

## 16th Annual Meeting of the European Forum of National Nursing and Midwifery Associations and WHO

Report on a WHO meeting Copenhagen, Denmark 29-30 March 2012

#### **ABSTRACT**

The Sixteenth Annual Meeting of the European Forum for National Nursing and Midwifery Associations and WHO was attended by representatives of nursing and midwifery associations of 16 Member States in the WHO European Region and observers from international associations and nongovernmental organizations. The main focus of the meeting was the role of Nursing and Midwifery professions in tackling Non-Communicable Diseases. The agenda also comprised discussion on the European policy for health and well-being, the European action plan for strengthening public health services and capacities, and the strategy for healthy ageing in Europe, which will be presented for adoption at the 62<sup>nd</sup> session of the WHO Regional Committee for Europe, in Malta.

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## **Opening of the meeting**

Lillian Bondo, the Chair of the European Forum of National Nursing and Midwifery Associations (EFNNMA) Steering Committee opened the sixteenth annual meeting of EFNNMA and the WHO Regional Office for Europe. She welcomed Jose Martin-Moreno, the Director of Programme Management of the Regional Office, and Hans Kluge, the Director of Health Systems and Public Health (DSP) and Special Representative of the Regional Director on M/XDR-TB as well as representatives of the International Council of Nurses (ICN), the International Confederation of Midwives (ICM) and the European Federation of Nurses Associations (EFN), guest speakers, other guests and participants from member associations.

Lillian Bondo thanked the Regional Office for holding the meeting again this year and emphasized that one of the main topics of this year' meeting would be the role of nurses and midwifes in preventing and caring for people with non-communicable diseases (NCDs).

#### Address by the WHO Regional Office for Europe

Jose Martin-Moreno opened the session by conveying sincere greetings from the WHO Regional Director for Europe, Zsuzsanna Jakab wishing everyone a successful meeting. He then reviewed some of the main events initiated by the Division of Health Systems and Public Health during the past six months following the previous EFNNMA annual meeting at the WHO Regional Office for Europe.

#### These included:

- consulting Member States and partners on Health 2020, the European policy framework to support action across government and society for health and well-being with two main foci on reducing health disparities and improved governance
- introducing the new WHO European Action Plan for Strengthening Public Health Capacities and Services 2012 (EAP), which identifies 10 European public health operations and calls for improvements in the education, performance and skills-mix of the public health workforce
- continuing preparations for the 62<sup>nd</sup> session of the WHO Regional Committee for Europe (RC62) in September 2012 which focuses on Health 2020, the EAP and healthy ageing
- working on the financial sustainability of health systems in the context of austerity.

Jose Martin-Moreno went on to endorse the commitment of the Regional Office to nursing and midwifery and pointed out that this commitment had been reinforced by several other recent events and developments including:

 the revival of the WHO European Chief Nursing Officers (CNO)s meeting in Warsaw in October 2011. This meeting included Dr Jose Martin-Moreno, the First Lady of Georgia, Mrs Sandra Roeloffs, a practicing nurse herself, and the WHO Goodwill Ambassador for the health-related Millennium Development Goals (MDGs). The WHO European CNOs meeting was held during the Polish EU Presidency and was the first in six years with over 50 participants from 30 Member States aimed at revitalizing nursing and midwifery interests in the European Region. In the future, the Regional Office and particularly the Division of Health Systems and Public Health would seek to establish better synergy with a range of other EU initiatives.

- the meeting of the six WHO collaborating centres on nursing and midwifery of which two
  are located in the United Kingdom and one each in Slovenia, Finland, Germany and
  Portugal (on probation). During this meeting, joint work plan activities between the
  Regional office and WHO Collaborating centres for the period 2011 to 2012 were
  discussed.
- the senior management of the Regional Office, the Regional Director, the Director of Programme Management and the Director of Division of Health Systems and Public Health raised the importance of nursing and midwifery at corporate events and during high level visits to countries while mainstreaming the nursing and midwifery across divisions and programmes at the Regional Office. Examples can be seen in the work on national health plans and strategies, the biennial work plans of the Regional Office and the new Health System Strengthening operational approach targeted to improve health outcomes.

Jose Martin-Moreno then discussed an important upcoming event - World Health Day on the 7 April which is strongly linked to nursing and midwifery by this year's topic on "Ageing and Health" under the topic "Good health adds life to years". Jose Martin-Moreno pointed out that the population in the European Region is ageing rapidly. The median age is the highest in the world and the proportion of people aged 65 years and older is projected to increase from 14% in 2010 to 25% by 2050. This demographic trend has many implications, both for the demand of care and the demand for health care providers.

