ANNUAL REPORT 2017

European Specialist Nurses Organisations - ESNO
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1 - Introduction

It’s my pleasure to write the introduction for the 2017 ESNO annual report, which frames the activities and achievements of the last twelve months and outlines future activities.

ESNO emerged ten years ago with a modest membership of specialist nursing organisations. It has now grown to include seventeen specialist organisations as members or associates. It is with this growing number of representatives that the ESNO message is being heard further and wider, allowing us to contribute to public health in specialist nursing across Europe.

The initial priority for ESNO was to develop the first constitution to cement the foundations of the organisation. Building from here, ESNO has been developing a specialist nursing framework that can, and will, be acknowledged and integrated by the member countries nursing professions. ESNO has fought to obtain recognition for the ‘specialist nurse’ as a significant and standalone profession. ESNO has been working tirelessly to enhance the status, by pursuing formal enquiry into whether developing an educational framework would enable entry into the Professional Qualification Framework.\(^1\)

By the end of 2017 we established committees, participated in three Joint Actions under the European Commission, participate in OECD activities, developed E-Books on the principles of nursing, started the educational mapping of the specialist nurse across different countries, and contributed actively in EMA working groups. These activities will be further explored in this report.

ESNO will continue to support the development of the specialist nurse role, which will ultimately positively impact on the quality of care provided to our patients. I am honoured and proud to be a member of such a pioneering organisation.

Pascal Rod, Vice President ESNO

Brussels: 26 March 2018

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\(^1\) https://ec.europa.eu/education/policy/strategic-framework/skills-qualifications_en
**2 - ESNO today and specialist nursing in the future**

ESNO has evolved from a start-up NGO 10 years ago, to a well-established European Nursing Association with an office in Brussels. In all European nations we aim to use all available means to meet the highest possible standard of care for all patients, regardless of their condition or life stage. We also uphold the culture of Europe as an open and collaborative environment and believe that borders should not be a barrier to high-quality care. We do, however, operate in a setting of increasing costs and, sometimes, a restrictive environment in prioritising health care.

ESNO aims to be a forum to explore issues of mutual concern as well as exchange knowledge, share evidence, ideas, and generate solutions on nurse education and Evidence Based Practice. While having a great spectrum of Nurses Specialty fields, they all are involved in issue transversal throughout the specialties such as; education, nursing statistics, paediatric, women's Healthcare and pregnancy, research and development, patient safety & occupational health, management and administration and informatics which reflect current education research, developments and European innovations and as evidenced in both.

ESNO foresees that Health economics will have more prominent position related to the financing and delivery of health services and the role of such services and other personal decisions in contributing to personal health. Today there is no common metric to measure the growth of a nurse’s research field but two alternative measures are among those that can be used to gauge the tremendous expansion of the field of nursing and healthcare economics. First, the number of PhDs awarded annually in nursing and healthcare economics has increased rapidly over time. In Europe, the number of dissertations on health economics increased eleven-fold from 1985 to 2014. By contrast, the number of dissertations in all fields of economics nursing has been increased only 2.5 times during the same period.

In this setting the nursing workforce is despite all progress under threat. Despite the willingness to give nurses a respected and well-regarded position we see a stagnation in salaries, an ageing cohort and a worrying number of nurses leaving countries that desperately need them.

However, we are glad to see nursing become increasingly respected as a profession, with nurses being taught and trained by nursing and non-nursing professionals and are now building a unique body of knowledge for both general and specialist nurses. As ESNO enjoys relationships with nurses from varied backgrounds, we hope to be viewed as a hub for the exchange of best practice and evidence based across specialism.
3 - What we do

**a-Harmonisation of Training**

ESNO aims to complete a training framework that incorporates a recognisable set of fit for purpose across Europe. The goal is to increase the competitiveness of the specialist nurse through the creation and acceptance of this framework, which will ultimately not only positively impact the specialist nurses concerned, but also improve patient care.

**b-Accreditation**

ESNO supports accrediting educational activities, such as the European Accreditation Network (EAN) and continued professional development (CPD), to encourage specialist nurses to continually improve in their area of specialism. It is envisaged that a credit-based system will support the CPD recognition for participating nurses.

**c-Common Training Framework**

The role of the specialist nurse is still not homogeneously defined across Europe. There is formal training for some specialist nursing, and in some cases embedded in the national legislation however, the current recognition of specialisms, and level of importance of each specialism, varies wildly from country-to-country. To support workforce mobility across European borders, transparency of roles and job requirements is needed, this can be achieved through a Common Training Framework. In 2016, ESNO developed the first draft of a competency framework for specialist nurses, the new education committee will continue this process.

