



Activity Report

European Federation of Nurses' Associations
Working Year 2018



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Abbreviations

- **AI** Artificial intelligence
- **AMR** Antimicrobial Resistance
- **ANP(s)** Advanced Nurse Practitioner(s)
- **CPD** Continuous Professional Development
- **DG** Directorate General
- **DG CONNECT** European Commission Directorate General for Communications Networks, Content and Technology
- **DG GROW** European Commission Directorate-General for Internal Market, Industry, Entrepreneurship and SMEs
- **DG SANTE** European Commission Directorate General for Health and Food Safety
- **DIR36/DIR55**
DIR36-55 Directive on Mutual Recognition of Professional Qualifications (2005/36/EC & 2013/55/EU)
- **ECDC** European Centre for Disease Prevention and Control
- **EFN** European Federation of Nurses' Association
- **EHR** Electronic Health Records
- **ENRF** European Nursing Research Foundation
- **ENS4Care** EFN EU Project "Evidence Based Guidelines for Nurses and Social Care Workers for the deployment of eHealth services"
- **EP** European Parliament
- **EPSCO** Employment, Social Policy, Health and Consumer Affairs Council configuration
- **EU** European Union
- **ENVI** European Parliament Committee on Environment, Public Health and Food Safety
- **EMPL** European Parliament's Employment and Social Affairs Committee
- **HCP** Healthcare Profession/al
- **FP9** Framework Programme 9
- **H2020** Horizon 2020 programme (EU Framework Programme for Research and Innovation)
- **ICN** International Council of Nurses
- **ICT** Information and Communication Technology
- **IMCO** European Parliament's Committee on Internal Market and Consumer Protection
- **K4I** Knowledge4Innovation
- **LTC** Long-Term Care
- **MEP(s)** Member(s) of the European Parliament
- **mHealth** Mobile health – in reference to using mobile communication devices in healthcare
- **NGO** Non-Governmental Organisation

- **NNA(s)** National Nurses' Association(s)/Organisation(s)
 - **OECD** Organisation for Economic Co-operation and Development
 - **PaSQ** Joint Action on Patient Safety & Quality of Care
 - **SME(s)** Small and Medium Enterprise(s)
 - **SOLP** EFN Strategic & Operational Lobby Plan
 - **SORP** ENRF Strategic & Operational Research Plan
 - **WHO** World Health Organization
 - **WG** Working group
 - **WP** Work Package
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Executive Summary

The European Federation of Nurses Associations (EFN) is respected and trusted for the collaborative and partnership work with all EU institutions, the European Commission, European Parliament and Council. The EFN advocates for the promotion of empowered and skilled EU nurses to work to the full scope of their practice and potential, as critical element to ensure the best healthcare outcomes for patients and EU citizens. More than ever it is crucial for nurses to engage and proactively influence and contribute to EU health and social policies, in the complex and challenging society we operate in as healthcare professionals.

Nurses' engagement in policy design is fundamental to ensuring EU policies fit-for-purpose. The EFN has been focussing on this, by lobbying the EU Institutions, the EU Stakeholders, and policy/decision-makers, and through alliances with key influential people. However, further action is required to ensure that the nurses' education is in line with the Directive 55. The [EFN Competency Framework](#) and [EFN Workforce Matrix 3+1](#) are guiding tools for EFN members and stakeholders to work towards evolving the appropriate workforce composition, and to provide clarity to the different nurses' roles and responsibilities. Building on the foundations of the Directive 55, nurses' advanced roles are crucial in boosting patients' empowerment and the implementation of meaningful [value-based healthcare systems](#). Nurses' close relationship with patients/citizens is fundamental ensuring what is developed in policy is appropriately delivered and deployed in practice. This is in line with the conclusions drawn by the [Country Health Profiles](#) have emphasised the importance of a fundamental rethink of service delivery for health and social care ecosystems, in which 3 million EU nurses play a central role.

The [European Pillar of Social Rights](#) developments are an essential policy and political agenda for the EFN. EFN members are committed to the design and implementation of the [20 principles](#) enshrined in the European Pillar of Social Rights, with special attention to principle 1 – Education; Principle 6 – Wages; Principle 16 – Healthcare; and Principle 18 – Long-term Care. The EFN compendium on best practices from 35 EU Countries is a key lobby document to provide evidence based and practice examples for healthcare stakeholders, policymakers, clinicians, patients and the public of nurses' contribution to society, and the sustainability of the health and social care ecosystems in the EU and Europe. The EFN report on Long-term Care (LTC) is key for the European Commission new LTC policy developments. The robust upscaling of these best practices is reliant on the engagement of nurses into the development and delivery of fit-for-purpose and sustainable solutions. It is crucial that nurses engage and proactively influence EU policies that impact on population's health.

Positioning nursing more central to health policy and technology design and ensuring that nurses can use their skills, including e-skills, to their full capacity, can lead to improved health and well-being, enabling the achievement of Universal Health Coverage. Supporting digital skills of the nursing workforce will have a positive influence in the context of the constantly changing nature of healthcare systems and healthcare delivery. There is clear evidence that health technologies and digital solutions will only be achieved with the end-user as co-designer. The success of the development and deployment depends on fit-for-purpose solutions that centrally involve frontline nurses.

In 2019, we have a real opportunity with the European Parliament elections and the upcoming new Commission to make a real difference. Nurses collectively across Europe have the voting power to ensure the politicians they elect, are committed to investing in health and nursing to benefit all the citizens of Europe. Speaking with one voice, nurses can influence the European Institutions to ensure the EU Acquis Communautaire reflects EU citizens' needs. The EFN [Manifesto](#), approved at the EFN General Assembly in October 2018, provides a clear message to the MEPs: "they have to champion appropriately educated, supported and developed nursing workforce with fair working conditions to deliver person-centred care and promote health in the EU".

In relation to the [Nursing Now](#) global campaign, the EFN received formal recognition and endorsement from the Global Nursing Now Campaign Board, and became officially the Nursing Now European Regional Leader. As specified by the Co-Chair of Global Board, Lord Nigel Crisp, at the EFN General Assembly, in Slovakia, October 2018, *"the biggest thing we can do to improve health globally is to empower nurses – who represent health of the health workforce of the world!"*

Foreword

Dear EFN Members,
Dear Colleagues,

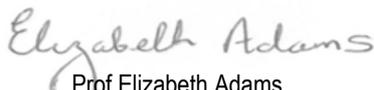
The EFN had many achievements in 2018 and it is important to reflect on all the work delivered in partnership and collaboration with all the EFN members, the EU Stakeholders and the EU policy makers, on behalf of all nurses we represent and the citizens across Europe. Without such commitment and relentless work of all the key players we would not be able to achieve all we do collectively.

Throughout 2018, there was a significant amount of lobby work to raise the nursing profession challenges, at national and EU levels, in addition to great opportunities to develop strong alliances with the EU Health Stakeholders, and EU policy-makers, designing the EU health policies. Improving the quality of working conditions for nurses and ensuring that the workforce remains skilled and motivated remained a priority for the EFN. The EFN focused on promoting the right [workforce composition](#) and to provide clarity in relation to the different [nurses' roles](#), responsibility and scope of practice. To ensure this professional vision becomes part of a political reality it is important that we continue to call on the EU Institutions to use the [EFN Workforce Matrix](#), which is underpinned by Article 31 of Directive 2013/55/EU.

To measure progress throughout the EU, we monitored and analysed the developments of the [European Semester](#). As the Country Reports have demonstrated, elements of work need to be progressed in terms of ensuring timely access of EU citizens to affordable health and social care, being one of the Pillars of the European Social Rights agenda, in addition to Long Term Care which takes a prominent place within the Semester as one of Europe's main challenge in which the nursing profession is part of the European solution.

Nurses input is fundamental to establish a strong European leadership guaranteeing that health and well-being will remain a high priority on the EU 'Health in All Policies' political agenda. Therefore, the EFN members are working to ensure that nurses' views, expertise and valuable contribution is taken into account in the development of the EU policies linked to the implementation of the [20 principles](#) enshrined in the European Pillar of Social Rights. A thorough implementation of such principles, reflecting the 3 million EU nurses' needs, their pragmatic approach and expertise, is crucial to achieving concrete outcomes for the sustainability of the health and social care sector. EU and national governments need to concretely engage the frontline nurses and their leaders in the co-design of the health and social care ecosystems in the EU.

It is with sincere appreciation that we present all your collective achievements that has been underpinned and driven by your strategic leadership in this 2018 Activity Report. The Report provides clear insights into the daily lobby efforts of EFN that would not be possible without your commitment, expertise, collective insights, engagement and positive support, all of which is valued and appreciated


Prof Elizabeth Adams
EFN President


Dr Paul De Raeve
EFN Secretary General

I. EFN KEY LOBBY PRIORITIES

In line with the [EFN Strategic and Operational Lobby Plan 2014-2020](#), and building on the achievements of previous years, in 2018 the EFN continued focussing on its three major key policy areas: [Education](#) (Under the lead of EFN Professional Committee), [EU Workforce for Health](#) (Under the lead of EFN Workforce Committee), and [Patient Safety and Quality of Care](#) (Under the lead of EFN Public Policy Committee), including [eHealth](#).



One of EFN most significant and strategic and positive political meeting took place in February 2018. The EU Health Commissioner for Health, Vytenis Andriukaitis, met with the EFN President, Elizabeth Adams, and the EFN Secretary General, Paul De Raeve, exchanged views regarding the main priorities currently affecting the nursing profession, and the EU policy response. The Commissioner acknowledged the nursing potential, like many politicians, and was very open to the nurses' concerns, recognising their key role in addressing important topics such as vaccination/vaccine hesitancy/health literacy/education and training of healthcare professionals. The Commissioner and EFN in partnership provides a

real opportunity to bring things forward for the nurses and the nursing profession, especially in relation to the future work of the European Commission on the [European Pillar of Social Rights](#) in which [principle 16](#) refers to Andriukaitis priority: 'Access to Health care'.

Our follow-up meetings with the Deputy Director General DG SANTE, Martin Seychell, are key in our daily lobby work to make progress. Over the years the EFN has built a positive relationship with the Deputy Director and there is a trust and understanding of our political needs. Martin is very open to the nurses' concerns and welcomes and appreciates the work of EFN and its members, and follows their practical solution with interest, acknowledging the need to explain to the future MEPs what the Health Policy Agenda is all about. So, debate on EU elections started.



The EFN has always worked very closely with dedicated health MEPS to advance triologue meetings on specific legislative files of the European Commission. This success story needs to continue in 2019.

Looking at the EFN SOLP priorities more in details, we can say that:

1. **EDUCATION**

↳ **Directive 36/55**

In 2018, the [Directive 2005/36/EC](#) on Mutual Recognition of Professional Qualifications (amended by Directive [2013/55/EU](#)), continued to be a key priority for the EFN and its members. In many countries the governments are trying to downgrade the nursing education and are starting to develop a 'cheap nurses', also called 'practical nurse', driven by economic factors rather than the body of evidence which demonstrates that graduated nurses make a significant positive difference to the quality, safety, morbidity and mortality of the individual citizens ([Aiken, 2017](#)). Although the EFN [letters](#) sent to the national governments in support of the EFN National Nurses Associations' requesting the engagement of the nursing profession in the policy design, saw national laws voted bypassing the engagement of the nursing profession. In this context, it is crucial that EFN Members join forces, together with the schools of nursing, universities and politicians to implement the requirements of Directive 55. This will avoid infringement procedures from the European Commission (DG GROW) and ensure a consistent level of qualified EU nurses in compliance with Directive 55.

Taking into account that with the current challenges of ageing, chronic diseases, etc. we need, more than ever, a highly qualified workforce to ensure that patient safety and quality of care are maintained. The EFN has been following this process very closely, and has been lobbying some EU Member States, as Bulgaria, Slovakia,

Czech Republic and Poland, to make sure that the legislative EU requirements are correctly implemented in National law (Acquis Communautaire). In this context, the EFN participated in several meetings and events, namely at EU level with the European Commissioners, and the EU stakeholders, as well as at national level (see more in page 29), to support the EFN members in their daily efforts to convince their governments.

At EU level, the EFN participated for example in the Workshop on “Planning for health professions: how to act on skills needs”, held in Brussels, in February 2018. At this event Akiko Maeda from OECD presented the findings of a study “Health workforce skills assessment: supporting health workers achieve person-centred care”, in which they looked at the cause of the skills mismatch and found that it is due to inadequate education and training, ineffective organisation, inappropriate incentives, restrictions in access. To address the diversity of health systems and Health Care Professions (HCP) roles, the OECD found a growing convergence among the professional competences. Maeda advised that the system is moving towards community and integrated care and the education needs to reflect this trend.

At the meeting of EMPL Committee meeting on “Modernisation of education in the EU” held in February 2018, MEP Agnieszka KOZŁOWSKA-RAJEWICZ (EPP, Poland) stressed that education is central in career possibilities. Preparing young people for the professional life is not the only aim of education, that needs to be of quality. Investing in education is crucial for economic progress.

In addition, to these meetings, the EFN has been closely following the debate on the European Pillar of Social Rights that enhances the quality education for everyone in its principle 1 ‘Education, training and life-long learning’ mentioning that *“Everyone has the right to quality and inclusive education, training and life-long learning in order to maintain and acquire skills that enable them to participate fully in society and manage successfully transitions in the labour market”*. Nurses play a central role in the adequate and efficient health and social care ecosystem throughout the EU and therefore EFN recommends that the EU encourages national governments to foster social convergence, by addressing at EU level strategic areas such as quality education, equal opportunities, and fair working conditions. Also, investing in advanced roles for nurses, with specific focus on the development of the case manager and the importance of nurse prescribing, implies the citizens access to health and social services can be better facilitated. EFN argues that an advanced role with the appropriate skills-mix, building on the Batchelor [EFN Competency Framework](#), will lead to an appropriate, effective, and sustainable designed frontline [workforce composition \(EFN Matrix 3+1\)](#) at the interface of health and social care services in the EU.

Finally, the EFN is involved in an EU project, under Erasmus+, called ‘Quality mentorship for developing competent nursing students’ ([QualMent](#)) aiming to address the clinical mentor’s lack in nursing education and develop the clinical mentor’s competence with mentor education for national and international nursing students. This field is of very high relevance, since all study programmes in the nursing field must be developed according to the EU Directive 2013/55/EU demanding that all undergraduate nursing study programmes must comply with Article 31 (8 competencies) and the Directive 2013/55/EU saying clearly that the half of the duration of the training (4600 hours) of each study programme is done in the clinical environments as clinical practice or stage (2300 hours) and mentored by the clinical mentors and teachers of the programme (See more page 20).

↳ **Proportionality Test Directive**

The transposition, or non-transposition, of [Directive 2013/55/EU](#) led to the development of a new EU Directive: the [Proportionality Test Directive](#). When revised in 2013, the objective of the DIR55 was to set rules to make sure that provisions would be fit for purpose and would not go beyond what is necessary for exercising the nursing profession. The procedure introduced by DIR55 includes guidance on assessing proportionality of existing legislation. But in many cases the EU Member States have been having difficulties to follow this guidance, based on the work of the Court of Justice. Therefore, the failure in using this guidance, experienced by some EU Member States, pushed the European Commission to present the Proportionality Directive proposal as a way to put in place a more structural approach. This proposal, based on the Court of Justice jurisprudence, is not imposing any additional rule, but is now clarifying the objective of Article 59 of DIR55 and of the EU Treaties on the proportionality principle: being justified by a public interest objective. As such, the Member States will have to apply the test in the context of their own procedures (The directive is not introducing new procedures), knowing that the proposal allows the Member States to determine the level of protection that they

want to take. This will benefit the nursing professions (and all healthcare professions), as the regulators have to make sure the legislation is kept on a proportional dimension.

