

**Education from a European Perspective
Nurses Influencing EU Policy Making**

Plenary Address

by

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Dear Colleagues,

I am delighted to participate in today's European debate concerning the Bachelor-Master-PhD Structure. The first thing I would like to do is to convey best wishes from the President of the European Federation of Nurses Associations and from my members of 30 Member States represented in EFN, to which the RCN belongs.

It goes without saying that the focus here will most notably be on the Bologna Process, but we should talk also about the European Directive on Mutual Recognition of Professional Qualifications.

It is my privilege to present the concrete ways in which nurses can help build and support nursing education in Europe. The concept of 'building' is interesting in this context and I use this concept intentionally.

Why?

Because this concept integrates the notions of developing a concrete and solid plan and implementing it.

Because this is about the process of integrating a number of separate factors into a concrete and functional whole.

This whole in its entirety is much more than the sum of its individual parts.

In many ways, this process is similar to the gradual 'building' of the European Union itself.

My presentation will consist of three parts:

1. a brief overview of EFN and its aims and objectives;
2. EFN position statement on the Bologna Process with some remarks concerning recent developments;
3. a 'listing' of a number of areas where nurses and their organisations can –and should- take action

1. A brief overview of EFN

First, I would like to provide you with some background of the EFN, the European Federation of Nurses Associations. In the early seventies the notion of mutual recognition of professional qualifications of doctors, nurses, pharmacists, midwives, architects, dentists and vets - the so-called 'sectorial professions'- gained momentum. Minimum requirements for education of nurses were developed and agreed on. These requirements are still forming the base of the so-called 'acquis communautaire'.

These developments led to the recognition of EFN by the European Commission, the European Parliament and the Council of Europe and EFN role as pan European Organisation to give input in the European Policy making processes. In other words, EFN became important to have a voice, a United voice for Nurses at European level.

Since then, EFN has developed into a powerful organisation, which brings together and represents the professional organisations of the 30 Member States of the EU and the Council of Europe.

EFN main objective is to influence European policy. To this effect, EFN works with the three most important institutions of the EU: the Commission, the European Parliament and the Council of Ministers. These institutions view EFN as the official 'voice', the official contact point for policy matters and other EU initiatives which have a bearing on nursing. For example, within the Commission, EFN is in close contact with the Directorates General for Health and Consumer Protection, Internal Market, Employment, Development and Research.

Apart from cooperation with the EU institutions, EFN has strong relations with other European umbrella organisations for health professionals and relevant interest groups, such as the European Patients Forum, the European Women Lobby and many others.

Mission

EFN mission statement reads as follows: "To strengthen the status and practice of the profession of nursing and the interest of nurses in the EU and Europe".

Three policy objectives flow from this statement:

- 1) Ensuring that nurses and nursing are a key element in the development of EU social and health policy and its implementation
- 2) Strategic support for a qualitative and equitable health service in the EU and Europe by means of developing a workforce of effective, competent and motivated nurses
- 3) Strengthening EFN representation in the EU and Europe and develop EFN key role as a bridge between nursing associations and the EU institutions.

One clear example of an activity in relation to the first objective is EFN active participation in the discussions surrounding the Open Method of Coordination, more specifically concerning the social side of Europe, the care for the elderly and patient information and safety. Another example is our intensive campaigning in relation to the new Directive on Mutual recognition of Professional Qualifications, recently published and to be implemented by the

EU Member States in October 2007. And this inevitably brings us to the Bologna Process. Without a doubt, this process will lead to setting standards, which will apply both to educational nursing institutes as well as to nurses and their services themselves. Within the European Single Market, especially the 'Bolkenstein Directive' it is important to look at health in a different way as other services provided to European citizens. The Bologna Process is important in this context, because it will determine what product needs to be delivered and by whom this product will be delivered in practice. This in turn will automatically lead to a discussion of differentiation of the various professions and the individual roles and responsibilities of doctors and nurses.

In order to promote nursing and nurses as a strategic factor within the care system, the second objective, EFN developed ethical guidelines for employing nurses – as well as keeping nurses in the workforce. Exchange of experience between Member States, learning from each other, which strategies work and which ones do not work, is of the essence in this respect.

Bringing together the individual organisations of nurses, joining forces and speaking with one voice at European level is the scope of the third objective. If each individual organisation would like to have its own separate voice, promoting each individual point of view, there would not be much hope for leadership and effective policy influencing within our area. EU policy influencing needs a strong, united voice.

2. The Bologna Process

Many of you will be familiar with the Bologna Process. The Bologna Process aims to establish a European Area of Higher Education by 2010, at the same time we need to achieve the Lisbon Objectives. The objectives of the Bologna Process are:

- Adoption of a system of easily accessible and comparable degrees, bachelor, master and PhD
- Establishment of a European Credit Transfer System
- Promotion of mobility
- Promotion of European co-operation in quality assurance
- Promotion of the European dimension in higher education
- Life Long Learning
- Involvement of students
- Attractiveness and competitiveness of the European Higher Education Area

Now what are the challenges for the Nursing Profession?

European cooperation has improved enormously. However, some questions remain:

- What kind of nursing « profile (s) » and « training (s) » do we want for Europe?
- What kind of nursing « competences » do we want?
 - How should they be measured and determined? What will the outcomes be?
 - How can we guarantee a « golden standard »?
- What are the « priorities » in the short-term?
 - National priorities?
 - European and international priorities?
- How will the Bologna process promote Excellency in the field of higher education and research?

EFN, together with the International Council of Nurses, have agreed a number of principles regarding nursing education:

- Admission to training institutes should only be possible after finishing secondary school, under the same conditions as those applying to access to university
- The length of the training programme should be sufficient to guarantee the acquisition of specific competencies and shall not be less than three academic years (minimum bachelor level)
- There should be one European professional level of nurses only
- The curriculum should be based on and consist of research, skills and competencies
- The institutes' Director should be a qualified nurse

At this stage, it is important to underline that across Europe, not all nurses are educated to degree level at the point of initial registration and more ways to reach registered nurse status are possible. Whatever decision we make, it is important to measure the impact of the Bologna Process on the workforce composition. Furthermore, we should compare the subject specific competencies (Tuning project) with the ICN competencies for the Generalist Nurse, identify the gaps and ambiguities.

3. A list of actions

Our current situation, our current reality strongly underlines the fact that building nursing education and health systems should be part of our European activities and endeavours.

How can we meet the aims of a high quality and safe health system in Europe?

EU policy making processes should:

- Guarantee stakeholders engagement;
- Validate the work on the competencies and the examination of how this might inform an updating of the current general directive on nursing;
- Provide tools to examine the potential implementation impact issues;
- Identify a chief nurse within each government to provide an opportunity to address these issues locally, nationally and at the European level.

Nursing education at various levels (baccalaureate, masters and doctoral) as well as continuing professional development (CPD) are essential elements in the process of progressing the health policy agenda. We need this to guarantee a professional workforce that can help drive change and deliver quality.

In conclusion, I believe that despite the many challenges we face in implementing the Bologna Process, this is clearly the way forward for all nurses. This journey is not just about building educational structures and alliances. In effect, we are helping to shape a new social landscape for a united Europe. This is undoubtedly an ambitious, demanding and truly exciting journey. And our trip is just beginning....

Thank you very much for your attention.