THE FUTURE EU HEALTH SERVICES

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Health is increasingly a global matter, and it is not surprising that the European Union is developing a Europe-wide health strategy and related policies. Originally the European Commission proposed the Services Directive, the "Bolkestein Directive" in January 2004 to liberalise the free movement of services. But the European citizens and Non Governmental Organisations expressed their resistance to the "Bolkestein Tsunami" as it undermined the right to collective bargaining, national labour market models, the European social model, the scope and content of a directive on Services of General Interest and last but not least quality in health and social care.

The nurses believe that the objective of any EU health services initiative, the full package, must be to promote and ensure high quality care to citizens. Therefore the EU legislative initiative must address the ethical recruitment of nurses, patient safety and quality care standards. The Commission needs to be clear on these issues before going into a co-decision procedure.

Within the ongoing enlargement process of the European Union, it is essential to develop and agree on European standards of care and quality control. As free movement of persons is one of the fundamental freedoms guaranteed by the European Treaty, we need to make sure that EU standards in care, standards in education and standards in recruitment are met at EU level, to comply with global challenges. Current European trends in health system reform, with their overarching concern for cost-containment, have had a downside for nursing in many European countries. This is reflected in cuts in nursing budgets, the loss of a nursing voice in governmental decision-making processes, increases in nursing workloads, and serious concerns about patient safety and the quality of care. A shortage of nurses' world wide has led to substitution of nurses with minimally trained unlicensed assistants providing direct patient care and some Western European Member States would like to see the nursing education shortened. These trends need to be countered and therefore concrete actions, not only consultations, are expected from the Commission. Otherwise we will face a second "Bolkestein Tsunami"!

Furthermore, clear 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 crucial for any impact assessment. But we need to go beyond administrative assessments; we also need to listen to the field workers, the nurses who are taking care of patients 24 hours a day, 7 days a week. Policies, declarations, recommendations, guidelines can not be developed top-down.

But whatever strategy or legislative initiative is initiated by the European Commission, it is up to the national governments to put health and health system high on the political agenda and to develop a stakeholder approach with Civil Society to prevent ideas, initiatives and recommendations ending up on book shelves. The World Health Organisation of the European Region, the Council of Europe and European Union need to put flesh on the bones of their Memorandum of Understanding on Collaboration, to work together in synergies and to facilitate the fieldworkers with supporting actions.

Although politicians and policy-makers have been tackling the challenges of higher expectations from patients, and the changing demographic and epidemiological profiles of their populations, Europe keeps on struggling to take concrete actions in health. Although we are providing input to so many consultations, having numerous high level groups and working parties on mobility, patient safety and health systems, the US is recruiting NOW 800.000 nurses. Who is going to take care of those who need care? What are our European values regardless what has been decided in the Council?

As Europe manages its integration into the global economy and strives to become the world's most competitive and dynamic knowledge-based society by the year 2010, new ways of successful leadership within the European health policy making community is needed to address these concrete "future challenges".

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