For the EFN, the proposed Proportionality Directive, is a clear follow-up of the modernised Directive 2013/55/EU, which has strengthened the development of nursing as a profession since its conception, and the Proportionality Directive will be a positive tool to develop new regulation/laws related to the development of the nursing profession in the EU. We need EU legislative tools to support the NNAs developing nursing throughout the EU and Europe as governments often decide without any consultation. As such, the EFN will continue [ensuring](#) that the level of protection of public health will not be undermined by the new provisions and that EU citizens will continue enjoying access to appropriately trained and regulated professionals. Adopted in June 2018, the [Proportionality Directive](#) brings positive outcomes for nurses who welcomes the specificity recognised to the health professions, the strengthened stakeholders' involvement and the important role given to Continuous Professional Development (CPD). The EU Member States will have now two years to transpose the Proportionality Directive into national law. The EFN will continue to follow closely its implementation and impact in the years to come.

↳ **Continuous Professional Development**

As a key political topic for the European Commission, strengthened in the modernised Directive 2013/55/EU, Continuous Professional Development (CPD) is an essential topic for the nursing profession. In 2018, the EFN continued to follow closely the debate and developments of CPD, and its lobby process next to the EU Institutions and key stakeholders, providing nurses' views and key concerns on the subject and making sure that EU nurses are able to regularly update their knowledge, skills and competences through CPD. The EFN will continue to follow this topic and keeping it high on the EU political agenda. The EFN will explore with the other sectoral professions (the doctors, pharmacists, midwives, dentists), what progress can be made in 2019, especially through the European Health Programme and the European Social Rights Pillar, in which the first principle relates to education, including life-long-learning and CPD.

2. EU WORKFORCE FOR HEALTH

The European health and social care systems are facing many challenges, one of which is the uneven distribution of workforce, a topic being discussed by the EFN, and key EU Stakeholders, for the last decades. Evidence from the EU Member States shows further deterioration in staffing levels, as short-term workforce planning and financial cuts' have contributed to the loss of thousands of nursing positions across Europe since 2008, when the financial crises hit the nursing profession very hard. Nurses paid a huge price, not the bankers!

In 2018, the major key concerns for all the EFN members at national level continue to relate to improving nurses working conditions, enough nursing workforce ensuring safe staffing levels resources and support, valuing nurses' work, better salaries, and appropriate education and qualifications, allowing opportunities to advance the individual nurse's career and the nursing profession. It is essential to make sure that young people feel motivated to choose nursing as their profession, currently being the largest occupational group in the health care sector, providing up to 80% of healthcare services. In 2019, it is crucial that at local, national, and EU levels, policy makers and competent authorities move one step further and make sure that the health facilities have the necessary nursing workforce, 24h/day, 7h/week, and 365/day a year, close to their patients; to provide safe and high quality healthcare services; and that the nurses' salaries take into account the extra hours worked; to ensure appropriate education and qualifications, and allow opportunities to advance the nursing profession, with the continuous promotion of advanced roles, continuous professional development and more opportunities in prevention and community care services, including ehealth services.

Therefore, the EFN lobbied DG Sante decision makers engaged in "Planning for health professions: how to act on skills needs", focussing on skills needs and health workforce planning processes, making sure that more EU policy efforts were/will be made, and more concrete actions are devoted to support the nursing workforce and competences, making sure that the nurses we have stay in the profession.

As the EU health and social care ecosystems have been deeply affected by the 2008 financial and economic crisis, with severe cuts in nursing posts and salaries, having a negative impact on healthcare outcomes, nurses are still expected to provide the same level of care, the same quality, if not higher, with less resources (less and lower

qualified staff), often leading to burn-out and nurses leaving the nursing profession. As emphasised by the [European Semester Country Reports](#), practically every Member State needs more nurses in order to support the unmet needs of their population, but slow frontline progress is made to achieve better working conditions and environments that keep nurses in the profession. Workforce working conditions are more talked about than changed frontline.

In this context, the EFN Members have identified Principle 6 'Wages' of the [European Pillar of Social Rights](#), as an important priority for the EFN to develop further. During the EFN Brussels General Assembly, April 2018, within the framework of the European Pillar of Social Rights discussion, the Workforce Committee reflected on how to collect information on the net wages of nurses. An agreed survey was submitted to the NNAs to determine the general care nurse salary across countries, to collect information on the net salaries of nurses, compared to some other professions (as benchmark), to build the argument for the Social Pillar design for more support to nurses and nursing in the EU. The first results show that despite a harmonised educational framework for nurses across the EU, nurses' salaries vary significantly. As such, it is key to keep, from a professional perspective, the nurses' wages/salaries positioned highly on the EU political agenda. It is also crucial that nurses across Europe are paid at the level of their education and in a fair way for the crucial work they perform for peoples' health. Not taking into account any increase in salaries nor all the extra hours nurses are providing, with the excuse of economic cuts in the health sector, is in 2018, unacceptable. In 2019, the EFN will build on this survey to bring more rigorous data on wages into the political debate, making sure nurses' views are reflected in DG Employment design of the European Social Pillar in 2019.

3. PATIENT SAFETY AND QUALITY OF CARE

[Patient safety and quality of care](#) are paramount health policy priorities for the EFN and the EU political agenda and continue to remain as such. Given the complex character of the health and social care sector and the need for quality, patient safety and adequate organisation and delivery of health and social services, including eHealth services, to the people of the EU and Europe, strong leadership in advocacy and governance is needed to address the future challenges within the EU and Europe. The EFN has been always very clear that to provide the best possible care and ensure patient safety, it is crucial that the workforce for health, and in particular nurses, is well organised, highly skilled/educated, and all necessary measures are taken to keep the health care professionals HCPs in the sector. While the European Union has seen significant developments in patient safety, urgent EU action is still needed in this regard, realising the topic is put aside. It is crucial to ensure that all citizens have equal access to health and social care with the highest possible quality and safety. It is also key that the European and national policymakers and stakeholders join forces and examine how to promote an exchange of good practices across EU Member States.

In 2018, the EFN focussed on the following topics:

a. Primary Care

Although the population is living longer, more people are living with co-morbidities, non-communicable diseases and needing complex care interventions. Building a sustainable health and social care service for future generations, therefore, implies bringing care back to the community and reorient policies towards primary care as it covers the complete life-cycle and includes long-term care services. Shifting care delivery away from hospitals and into primary care settings is integral to many national and EU policies as a means of delivering better and greater people-centred care. Nurses who work in primary care are in many countries the key professionals involved in the management and coordination of complex care for individual patients. Their experience and skills are essential to the success of such policy, yet little is known at EU level about what their work involves, how their roles and responsibilities differ between countries and what are their competencies and needs. Crucially, little is known about how many there are in the EU; what is their demographic, personal and work profiles; and what are their perceptions about the quality and safety of the care provided in community and primary care settings across the EU. The European Commission Expert Group on Health Systems Performance Assessment (HSPA) [report](#) "A New Drive for Primary Care in Europe: Rethinking the Assessment Tools and Methodologies", confirms that performance assessment in primary care paves the way for better health outcomes and improves the overall health system. If the EU Member States are to succeed in developing primary care, we need a whole system and mindset change at the policy, practice and education levels. Primary care must become stronger, match people's needs and be coordinated with other services, and prevention of disease, as well as the empowerment of chronically ill persons for self-management, must be at the heart of health systems.

As such, primary care has been high on the EFN political agenda, knowing that there is an increasing evidence that interventions led by nurses can contribute to an improvement of patient outcomes, particularly linked to the early discharge schemes and to self-management, [allowing patients](#) to stay longer at home. To empower nurses to further strengthen their role and to deliver safe and high-quality cost-effective patient care in the future, a change of both mindset and ecosystems is required. As such, in 2018, the EFN participated in several EU and health Stakeholders' events (as 'The digital transformation of healthcare - challenges and opportunities', at the European Parliament, in June 2018) and continued to lobby the EU policymakers for not thinking only in economic terms.

Also, at the EFN General Assembly in April 2018, in Brussels, and considering the EU discussions on the European Pillar of Social Rights, the EFN Members provide the EFN with best practices on well-functioning "Primary Care models", and good practices, led by nurses, which could be upscaled throughout the EU. The [EFN members input](#) shows that a strong primary care system has widespread health and wellbeing benefits for all those involved, primary care nurses' members of EFN are invested and committed to furthering quality and safe care in this setting by taking on a number of new and important roles. Based on the EFN Members' real-world experience of primary care in different countries in Europe, the EFN lobbied and recommended several European institutions, in particular DG Sante, national governments and relevant health stakeholders to: Invest in the expansion of community and family nursing to ensure efficient access to quality healthcare services across Europe is maintained; Support the development of greater nurse-led initiatives in primary care to relieve the mounting pressure on general practice and ensure quality outcomes for patients; Provide funds for capacity building for primary care nurses, and for development of further nursing initiatives that respond to changing demographics and increased patient needs; Continue to support the development and expansion of nurse prescribing, building on and furthering the success of this initiative from those countries that have already taken this step; and to Support the exchange of best practice around the usefulness of nursing roles such as health visiting and school nursing, ensuring the benefits from such development benefits EU citizens across regions and countries.

The benefits from investing in primary care are obvious to all those engaged in the health and social care ecosystem, both professionals and patients/citizens. Nurses have a central and leading role to play in primary care developments, although their role is not always acknowledged by the Commission Experts group and even the civil servants in DG Sante. It is high time the policy rhetoric gets translated into concrete support and investment in primary care services across Europe to ensure quality, accessible, efficient and safe care reaching those who need it most. DG Sante upscaling mechanisms should appreciate nurses' input and as such make funds available for upscaling. If the EU Member States aim to succeed in developing primary care, a whole system and mindset change at the policy, practice and education level will lead to better health outcomes, with a clear shift from intervention to prevention. The EFN will continue lobbying DG Sante and its appointed experts to making sure nurses' experience in primary care is taken into account in the EU policy design.

b. Long-Term Care

Long term care is a priority topic across Europe. The sustainability of the European national healthcare systems faces challenges often related to the ageing population, the increase of chronic diseases and, therefore, to the provision of long-term care services. As the [European Semester Country Reports](#) have stressed, most of the EU Member States suffer from a growing ageing society, leading to long-term care costs expected to increase significantly. This issue raised high political attention at EU level, and long-term care has become part of the social strategy of the European Commission, that included in Principle 18 of the [European Pillar of Social Rights](#) the right for everyone to affordable long-term care services of good quality, in particular home-care and community-based services. Long-term care is also a crucial topic for the nursing community as set out in the [EFN Position Paper on EU Challenges for Long-Term Care](#) and the [EFN Policy Statement on Long-Term Care](#).

Taking into account the developments in the field and the Pillar of social rights, the EFN members supported at the EFN General Assembly, in October 2018, in Slovakia, the EFN lobby work in emphasising nurses' role in Long Term Care (LTC), by providing best practices that are implemented/deployed at national level, and that could be used in the co-design of EU policies on LTC, especially within the remit of DG Employment activities. The [report](#) drafted from this valuable input under five key areas of activity: LTC & Workforce; LTC & Quality indicators; LTC & Digitalisation; LTC & Financing; and LTC & Standards, shows the extent to which nurses' roles are relevant in the delivery of [community care](#) across Europe and how their contribution becomes central to support the EU long-term

care political agenda, and that it is crucial to co-design with frontline nurses EU policies to make them fit for purpose and as such ensure a sustainable and efficient approach in the development of an EU LTC policy. In this context, the EFN Members invited EU and national policy makers to invest in a highly-skilled LTC nursing workforce; involve healthcare professionals and patients in the development and implementation of LTC quality indicators; invest in people-centred innovation technology; adopt value-based financing models; and engage end-users in standards design.

Based on this input from EFN members, the EFN has been lobbying DG Employment as they are designing the European Social Pillar mechanisms and policies. At several occasions, the EFN was in contact with key EU policy-makers to discuss and inform the future commitment of the European Commission regarding LTC. The EFN took this opportunity to provide its input to the European Pillar of Social Rights' discussions on LTC (Principle 18), raising the fundamental role nurses play in the provision of health and social care, in particular in prevention and long-term care and the need to promote the right to affordable long-term care services of good quality, in particular home-care and community-based services - a key priority for the nursing profession. People need continuity and personal care that can no longer be provided by hospitals and the development of an efficient primary and community care system is therefore central to the policy design within the European Pillar of Social Rights. DG Employment appreciates EFN contributions which will be transmitted to policy initiative in beginning 2019 as the Commission wants it 'ready' before the new Commission takes office in May 2019.

c. Antimicrobial Resistance

Representing one of the most current critical concerns of public health, Antimicrobial Resistance (AMR) is a professional and political challenge that requires the engagement and leadership of frontline nurses. Each year 25.000 people die in the EU, due to antibiotic-resistant bacteria, while the extra healthcare costs and productivity losses associated with AMR represent €1.5 billion. Nurses are continuously active in advancing their commitment to tackling AMR, as one of the most influential actors to [combat AMR frontline](#). The tremendous negative effect of AMR on outcomes is stressed in all EU meetings as if AMR cannot be countered by 2050, ten million people would die each year, combined with a reduction in global GDP of 2% to 3.5% and a total cost of 100 trillion dollars. Therefore EFN has demonstrated how [nurses can effectively contribute](#) addressing AMR, going way beyond awareness raising. For the EFN, the EU approach needs to be more concrete and go beyond consultation, awareness raising and keeping repeating the terrible statistics. Therefore, in 2018, the EFN continued its lobby in the High-level roundtable on the prevention of healthcare-associated infections, making clear that accelerating progress to manage antibiotics better can only be done by involving and engaging frontline, bedside health professionals and supporting them with concrete actions. EFN advocated: "Stop Talking, Start Acting!"

d. Value Based Health and social care Eco-systems

In a European society where a growing number of people live with co-morbidities, non-communicable diseases, and in need of complex care interventions, health and social care systems are expected to give greater importance to value-based outcomes, based on the patient's experience, with a focus on quality of life rather than length of stay and moving away from a medical diagnoses and complications systems towards achieved outcomes from a patient perspective. As different dimensions need to be considered in the health status, the promotion of healthy lifestyles is to be included in the value-based health and social care systems; and patients, providers and researchers should co-design the reforms needed to achieve an inclusive system for prevention and promotion, stepping in before you get a disease. This approach refers to self-management and co-responsibility.

Supporting value-based health and social care, bringing nurses closer to the patients, the EFN has been following closely this debate, and how it can tackle the challenges of future healthcare systems by shifting to integrated care models that improve health outcomes for patients and foster sustainability. To make it work, patients, healthcare providers and researchers should work more together on the optimisation of value, going beyond outcomes and costs measurements. Nurses designing the clinical pathways need to take into account the complexity of care and nurses' experiences and views to deliver better outcomes, as part of the designed algorithms constructing the pathways, especially when AI comes in. The creation of value for patients and citizens incorporates nurses' frontline experiences. [Value-based health care](#) is supported by the nursing profession if it goes beyond cost-control: quality and safety should drive better outcomes. In this context, the advanced roles of nurses are

necessary to respond to patients and citizens' unmet needs within a people-centred approach based on tailored continuity of care pathways which till today have failed to turn integrated care into a reality.

