Nurse – ICN’s definition

- Nurse is a person who was educated in the programme of primary education for nurses and is given a licence by a certain regulatory body for performing health care in her/his country.
- The primary education for nurses is formally accepted programme of education which ensures us with the wide basis of knowledge and is a firm base for the section of behavioural science (social) and biological and nurses knowledge for practicing health care.
- It makes the role of leaders possible, just like the possibility of continual education at a higher levels of specialization or even higher levels of advanced nursing practice.

WHO – Definition

“Nursing is a concept by which we imply the whole activity of nurses and midwives, which we comprehend as the role in preserving health, prevention of diseases, health care and treatment of the patients, and they role in the process of healing.”

Millenium development goals (MDG) and nursing care

Nurses represent the spine of health care systems all over the world and they give us the basis upon which we solve MDG and find solutions and results. If we want to succeed and advance the performance of health care systems, urgent actions are necessary in order to overcome problems which can undermine the contribution that nurses and midwives can have onto the vision of better health for everybody and in every community.

General director, 2002.
WHO fundamental principles and initial preparations of nurses and midwives

- The care of nurses and midwives must be an integral part of essential legislative and regulatory frame for health professions in every membership country.

WHO Fundamental principles of initial preparation of nurses and midwives

- Entering schools for nurses and midwives must follow successful end in secondary school, with qualifications that are asked for when entering a university in some member countries.

The curriculum and programme must be based on research, evidence and abilities.

The abilities mentioned above must include the capability to work in hospitals and under the conditions in the community and in multi-disciplinary health care team as well.

SECTORAL DIRECTIVES IN EU

- In 1970s and 1980s the European Commission prepared special directives for professions as sectoral directives.
- Every directive was taken out of the process of “harmonization” (adjustment) and which is reached with the work of relevant professions at the meetings of The Advisory Committee in Brussels.
- The Committee adjusted the minimal standards for professions (doctors, nurses, dentists, veterinary surgeons, midwives, pharmacists, architects).
- About the nature, minimal standards and the time of education and training that are necessary for receiving qualification, which will be accepted by all member countries.

Directive 2005/36/EC about recognition of professional qualifications

- This Directive came into effect on October 20, 2007.
- It exchanged 15 sectoral Directives, including 4 that were about professions of nurses and midwives.
- Directives: 77/452/EEC; 77/453/EEC for nurses
  - Directives: 80/154/EEC; 80/155/EEC for midwives
- The goal was strengthening the four earlier described freedoms and simplification of the process of correlation, and harmonization and acceptance.
- The correlation is a process by which the decisions of one member country also respect in the other, unless there are ambiguous basis to have a doubt.

Directive 2005/36/EC, act 31 – Basic demand for General profile nurse training

- Entering General profile nurse training can start after finishing the primary education.
- 10 years lasting
- Confirmed with a diploma, certificate or other evidence issued by the authorities of a member country or
- With a confirmation for a successful pass an exam of a certain level, in order to entering a nursing school.
3 years of full-time training
- Minimum of 4600 hours of theory and clinical training
  - Minimum theory 1/3 = 1533 hours
  - Minimum practice 1/2 = 2300 hours
For coordination the curriculum basis of nurses are responsible.

Theoretical training is provided by nurses teachers
- Professional knowledge, insight, skills
- Training in clinics
  - As a team, they learn how to give, organize, maintain and evaluate nursing care
  - Lead a team
  - Organize health care including education in health care for individuals and small groups.
- The programme flows in hospitals and other health institutions, as well as in institutions.

Education must ensure:
- Certain knowledge as the base of general health care
- Skills in ethics of general principles of health care
- Certain experience in hospital care
- The capability of taking part in educational work of health care workers.
- Experience in work with the rest of the members of other professions in health care sector.

Clinical practice:
- Nursing in relation to:
  - general and specialized medicine
  - general and specialized surgery
  - child care and pediatrics
  - pregnant women care/child-bearing care
  - mental health and psychiatry
  - care for old and geriatriy
  - house care
- Theoretical instruction must be valued and clinical practice must be coordinated.