Jose Martin-Moreno stated that he truly believes that members of the EFNNMA are in an ideal position to contribute to global action on ageing and health. The hard work of the Director of the DSP and his staff putting nursing and midwifery high on the WHO Regional Agenda was acknowledged, and he wished EFNNMA success in its deliberations and further cooperation with the Regional Office.

#### **Nomination of Chairperson**

The meeting approved the nomination of Mrs Lillian Bondo, the Chair of the EFNNMA Steering Committee as Chairperson of the meeting.

#### **Announcement of Rapporteur**

The meeting announced Ms Lene Svendsen Borra as Rapporteur.

## **Adoption of the Programme**

The meeting adopted the programme (see Programme, Annex 1).

## **Report by the Chairperson**

Lillian Bondo highlighted that this year's EFNNMA annual meeting is held only six months after the previous EFNNMA meeting in 2011 in order to ensure alignment with the 62<sup>nd</sup> session of the Regional Committee, as well as the World Health Assembly (WHA) in May and the CNOs meeting. This alignment between EFNNMA and the Regional Office has been pursued since 2000 in order to identify and prioritize common interests and joint efforts.

The Chair drew attention to the Munich Declaration which focuses on strengthening the status and making full use of nurses and midwifes and was adopted in 2000. It constitutes the basis of the alignment and common orientation for the Regional Office and National Nursing and Midwifery Associations in their collaboration with Member States.

In the past years, the topic of non-communicable diseases (NCDs) has been among the topics of particularly high interest for the collaboration between the EFNNMA and the Regional Office. NCDs have been a priority for the Regional Office in the last decade and have also been a focus topic of several high level United Nations Agency meetings. NCDs are an agenda topic of EFNNMA and will be discussed during this year's WHA in Geneva. As stressed by the Chair, NCDs are a global, regional, national and local issue with most concerning elements like overweight and obesity.

There is a strong call for nursing and midwifery to contribute to address the challenges posed by the increase in NCDs in most parts of the world. The Chair emphasized the need for strengthening nursing and midwifery education and research in order to equip the professions to respond to the needs of populations and to participate in the challenge of establishing equitable and accessible health services. The European Strategic Directions for Nursing and Midwifery (ESDNM) were mentioned for the period 2011 to 2015. Among its five action-oriented areas, two top priorities stand

- to ensure relevant and updated nursing and midwifery education
- to establish a higher degree of sustainability in the nursing profession in Member States

The Chair reported that the EFNNMA Steering Committee members were unable to participate in the meeting of the Chief Nursing Officers (CNOs) of Member States of the WHO European Region, in Warsaw, Poland in September 2011. However, the Steering Committee had received a full briefing on the meeting and was pleased to note that CNO meetings will be held on a consistent basis in the future. In this respect, it is the view of the Steering Committee that future meetings of EFNNMA take place in line with CNO and EFN meetings. The alignment will enable stronger coordination and collaboration for better health outcomes.

## **Financial Report**

Sheila Dickson, the Treasurer of EFNNMA, presented the financial report for 2011 (see Financial overview of membership fees received for 2011 in Annex 3). She informed the meeting that only eight national associations had paid their membership fees for 2011 by the time of the current meeting. Membership fees for 2012 had not been collected by EFNNMA. The income of the EFNNMA secretariat has decreased dramatically in the past years. The Regional Office had provided financial support to the EFNNMA annual meetings in 2011 and 2012.

Two options were suggested by the participants: First, invoices to be send out to national associations by WHO to pay membership fees for 2012. Alternative option is to send invoices to collect fees for 2012 by the EFNNMA treasurer. It was suggested to transfer fees for 2011, if it has not been done by a national association, as a member which fails to pay the membership fees has no voting right, according to the EFNNMA operational principles. Thus, the payment of fees is of particular relevance.

The Treasurer stated that EFNNMA is at a crossroad. Payments are not coming in, and whether this is due to withdrawal, non payment or due to difficulties in tracking the amounts because of insufficient information, is not possible to determine at this point. That the amounts are considerably below what used to be the case is obvious. The INMO has offered to take over financial reporting and accounting responsibilities from the Regional Office. It was concluded that the EFNNMA Steering Committee will meet with the Regional Office on this issue and report back to the EFNNMA after the meeting, outlining the implications of any change in the existing operational principles to member associations.