It is within this context that the EFN have been following the political debate closely, by lobbying the EU key players and participating in key EU events as: "*Value-based healthcare: how to utilise patient reported outcomes?*", held in February 2018, to discuss the increased focus on patient engagement and empowerment and the role of patient-reported outcomes in the shifting to value-based healthcare; "*The Value of Health: Improving Outcomes*", held in the European Parliament in September 2018, to discuss steps that can be taken to strengthen value for money in European health systems, and the role that the European Union can play in supporting Member States in this effort; "*Implementing outcomes-based healthcare*", in October 2018, that focussed on measurement of outcomes to create more patient-centred and sustainable healthcare. The politicians present recognised nurses' contribution.

As the ongoing developments (often and unfortunately mainly led by Industry) have a very economic approach towards value-driven health systems, it is of key importance that the measurement of "outcomes", through PROMS and PREMS (See [OECD PaRis project](#)) is co-designed from a nursing perspective and that in this process technology starts supporting the frontline nurses in collecting data instead of creating more administrative tasks to be taken on board. The digitalisation of continuity of care becomes central to health system reform and nurses should lead that design to create solutions fit-for-purpose. As such, collecting data cannot become more a burden for frontline nurses, filling in surveys, reports, leading to an increased workload and as such reducing the 'direct patient time' in person centred care. In fact, we get opposite result if not co-designed with the end-user.

e. Cross-border healthcare

Cross-border healthcare and professional mobility are closely connected. In the case of cross-border healthcare the focus is put on the patient moving to a different Members State to receive treatment/care, while in the other case the emphasis is on the professionals providing services in another country. The EFN has been following this political debate quite closely, since the design of the [Directive](#) will impact on nursing care and as such the policy processes need to take into account the nurses experiences. The EFN advocacy and lobby activities focussed on several political meetings in the European Parliament Committees (IMCO, ENVI), and organised by key EU Stakeholders and alliances: the "Cross-border healthcare and centres of excellence to enhance patients' rights: access, information and innovation" organised in the European Parliament in February 2018, by Active Citizenship Network, being the final event of a two-year campaign to raise awareness on cross-border healthcare - "[Patients' rights have no borders](#)".

The EFN also followed closely the discussions on the establishment of a [European Labour Authority](#) (ELA), aiming to ensure that EU rules on labour mobility are enforced in a fair, simple and effective way. Following consultations and an [impact assessment](#), a [legislative proposal](#) was presented on 13 March 2018. The EPSCO Council agreed on a general approach for the Commission's proposal for the ELA on its 6-7 December 2018 meeting. The agreement reached by the Council will serve as the basis for negotiations with the European Parliament. The Authority should be up and running in 2019 and reach its full operational capacity by 2023. Expecting that ELA will be an effective instrument to safeguard and enforce workers' rights in the European labour market, this proposal is also part of the roll-out of the [European Pillar of Social Rights](#). In 2019, the EFN will continue its lobby and advocacy role on this crucial topic for the nursing profession.

f. Digitalisation of Health and Care

Digitalisation is a crucial aspect of modern societies and health and social care ecosystems. Following this political debate very closely, the EFN believes that technology has an important role to contribute to enhancing patient safety and patient empowerment as well as facilitating healthcare professionals' work, with electronic tools supporting them in their daily work and allowing an easy and fast collection of relevant data, to free up time for direct patient care. Digitalisation in health has the potential to ease patients' access to their health records and simplify and improve the communication with and between health professionals.

The implications of digitalisation in health and social care are well-known to nurses, that play a crucial role in [empowering patients](#) by connecting them to [eHealth solutions](#) thanks to the close relationship between nurse and patient. Nurses can make a significant contribution to [boost value-based ecosystems](#), supported by technology, and being part of a culture that empowers patients to evaluate qualitative health outcomes. As such, the nursing

and health sector can benefit greatly from the use of modern technologies but nurses' engagement in the development as co-designers is crucial, so that the algorithms (e.g. AI) reflect and integrate the nurses' views and brings in the gender component into the equation. The EFN has already contributed to many European policy initiatives in the area of eHealth and eSkills ([ENS4Care](#)), but EFN aims successfully to go further by being part of the design of the Digital Single Market, mainly led by DG [Connect](#). Nurses should lead digital innovations as they are the key end-users, making sure fit-for-purpose solutions are deployed. The EFN believes that EU digital policies need to reinforce trust, and nurses can make this happen if properly engaged in the co-design of digitalisation.

The work of nurses is changing as technology makes it possible to re-engineer health and social care ecosystems. New tools allow nurses to deliver care differently, in hospitals and in remote locations. At EU level, the introduction of [eHealth](#) services are facilitating access to healthcare, whatever the geographical location, or innovative tele-health and personal health systems. Given the nurses' role as key provider of care, the EFN input to the governance and management of eHealth services is essential when designing and implementing the structure ensuring continuity of care between sectors and across borders. Furthermore, given the continuous development of electronic applications connected to the healthcare sector, the need to educate and train health professionals to integrate eHealth and mHealth into daily practice by developing their eSkills in the basic nursing education and CPD is needed.

As such, the EFN lobbied key EU policymakers in the European Commission and European Parliament and is a key partner in the [eHealth Stakeholder Group](#), composed of representatives from the most important European organisations active in the eHealth field, covering a wide range of stakeholders: from patients, consumers, healthcare professionals to the industry, and aiming to support the [EU's Digital Agenda](#) and ongoing eHealth initiatives with the European Commission DG Connect.

Next to participate in key EU meetings, the EFN has been also actively involved in the [AAL programme](#) (Active and Assisted Living Programme - ICT for ageing well), a public-public partnership, that aims to provide innovative-based solution to enhance quality of life and contributing to sustainability of health systems, and to develop ICT based solutions targeting any application areas within the AAL domain. The solutions need to be embedded into the strategies of the participating end-user organisations, services providers and business partners.

In this context of digitalisation, and in particular on the Electronic Health Records (EHR), the EFN becomes partner in two EU projects aiming to pave the way for the full deployment of citizen-centred solutions and services in a digital single market for wellbeing and healthcare, through an easy-to-use, secure, constantly accessible and portable health data and services prototype, thus advancing citizens' health and wellbeing, and digital health innovation.

The European EHR designs links to EFN ongoing efforts to make the nursing workforce better equipped with the right eSkills. Without the right eSkills these technologies, innovations, will not be fully integrated into existing health and social care pathways and as such the investments will be lost. The EFN [eSkills and Health workforce](#) report indicates the gaps in eSkills while providing for a series of practical steps to be taken to make digitalisation happen. The health professional organisations, together with the patients organisations, and the industry (SMEs) should look into eSkills development for the health workforce to address the increasing unmet needs, which then contributes to the implementation of the EU [eHealth Action Plan 2012-2020](#). No surprise the EFN has been very active in lobbying for the inclusion of eSkills in the education and the training of the nurses at both undergraduate and postgraduate level, as well as ensuring their Continuous Professional Development.

Therefore, on the occasion of the [Digital Day 2018](#), organised in Brussels, in April 2018, by the European Commission under the auspices of the Bulgarian EU Presidency, Commissioners, Ministers and representatives of Member States, EFN supports the Commission renovated commitment to [complete the Digital Single Market](#), and sees opportunities to provide nurses input on key policy areas shaping the European Union Digital future, such as blockchain and artificial intelligence, two topics further explored from an EFN lobby perspective.

Blockchain has an important role to play in relation to the digitalisation of health and care and their mission to improve access to healthcare, as advised in the Chapter III of the [European Pillar of Social Rights](#), social protection and inclusion. Namely, to guarantee the delivery of safe healthcare of good quality, the EU and national governments should focus on policies implementing blockchain features that make the healthcare systems

communicate more efficiently. The right of citizens to timely access, affordable, preventive and curative health care of good quality is a key societal challenge in the EU, to be addressed with an urgent re-focus on 'moving care back to the community' by designing, in partnership with the nurses, a more holistic approach to value based healthcare.

The innovation of blockchain-inspired technologies has been acknowledged at EU level, with the EU investing in blockchain related projects and launching the [EU Blockchain Observatory and Forum](#) (June 2018) to map existing initiatives on blockchain and informing policy debates and inspiring common actions, based on specific use-cases. Parallely, several EU member states have joined the [European Blockchain Partnership](#), with which the Commission aims to consolidate expertise across borders and address challenges such as disintermediation, trust, security and traceability by design.

In blockchain, nurses are part of the chain accessing, recording, and processing healthcare data needed for continuity of care, a process that will increase patients' trust on data accuracy and consistency, leading to improved patient care and outcomes. In this sense, co-designed digital health supports nurses in leading the transition towards an integrated care model through measures that acknowledge and emphasise the frontline responsibility in ensuring continuity of care. As such, EFN followed closely the blockchain discussions and political advances at EU level. [Blockchain](#) is innovative for clinical pathways, boosting continuity of care and integrated care.

In this debate, the European Commission is committed to adopt a comprehensive EU strategy to boost innovation and exploitation of blockchain technology, acknowledging the importance to gather support among EU industry leaders, governments and policymakers, with the aim to boost innovation and exploitation of blockchain technology. The European Commission aims to develop a [common approach on Blockchain technology](#) for the EU in the international arena.



Finally, advocating for engaging nurses in the co-creation of health technologies, the OECD in Paris values EFN input to the [OECD Blockchain Policy Forum](#) in Paris, indicating nurses are key to put a human face to blockchain technologies. Being a key theme, the EFN will continue following this development in 2019, taking an active role in the EU debate to make sure that the nurses' views and experience are taken into account in the decision-making process.

This brings us to the second innovation EFN is following closely from a political perspective: AI. As AI is increasingly being discussed at European level, the EFN becomes more engaged in these discussion ([K4I](#), [DG Connect](#) and [H2020](#)). Technological developments are not seen as goals as such anymore, but as a contribution to different sectors, as a component of innovation. The nursing and health sector can benefit from the use of modern technologies but engagement in their co-design is crucial, so that the algorithms designed reflect and integrate the nurses' views as end-user. When developing EU policies on Artificial Intelligence (AI), it is crucial to ensure that [Europeans make the most of new technologies](#), not the other way around. The human touch still remains fundamental in the deployment of digital solutions that should ease human work. AI can bring innovation to healthcare delivery, and [nurses should be engaged](#) in their co-design to guarantee the success. In April 2018, the European Commission presented a [European approach](#) to boost investment and set ethical guidelines for AI, aiming at: boosting financial support and encouraging uptake by public and private sectors; Preparing for socio-economic changes brought about by AI; and Ensuring an appropriate ethical and legal framework.

Finally, we can say that it is key to explore ways to incorporate the array of existing technology and emerging innovations into new models of care and the day-to-day provision of services that deliver on health system objectives. Therefore, the EU must become a leader, with EFN as partner, providing the EU nursing workforce with the e-skills to deploy these innovations frontline. Including a gender perspective in the design of Artificial Intelligence is key to make tools fit-for-purpose.

The EFN will continue in 2019 to engage with key EU policy-makers and stakeholders contribute as major end-user to innovations and technology developments, bringing to the political forefront best practices in nursing care.

4. OTHER KEY POLITICAL TOPICS EFN LOBBIED ON

a. Gender

Gender equality is one of the objectives of the European Union. Over the years, legislation, case-law and changes to the Treaties have helped supported this principle and its implementation in the EU. But [a lot still needs to be done](#) to make this objective attained. Many Member States are introducing reforms of the health and social sector designed to improve the relevance, sustainability, efficiency and cost-effectiveness of the current 'silo system', which is not sensitive enough towards gender. Policy-makers and politicians at EU and national levels have here an opportunity to ensure that the reform processes address the challenges of the long-standing inequality between women and men, both as providers and as recipients of care. Therefore, the EFN strongly encourages the EU Commission to include the gender dimension in the design of EU policies. For nurses, this is particularly relevant both in terms of work-life balance measures to retain nurses in the profession and, to allow women being key players in the co-design of health and social policies, that will allow to build resilient health and social ecosystems in the EU.

Over the years, the EFN has been lobbying the EU Institutions to make the voice of 3 million nurses/women heard. And continued in 2018, with participating in key EU meetings, and bringing the attention to EU decision makers on the strong capacity of women/nurses in policy design. The EFN participated in EU event organised by the [European Institute of Women's Health](#) "Resetting the Agenda in Women's Health in Europe", to discuss the European Action Plan for Women's Health, where the EFN emphasised that, if frontline is not empowered, person-centred care cannot be fully operational. Therefore, you need highly educated nurses, women, and Directive 2013/55/EU helps us doing so. Nowadays it is extremely difficult to recruit and retain nurses as the profession lost attractiveness due to uncomfortable working conditions and low salaries.

On the occasion of the International Women's Day, 8 March, the EFN took this opportunity to [raise](#) the difficult situation of women within the EU, knowing that since the economic crisis hit Europe in 2008, women have experienced the worst consequences reflected in their working conditions. Therefore, it is time that national and EU Parliaments address gender inequalities within budgets, laws and policies, involving nurses/women in this process. Nurses/women leadership can lead to more equal participation at the economic, social and political life. The improvement of labour legislation, the increase of salaries, the promotion of collective bargaining, and the protection of maternity, are amongst some of the most needed measures to achieve gender equality. EFN supported the [NON.NO.NEIN. Campaign](#) (see #SayNoStopVAW) on the International Day for Elimination of Violence against Women, carried out by the European Commission, through [EFN Website](#) & Social Media.

The EFN will continue to follow these important topics for nurses and the nursing profession, in 2019.

b. Carcinogens and hazardous drugs

Every year more than 12.7 million health professionals in Europe, including 7.3 million nurses, are exposed to carcinogenic, mutagenic and reprotoxic hazardous drugs. And it is estimated that in Europe each year occupational exposure to hazardous drugs produces 2,220 new cases of leukaemia alone which results in 1,467 additional deaths of health professionals each year.

While the majority of occupational hazards have been successfully addressed by legislation at the European (with the adoption of the European [Directive 2017/2398](#) amending [Directive 2004/37/EC](#)) and national level, much remains to be done when it comes to the exposure of healthcare professionals to chemical risks during activities such as the preparation and administration of cytotoxic drugs used to treat patients with cancer, especially when care is moved back to the community. The EFN believes that nurses must receive suitable and regular information on the risks, personal protective equipment, as well as suitable decontamination, cleaning and disinfection guidelines based on surface contamination levels and type of drugs, and regular monitoring of surface contamination. For the EFN the new legislation, addressing for the first time the risks to health professionals from occupational exposure to hazardous drugs and what needs to be done to protect them from contracting cancer and the reproductive problems that arise from carcinogenic drugs, is a mean to increase the benefits in terms of preventing nurses from getting avoidable work-related cancer, and thus preventing unnecessary suffering and illness. The EFN will continue raising awareness and influencing the EU policy makers on this crucial topic, in 2019.

c. Research and Innovation

Research and innovation are crucial to reduce the increasing burden of major chronic diseases in European societies. Although the last decades have seen important advances in health research and innovation, there are still significant gaps in the understanding, prevention, diagnosis and treatment of these conditions. The European Union plays an important role in supporting health research and innovation, and the next Research Framework Programme (2021-2027) – [Horizon Europe](#) – with a potential total budget of €97.6 billion, represents an opportunity to enhance the need for a further involvement and promotion of health professionals in the future of the EU health research and innovation policies. With this framework, the aim of the Commission is to continue to promote research excellence and strengthen the focus on innovation. The EFN called on the Commission and the Parliament, on a continuous basis, to ensure that the EU commitment towards promoting accessible health and social care for EU citizens remains a key priority for the EU. Frontline and end-users' need to be properly engaged and supported to deliver positive health outcomes. As in 2017, the EFN followed this topic closely in 2018, through its network, building alliances, participating in key events, and by lobbying the EU Institutions, and will continue lobbying on this key topic in 2019 and make sure that special attention is devoted to the continuity of care and to the workforce composition that makes innovation possible.

