



Irish Nurses Organisation
Cumann na nAltraí Gaelacha

PROFESSIONAL DEVELOPMENT CENTRE

The Whitworth Building
North Brunswick Street, Dublin 7
Tel: 01 6640600 Fax: 01 6622334
E-mail: ino@ino.ie <http://www.ino.ie>
<http://www.nurse2nurse.ie>

Commissioner Markos Kyprianou
European Commission
DG Health and Consumer Protection
Health Services Consultation
B-1049 Brussels
Belgium

30 January 2007

Concerning: *Consultation Regarding Community Action on Health Services B 232 8/102.*

Dear Commissioner,

The Irish Nurses Organisation welcomes the opportunity to provide feedback and comment on the *Consultation Regarding Community Action on Health Services B 232 8/102*. The Irish Nurses Organisation commends the work of the Health and Consumer Protection Directorate-General in addressing such complex issues. The Irish Nurses Organisation fully endorses the submission on the *Consultation Regarding Community Action on Health Services* by the European Federation of Nurses Associations.

Background

The Irish Nurses Organisation is Ireland's largest Professional Union for Nurses and Midwives with over 35,000 members. Founded in 1919 the Irish Nurses Organisation was affiliated to the International Council of Nurses, and in 1972 was a founder member of the Standing Committee of Nurses in the European Union now known as the European Federation of Nurses Associations. Ireland currently holds the presidency of the European Federation of Nurses Associations.

In brief, the Irish Nurses Organisation:

- negotiates on pay and conditions at national and local level, and represented members locally on all aspects employment conditions and related matters
- strives to ensure the educational and professional needs of nurses and midwives are met through the provision of a wide range of courses and programmes up to Masters Degree Level
- ensures the nursing and midwifery perspective is included in policy formulation and application through constant dialogue at political, national and international level.

General points

The Irish Nurses Organisation believes that:

- In promoting and ensuring high quality patient care the approach must be underpinned by the common values and principles in EU health systems as agreed by the Council of Ministers.
- A central requirement to ensuring access, quality and financial sustainability of patient mobility is the development of a standardised data base across Europe to provide accurate, reliable, up-to-date and comparable information in order to analyse patient and healthcare professional mobility and the impact on healthcare services.
- Identifying national networks and responsible authorities in each Member States is essential to managing healthcare resources and implementing standardised process across Europe.
- Establishing a central body to work with national authorities in order to address for example standards of care, quality control, common indicators, patient safety, continuous professional development and a complaints mechanism is required.
- Identifying lines of accountability for the continuity of patient care that is initiated in one jurisdiction and requires follow-up care on returning to their country of origin is essential.
- The distinction between health and social care needs to be clarified as in many Member States a great deal of healthcare, especially elderly care, is delivered within social care, which is outside the scope of this consultation.
- A European-wide commitment to ethical principles and code of conduct on mobility of all health professionals must be agreed.

About specific issues

Data issues

- An essential requirement to support patient mobility is the development of a standardised data base across Europe to provide accurate, reliable, up-to-date and comparable information in order to analyse patient movement and support the continuous improvement of services.
- Data collection rules and definitions must be standard to enable interpretation and effective use of information.
- Forecasting patient mobility correctly on sound information is essential.
- The movement of patients is expected to grow therefore tracking of the numbers of patients moving will provide information to analyse the impact on all health services.
- Professional mobility will also have an impact on service delivery therefore needs to be factored in when analysing patient mobility.
- The movement of patients has an impact on internal entitlements within the host country replacing entitlements in the home country.
- At a certain level patient mobility may indicate that there is health service delivery problem in a particular country.

Legal certainty

- Legal certainty is required around definitions (for example, elective care) and reimbursement issues.
- Coordination of regulations in regard to social security and health is required.
- Clarity on liability issues and responsibilities if things go wrong, including compensation arrangements.
- Patient rights, for example consent, entitlements, access, choice and complaints procedures need clarification.

Professional mobility

The free movement of health professionals is addressed in European Union legislation. However, there are many practical issues that arise from professional mobility that need addressing, for example:

- Transferability of pensions, insurance and social insurance.
- Standardisation of professional competencies and credentialing of education programmes.
- Accessibility to professional registration records.
- Establishment of a data base to track professional mobility.

Additional points

Consideration should be given to:

- Establishing a European Health Ombudsman.
- Agreeing shared values in health delivery.
- Establishing European clinical guidelines with a bench marking agency.
- Developing a model of European health care.
- Establishing a European patient safety agency.
- Systems to share health care knowledge.

Questions raised for consideration

The Irish Nurses Organisation has identified a number of questions that should be considered when promoting mobility of patients while ensuring accessibility, quality and financial sustainability of healthcare systems throughout Europe.

- What is an inappropriate time period for an individual to be waiting on a list for treatment in any Member State?
- Who is responsible for the continuity of patient care after they have had treatment in another Member State?
- How will the communication be facilitated for patients and their families if they do not speak the language of the country that treatment is provided and will an interpreter be provided?
- Who will pay for the additional requirements (such as interpreters) to support the patient receiving treatment in another country and how will it be organised?
- Will patients seeking treatment outside their country receive priority over patient in the host country?
- Will the movement of patients pose an additional burden on health services?
- How will the outcomes of patients who receive treatment in another Member State be audited?

- How will information about treatment options, health services and standards be disseminated to allow for informed choice?
- How will health services and health professionals coming into a country on a temporary basis be regulated? In addition, which standards will apply for example, those of the country of origin or of the country where the service is delivered.

Once on behalf of the Irish Nurses Organisation I wish to thank you for the opportunity to participate in the consultation process. If you require clarification or further information please do not hesitate to contact me.

Yours sincerely

Annette Kennedy
Director of Professional Development
Irish Nurses Organisation

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