world. In terms of health, the Latvian EU Presidency intends to begin negotiations with the European Parliament on reforming EU regulations on medical devices and in vitro diagnostic medical devices. Cohesion policy will also be one of its key priorities, by ensuring that all the preconditions are met to start the new cohesion policy for 2014-2020. Another key topic will be to take an integrative approach on equality between women and men, building it into all policy areas, and especially employment, social and health policies. Finally, the Presidency is aiming to consolidate the role of education and training in delivering skills that the labour market needs, in line with the Agenda 2020, and will seek to strengthen informal education, including social skills.

Continuous Professional Development and Life-Long Learning

The European Commission published the [final report](#) of the study on the review and mapping of continuous professional development (CPD) and life-long learning (LLL) for health professionals in the EU, in which the EFN was involved, together with the Council of European Dentists (CED), the European Midwives Association (EMA), the European Public Health Alliance (EPHA), the Pharmaceutical Group of the European Union (PGEU), and the Standing Committee of European Doctors (CPME). The study findings reaffirm the importance of CPD and LLL for health professionals, both in terms of professional and personal development, and show that there is significant variance in CPD across countries and health professions, with mandatory and voluntary systems, and formal and informal delivery of CPD activities. The main conclusions show that efforts need to be made to ensure that health professionals in all the EU Member States are able to access CPD activities in accordance with Member States' obligation under the revised Directive on the recognition of professional qualifications, and that further research should be done on the impact and systems of health professional CPD, in particular as regards the relation between CPD and patient safety, quality of care and patient outcomes.

eSkills and Health Workforce

Published by the European Commission, in December 2014, the [eHealth Stakeholder Group](#) report on "[eSkills and Health workforce](#)", led by EFN, provides an overview of the gaps in eSkills of the EU healthcare workforce, as well as a series of practical steps, and invites the Commission to coordinate the efforts at EU level to map common eSkill needs. It should also ensure exchange of best practices in training ad curricula, whereas Member States should strengthen efforts on continuous professional development that should also include eSkills. It also provides a concrete contribution to the [eHealth Action Plan 2012-2020](#) on supporting digital skills.

mHealth in Europe: Preparing the ground

The European Commission published on 12 January the [results](#) of its public [consultation](#) on the green paper on mHealth, undertaken in 2014, to which the EFN provided its [input](#). While recent [statistics](#) confirm that national and EU funding initiatives are being successful and that Europe is set to become the largest market by 2018, responses to this consultation indicate that a lot still remains to be done so that EU entrepreneurs can effectively access this market, as: more patient safety and transparency of information, by means of certification schemes or quality labelling of lifestyle and wellbeing apps; more evidence on the cost-effectiveness of mHealth; stronger privacy and security tools to build users' trust; EU and national actions to ensure interoperability of mHealth solutions with Electronic Health Records (EHRs) for continuity of care and research purposes; and health professionals, carers and users should be actively involved in co-designing mHealth solutions. The EFN believes that in order to promote healthcare system reform, the role played by innovation in the field of healthcare, including mHealth, is crucial and therefore it is necessary to invest and allocate resources in order to carry out objective evaluation studies and obtain concrete results on whether or not mHealth is producing better health outcomes. The Commission will now analyse the options for policy actions (legislation, self- or co-regulation, policy guidelines, etc.). A series of actions to support mHealth deployment are already foreseen under Horizon 2020 and will be taken into account in future work programmes. mHealth will be one of the key topics on the agenda of [eHealth Week 2015](#) to take place in Riga in May 2015, with the objective to discuss in-depth the key policy actions identified through the consultation and on which we could move forward.

Long-term social care and deinstitutionalisation

The European Economic and Social Committee (EESC) is preparing an [exploratory opinion](#) on long-term social care and deinstitutionalisation, as a contribution to the implementation of further social services reforms, and the improvement of long-term care. Once adopted, the opinion will be presented at, and could serve as a significant contribution to, the conference on "Deinstitutionalisation practices and further development of the European social care policy", to be held on 15 June 2015, in Riga. Due to the complexity of the subject, a [public hearing](#) is being organised on 12 February to better understand the situation in the different EU Member States, examine the challenges and look at solutions.

European Ombudsman re-elected

The European [Ombudsman](#), Emily O'Reilly, has been re-elected on 16 December, for a five years' term (2014-2019), by the European Parliament with an overwhelming majority (569 votes in favour out of 678 MEPs voting). The European Ombudsman will now work to implement her new strategy "[Towards 2019](#)" with the key objectives of ensuring relevance, increasing visibility and achieving greater impact.

Publications

Access to healthcare in times of crisis

Eurofound published a report "[Access to healthcare in times of crisis](#)" emphasizing that the current crisis resulted in the emergence of new and unexpected vulnerable groups, who no longer have access to healthcare, even in countries that chose to make few cuts to the health services. These groups include people who live in remote areas; with low health literacy, poor education and low incomes; with disabilities, elderly people and people with chronic illnesses; as well as homeless people and migrants. In its report, Eurofound suggests that policymakers and service providers determine whether quick responses to a new situation may be worse than renovating the system as a whole and recommends investing in the working conditions of healthcare staff, as an effective option to tackle staff shortages, while investments in the short run, for example, in ICT, self-help facilities, and home and ambulatory care, could free up resources over the long term.

Health at a Glance: Europe 2014

The European Commission, in collaboration with OECD, published the new "[Health at a Glance: Europe 2014](#)" providing the most recent data on health status, risk factors to health, and access to high-quality care across the 28 EU member states, four candidate countries and three EFTA countries. This third edition also includes a new chapter on access to care, assessing where possible the impact of the economic crisis on financial barriers, geographic barriers and waiting times.

2015 Annual Growth Survey

The European Commission published its [Annual Growth Survey 2015](#) that outlines the main features of its new jobs and growth agenda. It puts Europe back on track in terms of the creation of jobs and sustainable economic growth, and recommends continued work on the economic and social policy based on three pillars: momentum for investment, renewal of the commitment in support of structural reforms and continued budgetary responsibility. It also highlights that more can be done at EU level to help Member States return to higher growth levels and make progress towards sustainable development, and that reviving growth can only be achieved if the EU Institutions and the Member States work together to deliver on Europe social market economy.

Comparing (Voluntary) Occupational Welfare in the EU

The European Social Observatory published a [report](#) "Comparing (Voluntary) Occupational Welfare in the EU: Evidence from an international research study", that focus on three policy areas (health care; reconciliation of work and family life, and training), three sectors (manufacturing, public sector, and private services), in eight EU countries (Austria, Belgium, Germany, Italy, Poland, Spain, Sweden, and UK). The evidence collected shows that Voluntary Occupational Welfare is becoming relatively more widespread, even if usually representing an addition rather than a substitute to statutory schemes. However the Voluntary Occupational Welfare programmes offer possibilities for improving workers' conditions and life; and could create incentives to weaken the welfare state and to fragment employees' conditions on the labour market.

Agenda

To view the upcoming meetings' dates, click [here](#).

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