The EFN lobby strategy will focus on concepts such as co-creation, fit-for purpose solutions, patients and citizens' empowerment, trust and clinical relevance. The EFN is in a key position to ensure that the development of any system, program, guidelines, etc. is in line with the EU, national & local requirements. Being a partner in a consortium as end-user, the EFN would have an important role providing concrete input in addressing key challenges such as patient empowerment, patient safety, chronic disease management, diagnosing, home-care logistics, hospital logistics, skills, independent living and quality of life. Due to the close relation nurses develop with the patients, families and informal carers, nurses are ideally placed to create trust.

An important role played by the EFN as representing the end-user concerns its experience of frontline testing/upscaling, deployment strategies and site visits, peer reviews. As an EU umbrella organisation, the EFN has a solid network for engagement and dissemination. Thanks to a long-lasting cooperation at EU institutional level due to its fruitful work with the European Commission (DG GROW, DG CNECT), its Agencies and with the EU Parliament, the EFN is key in organising political discussion in the European Parliament and other EU Institutions, essential to move research finding towards a political commitment. The EFN as end-user partner offers a wide expertise in:

- Collecting frontline and gender sensitive data for research;
- Identifying, assessing, and making visible good clinical practices in health services;
- Integrate experiences from a women-led profession;
- Dissemination and exploitation of results;
- Organise the dissemination through policy and political discussion in EU Institutions;
- Move research finding towards deployment to close the implementation gap.

d. EU Elections 2019



The mandate of the current European Parliament legislature is coming to an end, with the next [elections](#) to take place on 23-26 May 2019. With a total of 751 Members of the European Parliament (MEPs) currently representing some 500 million people from 28 EU Member States, the EU elections constitute a crucial moment for determining the new representatives of the EU citizens and, as such,

establish the new political priorities that will be carried out in the next 5 years in the EU. The EFN is very vocal in advocating for health to remain high in the EU political agenda and to be further supported by the next Parliamentary legislature and the European Commission.

Within this context, it is crucial that the MEPs elected in the next mandate includes health among their priorities and enhance nurses' ability to shape and deliver effective and high-quality care to EU citizens. Therefore, in the months preceding the elections, the EFN Members start their lobby process next to their potential national candidates to make them aware and sensitive of the united voice for nurses' priorities so that their political programmes include

the nurses' concerns. Once in the European Parliament, we can hold them accountable for the programme implementation.

To make this happen, the EFN has already approved at its General Assembly in October 2018, in Slovakia, the key EFN messages to deliver to the potential candidates reflecting the key priorities of EFN and its members, which have a future dimension for solutions at EU level. The approved EFN [Manifesto](#) highlights key political messages on the three main EFN priorities: education, workforce, and quality and safety, calling to: Invest in nursing education at European and national level; Ensure optimal working conditions and health workforce planning; Recognise nursing research as a fundamental pillar in evidence-based health policy making. Knowing that 6 million nurses in the EU and Europe can make the difference in such elections, the EFN Members will be using this manifesto at full potential at national level to influence their candidate MEPs.

Also, the healthcare stakeholders are joining forces to call on the EU policymakers to work on health policies from which all citizens in Europe can benefit. Within this framework, the EFN has joined a stakeholders' working group on the "Future of Health", calling for a stronger coherence in approach and implementation between the different policy levels, including the organisation and financing of current and future healthcare.

II. EU PROJECTS

A. Quality Mentorship for Developing Competent Nursing Students (QualMent) - Erasmus+ project



Co-financed under Erasmus+ and coordinated by the [College of Nursing in Celje](#) (Slovenia), this 28 months' [project](#), that started in September 2018, is aiming at addressing the clinical mentor's lack in nursing education and develop the clinical mentor's competence with mentor education for national and international nursing students. To ensure the systematic approach, the project will develop Clinical mentors' competence model which will provide new knowledge and findings regarding the current situation of clinical mentoring in nursing study programmes in Europe. The model will introduce most important concepts to be integrated into education of clinical mentoring and will be used as a base to prepare a course of advanced mentorship competences. This course will empower clinical mentors with high-quality skills and competences needed to perform their role and at the same time fill the gap, as there is no systematic approach in developing and implementing the quality courses offering mentors' competences to the nurses in clinical environment in EU. Mentoring guidelines with clear and simple instructions to be used in the daily clinical practice of mentoring will be another output of the project.

The EFN will be the partner focussing on [dissemination](#) activities, including social media, regular eBulletins, project leaflet, and Website, and will have a crucial role in the deployment of the project outputs across the EU. The EFN will be participating to deliver the following [tasks](#): Cooperation in preparing the Clinical Mentors' Competence Model, the Course of advance mentorship competences and the Guidelines; and organise the 5th Transnational project meeting, in October 2020, in Brussels.

The [partners](#) in the project are: College of Nursing in Celje (Slovenia); University of Oulu - Research unit for Nursing Science and Health Management (Finland); University of Alicante (Spain); Lithuanian University of Health Sciences (Lithuania); and the European Federation of Nurses Associations (Belgium).

» Meetings

1st Transnational Partners Meeting

Being a [partner](#) in the project, the EFN participated in the kick-off meeting that took place in Celje (Slovenia), on 26-27 November 2018, hosted by the project coordinator. This meeting provided a good opportunity for the partners to present their own institution, and the educational system in their country, and to discuss the first steps and the future objectives of the project. The next transnational partners meeting will take place in April 2019, in Oulu (Finland).



» Dissemination

Leading the development of this activity, aiming to inform all the EU stakeholders and policy-makers, the EFN has developed and made available:



<< Project leaflet

eBulletin >>

To be published on regular basis

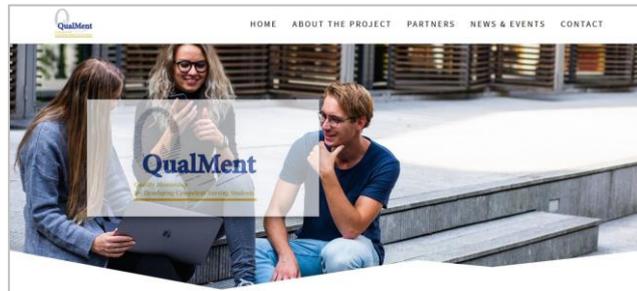


See: <http://qualment.be/news-events/>

Project Website >>

including the most relevant information on the project.

<http://qualment.be/>



<< Social media (@QualMentProject) - Facebook & Twitter

B. Electronic Health Records (EHR) H2020 EU Projects

In the context of the H2020 calls 2018, the EFN became part of two EU-funded projects, starting January 2019, with the objective to ensure a greater engagement of end-users, nurses, in the development of digital health solutions, and working to empower the citizens and unlock health data from local silos, using a bottom-up approach for EHR Interoperability. This work perfectly fit within the nursing profession work on integrated care and continuity of care, in which frontline nurses play a central role.

↳ Citizen-centred EU-EHR exchange for personalised health (Smart4Health)



Coordinated by UNINOVA (Instituto de Desenvolvimento de Novas Tecnologias (Portugal), this 50 months EU project will address the current challenges in EHR with an outstanding

consortium that will develop, test and validate a platform prototype for the Smart4Health citizen-centred health record EU-EHR exchange. This will pave the way for the full deployment of citizen-centred solutions and services in a digital single market for wellbeing and healthcare, through an easy-to-use, secure, constantly accessible and portable health data and services prototype, thus advancing citizens' health and wellbeing, and digital health innovation.

The EFN will be representing the end-users, facilitating a co-design workshop, bringing together a group of nurses from different European countries, in order to further refine the scenarios and use cases the consortium will work on; and providing input to some of the project work packages (WP), namely: WP1 (Citizen- and Professional-User participation) - to ensure that the development of the project is in line with the EU, national & local regulations; WP4 (Citizen Use Cases) - by contributing with its experience of frontline testing/upscaling, deployment strategies and site visits; WP6 (Dissemination, Exploitation, Sustainability and Communication); and it will support the work carried out in WP2 (4HealthPlatform (4HP)) - data layer implementation, and WP3 (4HealthNavigator portal) - services and applications layer implementation.

The kick-off meeting of the project is taking place in January 2019, in Aachen (Germany).

The partners in the project are: Instituto De Desenvolvimento De Novas Tecnologias-Associacao (PT); Hasso-Plattner-Institut For Digital Engineering Ggmbh (DE); Hps Gesundheitscloud Ggmbh (DE); Hpihs Gmbh (DE) Universitat Wien (Austria); Universitaetsklinikum Aachen (DE) Academisch Ziekenhuis Maastricht (NL); Information Technology For Translational Medicine (Ittm) Sa (LU); Knowledgebiz Consulting-Sociedade De Consultoria Em Gestao Lda (PT); Universite Du Luxembourg (Lu); Icahn School Of Medicine At Mount Sinai (US); Zs Unternehmen Gesundheit (DE); Ospedale San Raffaele Srl (IT); Stftung Hllef Doheem (Luxembourg); Confdration Franaise Des Retraits (FR); Federation Europeenne Des Associations Infirmieres Aisbl (BE); Secretaria Regional Da Economia, Turismo e Cultura (PT); Laboratoire Virtuel Europeen Dans Le Domaine De L'interoperabilite Des Entreprises (BE).

↳ Interoperable EHRs at user edge (InteropEHRate)

Coordinated by Engineering Ingegneria Informatica (Italy), this 42 months H2020 EU project is aiming to realise an open, standardized and unique European extended-EHR to preserve the European assets and professional ways of working, by addressing the current lack of standardization and security, defining a set of integrated protocols and conformance criteria for mobile apps, supporting secure and portable local storage and backup, released as open specifications. Moreover, the project will integrate these new protocols with technologies for information extraction and translation, to reduce the difficulties in health data exchange related to the different terminologies and languages adopted in different European countries and by different healthcare providers. It also aims at providing the European citizens with a complete view of their health history, shareable with health operators and researchers, by means of a multi-alternatives strategy based on: (1) the adoption of Personal EHRs, (2) the incremental integration of existing EHRs, (3) the support of different levels of interoperability, (4) the usage of blockchain and a decentralized architecture, (5) the human aspects governance.

The EFN will be representing the end-users, contributing to define user requirements and scenarios to be supported by the new EHR interoperability (WP2); supporting the design and implementation of a set of services (HCP Web App used by healthcare professionals for creating and accessing health data of foreign patients) fulfilling the user requirements for realizing the incremental cross-border interoperability among EHRs, EMRs and S-EHRs (WP5); providing input to create a S-EHR mobile app (WP6), and to validate results through the execution of pilots; and be part of the communication and dissemination activities, and in stakeholder management and collaboration (WP9).

The kick-off meeting of the project is taking place in January 2019, in Rome (Italy).

The partners in the project are: Engineering – Ingegneria Informatica Spa (IT); A7 software (BE); European Health Telematics Association (BE); Diagnostikon Kai Therapeftikon Kentron Athinon Ygeia Anonymos Etaireia (EL); Universita Degli Studi Di Trento (IT); Universitat Wien (AT); Federation Europeenne Des Associations Infirmieres Aisbl (BE); Fondazione Toscana Gabriele Monasterio Per La Ricerca Medica E Di Sanitapubblica (IT); Centre Hospitalier Universitaire De Liege (BE); Ubitech Limited (CY); University Of Piraeus Research Center (EI); Spitalul Clinic De Urgenta “Bagdasar-Arseni” (RO); Singularlogic Anonymi Etaireia Pliroforiakon Systimaton Kai Efarmogonpliroforikis (EL); Siveco Romania Sa (RO); Fraunhofer Gesellschaft Zur Foerderung Der Angewandten Forschung E.V. (DE); Iatrikos Syllogos Athinon (EL).

III. BUILDING ALLIANCES

Building alliances and creating partnerships with key organisations to work on particular issues has been the top priority for the EFN, as this is a means of strengthening civil society in the policy-making process and to get successful outcomes not only at EU level but also at national and local levels. In 2018, the EFN continued this process of building alliances and strengthening the ones already established with the key EU non-state stakeholders built up throughout the years, which is now providing consortia for the Horizon 2020 highly respected and influential to make innovation happen and implemented.

➤ Sectorial Professions' Organisations

For the last 15 years, the EFN has been collaborating very closely with the sectorial professions' organisations based in Brussels, working on common topics, as Education (DIR55), Workforce, and Patient Safety and Quality of Care - the 3 EFN main lobby topics, and participating in the same EU projects, as: PaSQ, Joint Action on Workforce, Smartcare, etc. In 2018, the EFN continued this good collaboration and exchange of views on key concerns, as: Patient safety, skills, value-based health systems, Proportionality test directive, DIR36/55, Blockchain, AI, ehealth, through regular meetings with: The Pharmaceutical Group of the European Union ([PGEU](#)), representing community pharmacists at EU level; The Standing Committee of European Doctors ([CPME](#)), representing the national medical associations across Europe; The Council of European Dentists ([CED](#)), representing the dentists and promoting oral health in Europe; The European Region of the World Confederation for Physical Therapy / Physiotherapy ([ER-WCPT](#)) representing the physiotherapy profession at European Level; and last but not least the European Midwives Association ([EMA](#)), representing midwifery organisations and associations at EU level. The EFN is looking forward to continuing, in 2019, this important collaboration in the EU lobby arena, to build strong alliances to jointly push for quality of care, patient safety, and health system reform.

Next to these NGO's, the EFN also was in close collaboration and/or started building alliances with the following organisations:

➤ Active Citizenship Network



[Active Citizenship Network](#) (ACN) is an Italian non-profit organisation founded in 1978 that aims to promote civic participation and protect citizens' rights in Italy and in Europe. Particularly active on health, with the Tribunal for Patients' Rights, education and training and European citizenship, the ACN and the EFN have been collaborating for many years, mainly in the context of EU projects (as ENS4Care), and on the [Patients' Rights Day](#), celebrated in May every year, in which the EFN always participate actively, and on some topics of common interest, as: Health Reform, pain management, continuity of care, and EU enlargement. In 2018, the EFN participated in some of the ACN events, namely on Pain and Vaccination, and discussed potential collaboration in EU projects. The EFN is looking forward continuing this close collaboration with ACN in 2019.

➤ DigitalEurope



[DigitalEurope](#) is the leading trade association representing digitally transforming industries in Europe. In 2018, the EFN participated in some of their meetings and had close contacts with their representatives, in the context of Digitalisation discussions. DigitalEurope believe that the most important thing about digital tools is to support HCPs in their work. As the improvement hasn't come yet, they see the involvement of nurses in the decision of the material for hospital as key as this can guarantee the quality measurement. The EFN will continue looking closely at these developments in 2019.