## Strengthening Nursing and Midwifery across the WHO European Region

Hans Kluge provided highlights on the development of nursing and midwifery activities in the WHO European Region since the last annual EFNNMA meeting in 2011.

He thanked Zsuzsanna Jakab, WHO Regional Director for Europe, for her strong support to health system strengthening approach including nursing and midwifery, as a priority for the Regional Office.

Nursing and midwifery activities are in the process of being streamlined in the Regional Office in addition to the continued work of the Human Resources for Health programme. Nursing and midwifery will be addressed by various programmes of the Division of Health Systems and Public Health (DSP) in addition to the new approach to Health System Strengthening (HSS). The HSS seeks to align the DSP divisional products and services with the identified top HSS priorities in the European Region. It is envisaged that a more holistic and comprehensive response will be achieved, for example by including a component on nursing and midwifery in the Health System Performance Assessment.

Furthermore, DSP will address nursing and midwifery when preparing and negotiating National Health Policies and Strategies with national counterparts. The number of Member States with plans for nursing and midwifery activities has increased in the last biennium.

Two important joint collaborations between the DSP and other programmes of the Regional Office are continuing: The HSS/Non-Communicable Disease collaboration and the HSS/Multi-Drug Resistant Tuberculosis collaboration. Both collaborations offer vast opportunities for nursing and midwifery input and involvement at all levels.

A revitalization of the collaboration between CNOs of the European Region and the Regional Office has begun, and the meeting of CNOs took place in Warsaw, Poland, 7 - 8 October 2011 with 50 participants from 30 Member States. The recommendations from the meeting were:

- Link up with all major partners- the WHO collaborating centres, the EFNNMA, the EFN and the ICN
- Develop a shared vision aligned with regional strategic directions for nursing and midwifery and contributing to the wider health agenda
- Learn from each other, collecting evidence on good nursing and midwifery practice and share knowledge and information
- Convene regional CNOs meetings biennially
- Working with other stakeholders and partners, promoting inter- and multidisciplinary approaches
- Raising nursing and midwifery issues to the regional policy-makers discussion (Regional Committee)

A meeting of the WHO collaborating centres for nursing and midwifery was held at the Regional Office on 20 - 21 February, 2012. The meeting was successful in achieving a joint work plan between the Regional Office and the collaborating centres and in reaching a consensus on maintaining a European Network of collaborating centres to share experiences and work together.

Two recent high level meetings were highlighted for which input by the DSP of the Regional Office on nursing and midwifery has been significant:

- "Shaping the Future of Healthcare in Greece" on March 20, 2012
- The First European Conference of the Regional Office on Health 2020 in Israel in November 2012

He furthermore delivered an update on the following issues:

- consultations on the draft European Strategic Directions for Nursing and Midwifery have been finalized
- discussions on the Family Health Nursing project and collaboration with the University of West Scotland are ongoing

 preliminary talks on establishing a working expert group on nursing and midwifery to advise to the Regional Office take place

In conclusion, Hans Kluge reflected on the role of nurses and midwives as part of the process of coordinating care in the context of modern health services delivery. Disease prevention and health promotion should become an integral part of all health services at all levels. It is equally important to take up the challenge of reorienting hospital services towards further strengthening of community based services. This implies moving a range of hospital based services into community based services, which offers new opportunities for nurses and midwives and calls for strong nursing input to be successful.

# **Technical Discussion on Roles of Nursing and Midwifery Profession in Tackling NCDs**

## Introduction of speakers by Chair of Session

Lillian Bondo opened the technical discussion focusing on the fight against obesity and sedentary lifestyle through an inter-professional approach.

#### **Presentations and Panel Discussion**

The first presentation was made by Hanne Kristine Hegaard, Midwife, Ph.D., from the Research Department for Women and Children Health, Rigshospital, Denmark, who presented an interprofessional intervention study, "Mums on The Move". The study succeeded in showing that moderate exercise during pregnancy leads to a greater well-being during and after the pregnancy. Examples for evidence are less pain in the lower back during and greater weight loss after the pregnancy.

The second presentation was given by Lene Witte, CEO of the Danish Rheumatism Association, Denmark, on the topic: "How can a patient association be a part of an inter-professional approach to pregnant women?" The speaker outlined the Danish Rheumatism Association's strengths to influence policy makers to prioritize the prevention and treatment of rheumatic diseases. Specific reference was made to a project in Randers, Denmark, aiming at increasing the physical activity among pregnant women in order to prevent lower back or pelvis pain and develop new ways of preventing lower back pain as part of a comprehensive communication strategy.