**d-Recognition and mapping study**

The official recognition process for specialist nurses in Europe, under the Directive of Professional Qualification will likely be a long and challenging process. Although, recognition is on the horizon, we expect to experience additional hurdles, such as the European Proportionality Test Directive.

ESNO sees this process as more than one project, due to the complexity of many specialism, national regulations, educations and so on. For this reason, ESNO decided to take it step by step, using one speciality to set the stage with a consortium and an approach that may be followed in the future by other specialities.

This consortium will develop a common training framework for diabetes nursing to set the stage. The framework will standardise the skills and training of nurse specialists across Europe to enhance care quality, improve health care outcomes and reduce care costs.

In 2017 the first step was taken, by starting the mapping process and literature review on diabetes nursing. Over the coming years ESNO has a lot of work to do, starting with Foundation of European Nurses in Diabetes (FEND) and a consortium of partners and stakeholders to seek funds.

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e- Publishing series of books on ‘Principles of Specialist Nurses in Europe’

We hope this series will shape evidence-based practice in Europe, while also integrating lessons learned from other continents. Moreover, we hope they will help to clarify the status of the specialist nurse as an advanced practice nurse. In 2018 the first book will be published on mental health⁴ and it is hoped further books on each speciality will follow.

4 - Health themes

VACCINATION

We observe too often that anti-vaccine movements, based on myths, are increasing and spreading across Europe. Therefore, we believe it is essential to actively educate and inform nurses, contribute to EU initiatives and, if possible, work with other healthcare professionals (HCPs) on the importance of vaccines.

This year, ESNO took part in World Immunization Week and contributed to the development on the Declaration on Vaccination, presentation April 2018. ESNO will also participate in the European Joint Action on Vaccination, initiate a Nurses Information and Communication Guide on Vaccination and collaborate with the community pharmacists.

ANTI-MICROBIAL RESISTANCE (AMR)

Microbial infections are a common issue that can be addressed by a systematic approach of using the correct antibiotic medication, however, it is devastating when such medication cannot be sufficiently used anymore due to resistance and the most common infection becomes life threatening.

Over the past year ESNO has shown support for the need to tackle AMR and concluded that – beside the abundance of activities already going on – there are not enough explicit tools to support nurses to educate, inform and communicate about the issue.

In 2017 ESNO was invited to make an editorial on AMR from the nurse’s perspective in the Parliament Magazine.⁵

In the process ESNO was contacted by the Joint Action on AMR, and the first steps in creating an ‘Nurses Information and Communication Guide on AMR’ were taken. In this guide ESNO wants to be realistic, pragmatic and explicit on what nurses can do. ESNO will also participate in the European AMR Joint Action (WP-8) on the Joined Action on Vaccination and will initiate a Nurses Information and Communication Guideline on Vaccination

5 - European Health Affairs

Good health is a crucial element of European social pillars, and ESNO has experienced a significant call for participation and support for many health issues. The demand for high-quality, sustainable health care is rapidly increasing due to societal expectations to reduce both the health, economic and social impacts of disease and the right citizens have to live in a safe and healthy environment. ESNO has been invited to participate in many platforms:

A) Gastein
ESNO has not been able to participate in Gastein in the past but has followed the activities of the meetings closely and greatly supports this initiative. ESNO will contribute actively in 2018 and in the years to come. https://www.ehfg.org/

B) European Public Health Alliance (EPHA)
ESNO strongly believes that health should be a top priority on the EU social agenda and has contributed in the AMR joint statement. ESNO believes that nurses play a vital role in health, which is why increasing future participation in EPHA is necessary. https://epha.org/

C) European Health Policy Platform
ESNO regards participation in the European Health Public Platform as a vital step to addressing European health issues from the nurse’s perspective. It also gives opportunities to keep up-to-date on developments, as well as participate in, and influence, decisions. https://webgate.ec.europa.eu/hpf/

D) Antisepsis
In December 2017 ESNO was invited to take part in a stakeholder event on enhanced prevention of healthcare-associated infections in the EU. It is time to harmonise skin antisepsis in the EU share best practice and maximise prevention of such infections. 2018 will see a White Paper driving this issue forwards, and ESNO and its members will take part and address this issue from a nurse’s perspective. ECDC