➤ EFPIA



The European Federation of Pharmaceutical Industries and Associations ([EFPIA](#)) represents the pharmaceutical industry operating in Europe. Through its direct membership of 36 national associations and 40 leading pharmaceutical companies, EFPIA's mission is to create a collaborative environment that enables their members to innovate, discover, develop and deliver new therapies and vaccines for people across Europe, as well as contribute to the European economy. Their vision is for a healthier future for Europe; a future based on prevention, innovation, access to new treatments and better outcomes for patients. In 2018, the EFN had close contacts with EFPIA, namely in the context of common topics of interest as Medical reconciliation, personalised medicines, dementia and

vaccination; and try to cooperate more to influence the EU Institutions in a concrete way. Nurses can definitely impact the debate on personalised medicine, dementia. Nurses have an important role for their observation skills, and are key players in the gender debate, and in the review of the primary care system. It is therefore important to see what can be done at EU level as regards healthcare, what is the EU added value in health, how can we influence the agenda to bring this added-value to patients. The EFN will continue this close collaboration in 2019.

➤ **EU-OSHA**



Working to make European workplaces safer, healthier and more productive - for the benefit of businesses, employees and governments, [EU-OSHA](#) promotes a culture of risk prevention to improve working conditions in Europe. Many Europeans are exposed to dangerous substances at work, which presents major safety and health concerns for workers, not to mention unnecessary costs for employers and society. In 2018, the EFN was followed closely the campaign “Healthy Workplaces Manage Dangerous Substances”, aiming to raise awareness of the prevalence of dangerous substances in workplaces; and to ensure that the needs of specific groups of workers (as nurses) are met through, for instance, good practice examples. The EU-OSHA-EFN common topics: Pillar of social rights for healthy workplace in Europe, digitalisation, sharps injuries, chronic diseases, hazardous drugs.

➤ **European Association Working for Carers (EUROCARERS)**



[EUROCARERS](#) brings together organisations representing carers and those involved in research and development. It aims to support carers, contribute to policy developments and collaborate with other interest groups at EU level. The role of carers is more crucial than ever due to demographic changes and challenges to formal health and social care services throughout Europe and the introduction of ICT tools go to shape also their daily work. Over the last years, the EFN has been collaborating closely with EUROCARERS in the EU lobby arena, providing nurses' views and support when needed, and participating in their meetings organised in Brussels all over the year. The EFN is looking forward to continuing, in 2019, this important collaboration.

➤ **European Centre for Disease Prevention and Control (ECDC)**



In 2018, the EFN followed closely the work done by the [ECDC](#), aiming to strengthen Europe's defences against infectious diseases, on Antimicrobial Resistance, and strengthened EFN/ECDC close collaboration on the topic, namely by contributing to the [European Antibiotic Awareness Day](#), as for previous years. Knowing that AMR stays high on the EFN policy agenda, the EFN will continue to follow closely the ECDC developments on this topic and develop this important collaboration.

➤ **European Institute of Women's Health (EIWH)**



Gender is important for the EFN, and this close collaboration with the [EIWH](#) is very important as this organisation aims to promote health throughout the lifespan, to ensure quality and equity in health policy and care and to campaign for gender-specific research. Including people and organisation with expertise and interest in women's health, is key for the EFN lobby work knowing that 92% of nurses are women. In 2018, the EFN continued to strengthen this close collaboration and is looking forward to continuing it in 2019.

➤ **EUROFOUND**



The European Foundation for the Improvement of Living and Working Conditions ([Eurofound](#)) is a tripartite European Union Agency, whose role is to provide knowledge to assist in the development of better social, employment and work-related policies. Its role is to provide information, advice and expertise – on working conditions and sustainable work, industrial relations, labour market change and quality and life and public services – for key actors in the field of EU social policy on the basis of comparative information, research and analysis. In 2018, the EFN and EUROFOUND were in contact to discuss the database on working-life balance and possible potential for nursing profession. The EFN is looking forward to developing this collaboration in 2019.

➤ **Health First Europe**



[Health First Europe](#) is a non-profit, non-commercial alliance of patients, healthcare workers, academics and healthcare experts and the medical technology industry, aiming to ensure that equitable access to modern, innovative and reliable medical technology and healthcare is regarded as a vital investment in the future of Europe. For many years, the EFN and HFE have been

collaborating on some common topics as patient safety. In 2018, HFE was in contact with the EFN for a possible participation in the European Network for Safer Healthcare, aiming to lobby the EU institutions on patient and HCP safety, on key topics: 1. Sepsis and surgical infections; 2. Patients' safety and adverse events; 3. HCP safety (hazardous drugs, carcinogens, needle stick injuries); and AMR. The objective is to keep these items high on the agenda of DG SANTE and DG Research, and to extend the collaboration in preparation of the upcoming EP elections.

➤ **HIMSS**



HIMSS is a non-for-profit global advisor and thought leader supporting the transformation of health through the application of information and technology. Its mission is to improve health through technology, by providing educational opportunities to their members (72K individuals member, and more than 600 association members (suppliers, academic, NGOs, governments)) - Facilitators providing education to health suppliers. The EFN and HIMSS were in contact in 2018 to discuss on common priorities, as education. The core for HIMSS would be that the EFN reaches the nursing sector, as nurses are the ones implementing the technology, and having also the nursing community in their membership. The membership would provide access to e-learning centres to share experience with other members and the regional communities. In particular, the online centre includes access with case-studies, access to training and direct contact in real time to solve doubts. The EFN will explore this possibility in 2019.

➤ **IEEE**



[IEEE](#) is the world's largest technical professional organization dedicated to advancing technology for the benefit of humanity. In 2018, the EFN was invited to provide input to their discussion on ICT for the Prevention of Noncommunicable Diseases and Health Promotion in Europe and Digital health. The EFN presented the nurses' views on the potential of eHealth on the health sector and for the nursing profession. The main points concerned the need to involve frontline nurses as end-users in the development of digital health tools to guarantee fit-for-purpose solutions. The EFN is looking forward to continuing this good collaboration in 2019.

➤ **Inlecom**



[Inlecom](#) is a European SME with offices and consultants in Brussels, UK, Athens, Ireland Spain, and Italy, established in 1996 with the seminal charter of promoting innovative **Information Learning and Communication Solutions**, and coordinating and delivering large scale European Research & Innovation projects across multiple technology domains. In 2018, the EFN had close contacts with them to discuss on Blockchain, how it can support HCP and nurses, and what is the best way forward to promote it at EU level; as well as the process of discharging patients and the importance of data sharing in continuity of care. Robotics and AI can be a support for nurses and decrease their workload, and blockchain can be a possible solution for that. Nurses, bringing the end-user perspective in this debate is key, and going to meetings organised by industries shows that they haven't found the formula to find return on investment, because they don't engage end-users in their solutions. The EFN looks forward to continuing this good alliance building in 2019.

➤ **Johanniter International**



Johanniter International ([JOIN](#)) is a partnership of 16 national charity organisations founded by the Order of St John in Europe and the Middle East, and the 4 Orders of St John in Europe. In 2018, JOIN approached EFN for potential collaboration in EU projects. JOIN is active in H2020 and Erasmus+ but always with member organisations, with a small role as communication and contact with the EU (not operational role). They are now seeking partnership with EFN, as end-user partner for a next call. The EFN is looking forward for collaborating with JOIN in 2019.

➤ **Knowledge4Innovation (K4I)**



[Knowledge4Innovation](#) (K4I) is an open, independent, non-profit platform with a wide variety of stakeholders including regions, cities and universities, research organisations, regions and cities, trade organisations and think tanks as well as technology platforms small and large companies. Knowledge4Innovation is advocating for favourable framework conditions promoting innovation activities in Europe. The K4I Forum is supported by more than 30 Members of the European Parliament. The EFN is putting Health higher on the innovation agenda. As such, it believes that Knowledge4Innovation is a good platform for EFN to become a key player in

innovation, and an ideal platform to keep health and social care high on the innovation and political agenda, making sure integrated care and continuity of care leads to better health outcomes for patients and citizens. In 2018, the EFN continued its very good collaboration, participating in some of their events providing nurses' views on innovation and exploring how nurses can successfully contribute to the debate. The EFN will continue this good collaboration with K4I in 2019, bringing the nurses' views into the innovation debate.

➤ **Organisation for Economic Co-operation and Development (OECD)**



Aiming to provide a forum for governments to share experiences and seek solutions to common problems, [OECD](#) mission is to promote policies that will improve the economic and social well-being of people around the world. Taking that into account, the EFN kept in contact with the OECD in 2018, namely as regards Workforce, health systems reform, patient safety, Blockchain, and participated in some of their meetings in Paris (as the Blockchain Policy Conference, in Paris, September 2018), to make sure that the nurses' views were taken into account in the debate. The EFN will continue to strengthen this close collaboration with OECD in 2019.

➤ **World Health Organisation (WHO)**



Over the last 15 years, the EFN has been engaged with WHO Europe in different ways, as: by having an observer status in WHO Regional Committee (RC) meetings, by participating in several WHO & WHO RC meetings, and by contributing to consultations/debates, to make sure that the nurses' views were taken into account in the debate. Also, WHO EFNNMA is having an Observer status within EFN GAs. In 2018, WHO launched a procedure for accreditation to regional non-State actors not in official relations with WHO to attend meetings of the WHO Regional Committee for Europe, and thus become accredited to the WHO regional office for Europe. Aiming to continue and strengthen this close collaboration with WHO & WHO Forum, namely on Health systems reform, Digitalisation, Primary care, and Nursing workforce, the EFN applied for this WHO accreditation. As this procedure is still in process, we will know only in 2019, if we are successful in this process.

IV. NURSING NOW EUROPE

Officially launched in February 2018, [Nursing Now](#), is a programme of the [Burdett Trust for Nursing](#), aiming at improving health by raising the status and profile of nursing globally and maximise the contribution that nursing makes to Universal Health Coverage, women's empowerment and economic development. This three-year campaign, being run in collaboration with the [International Council of Nurses](#) and the [World Health Organization](#), is represented by nurses and non-nurses from 16 different countries and active groups in over 50 countries.

Advocating that the biggest thing we can do to improve health globally is to empower nurses, representing half the health workforce of the world, its main focus points are specifically around advocating for policy changes to make sure nurses are central to achieving universal health coverage, developing primary health care, and tackling non-communicable diseases. The Campaign also calls for investment in the development of nurse-led clinics; primary and community care; prevention, promotion and health literacy; midwifery, child health and adolescent services; and development of more specialist/advanced nurses inside and outside hospitals. Its activities are linked with the global health workforce strategy and the five-year Action Plan of the Commission on Health Employment and Economic Growth.

Within this context, the EFN has been appointed as the Nursing Now European regional leader and at the Spring EFN General Assembly in Brussels, April 2018, the EFN Members agreed that the National Nurses Associations should become actively involved in 'Nursing Now', next to the EFN as the European lead of the Campaign.



The campaign strategic goal is to position nursing to optimise the potential to fully contribute and make a real difference to the health of the global population, to support nurse leaders within and across countries to translate the vision into reality, and to improve perceptions of nurses, enhance their influence and maximise their contributions to ensuring that everyone everywhere has access to health and healthcare. As such, the EFN will ensure to position nursing more central to health policy and ensure that nurses can use their skills, education and training to their full capacity.

By the end of 2020, Nursing Now Board – in which the EFN President, Elizabeth Adams, serves – will develop a challenging and ambitious agenda with the following goals to be achieved:

- ✓ Greater investment in improving education, professional development, standards, regulation and employment conditions for nurses.
- ✓ Increased and improved dissemination of effective and innovative practice in nursing.
- ✓ Greater influence for nurses and midwives on global and national health policy, as part of broader efforts to ensure health workforces are more involved in decision-making.
- ✓ More nurses in leadership positions and more opportunities for development at all levels.

- ✓ More evidence for policy and decision makers about: where nursing can have the greatest impact, what is stopping nurses from reaching their full potential and how to address these obstacles.



At European level, the EFN as Nursing Now European regional leadership group, will focus on nurses' support to the current political policy driver across Europe – [European Pillar of Social Rights](#) – building on 20 key principles (with a focus on those principles that EFN Members have committed to), and structured around three categories: equal opportunities and access to the labour market; fair working conditions, social protection and inclusion.

Promoting the right to affordable long-term care services of good quality, in particular home-care and community-based services, has

become a key priority for policy-makers and politicians, with the nursing profession co-designing policies guarantying timely access to affordable, preventive and curative health and social care of high quality. The need of patients and citizens to be able to access their health data is high on the political agenda, leading to the design of people-centred health and social care policies. It is time for the National and EU political leaders to enact concrete policies supporting 3 million EU nurses in Europe, and 6 million globally.



Invited to present the Campaign at the EFN General Assembly, October 2018, in Slovakia, Lord Crisp stressed that the Campaign can help open policy doors but only nurses can walk through them. There is a great opportunity to make advances in nursing, but nurses need to be ambitious and go beyond small changes: “start small, think big, go fast!” Furthermore, building on the Campaign the [World Health Assembly](#) in 2020 will be centred on Nursing, which represents an important policy opportunity.

As such, it is key the EFN Members join the Campaign by creating local groups; advocating for local priorities plans; engaging with the development of the ‘State of the World’s Nursing’; using international nurses’ day to promote the Campaign; promoting development of young nurses locally; and making 2020 the year of nursing, and the year of change and celebration. Each country is encouraged to have one national lead to drive country specific initiatives. Regional groups are also encouraged to work together under the Nursing Now Campaign umbrella.

Further information is available at: www.nursingnow.com.



IV. EFN MEMBERS STRENGTH

1. EFN Members representing EFN



Digital Assembly 2018 - Hosted by the European Commission Directorate-General for Communications Networks, Content and Technology ([DG CONNECT](#)), and the [Bulgarian Presidency](#) of the Council of the European Union, on 25-26 June 2018, in Sofia, Bulgaria, the [event](#) brought together more than 1.000 EU policymakers and stakeholders to discuss [EU digital policy](#), and recent technological developments, focussing on key digital priorities: strengthening cybersecurity, digital skills, artificial intelligence and the Internet of Things as well as tackling disinformation. Represented by Milka

Vasileva, President of the [Bulgarian Association of Health Professionals in nursing](#) (BAHPN), and EFN Executive Committee member, the EFN stressed that EU digital policies need to reinforce trust, and [nurses can make this happen](#) if properly engaged in the co-design of digitalisation - Frontline nurses co-designing digital health ensure fit-for-purpose solutions, so nurses should be involved since the start of the co-design process, with specific attention to gender sensitivity. The EFN also called on the EU to put a stronger focus on implementation. It is time to move from words to action!

2. EFN support to EFN Members

It is crucial for the EFN, as a Pan European Organisation, to continuously support and strengthen its relationship with its members by getting a real sense of what is important to them at national level. Taking part in national events is an ideal way of strengthening ties with the members but it is also crucial for understanding the key issues at stake in Member States and offering, in return, the EU-level perspective. The EFN appreciates these moments with its members and continues investing in national, regional and local events that promotes the EU nurses' voice. But participating in meetings is not enough to get the political message through to national policy makers understanding the importance of the nurses' views and concerns in the policy process and in the daily clinical practice. As such, it is important for the members to get EFN support directly addressed to key political players to help them to push for their key concerns at national level. As such, in 2017, the EFN provided its support through some supporting letters, and by participating in key national events.