The third presentation was made by Elliot Berry, MD, Professor, from the Braun School of Public Health of the Hebrew University's Hadassah Medical School in Jerusalem, Israel. Dr Berry delivered a presentation called "Tell me your socio-type and I will tell you what you weigh" dealing with scientific results on combatting obesity. The main findings were primarily that obesity is a normal response to an abnormal socio-typical environment, education and culture, and secondly that

understanding a person's socio-type is the key to influence a change in behavior, lifestyle and coping mechanisms of that individual.

Following the presentations, Lillian Bondo invited the three presenters and the members of the EFNNMA Steering Committee to form a panel for a subsequent discussion on "reflections by the Nursing and Midwifery Association on examples of good practices and current challenges facing nursing and midwifery".

The discussion focused on the role of nurses and midwives in combating NCDs. Since the topic of NCDs is a current focus and priority of most health systems, it is highly relevant for EFNNMA. As stated by an ICN representative, the medical model for addressing NCDs has missed the opportunity for optimal nursing input so far due to inadequate assignments of doctors designating nurses the role of an assistant to the doctor. This is less of a case for midwives. According to the ICN representative, the present medical model for addressing NDC is outdated.

A paradigm shift concerning NCDs has taken place which moves "NCD thinking" from curative services in hospital settings to community based services including home based care and outpatient departments. This shift is a great chance for nurses to manifest the profession as key provider of services in the prevention of NCDs, a care provider and a key driving force behind behavior and life style modification. In line with this, the ICN has established a collaboration with the John Hopkins University on a project entitled "Nurses lead in NCD prevention" which aims at developing materials for behavior modification and related assessment tools.

However, the challenge to convince Health Boards and Ministries of Health of the benefits of nurses and midwives in combating NCDs, and to find evidence for these benefits, remains. Thus, it is a priority to initiate and fund research aimed at gathering evidence that services for behavior and lifestyle change provided by nurses and midwives help to cut health expenditures. Similar research should also be conducted to determine possible cost savings related to care for people living with NCDs alternate to hospitalization. It should be a further priority of the EFNNMA and individual associations to foster the political will and recognition among governments to implement community services and to fund the research initiatives mentioned above.

Participants were inspired by the guest speakers and suggested that the findings presented by Elliot Berry should be used to reconsider and redefine the roles of nurses and midwives. Emphasis should be placed on reintroducing the concept of "self care management" and placing more responsibility on the individual for their own health. Developing roles for nurses and midwives in cross-generational community interventions, where public-private partnerships are being endorsed, will also be of high priority given that many home based care services are being provided by private organizations due to the lack of resources among governments.

Nursing and midwifery education should be further geared towards community services, including home based care, in order to establish a more comprehensive understanding among future nursing and midwifery professionals.

#### Examples of good practise included:

- An outpatient department in Bulgaria with maternal and child health services that endorses health promotion and disease prevention in children from the age of 0 to 3 years of age.
- The "54 Cope Street project" in the United Kingdom which teaches women during and after the pregnancy how to prepare nutritious meals for themselves.
- The introduction of "home assistance" in Denmark, a new component of home based care, in which municipalities support services aimed at the rehabilitation and life style modifications, the promotion of exercise and weight loss. Families who need extra support are visited by a Public Health Visitor (a nurse) at home who makes a diagnosis and refers to specialists if needed. Community centres have been established to further support this effort.

The discussion concluded that if nurses and midwives wish to initiate for a shift from curative services to community based services for NCD, it's necessary to coordinate action and speak with a common voice.

## **Technical Discussions Related to the Regional Committee (RC62) Agenda**

## **Introduction of speakers**

Lillian Bondo opened the technical discussion which focused on the European Action Plan (EAP) and issues related to assuring a competent public health workforce, including roles of nursing and midwifery personnel.

#### **Presentations and Panel Discussion**

Hans Kluge, DSP Director, started the technical discussion by providing a comprehensive presentation on issues related to the upcoming RC62 in Malta from 10 to 13 September. Its focus will be on the new European policy framework Health 2020, the European Action Plan for Strengthening Public Health Services and Capacities, and the European Strategy on Healthy Aging. Hans Kluge addressed the issue of the disease burden in the WHO European Region. The main trends show consistent improvements in health. The major disease burden in the European Region, cardiovascular diseases, remains the major cause of premature deaths in Europe whereas cancers represent only the second most frequent group. Since some NCDs can be prevented, the Regional Office focuses its NCD strategy on life style modification targeting tobacco, diet, physical activity, alcohol and the promotion of healthy choices. Other related efforts aim at strengthening health systems including primary health care, health information and surveillance, developing healthy settings and environments and ensuring attention to special needs and disadvantaged populations. Hans Kluge elaborated on the main elements of the EAP, which distinguishes between actions for Member States, the Regional Office and partner organizations.