E) Heart Failure
In 2016 ESNO took a supporting role in the Written Declaration on heart failure (110/2016) and campaigned for MEP signatures to raise awareness of the condition and the need to support ‘specialisation and accreditation of training for nurses and allied health professionals’. Even though the required number of signature was not reached to pass the Written Declaration, it was a significant awareness raising campaign in the European Parliament. ESNO remains supportive of the heart failure project and will explore further activities. http://www.hfpolicynetwork.eu/
F) Women’s Health

ESNO was invited to participate in a two-day Women’s Health congress ‘Resetting the Agenda in Women’s Health in Europe’, by the European Institute of Women’s Health. During this meeting gaps were explored by employing a cross-sectoral approach and devising steps to move forward together. The conference objectives were to facilitate expert participation in the European Action Plan for Women’s Health. ESNO believes that there should be more attention on women’s health across the health sector and is committed to addressing this where possible. https://eurohealth.ie/

6 - ESNO committees

EDUCATION

The Education Committee addresses issues relating to education, recognition and practice, which is relevant to every association member and their specific specialty. They collect and gather evidence on the contributions specialist nurses make to the improvement of quality and safety of care provision. They work on a common framework that could be used by each specialty to develop a specific Common Training Framework.

GOVERNANCE

The Governance Committee is responsible for the development and proper implementation of mechanisms (constitution, internal regulation, code of conduct and eligibility) required to balance the participation of members, the success of the organization, it’s mission and goals.

EXTERNAL RELATIONS

The External Relations Committee cooperates with institutions to publish health related publications related to the nursing profession, such as guidelines, e-books, newsletters and annual reports for public use. Publications on specific specialist areas related to members are found on the individual member websites.

CONGRESS

The Congress Committee will plan the ESNO Summit. In 2017 ESNO planned a summit as the bi-annual follow-up to the successful summit of 2015. However, the summit was postponed until the end of 2018 or beginning of 2019, allowing for more time to organise an event of high standards and professional quality, which the members expect. The theme “Title :Shifting from a hospital to primary care: Role of the nurse specialist – challenges, threats and opportunities for nurse specialists” was highly relevant and this theme will remain for the planned congress 2018.
7 - Nurse guidelines on biosimilars

In 2016, ESNO was invited to contribute to Health Care Professionals guidelines on biosimilars, from the very first draft it was clear that the content was highly informative and well oriented for physicians. In parallel, we have also seen the growth of patient information and initiatives on the topic Commission publishes Q&A on biosimilar medicines for patients.

Our work was to make sure that this wealth of information reaches the nurses. However, whilst ESNO was developing the nurse guidelines on biosimilars, care was taken to ensure that it did not form a third separate information source. We aimed that the guidelines would connect both the HCP and the patient guidelines.

The guidelines will be published in April 2018 and translated into 7 languages, with an aim to translate them into every European language. We also aim to offer a webinar and an online website to publicise the renewed versions.

8 - Finance

As non-profit organisation, ESNO’s income is mainly sourced by members fee. By an slight increased budget from members fee and activities ESNO has been able to extent activities but still, the budget is far too low to meet criteria towards a professional standard organisation but it is expected that this will change over the past year, and at the same time meeting the criteria of independency and neutral to commercial influences, link to funding source. This enabled ESNO in 2017 to revise the website and open an office in the centre of the European region in Brussels and extent the activities in Brussels being able to participate and contribute to the European Health Agenda.

9 - ESNO and European Agencies

European Centre for Disease Prevention and Control - ECDC

ESNO has had several meetings with ECDC to see where, and how, nurses can contribute to the health issues such as AMR and Vaccine.

The European Centre for Disease Prevention and Control (ECDC) is an EU agency aimed at strengthening Europe’s defences against infectious diseases. They provide evidence for effective and efficient decision-making, which strengthens public health systems and supports the response to public health threats.

In 2017, ESNO agreed to give a substantial future input on the topics of vaccination and AMR. ESNO welcomes this relationship and the vast amount of epidemiological intelligence, response, scientific advice, microbiology, preparedness, public health training instruments, international relations, health communication that the ECDC provides the European community. Their program touches and

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7. [https://ec.europa.eu/growth/content/commission-publishes-qa-biosimilar-medicines-patients-0_nl](https://ec.europa.eu/growth/content/commission-publishes-qa-biosimilar-medicines-patients-0_nl)
great number of tools for health care professionals, but in ESNO’s view there could be a more specific nurses input, through nurse narratives and nurse clinical practice, competences and attitudes. We have agreed to collaborate further on vaccination and AMR events and awareness days, and ESNO will take on a number of initiatives and activities that will contribute to better health in these areas. Link to ECDC

European Medicine Agency - EMA
ESNO has increased its relations with the EMA and is now an explicit contributor in several evaluations, is a member of several working groups and has created a platform of specialist groups on specific medicines.