➔ Support to EFN Members national key concerns

Again, the EFN members have been struggling with their governments wanting to downgrade the nursing education and create cheap nurses. This year, as in previous years, some EFN Members, as Bulgaria and Slovakia, asked the EFN to send supporting letters to their national governments stressing that ensuring appropriate education and qualifications of general care nurses, and allowing opportunities to advance the nursing profession are key to guaranteeing the sustainability of the health workforce and ensuring the willingness of young people to choose nursing as a career path. It is crucial that EU national governments make sure that their health systems have the necessary nursing workforce, with the necessary competences, to provide high-quality and safe healthcare services. This also applies to those national governments in the process of accession.

On the occasion of the International Nurses' Day 2018, 12 May, the [Bulgarian nurses](#) moved a step forward to show their difficult situation through a [national protest action](#), together with patients' organisations. They took this opportunity to call on their national government and the EU Institutions for better working





conditions and to raise awareness on their low salaries, overload of shifts, derogatory attitude of the public towards the nursing profession, and the enormous shortage of nurses, which leads to bad compromises on the professional quality of health care outcomes. Present in Sofia, the EFN Secretary General [called](#) on the national and EU Institutions to empower and support nursing as a profession, by designing career pathways for nurses, with the promotion of advanced roles and more opportunities in community care; as well as the Bulgarian EU Presidency, and upcoming ones, to make sure nurses are at the centre of health system reforms.

→ Participation in EFN Members' national events

Polish National Nursing Congress - held in Warsaw (Poland), on 13-15 September 2018 and organised by the [Polish Nurses Association](#), to discuss the challenges and opportunities for European nursing. Invited as keynote speaker, the EFN Secretary General, stressed the importance for the National and EU political leaders to enact concrete policies supporting 3 million EU nurses! Nursing workforce is suffering from hard working conditions that have substantially worsened due to cuts in salaries and job. Nurses have been disproportionately affected by human resources' policies that fail to consider their professional needs in employment contracts, incentives and career advancement opportunities. In this context, the EFN is lobbying to ensure nurses' voice will shape the [European Pillar for Social Rights](#), seen as a useful tool for developing mechanisms to support nurses staying in the profession.



SKSaPA Congress "Nursing and Midwifery in the process of change III" - Organised by the [Slovak Chamber of Nurses and Midwives](#), in Senec (Slovakia), on 9-10 October 2018, in cooperation with Regional Chambers of Nurses and Midwives, and under the auspices of the European Federation of Nurses Associations and the Ministry of Health of the Slovak Republic, the event brought together nurses and midwives from around Europe to discuss about the current key challenges/topics as shortage, patient-centred care, ehealth, ANP. Invited as keynote speakers, EFN President, Elizabeth Adams, and EFN Secretary General, Paul De Raeve, took this opportunity to remind that it is key to ensure that political decisions taken at national & European levels better reflect the need for change as perceived by nurses, and that their needs and concerns are part of the political discussion and able to inform and influence the policy-making process. We need every nurse and midwife to collective stand together and speak with one voice, to keep governments accountable, to engage in policy designs and debates, to achieve appropriate fit-for-purpose policy outcomes supporting all EU nurses and midwives, EU citizens and patients.

9èmes rencontres nationales MAIA (ANFIIDE) – Organised in Paris on 7 November 2018, the event shared with pilots and case managers how integrated care is being implemented in Europe. Invited as keynote speaker, EFN Secretary General [presented](#) the benefits of digitalisation on integrated care and nurses' roles, before an audience of more than 400 frontline workers and explained that innovative, high quality, safe and cost-effective integrated care health and social ecosystems are to be upscaled with EU Funds so policy-makers and politicians develop soft and hard law that reflects frontline work. If not, citizens will lose trust in policy-makers and politicians. Co-designed blockchain technology with nurses as end-users ensures deployment Integrated and Continuity of care across primary and secondary health and social care sectors.

25th Annual Cyprus Nursing and Midwifery Conference – Organised by the [Cyprus Nurses and Midwives Association](#), in Nicosia Cyprus, on 23-24 November 2018, the conference discussed the topic "Nurses and Midwives: Lead Voices for the Right in Health". Invited as keynote speaker, the EFN President stressed that "It is important to be strategic,



alert, energetic and innovative to offer future nursing and midwifery care in Cyprus and to build a legacy to be proud of for the next generation and the health of the population of Cyprus. Collaboration, partnership and leadership are your considerable power, combined with care and compassion that will help you meet your goals collectively beyond your expectations.”



Regional Conference of Nurses and Midwives Montenegro –

Organised by the National Association of Nurses and Midwives of Montenegro, on 29-30 November 2018, in Podgorica – Montenegro, the aim of the Conference was to share regional experiences in the process of

harmonisation of the profession of nurse and midwife as a regulated profession in compliance with the Directive requirements, and discuss how to improve the quality of the nursing profession, nursing care and establish regional cooperation in the area of nursing and midwifery. Invited as keynote speaker, EFN President, Elizabeth Adams, took this opportunity to express nurses play a central role in the accessibility to healthcare services, including prevention. More than ever further action is required to ensure that the nurses' education is in line with the Directive 55. The [EFN Competency Framework](#) and [EFN Workforce Matrix 3+1](#) are guiding tools for EFN members and stakeholders to work towards the right workforce composition, and to provide clarity to the different nurses' roles and responsibilities. We consistency need to highlight and remind policy-makers and politicians that highly qualified, motivated frontline nursing workforce are essential to deliver on their political aspirations. The event brought together nurses and midwives from Montenegro, Serbia, Slovenia, Croatia, Albania, Bosnia Herzegovina, and Macedonia.

3. EFN Members visiting Brussels and the EU Institutions

Bringing to Brussels NNAs delegations is a good opportunity for the EFN Members' NNAs to meet with their country EU representatives and learn more about the EFN political agenda, how this agenda is influencing and influenced by the EU Institutions, the outcomes achieved by EFN, and the role of the EU Institutions in relation to the EU health policy. The main topics presented on these occasions are: the EFN's key priorities in the EU lobby process, including Directive 36/55 and the challenges for nursing education; the EU projects the EFN had been involved in (Joint Actions on Quality and Safety and on EU Health Workforce, Smartcare, ENS4Care), and the importance of investing in the EU lobby process.

The EFN welcomes this initiative and pro-active attitude from EFN members. Not only as this increases the visibility and reputation of nurses at EU level but also because it shows that they are serious about their profession and the issues that have an impact on it. Therefore, the EFN members are encouraged to continue these efforts in 2019 in order to give the nursing perspective to the EU on key topics.

V. A FUTURE FOR EVIDENCE BASE POLICY-MAKING

A. EUROPEAN NURSING RESEARCH FOUNDATION



policy-making process.

Founded by the EFN in 2013, within the context of the increasing emphasis placed on nursing research at EU level to secure reliable evidence from which to base future workforce decisions, the European Nursing Research Foundation (ENRF) is aiming at making the bridge between evidence and policy-making process and act as a contact point for EU policy-makers and politicians, and analysing and compiling what already exists in terms of nursing research in the EU Member States, in order to convert existing data into evidence-based advocacy for the EU

↳ **ENRF Governance body**

In terms of governance, all EFN Members are entitled to nominate and elect four Directors, of which one is the Founding Director, representing the EFN voice. The ENRF [governance body](#) is composed by four Directors and the ENRF Secretary General, Paul De Raeve.



The ENRF Board of Directors (2017-2019) is currently constituted by: 1 Founding EFN Director - Karen Bjøro (Norway); and 3 EFN Directors - Dorota Kilanska (Poland), Kate Seers (UK). Birgit Vosseler (Switzerland) resigned from the Board in June 2018.

The Board is responsible for defining its priorities/outcomes in accordance with its mission, vision and constitutional aims, included in the [ENRF strategic plan \(2017-2020\)](#) that includes a set of values, content and theme for the Foundation to work on. At their Board meeting in Brussels, in April 2018, the Directors agreed to appoint their first ever Honorary Director, Professor Máximo González, from Spain, taking into account that he was elected as first EFN Founding Director and President of ENRF and his longstanding commitment to nursing and nursing research in Europe and in particular his role in establishing the Foundation.

↳ **ENRF activities**

i. **Board of Directors meetings**

In 2018, the ENRF Board of Directors met six times: 16 February 2018 (Online); 10-11 April 2018 (Brussels); 5 June 2018 (Online); 23 August 2018 (Online); and 26 October 2018 (Online), discussing the ongoing ENRF developments, and producing recommendations towards the EFN General Assemblies - April 2018 (Brussels) and October 2018 (Slovakia). The Board of Directors took these opportunities to reflect on how/where/when to take concrete actions, to guarantee the ENRF future developments, based on ENRF mission, vision and constitutional aims, as set out in the [ENRF strategic plan \(2017-2020\)](#), and as such influence the importance of quality and rigorous nursing research as the driving focus for Nursing in Europe. This is key to bring the ENRF to a next stage, making it a reliable partner at EU level, next to EFN, being the political voice of the nurses in the EU.

ii. **EFN Executive Committees & General Assemblies**

As done since its establishment, the EFN Executive Committee and General Assembly are continuously informed on the ENRF ongoing work, by the ENRF President. As such, the current Directors' reflections were reported to, and discussed at, the EFN Executive Committee meetings and General Assemblies in 2018. Recognising the challenges the ENRF is facing, and knowing that the EFN members do not have enough time to discuss in deep the governance of ENRF in the EFN General Assemblies, the EFN October 2018 General Assembly, in Slovakia, agreed to constitute a small working group to look at where we are at, what we have achieved so far, and what would be the next steps for the Foundation. It is important for the EFN to have a clear position on the ENRF future development(s) and outcomes.

iii. Building Alliances

Building alliances and creating partnerships, next to strengthening the ones already established with key EU stakeholders and EU policy decision-makers is key for an organisation to grow and to achieve concrete outcomes. Contributing to an efficient information flow, the ENRF will continue to participate in key EU meetings and look to build reliable alliances with key EU health and social Stakeholders, and policy and decision-makers, to ensure that nursing research get higher on the EU Research and Innovation Agenda.

iv. EU Consultations

Answering European Commission consultations is a great opportunity to increase the ENRF visibility and making sure the nursing researchers voice is heard at political level. As such, the ENRF [input](#) to the European Commission [Consultation](#) on DG Research upcoming 2018-2020 EU Research program was key as a first point of contact. Next to the European Commission consultations, the ENRF provided its input to other organisations consultations (as WHO, OECD, etc.) that can play an important role in the development of nursing research. As such, and taking into account the importance of the topic for the nursing profession, the Foundation provided, in May 2018, [its input](#) to the [consultation](#) on the WHO Independent High-Level Commission on Non-communicable diseases [Draft Report](#), as did the EFN. This was perceived as a huge support to ICN leadership.

v. Communication

Crucial to get the message across and to enhance effectiveness, communicating on the ENRF activities is crucial for making it visualised, and to get the message across. As such, in 2018, the ENRF Board of Directors & Reference Points, as well as the EFN members, received on regular basis the ENRF Newsletter, ENRF Briefing Notes, and Press Releases.

- » **ENRF Newsletters** - In 2018, the ENRF Office has published 3 Newsletters: [March](#) (being the first edition), [June](#) and [November](#). As Founding organisation, the EFN also takes the opportunity to mention the ENRF in its Newsletter when it is seen relevant, as in the EFN Update [May-June-July 2018](#). All Newsletters are available at: <http://www.enrf.eu/dissemination/newsletter/>
- » **Briefing notes** - Seen as a way to provide information on key meetings and latest developments at EU level to the ENRF Board of Directors, Reference points, and EFN Members, the ENRF Office published in 2018 two key Briefing Notes: [Innovation and research \(FP9\)](#) (May 2018; [Towards the next European Research Framework Programme](#) (November 2018)). All ENRF Briefing Notes are available at: <http://www.enrf.eu/briefing-notes/>
- » **Press releases** - The ENRF published the first ENRF Press Release in December 2018 on the occasion of the United Health Coverage Day 2018: "[United for Universal Health Coverage – Nursing Research Evidence – \(UHC Day 2018\)](#)".
- » **ENRF Web & Social Media** – Updated on regular basis with key information/news, the ENRF Website (www.enrf.eu), is aiming at making the Foundation more visible, next to ENRF Facebook (@enrf.foundation) & Twitter (@Enrf_Foundation).

↳ Conclusion

The ENRF has the ambition to become a reference point for the dialogue between nursing researchers and EU policy-makers, with the purpose of translating knowledge into health and social policies with the ultimate objective to improve our knowledge base when reforming national health and social care ecosystems, and to become the scientific reference point for nursing research to enhance the EU health and social policy agenda. The ENRF Directors, together with the ENRF Secretary General, will continue to develop the Foundation further, taking into account the Working Group recommendations on the Future of the ENRF, the EFN Excom position and the decision taken by the EFN members in the upcoming GA.

VI. EFN DATA COLLECTION

To gather quantity and quality evidence, the EFN uses data collection (through email, online surveys, or during the EFN General Assemblies with the Tour de Table item) as key component in its daily lobby work. This allows to provide the EU institutions and key EU stakeholders with up-to-date information/data to take informed decisions and consider the next steps on crucial topics. As such, in 2018, the EFN and its members undertook and provided input to some key surveys/consultations:

A. EFN

Vaccination

Vaccination features high on the agenda of the European Institutions as well as at the level of individual countries and healthcare authorities. Despite the demonstrated benefits of many kinds of vaccination it remains a controversial issue largely due to misinformation, restricted access, health illiteracy and cost. The consequences of low uptakes of certain kinds of vaccination can be damaging to the health and economic welfare of vulnerable citizens across Europe, and by extension to their families and wider communities. Nurses are the frontline staff largely responsible for delivering safe and effective vaccination programmes to communities across Europe, yet rarely get formal recognition for this life-saving endeavour. In addition to administering vaccination, nurses have additional roles relating to educating the public, identifying vulnerable groups, raising awareness and promoting uptake among those who stand to benefit.

In the context of the European Commission mission to strengthen cooperation against vaccine preventable diseases, the EFN was asked, in January 2018, to provide its input to the European Commission. As such, the 36 EFN Members were invited to respond to a pan-European questionnaire survey on nurses' actions relating to vaccination. The analysis of the survey revealed that nurses across Europe have wide and varied roles with regard vaccination, including surveillance, monitoring, planning, delivering and evaluating the success of vaccination programmes, and that they deliver vaccination-related nursing care in diverse settings, from acute hospitals, schools, older persons facilities, to workplaces and peoples' homes. The [survey highlighted](#) that only a small proportion of vaccination activities take place where it would actually be most convenient and accessible to citizens, such as their homes, areas of work and their community pharmacy. This illustrates that current vaccination provision remains health service/professional centred, rather than patient centred. Therefore, coordinated action is warranted to ensure nurses and nursing meet society's mandate to protect and promote the health of Europe's citizens through provision of safe and high-quality nursing care.

Nurses Wages

The level at which nurses are remunerated is one of the key factors affecting their job satisfaction and the attractiveness of the nursing profession. Nurses are the single largest professional group delivering health and social care, and their salary represents a significant spending item in the health and social ecosystems. This is, thus, a contentious policy topic across countries in Europe.