Health 2020: The European policy for health and well-being was presented, detailing changes in disease burden over the past decade call for the definition of new overall directions and a strategic view of health systems. Health 2020 provides a value-based action-oriented policy framework primarily addressing Ministries of Health. It contains four main components: health equity, health governance, economy of prevention and public health. Regarding HSS, a new operational approach has been developed by DSP, composed of three pillars on the national level:

- clarifying expected results related to priority diseases and conditions
- listing the core services to be provided to achieve expected results
- removing health system bottlenecks for delivering services and achieving results, in terms of e.g. population and individual level service delivery, governance, health financing, resource generation, including Human Resources for Health (HRH) and technology.

Finally, Hans Kluge addressed the issue of "Active Healthy Aging", the slogan of the year 2012. 2012 also marks the 10-year anniversary of the Madrid International Plan of Action on Ageing. Furthermore, a ministerial conference of the United Nations Economic Commission for Europe will take place in Vienna in September 2012.

The work of the Regional Office on ageing complements and overlaps with the work of the European Commission (EC). A cooperation under the EC European Innovation Partnership on Active and Healthy Ageing is presently under discussion, particularly on tools for age-friendly policies for cities and communities. This EC cooperation would build on the work of the Regional Committee on the EURO Healthy Cities Network.

Galina Perfilieva, Programme Manager, Human Resources for Health, followed Hans Kluge by presenting the major implications of the WHO Global Code of Practice on International Recruitment of Health Personnel (the Code) for the European Region.

The Code was adopted by the 193 Member States at the sixty-third World Health Assembly in May 2010. It establishes and promotes voluntary principles and practices for the ethical international recruitment of health personnel and the strengthening of health systems. The Code goes beyond setting norms for recruitment practices and addresses that issue in broader context of the need for stronger and more self-reliant health systems. It promotes the planning of the education and training of health workers to meet future service needs and the development of working environments facilitating the retention of personnel. The Code also proposes a framework for global dialogue and cooperation to address challenges associated with the international mobility of health professionals; it also offers examples of good practices such as integration programmes of migrant health workers, bilateral agreements to regulate migration flows, and strategies to promote and support circular migration to the benefit of sending and receiving countries.

In adopting the Code, countries committed to taking its principles and recommendations into account when developing and implementing health sector employment policies and practices. This includes promoting and implementing fair labour practices for all health personnel and striving to meet their needs through appropriate education, recruitment, deployment and retention health workforce policies.

The WHO Regional Office for Europe has had a leading role at global level in developing the Code and will play a strong supportive role in implementing it in the Region. The EFNNMA contributed to the process of developing the Code, and its role in the implementation of the Code will be extremely important in the coming years, both at national and regional levels.

The Code sets out a critical and central implementation role for Member States and all other stakeholders at national level including recruiters, employers, professional associations and non-governmental civil society organizations. WHO is committed to supporting this process; the Regional Office for Europe will keep monitoring the progress and constraints in implementation of the Code through a National Reporting self-assessment tool covering the following topics: legal rights of migrants, bilateral agreements, research on health personnel mobility, statistics, and regulation of authorization to practice. The Regional Office is working with designated national authorities and providing technical assistance to Member States in developing their monitoring and planning functions and in strengthening national capacity in health workforce planning.

Galina Perfilieva informed the meeting participants that the Regional Office has developed a roadmap and a biennial work plan for 2012-2013 with focus on fully and effectively implementing the Code through a series of actions. The actions reflect and respond to countries needs, aiming at supporting Member States in developing their own responses to human resources challenges and they are aligned with the global initiatives on health workforce and the Regional Health 2020 policy framework. The action plan is built on the actions structured in the four key strategic areas:

- 1. Advocate, communicate and mobilize resources
- 2. Build the information base for human resources for health
- 3. Invest strategically in human resources for health development
- 4. Align human resources for health policies and interventions.

The Action plan will be presented at the Technical briefing during the Regional Committee in September 2012, the Regional Office is working on the toolkit for strengthening country health workforce and a policy brief on implementation the Code in member States of the WHO European region.