_The European Medicines Agency (EMA) is a decentralised EU agency, located in London. It began operating in 1995. The Agency is responsible for the scientific evaluation, supervision and safety monitoring of medicines in the EU, evaluating and approving them before going into use by HCPs and nurses._

Although it is often said that the prescribing professional is responsible for the entire process, nurses have taken increasing responsibility in recent years. Whereas in the past nurses only distributed, administered medicines, observed side effects and reported back to doctors, today their role has expanded. They participate in clinical trials, develop guidelines, contribute to adherence programs, have prescribing authority, take part in (formal and informal) decision-making processes and much more. For this reason, the nurses’ input is not only relevant, but essential.

For the year 2018 and 2019 we foresee a stronger and more effective collaboration with the EMA in the participation on the Health Care Professional Working Party (HCPWP) to achieve the highest possible standards in patient safety. Link to EMA

**10 - ESNO and Lobbying**

Over 2017 ESNO received 35 invitations to participate in meetings, events and consultations on a variety of health fields because of the value of specialist nurses. ESNO has two representatives with TR Card a Transparency Register Card to access the parliament building. Over 2017 we saw that more ESNO members were registering in the Transparency Register, which is good news. We often see too many vacant chairs during important meetings, left open for nurses and nurse-member representatives to participate and have their say and above all to follow the other 20.000 lobbyist in Brussels, two or three for nurses is not enough considering the fact that there are over 3.000.000 in Europe.

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10 [https://www.youtube.com/watch?v=SjW-uXNhme0](https://www.youtube.com/watch?v=SjW-uXNhme0)
11 – Program 2018 at a glance

Visibility and collaboration

• Organise an event end of 2018 in Brussels preferably in the European Parliament
• Support ESNO members in their campaigns
• Open up to wider representatives, such as hospitals and universities and even individuals
• Participate in European health events of significance, such as Gastein
• Establish contacts with European specialist fields not yet allied to ESNO
• Support more nurse organisations hold their meetings at the ESNO venue
• Collaborate with other health care professionals
• Strengthen relations with patient organisations

Governance

• Establish a new board with clear role descriptions and areas of responsibility
• Revise the ESNO constitution and refresh internal regulations
• Establish a well operating committee structure
• Develop clear online communication and management structure
• Plan ESNO’s financial future to safeguard a sustainable economic future

Publications

• Finalise the Nurses Information and Communication Guide on Biosimilars
• Start the Nurses Information and Communication Guide on AMR and Vaccine
• Develop the e-book series on specialist nurses in Oncology

Education and expert input

• Establish process for developing accreditation programs
• Have more nursing activities accredited
• Further develop CTF
• Establish a well-represented Specialist Nursing Reference Group to participate in medication evaluations.
12 - ESNO members

1- ACENDIO - Association for Common European Nursing Diagnoses, Interventions and Outcomes
2- EDTNA/ERCA - European Dialysis and Transplant Nurses Association / European Renal Care Association
3- EFCCNs - European federation of Critical Care Nursing associations
4- ENDA - European Nurse Directors Association
5- EONS - European Oncology Nursing Society
6- EORNA - European Operating Room Nurses Association
7- IFNA - International Federation of Nurse Anesthetists
8- EAUN - European Association of Urology Nurses
9- ESGENA - European Society of Gastroenterology and Endoscopy Nurses and Associate
10- ERNA - European Respiratory Nurses Association
11- EULAR - European League Against Rheumatism / Nurses section
12- EuSEN - European Society for Emergency Nursing
13- EANN - European Association Neuroscience Nurses
14- ACOVENE - European Veterinary Nurses
15- ESE - European Society of Endocrinology Nurses
16- ECCO - European Crohn’s and Colitis Organisation
17- Dermatology, observer

The ESNO team

- Francoise Caharny-Sonnek, President (until 1 december 2017)
- Pacal Rod, Vice President
- Patric Crombes, Board member
- Maria Teresa Parisotto, Member Steering Committee
- Adriano Friganovic, Member Steering Committee
- Ber Oomen, Executive Secretary

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