At the Spring EFN General Assembly, held in Brussels, in April 2018, the EFN Members identified Principle 6 of the [European Pillar of Social Rights](#), 'Wages', as an important priority for the EFN to take further. As such, the Workforce Committee reflect on how to collect information on the net wages of nurses, and based on these decisions, the EFN was asked to conduct a survey based on EFN Members' decision: the NNAs to determine the general care nurse salary across countries would be a good option, with the aim to collect information on the net salaries of nurses, compared to some other professions, and select other indicators to build the argument for more support to nurses and nursing in the EU. The main argument behind this survey was not to compare between countries, but to find trends within the data that can inform policy discussions at national and European level, especially within the European Social Pillar. As the Commission is drafting its policies in beginning 2019, it is key EFN provides input from the NNAs.

Five key areas have been analysed: the difference in nurses and other professions' initial salary, at national level; the difference in nurses' salary growth according to their working experience across Europe; the difference in nurses and

other professions' salary growth according to their working experience, at national level; the difference in nurses' overtime payment across Europe; and differences in working hours across Europe; which reveal that there are great disparities among countries and that despite a harmonised educational framework for nurses across the EU, nurses' salaries vary significantly and randomly across the EFN membership. This analysis is just a first start in an ongoing dialogue between EFN members to strengthen the nurses' voice as regards wages discussions, in the context of the European Pillar of Social Rights. It remains to be seen how EFN will further develop this sensitive topic in 2019.

Primary Care models

In the context of EFN Tour de Table within the EFN General Assemblies, and taking into account the EU discussions on the European Pillar of Social Rights, the EFN Members were asked, at the EFN April 2018 General Assembly, in Brussels, to provide best practices on well-functioning "Primary Care models", and good practices, led by nurses, which could be upscaled throughout the EU (related to healthy lifestyle, stopping smoking, active ageing, prevention dementia, alcohol prevention, violence prevention, etc.). It is important for the EFN in its daily lobby work to show the politicians and civil servants (European Commission) the importance of nurses' contribution to primary care.

The [data collected show](#) the breadth and depth of activity nurses across Europe are engaging with to contribute and support the primary care agenda. Driven by the knowledge that a strong primary care system has widespread health and wellbeing benefits for all those involved, primary care nurses' members of EFN are invested and committed to furthering quality and safe care in this setting by taking on a number of new and important roles. The benefits from investing in primary care are obvious to all those engaged in the healthcare system, both professionals and patients. Nurses have a central and leading role to play in these developments, although their role is not always acknowledged. It is time for policy rhetoric to translate into concrete support and investment in primary care services across Europe to ensure quality, accessible, efficient and safe care reaches those who need it most.

Long-Term Care

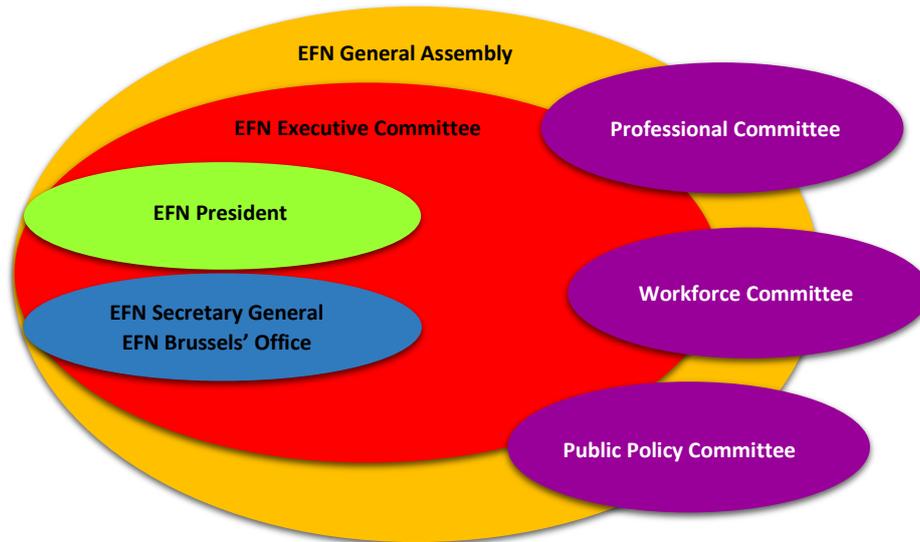
In the context of EFN Tour de Table within the EFN General Assemblies and taking into account the EU discussions on the European Pillar of Social Rights, the EFN Members were asked, at the EFN October 2018 General Assembly, in Slovakia, to provide [best practices](#) on nurses' role in Long Term Care.

The provision of long-term care services of good quality, in particular home-care and community-based services, is a key priority for the nursing profession, advocating for [paradigm shift in long-term care policies](#) to improve the quality of services and quality of life for long-term care patients. The EFN members are strongly engaged in contributing to delivering long-term care positive outcomes. The input of the EFN Members' to the Tour de Table demonstrates the extent to which nurses' roles are relevant in the delivery of [community care](#) across Europe and how their contribution becomes central to support the EU long-term care political agenda, and how crucial it is to co-design with frontline nurses EU policies to make them fit for purpose and as such ensure a sustainable and efficient approach in the development of an EU LTC policy.

VII. EFN GOVERNANCE

A. EFN STRUCTURE

The EFN governance structure consists of the General Assembly, which includes 36 National Nurses' Associations, supported by the Executive Committee, the Professional, Workforce and Public Policy Committees, and the EFN Brussels Office.



B. EFN GENERAL ASSEMBLY

As the EFN governing body, the General Assembly meets twice a year to discuss the important issues related to the EFN lobby work that can influence the nurses and the nursing profession at EU and national levels, to discuss and endorse key Policy and Position Statements, and to work on several EU projects.

The EFN General Assembly is constituted by:

- ↳ **Members** - drawn from the [National Nurses' Associations](#) from the twenty-eight EU Member States + Iceland, Norway, Switzerland, the Former Yugoslav Republic of Macedonia, Montenegro, Serbia, Albania, AUVB-UGIB from Belgium.
- ↳ **Observers** - International Council of Nurses ([ICN](#)); World Health Organisation ([WHO](#)); and the European Nursing Students Association ([ENSA](#)).

To view the full list of the EFN Members, updated on regular basis, please visit the [EFN Website](#).

In 2018, the EFN Members met in on 12-13 April, in Brussels, for the Spring EFN General Assembly, and on 11-12 October, in Slovakia, for the Autumn General Assembly, organised by the Slovak Chamber of Nurses and Midwives (SKSAPA). The minutes of the General Assemblies are not publicly available. The EFN Members can access them via the Members' section of EFN [Website](#). In 2019, the EFN General Assembly will meet on 11-12 April (Brussels) and 17-18 October (Greece).

C. EFN COMMITTEES

Constituted in 2006, in order to prepare and facilitate the EFN lobby process towards the European Commission, the European Parliament and the Council of Ministers (EU Presidency), the three EFN Committees meet twice a year during the EFN General Assemblies in order to discuss and produce recommendations to the General Assembly on the steps forward to achieve concrete outcomes related to specific issues:

- **Professional Committee:** In 2018, the Professional Committee led by Janet Davies, from the Royal College of Nursing (RCN) – April 2018, and by Nina Hahtela, from the Finnish Nurses Association – October 2018, discussed and provided recommendations to the EFN General Assembly on: European Pillar of Social Rights from an education

perspective; EFN Position Paper on the European Pillar of Social Rights; EU Advanced Nurse Practitioner; European Commission DG Sante Best Practice Portal; European Semester Country Reports; EU Elections 2019, including EFN Manifesto.

- **Workforce Committee:** In 2018, the Workforce Committee led by Veronika Di Cara, from the Czech Nurses Association, discussed and provided recommendations to the EFN General Assembly on: European Pillar of Social Rights from a workforce perspective; EFN Position Paper on the European Pillar of Social Rights; OECD Data; European Commission DG Sante Best Practice Portal; European Semester Country Reports; EU Elections 2019, including EFN Manifesto.
- **Public Policy Committee:** In 2018, the Public Policy Committee led by Roswitha Koch, from the Swiss Nurses Association, discussed and provided recommendations to the EFN General Assembly on: European Pillar of Social Rights from a quality and safety perspective; EFN Position Paper on the European Pillar of Social Rights; OECD Data; EU Policy on Long-Term Care; European Commission DG Sante Best Practice Portal; European Semester Country Reports; EU Elections 2019, including EFN Manifesto.

D. EFN WORKING GROUPS

» ON ANP

Within the framework of the [European Pillar of Social Rights](#), the EFN believes on the importance of the Advanced Nurse Practice (ANP) for the delivery of positive health outcomes. Seen the importance of this topic, the EFN General Assembly in Brussels, April 2018, decided to set up an ANP Working Group to take this work further. The ANP Working Group includes the following EFN Members: Mag. PhDr. Silvia Neumann-Ponesch MAS (Austria); Thierry Lothaire (Belgium – FNIB); Deniz Avcioğlu & Lieve Goossens (Belgium – AUVB); Miroslava Kičić (Croatia); Paraskevi Christofi (Cyprus); Gerli Liivet (Estonia); Franck Vetraino (France); Anna Suutarla (Finland); Dimitris Papageorgiou (Greece); Marta Silva (Italy); Anne-Marie Hanff (Luxembourg); Marit Leegaard (Norway); Maria José Martins da Costa Dias (Portugal); Ecaterina Gulie (Romania); José Luis Cobos (Spain); Birgitta Wedahl (Sweden); Roswitha Koch & Romy Mahrer (Switzerland); Lead WG - Wendy Preston (UK). Based on the discussions at the General Assembly EFN Professional Committee, and within the ANP working group, the EFN members agreed that the EFN do not need to do further work on defining advanced practice and competencies, but that it is crucial to have an evidence-based policy position in order for the NNAs to advance things at national and European levels. The ANP working group will continue to discuss this in 2019.

» ON THE FUTURE OF ENRF

Following the ENRF President, Karen Bjoro, presentation on the current ENRF challenges at the October 2018 EFN General Assembly, in Slovakia, the EFN General Assembly decided to set up a working group aiming to look at the ENRF Future and formulate recommendations to the EFN EXCOM. The working group consists of representatives from: Royal College of Nursing; Spanish General Council of Nursing; Irish Nursing and Midwives Organisation; Polish Nurses Association; and is chaired by the EFN Vice-President Nina Hahtela (Finish Nurses Association), supported by Veronika di Cara (EFN EXCOM – Czech Republic Nurses Association). The EFN working group on the Future of ENRF met for the first time on 11 December 2018, and again in January 2019, to discuss and formulate recommendations for the EFN Executive Committee, February 2019 & the EFN General Assembly, April 2019.

E. EFN EXECUTIVE COMMITTEE

The [EFN Executive Committee](#) is constituted by seven members: President, Vice-president, Treasurer and four delegates elected by the EFN Members National Nurses' Associations. They meet at least twice a year (in between each General Assembly) to discuss key issues for the EFN, to prepare recommendations for the General Assembly, and to follow-up on the General Assembly decisions. An extraordinary Executive Committee meeting usually also takes place the day before each General Assembly to set up the last recommendations for the meeting.

a. Meetings

In 2018, the EFN Executive Committee met five times: on 23 February and 5 September (Online) for their regular meetings, and on 11 April (Brussels), 6 July (Online), and 10 October (Slovakia) for EFN Executive Committee extraordinary meetings. In 2019, the Executive Committee will meet for their regular meetings on: 8 February and 6 September, both Online.

b. Elections

At the Autumn EFN General Assembly held on 11-12 October 2018, in Slovakia, the EFN members elected the following members of the EFN Executive Committee: Vice-President - Nina Hahtela, Finnish Nurses Association (51 votes in favour); and two Executive Committee members: Aristides Chorattas, Cyprus Nurses and Midwives Association (34 votes in favour); and Veronika Di Cara, Czech Nurses Association (44 votes in favour) for a two-year term 2018-2020.

As a result, the new Executive Committee is constituted as follow:



President: Ms Elizabeth Adams, Irish Nurses and Midwives Organisation, *Ireland*



Vice-President: Ms Nina Hahtela, Finnish Nurses Association, *Finland*



Treasurer: Ms Milka Vasileva, Bulgarian Association of Health Professionals in Nursing, *Bulgaria*

Four Executive Committee Members:



Mr Aristides Chorattas, Cyprus Nurses and Midwives Association, *Cyprus*



Ms Veronika Di Cara, Czech Nurses Association, *Czech Republic*



Ms Jana Slováková, Slovak Chamber of Nurses and Midwives, *Slovakia*



Ms Roswitha Koch, Swiss Nurses Association, *Switzerland*

F. EFN BRUSSELS OFFICE

In 2018, the EFN Brussels Office, consisting of the Secretary General, the Secretary, and a Policy Advisor, and supported by consultants in the area of Accounting, Social Security System, Web and IT management, Legal Affairs and on specific policy areas, especially during the EFN General Assemblies, continued focussing on implementing the EFN Strategic Lobby Plan 2014-2020.

Having a proactive approach to setting the EU health and social policy agenda by influencing the major policy initiatives from the European Institutions, which in turn impacts on nurses and the nursing profession, is the core business of EFN. Translating this political journey into the 'language' of the EFN members, through the EFN Updates, Press Releases and

Briefing Notes, bridges the distance between Brussels and the governmental capital of the Member States where national policies are developed. Informing and keeping the EFN members up to speed is essential in putting them in an advanced position vis-à-vis their national governments. But equally important is the engagement of the EFN members in the Brussels' lobbying process 'to put a human face to policy-making'.

As such, having an EFN Office in Brussels equipped with highly educated and motivated staff, and empowering members to exchange views on specific EU policy areas, thus enabling them to go back home with the capacity to influence national governments is, in fact, the 'raison d'être' of EFN.

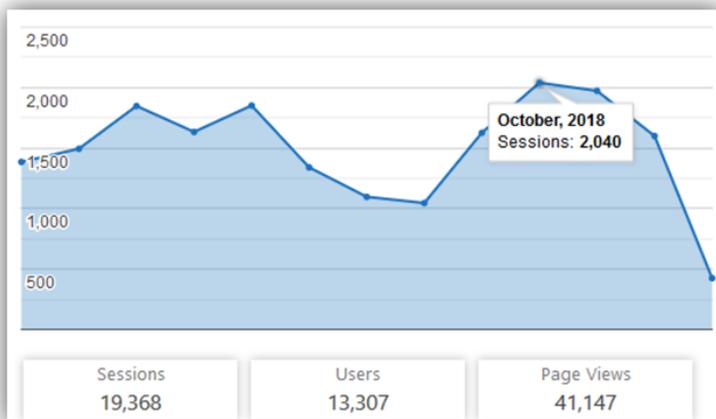
VIII. COMMUNICATION

For the EFN, it is essential that its members have the necessary information, knowledge and experience to take informed decisions on the key issues related to the nursing profession, not only during the EFN General Assemblies, but also when an item is being discussed and/or needs urgent attention, decision and/or action. In order to be as reactive and proactive as possible, the EFN Brussels Office regularly provides the EFN members with up-to-date information on the most recent items discussed at EU level, through: updates, briefing notes, press releases, position statements, and articles. Most of these documents are made available to the public via the EFN Website: www.efnweb.eu.