Following the two presentations Lillian Bondo invited four members of EFNNMA, the representatives of Greece and Portugal, as well as representatives of the ICN and the ICM to form a panel for a subsequent discussion on the topic.

Members of EFNNMA began to discuss the issue of migration, and as pointed out by both ICN and ICM representatives; it is predominantly nurses that migrate, not to large extent midwives. It is the right of all health workers to migrate. However, the *sustainability* of the national health workforce should be endorsed as a national strategy, and governments should discontinue educating nurses for export purposes. Governments should encourage, advise and motivate their health personnel to stay in country.

Migration patterns are being monitored closely, especially the pull and push factors which determine individual choices of nurses. The ICN is collecting evidence on various retention

strategies. Currently, the ICN is testing the offering loans as part of a retention strategy. However, there are challenges related to collecting data on nursing migration flows, because of lack of common definitions of nurses in Member States. It was suggested to use a harmonized set of indicators and definitions for all professional categories of nursing personnel in the Region based on competencies; this approach should be implemented throughout the Region to facilitate more accurate data collection. Furthermore, there is no protection of the nurse title. The term"nursing personnel" is an insufficient category and should be changed. It was further suggested that terms like Nurse Aid and Auxiliary Nurse should fall into the category entitled "Nursing Assistant".

In order to improve the safety of migrating nurses, it was suggested that Member States create a network involving professional organizations for nurses and immigration authorities to facilitate migration in a more secure and coordinated manner.

Countries have taken advantage of the economic downturn to implement early retirement of nurses in order to save staff expenses. But staffing needs are still increasing in view of the increase in NCD and in line with the ageing of the population. As it was pointed out by EFNNMA members, the Regional Office has an obligation to address the current and rapidly increasing shortage in the nursing work force.

More practically speaking, the Code needs to be translated into concrete action and the process of implementing the Code needs to engage the key persons responsible for migration within the national authorities of the Member States. It was considered a shortcoming of the Code that there were no elaborations on how the source country is compensated when health personnel migrates.

Subsequently, the discussion raised the subject of nursing and midwifery education. As health systems are increasingly shifting the balance from curative services to community services, the challenge is to ensure a competent public health workforce that is prepared to take over new tasks and responsibilities. As part of the effort to educate the midwifery workforce to become a public health workforce, the ICM has launched reports on new skills and competencies for Public Health, including healthy pregnancies and positive parenting, which are available on their web site.

The ICN reminded EFNNMA that the Munich Declaration from 2000 endorsed the concept of the Family Health Nurse (FHN) as a way to achieve the "Health for all" goals. The FHN had a threefold focus: the individual, the family and the community. Along with the Family Physician role supported by the Regional Office, it would be important to consider a rejuvenation of the Family Health Nurse in the context of a public health team.

The Chair informed the members that the European Action Plan for Strengthening Public Health Services and Capacities (EAP) had been circulated to all members for comments. So far comments have been received by the United Kingdom's Royal College of Nursing.

The draft EAP is also in consultation with a range of other partners, including EuroHealth Net, the European Public Health Association (EUPHA) and the Association of Schools of Public Health in the European Region (ASPHER).

However, the present EAP needs much stronger input on nursing and midwifery, particularly on the section "Ensuring a sufficient and competent public health workforce". Action steps need to be included. In general, the EAP should make more reference to nursing and midwifery personnel and their contribution to different components of the action plan. It would therefore be important to seek more input from EFNNMA members, the EFN, the European Midwives Association (EMA), CNOs and the WHO collaborating centres for nursing and midwifery. The final draft EAP will be presented for endorsement during the RC62 in September 2012.

It was agreed that EFNNMA secretariat will collect the comments and contributions to submit timely to the Regional Office. It will be considered if EFNNMA will put forward a statement at the RC62 to endorse the contributions of nurses and midwives to public health services. EFNNMA concluded that it would seek strong input on nursing and midwifery to the EAP in order to foster alignment and coordinated action. Also mentioned was EFNNMA and the Regional Office should work closely with CNOs and the EFN on establishing a common agenda and policy platform which would consist of several selected key priority issues. During the past two days, the following aspects were identified as key nursing and midwifery issues:

- To promote the Family Health Nurse as part of the Public Health team
- To promote sustainability in the nursing and midwifery workforce
- To endorse Self Care Management (particularly in the context of NCD and as a concept the nursing and midwifery workforce can deliver)
- To use positive deviance as an angle for research on coping mechanisms for NCDs

#### Dates and venue of the next meeting

The next EFNNMA Annual Meeting should be arranged in line with the Regional CNOs meeting. The WHO collaborating centres should also be invited to the next EFNNMA meeting. The next EFNNMA meeting might take place in March or April 2013. Additional information will be provided to EFNNMA members as soon as details are confirmed.

