

To the European Commission.  
Directorate-general for Health and Consumer Protection  
Unit C/2 "Health Information"  
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Subject; Response on the Green Paper Mental Health Strategy EU  
Date; Arnhem, Netherlands 26-05-2006

Dear sir and madam.

HORATIO is the association for European Psychiatric Nurses. We are very strongly associated with the EFN, the European Federation for Nursing associations and the ESNO, the European Specialist Nursing Organisation and work together on subject within our fields of interest.

Regarding the fact that Mental Health is a field strongly related to our professionals around Europe, we have been following the consultation process with great interest. The Green paper has been an important subject in our discussions in the past half year.

We have been in de great opportunity being present in the fist consultation meeting in December organised by MHE-SME. In this meeting it became clear that this initiative is a great opportunity in our contribution to improve the lives of our European citizens on Mental Health. In this document you find our contribution as a result from our discussion in our association.

You're sincerely,

Ber Oomen, Secretary General

The following represents the areas of consideration and recommended issues from HORATIO, European Psychiatric Nurses. The points raised are those suggested by its international Board and European member organisations for Psychiatric Nursing representative bodies from around Europe, both EU and non-EU.

HORATIO welcomes the initiative to develop a unified strategy for mental health care support throughout all EU member states, for, representing the clinical discipline who have most contact with those suffering mental illness, it recognises that unless proper forms of investment are made in both the service structures and human resources necessary for appropriate support mental ill health will continue to spiral out of control. The consequences for this are incalculable and unacceptable. It supports both the notion of developing correctly resourced community services and reducing the necessity for formal institutional admissions (two areas it considers to be linked). The recommendations for this submission relate primarily to the domain of psychiatric nursing though HORATIO recognises this to be a component part of the wider mental health agenda. However, for the EU to deliver the strategic principles outlined within the Green Paper the following must be addressed.

#### Area 1.

Promote and facilitate information about effective Psychiatric Nursing within Europe.

- Paying special interest in those countries where psychiatric nursing has had bad publicity because they have been used in previous phases as a politically motivated instrument
- The development and/or support of knowledge systems to share research on treatments, therapies and clinical practice (and, leadership, education, roles and responsibilities)
  - This is external to the existing medical networks such as the Cochrane Initiative
- Practitioners need to receive equal recognition for working in mental health as those working in general medical care
  - Build up professional confidences

#### Area 2.

Represent the special interests of Psychiatric Nurses in Europe and collaborate with stake holding nursing organisations to promote the impact of the specialist care they offer.

- Psychiatric Nursing should be on every Mental Health agenda within the various EU debating chambers
- Politicians should confer directly with Psychiatric Nursing representatives (HORATIO) for intelligence concerning the delivery of

direct mental health care and not assume professional knowledge is not otherwise available to them

#### Area 3.

Work with European Stakeholder organisations to advance the art and science of Psychiatric nursing within Europe by

- Education – development of standards – across all member states
- Supporting the development and advancement of dedicated psychiatric nursing education
- Facilitating the transfer of knowledge from and to local groups of psychiatric nurses

#### Area 4.

Improve the recognition of Psychiatric nursing within Europe, within all fields of health care by considering the following:

- Qualified psychiatric nurses are essential for the delivery of quality mental health care and employers should be encouraged to avoid employing general and/or generic nurses to resource mental health services. Care quality, care options and clinical diversity will all suffer (and as such the care offered to the patient) if non-specialists nurses control the psychiatric nursing agenda
- The support for the development of evidence based mental health care nursing throughout Europe
- Supporting initiatives that develop and promote specialities within the field of Psychiatric Nursing (such as community-care, addiction, elderly, forensic)
- Seeking to promote one name for the discipline through the EU – currently psychiatric nursing is the preferred title for the majority of nations with only a few, more powerful ones, opting for mental health nursing – a title that is politically inspired and patently inappropriate as all of the people nursed by these nurses are ill, not well.

#### Area 5.

Contribute to effective cooperation between health professionals, organisations institutions, agencies, charities and groups who have an interest in the care of mentally ill patients.

- Get involvement and collaboration with bodies conducting their own international research or having access to it (universities, research organisations, WHO Europe or EFN having access to EU research centre) and facilitate the dissemination of the studies among member organizations
- Use the WHO European Curriculum for Psychiatric Nursing as the agreed source for core educational developments throughout Europe

#### Area 6.

Inform the development of standards for Education and Continuing Competence

- Further collaboration with European universities could be developed as necessary in order to facilitate members' access of scholarships, exchange programmes or funding (for example EU) for educational purposes
- Influence the harmonisation of special education programs in Psychiatric nursing within Europe (possibly through both the WHO and the European Tuning Project)
- Ensure, either through direct involvement or the availability of specialist educational funds, that continuing professional education programmes for psychiatric nurses are identified as essential for European governing and regulatory bodies
- Contribute to international student exchange programs for psychiatric nursing
- Seek to support pan-European recognition for qualifications
  - This applies to the recognition of specialist competencies for all mental health practitioners and not just nurses
  - Need information about the levels of education and course information
  - Need to consider competencies in practice and not just curricula contents

#### Area 7.

Strengthen nurse leadership in mental health, through:

- Professional development of key care staff and nurses in management and research positions – to work with existing bodies to achieve developmental continuity (e.g. ICN Mental Health Leadership program)
- Support psychiatric nurses and students from around Europe to participate in the HORATIO organisation, to use it as a field to improve/develop leadership skills and learn about International structures for future opportunities

#### Area 8.

Provide conferences, congresses and continuing education opportunities for Psychiatric nurses.

- Currently it is extremely difficult for nurses in some of the new member states to access conferencing activities that are both costly and, often, organised by institutions in the Western and Northern parts of the Community. The EU should be encouraged to look at the provision of bursaries for these nurses that can be used to advance psychiatric health care for the se developing nations
- The EU should work with HORATIO to promote psychiatric nursing conferences, seminars and symposia within the Community

#### Area 9.

Link and network with similar national/international organisations external to the European community (i.e. USA, Australasia, and Africa).

- Very often problems faced by member states have been addressed differently, and very often successfully, outside of the Community. Formal links between the EU and these countries might speed up knowledge transfer and improve critical decision making, especially by psychiatric nurses

In addition to the above HORATIO would respond to the items of the Green Paper specifically with the following observations:

- Development of strategies for MH promotion
- Research designed to develop strategies for suicide prevention
- Encourage new ideas and initiatives that have been proven to have worth for different psychiatric conditions (e.g. early interventions in psychosis, psychosocial interventions with families)
- Recovery must be central to the philosophy of mental health care – we should no longer simply accept the notion that people do not recover from mental health problems
- Community care must be built on good structures and lessons need to be learnt from member states where this has been done successfully – there is no need to re-invent the wheel

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