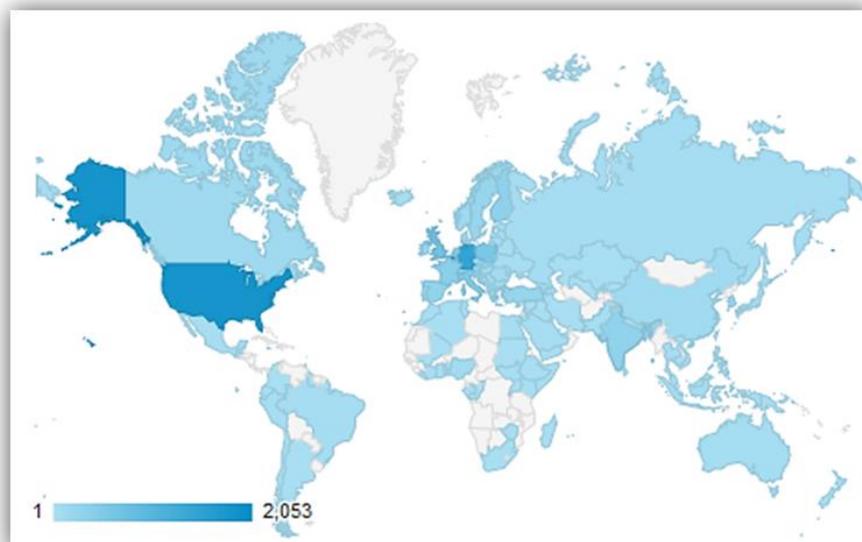
➤ EFN Website

The [EFN website](http://www.efnweb.eu) is used as a key communication channel to disseminate information to the EFN members, the EU health stakeholders, key decision-makers, and the public in general. Updated on regular basis, the EFN Website reflects the EFN on-going activities and relevant information which shows the dynamics and impact of EFN on EU policy-making. Below you can see how much people use the EFN Website and which pages they read the most, with some statistics on the EFN Website number of visitors and top pages/documents visited in the last year (*data as of 31/12/2018*):

➤ Number of visits to EFN Website (for the full year)



Visits by country



Number of visits country by country

EFN Members

Albania	57	Austria		Belgium	600	Bulgaria	131
Croatia	148	Cyprus	90	Czech Republic	198	Denmark	63
Estonia	82	Finland	320	France	375	FYR Macedonia	48
Germany	1.465	Greece	218	Hungary	73	Iceland	23
Ireland	195	Italy	486	Latvia	40	Lithuania	25
Luxembourg	66	Malta	41	Montenegro	18	Netherlands	310
Norway	121	Poland	581	Portugal	203	Romania	85
Serbia	55	Slovak Republic	210	Slovenia	245	Spain	281
Sweden	217	Switzerland	159	United-Kingdom	678		

Other countries

Algeria	9	Argentina	4	Armenia	4	Australia	63
Azerbaijan	4	Bahrein	7	Bangladesh	10	Belarus	7
Benin	5	Bosnia & Herzegovina	71	Brazil	41	Cambodia	7
Canada	120	Chile	7	China	113	Colombia	9
Côte d'Ivoire	7	Dominican Republic	1	Egypt	24	Ethiopia	2
Faroe Islands	1	Georgia	3	Ghana	10	Grenada	5
Guyana	2	Hong Kong	13	India	306	Indonesia	43
Iran	19	Iraq	12	Israel	19	Japan	43
Kazakhstan	9	Kenya	8	Kosovo	17	Kuwait	2
Lebanon	1	Macau	2	Malaysia	8	Mauritius	8
Mexico	25	Moldova	6	Morocco	17	Nepal	2
New Zealand	13	Nigeria	88	Pakistan	31	Palestine	4
Peru	24	Philippines	56	Qatar	9	Russia	39
Saudi Arabia	26	Singapore	6	South Africa	11	South Korea	178
Sri Lanka	7	Sudan	4	Syria	2	Taiwan	25
Thailand	12	Togo	6	Turkey	225	Tunisia	3
Uganda	5	Ukraine	30	United Arab Emirates	21	United States	1.852
Uzbekistan	1	Zimbabwe	2				

Top pages viewed (for the full year)

Page Title ?	Pageviews ? ↓
1. EFN – European Federation of Nurses Associations European Federation of Nurses Associations	10,883 (32.50%)
2. EFN – European Federation of Nurses Associations Browsing the category Latest News	1,820 (5.44%)
3. EFN – European Federation of Nurses Associations Members	1,367 (4.08%)
4. AGENDA EFN – European Federation of Nurses Associations	1,297 (3.87%)
5. EFN – European Federation of Nurses Associations EFN Member Section	751 (2.24%)

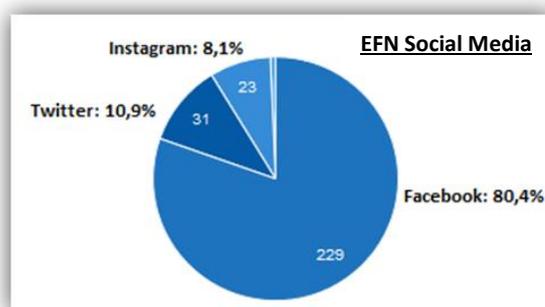
Page Title ?	Pageviews ? ↓
6. EFN – European Federation of Nurses Associations Search Results	876 (2.62%)
7. EFN – European Federation of Nurses Associations Executive Committee	778 (2.32%)
8. EFN – European Federation of Nurses Associations History	745 (2.22%)
9. EFN – European Federation of Nurses Associations Contact Us	715 (2.14%)
10. EFN – European Federation of Nurses Associations Brussels office	777 (2.32%)

Page Title ?	Pageviews ? ↓
11. EFN – European Federation of Nurses Associations EFN Competency Framework for Mutual Recognition of Professional Qualifications Directive 2005/36/EC, amended by Directive 2013/55/EU	718 (2.14%)
12. EFN – European Federation of Nurses Associations Mission & Objectives	482 (1.44%)
13. The holistic role of nurses EFN – European Federation of Nurses Associations	315 (0.94%)
14. The EFN President & Secretary General meet the EU Commissioner for Health, Vytenis Andriukaitis EFN – European Federation of Nurses Associations	333 (0.99%)
15. EFN – European Federation of Nurses Associations ENS4Care	282 (0.84%)

Page Title ?	Pageviews ? ↓
16. Nursing Times Awards 2017 EFN – European Federation of Nurses Associations	277 (0.83%)
17. EFN – European Federation of Nurses Associations Links	198 (0.59%)
18. EFN Report "Nurses are frontline combating AMR" EFN – European Federation of Nurses Associations	271 (0.81%)
19. Say No! Stop Violence Against Women! EFN – European Federation of Nurses Associations	274 (0.82%)
20. The Future of Europe – what's next? EFN – European Federation of Nurses Associations	260 (0.78%)

➤ Social Media

Being used by a huge majority of the population in the world, social media is now an important tool to share and exchange information also with the EU lobby arena. In order to be more visible in the social media network and to get EFN messages closer to the European stakeholders, the MEPs and Commission people who also use social media to communicate, and the nurses all over the EU, the EFN decided in October 2014 to get both a [Facebook](#) and a [Twitter](#) accounts, and more recently Instagram (created in 2018, as requested by the April 2018 EFN General Assembly). Taking on board the EFN Members request for the EFN to be more active on Social Media in 2018, the EFN office was quite active on Facebook, Twitter & Instagram. See below some data on those 3 tools:



📌 EFN Facebook: /efnbrussels

The EFN Facebook account has currently 979 'likes/followers' (as of 31/12/2018). In 2018, the EFN was quite active on Facebook, with many posts published, and an average of 450 people seeing them, with a top reached with the one published on the occasion of the EFN General Assembly, on 12 October 2018, on EFN becoming lead for Nursing Now Europe, seen by 7.323 people:

📌 EFN Twitter: @EFNBrussels

The EFN Twitter account has currently 342 followers (as of 31/12/2018). In 2018, the EFN was quite active on Twitter, namely raising EFN main activities (as high-level meetings, publications, etc.) and/or key topics for the nurses.

📌 EFN Instagram: @efn_brussels

As for Facebook & Twitter, the EFN is using its Instagram account to publish the most relevant information. In 2018, the EFN was active on Instagram, namely on meetings the EFN participated in and/or key topics for the nurses.



➤ EFN Update

On a regular basis, when significant lobby information is available, the EFN publishes its [Update](#), a newsletter that makes reference to the main information for nurses and the nursing profession within the European Union and to the key issues to influence the European Institutions. These 'Updates' keep the EFN Members and other key EU health alliances informed about the EFN policies, actions and relevant EU initiatives. In 2018, the EFN published three Updates: [February-March-April 2018](#); [May-June-July 2018](#); [October-November-December 2018](#). All the EFN Updates are available at: http://www.efnweb.be/?page_id=875

➤ EFN Press Releases

Another approach that the EFN is using to communicate with the EU lobby arena is through its press releases. The [EFN Press Releases](#) provide the EFN members and other key EU health actors, with information on key topics that the EFN believes are important to share, at a crucial moment. These are also seen as a good way to reaffirm EFN views/position on a particular topic next to the EU Institutions and the EU stakeholders. In 2018, the EFN published the following press releases: [Nurses End-users in Co-creating digital value-based ecosystems](#) (April 2018); [Nurses are the driving force to deliver health outcomes](#) (May 2018); [United for Universal Health Coverage \(UHC Day 2018\)](#) (December 2018). All the EFN Press Releases are available at: http://www.efnweb.be/?page_id=882

➤ EFN Policy Statements and Position Papers

The [EFN Policy Statements and Position Papers](#), highlighting the EFN members views on specific issues, and approved by the EFN General Assembly, are crucial for the EFN's lobby work next to the different EU Institutions and EU Stakeholders, and to support the EFN Members in their daily lobby work at national and EU level. In 2018, the EFN members adopted the [EFN Policy Statement & Position Paper](#) on the European Pillar of Social Rights (April 2018). All the EFN Policy Statements and Position Papers are available at: http://www.efnweb.be/?page_id=833

➤ EFN inputs to the European Commission Consultation Processes

In 2018, the EFN inputs to the European Commission Consultation processes related to: [Public Consultation on strengthened cooperation against vaccine preventable diseases](#) (February 2018); [Consultation on the WHO Independent High-Level Commission on Non-communicable diseases Draft Report](#) (May 2018); [EU Consultation on the Future of Europe](#) (May 2018); [Consultation on the ECDC European Antibiotic Awareness Day](#) (August 2018).

All the EFN contributions to the EU consultation processes are available at: http://www.efnweb.be/?page_id=873

➤ EFN Reports

The EFN has long used data collection on the spot and its 'Tour de Table' during its General Assemblies, as a key policy support mechanism to gather data and enable the exchange of best practices among its membership. The policy reports developed from this intelligence gathering are a vital source of factual, comparative data and insights into health and social care in the European Union and Europe. In 2018, the EFN as put together several reports out of this data collect/Tour de table: [EFN Report on Good Nursing Practices for Primary Care](#) (April 2018); [EFN Report on vaccination: Nurses competencies in prevention](#) (April 2018); [EFN Comprehensive Report on Nurses Added Value in the Health and Social Ecosystems](#) (December 2018); [EFN Report on Best Nursing Care Practices in Long-Term Care with Upscaling Potential](#) (December 2018). For more information on these reports, see "Data Collection" page 34. All the EFN reports are available at: http://www.efnweb.be/?page_id=2198

➤ EFN Articles

Publishing [articles](#) is a good way for the EFN to increase the visibility of nurses and the nursing profession at European level, to strengthen the EFN's position on a range of key policy issues, and to increase the impact of the EFN messages and their potential influence on the policy design. In 2018, the EFN published several articles: [Nurses in Europe codesigning an EU value-based health and social care ecosystem](#) (May 2018); [Blockchain support to continuity of care](#) (May 2018); [The Long-Term Care implementation gap](#) (June 2018); [Why the European Pillar of Social Rights should keep nurses in the profession](#) (July 2018); [Blockchain supports nurses in the continuity of health and social care](#) (August 2018); [The value-based public procurement nurse in Europe](#) (August 2018); [Future EU enlargement: fit-for-purpose accession negotiation mechanisms needed](#) (November 2018); [Three million EU nurses focusing on the European elections](#) (November 2018). All the EFN articles are available at: http://www.efnweb.be/?page_id=2258

➤ EFN Briefing Notes

The [EFN Briefing Notes](#), available only to the EFN members via email and/or the members' section of EFN Website, provide specific information on key lobby topics that may influence the EFN members' national policies and daily lobby work. In 2018, the EFN published some Briefing Notes on key items: On EP report on the implementation of Directive 55 (January 2018); On EU Pillar of Social Right (February 2018); On New initiatives on safe workplace (March 2018); On the European Semester (May 2018); On European Social Fund Plus (ESF+) (May 2018); On Digital Transformation Towards Health and Social Care Ecosystems in the EU (September 2018). All the EFN Briefing Notes are available, only to EFN Members, at: http://www.efnweb.be/?page_id=2295

IX. CONCLUSION

Reflecting on 2018, we can say that the EFN has addressed many challenges for the nurses and the nursing profession, and through intense lobby work has ensured that the united voice of nurses, the potential and the expertise of the nurses and the nursing profession is clearly articulated across EU Institutions. Collectively we are in a strong position to face the challenges in terms of health and wellbeing. With austerity measures adopted in all the EU Member States, nursing has experienced a range of severe cuts in posts, salary, education. In addressing ongoing societal challenges, governments and employers short sighted policies have had enormous implications on the quality of life of EU citizens and a harmful effect on the nursing workforce and their ability to effectively and efficiently deliver nursing care.

To tackle this trend, the EFN has restlessly worked to advocate for the promotion of empowered and skilled nurses to work to the full scope of their practice and potential, as critical element to ensure the best health and social care outcomes for patients and EU citizens. Now more than ever it is crucial for nurses to engage and proactively influence EU health and social policies.

The EFN Members are strongly engaged to make the difference to the current EU policy agenda and are working relentlessly to ensure that 3 million nurses' contribution is valued, and the potential of the nursing profession is maximised to positively benefit patients and health ecosystems. With the upcoming EU elections, in May 2019, it is a crucial moment for determining the new representatives of the EU citizens and to establish the new political priorities that will be carried out in the next 5 years in the EU. And the nurses' voice is key in this process! It is crucial that the MEPs elected in the next mandate include health among their priorities and enhance nurses' ability to shape and deliver effective and high-quality care to EU citizens.

Therefore, the first half of 2019 will be key for the EFN Members to make their potential national candidates aware and sensitive of the united voice for nurses' priorities so that their political programmes include the nurses' concerns. Once in the European Parliament, we will hold them accountable for achieved outcomes. We have the opportunity to make a real difference, a difference to politics. Nurses collectively across Europe have the voting power to ensure the politicians they elect are committed to investing in health and nursing to benefit better all the citizens of Europe. Speaking with one voice nurses can influence the European Institutions, the Commission, the European Parliament and Council, to ensure EU legislation reflects EU citizens' needs.

2019 will for sure build further on all the lobby work and outcomes of 2018, knowing that a lot is happening at EU level, namely on Digitalisation, Workforce and Education; and will undertake successfully the upcoming opportunities for the nursing profession, together with Nursing Now.

The European Federation of Nurses Associations (EFN) was established in 1971. The EFN represents over 36 National Nurses Associations and its work has an effect on the daily work of 3 million nurses throughout the European Union and 6 million in Europe. The EFN is the independent voice of the nursing profession and its mission is 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 and Europe.

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Transparency Register: 87872442953-08

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