## **Closing Session**

Jose Martin-Moreno drew the attention of the members of the EFNNMA to the hedgehog concept, one of the underlying principles of the new DSP strategy for HSS. This principle will support the nursing and midwifery activities within the DSP. He emphasized that the Regional Office would like to continue working with EFNNMA to foster synergy and even intensify its collaboration with

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its partners on nursing and midwifery. In order to do so, EFNNMA needs to prioritize and streamline its agenda towards the priority issues embedded in the strategic objectives of the DSP.

Lillian Bondo stated that the future structure of the EFNNMA needs re-assessment and assured the members that the EFNNMA Steering Group is committed to offering a range of options for changing the operating principles of EFNNMA which will be considered at the next EFNNMA meeting.

The membership fees for 2012 will be collected among the members and the future budget administration of EFNNMA will be handled by the Irish Nurses Association which has kindly offered its assistance. The Chair thanked the Regional Office for its support in organizing the meeting and invited an Association to hold the next meeting.

Ekaterina Gulie, the President of the Association of Nurses of Romania, was welcomed as a new member of the Steering Committee. Ekaterina Gulie complimented the Steering Committee, on its hard work and informed the members that the development of community nursing is a priority in Romania. The role and function of Family Health Nurses will be endorsed as part of this effort.

The meeting was adjourned with thanks to everyone for their active participation and contributions over the past two days.

#### Annex 1

## LIST OF PARTICIPANTS

## Bulgaria

Ms Milka Atanasova Vasileva Vice President Bulgarian Association of Health Professionals in Nursing (BAHPN)

### **Cyprus**

Mr Stavros Vryonides Board Member Cyprus Nurses and Midwives Association (CYNMA)

## **Czech Republic**

Ms Karolina Moravcova President Nursing Association of Czech Republic

#### **Denmark**

Ms Lillian Bondo President Danish Association of Midwives

Ms Tine Lyngholm Head of Professional Development Danish Nurses Organization

Ms Bente Sivertsen Professional Chief Nursing Officer Danish Nurses Organization Sankt Annæ Plads 30 DK-1018 Copenhagen K

#### Greece

Ms Eleni Kyritsi Koukoulari President Hellenic Nurses Association Sixteenth Annual Meeting of the European Forum of National Nursing and Midwifery Associations and WHO page 16

Mr Evangelos Dousis General Secretary Hellenic Nurses Association Representative European Federation of Nurses Associations (EFN)

## Germany

Ms Andrea Weskamm Senior Consultant German Nurses Association

#### **Ireland**

Ms Sheila Dickson President Irish Nurses and Midwives Association

## **Italy**

Ms Cecilia Sironi Nursing Association

## Norway

Ms Marit Heiberg President The Norwegian Association of Midwives

Ms Eva Sommerseth President Midwife Group, Norwegian Nurses Association

## **Portugal**

Mr Antonio Manuel Vieira Alves da Silva Ordem dos Enfermeiros International Affairs Department

Mr Vítor Varela Ordem dos Enfermeiros Professional College Of Maternal Health and Obstetrics Nursing (Midwifery) Mrs Benvinda Bento FNOPE / APEO Ordem dos Enfermeiros

Mrs. Tânia Graça Ordem dos Enfermeiros International Affairs Department

## Republic of Moldova

Ms Ala Grecu Association of Nurses of the Republic of Moldova

Ms Victoria Grecu Association of Nurses of the Republic of Moldova

#### Romania

Ms Ekaterina Gulie President Association of Nurses of Romania

#### **Russian Federation**

Ms Valentina Sarkisova President Russian Nursing Association

Ms Natalia Serebrennikova Manager, International Relations Russian Nursing Association

#### Sweden

Ms Kerstin Belfrage Advisor Swedish Association of Health Professionals

#### **Switzerland**

Ms Roswitha Koch Swiss Nurses Association

#### **United Kingdom of Great Britain and Northern Ireland**

Ms Frances Day-Stirk Director Learning, Research and Practice Development International Office The Royal College of Midwives of the UK President, ICM

Mr Steve Jamieson Royal College of Nursing

#### **Observers**

Dr Tesfamicael Ghebrehiwet Consultant, Nursing and Health Policy International Council of Nurses

## **Temporary Advisers**

Professor Elliot Berry
Head
WHO Collaborating Centre for HRH
Director
Department of Human Nutrition and Metabolism
Braun School of Public Health
Jerusalem

Ms Hanne Hegaard Research Unit of the National Hospital of Denmark

Ms Lene Svendsen Rapporteur

Ms Lene Witte Director Danish Rheumatism Association

## **World Health Organization**

## **Regional Office for Europe**

Dr Jose M Martin-Moreno, Director, Programme Management Dr Hans Kluge Director, Division of Health Systems and Public Health Special Representative of the Regional Director on M/XDR-TB

Dr Galina Perfilieva Programme Manager Human Resources for Health Programme

Ms Elena Galmond Programme Assistant Human Resources for Health Programme

## Annex 2

## **PROGRAMME**

Thursday, 29 Ma	rch 2012
12.30 – 13.00	Registration
	Opening Session
13.00 – 13.10	Welcoming address  Lillian Bondo, Chair EFNNMA  Jose Martin-Moreno, Director of Programme Management WHO Europe
13.10 – 13.20	Election of Chairperson of the Meeting and appointment of Rapporteur Adoption of Agenda and Programme  Valentina Sarkisova, Vice Chair EFNNMA
13.20 – 13.50	Business reports and updates (incl. questions and answers)  Lillian Bondo, Chair EFNNMA  Sheila Dickson, Treasurer EFNNMA
13.50 – 14.20	Financial update Sheila Dickson, Treasurer EFNNMA
14.20 – 14.30	WHO Europe update  Hans Kluge, Director, Health Systems and Public Health/WHO Europe
14.30 – 15.00	Coffee/tea break (sponsored by Swiss Nursing Association)
	Technical Discussions on Roles of Nursing and Midwifery Profession in Tackling Non-Communicable Diseases (NCD)
15.00 – 16.45	Fighting obesity and sedentary lifestyle through an inter- professional approach Guest speakers – Hanne Hegaard, RM, PhD, Research Unit of the National Hospital of Denmark, Lene Witte, Director of the Danish Rheumatism Association Facilitated by Lillian Bondo, Chair EFNNMA
	"Tell me your socio-type and I will tell you what you weigh" – implications for combating obesity  Guest speaker- Elliot Berry, MD, FRCP, Head, WHO Collaborating Centre for HRH, Director, Department of Human Nutrition and Metabolism, Braun School of Public Health, Jerusalem  Facilitated by Antonio Manuel Silva, Ordem dos Enfermeiros, Portugal

16.45 – 17.45 Reflections by nursing and midwifery associations on examples of good practices and current challenges facing nursing and midwifery. Setting up open discussions via e-mail mail groups

Facilitated panel discussion with panellists by Steering Committee members

17.45 – 18.00 Conclusions and closure of the day *Lillian Bondo, Chair EFNNMA* 

#### Friday, 30 March 2012

#### Technical Discussions related to the RC62 agenda

09.00 – 09.30 European Action Plan for Strengthening Public Health Capacities and Services (RC62 agenda item)

Hans Kluge, Director, Health Systems and Public Health/WHO Europe

09.30 – 10.30 Assuring a competent public health workforce

Galina Perfilieva, Programme Manager, Human Resources for

Health Programme/ WHO Europe

Reflecting on workforce issues, what would be the roles of NMA's?

Round Table discussion

10.30 - 11.00 Coffee/tea break

11.00 – 11.45 Recommendations and inputs to the European Action Plan for Strengthening Public Health Capacities and Services (For the Steering committee to finalize prior to the RC62)

#### 11.45 – 12.00 Conclusions and closure of the meeting

Lillian Bondo, Chair EFNNMA Jose Martin-Moreno, Director of Programme Management/ WHO Europe

## Annex 3

# Financial overview of membership fees paid for 2011 to EFNNMA Secretariat (received as of $29 \ March \ 2012)$

Country	Amount USD	Organization
AUT	1.430	Austrian Nurses Association
BUL	243	Bulgarian Nursing and Midwifery Association
DEN	1.455	Danish Nursing Association
DEN	1.447	Danish Midwifery Association
IRE	1.213	Irish Nursing and Midwifery Association
POR	1.455	Portuguese Nursing Association
ROM	121	Romanian Nursing Association
RUS	606	Russian Nursing Association
Total	7.970	