TRAINING OF MIDWIVES
- Act 40
  - The admission to training of midwives will be fulfilling one of the old terms:
    - At least 10 years of primary education
    - First way:
      - Special training in the form of regular school for nurses that will involve at least 3 years of theory and practice which includes the programme described for nurses
    - Other way:
      - Special training in the form of regular school for midwives lasting 18 months, including at least the programme of schooling that was not the subject of training for general profile nurse.

The reality of nurses and midwives in Serbia 2010.
Nursing / regulatory body:

**PROFILE STRUCTURE**

- **TOTAL:**
  - 72,163 nurses and medical technicians of all profiles on all levels of health care
  - 60,418 nurses and midwives
  - 56,198 nurses and midwives with secondary school (69.31%)
  - 4,220 (7.70%) are nurses and midwives with faculties (European standards for receiving the title of a nurse)

- **UNEMPLOYED:**
  - 15,500 nurses in Serbia according to the data of National employment service.

**PROFILE STRUCTURE OF NURSES**

- 15,190 (7.71%) nurses
- 49,048 (24.90%) midwives
- 4,220 (2.19%) faculty

**THE EXISTING REGULATORY RULES:**

- REGULATIONS ON HEALTH PROTECTION
- REGULATION ON HEALTH INSURANCE
- THE CHAMBER
- REPUBLIC PROFESSIONAL HEALTH CARE COMMITTEE (2009)

*Regulations on health protection, Act 166:*

- According to education health professional can be:
  1. doctor of medicine
  2. other health professional: received high or higher education, or finished health professional secondary school

**STATE OF EDUCATION?**

- **PRE-SCHOOL EDUCATION**
- **PRIMARY SCHOOL** (8 YEARS)
- **SECONDARY MEDICAL SCHOOL** (4 YEARS OF EDUCATION)
- **HIGHER EDUCATION:**
- **PROFESSIONAL STUDIES** (3 years)
- **AKADEMIC** but the problem is not resolved: OF TITLE, QUALIFICATION and COMPETENCE

**STATE. cont**

- **NEW TERMS WHEN ENTERING A FACULTY**
- **...OTHER SECONDARY SCHOOL CAN ENTER**
- **NEW CURRICULUM**
- **NEW STUDYING PROGRAMME**
- **REGULAR AND OPTIONAL SUBJECTS AND TO BE PRESENT ON LECTURES**
- **ALL SUBJECTS LASTS ONE SEMESTRE AND GIVES ONE A CERTAIN NUMBER OF CREDITS**
- **NEW METHOD OF GRADING**
- **THE CHAMBER ISSUED LICENCES FOR WORK**
- **THERE IS A REGULATIVE ON CONTINUAL EDUCATION**
The education of nurses is realized:

- **Middle-level of education (4 years)**
  - 33 state secondary schools
  - 2 private secondary schools
  - With 6 majors:
    - Nurse-technician
    - Nurse in pediatrics - technician
    - Midwife-technician
    - Nurse - pedagogue
    - Nurse in dentistry
    - Health carer/exp

**Higher education of nurses is realized in the form of:**

1. **Professional studies** lasting 3 years - title:
   - Professional nurse and professional midwife
   - Professional nurse specialist

2. **Academic studies** lasting 4 years - title:
   - Health care organizer
   - PhD health care organizer

3. **Master studies**

Categories of subjects in secondary nursing schools:

- 52% primary education
- 26% health care
- 22% medical

Educational structure of a lecturer in secondary medical schools:

- 52% primary education
- 11% health care
- 24% general university
- 1% secondary medical school

The educational structure of a lecturer in faculties for nurses:

- 92% primary education
- 4% doctor
- 3% doctor spec.
- 1% nursing faculty + university
- 1% general university
- 1% secondary medical school

The list of titles in higher education:

- **Academic**
  - Basic
  - Health care organizer
  - University degree
  - PhD health care organizer
  - PhD nurse

- **Medical sciences**
  - Basic
  - Professional nurse
  - Professional midwife

- **Dentistry**
  - Cultural hygiene
  - Oral hygiene
  - PhD dentistry
THE SYSTEM OF EDUCATION OF NURSES AND MIDWIVES IS IN TRANSITION
IT IS NOT COHERENT
ITS CONCEPTION IS NOT FINISHED
IT IS NOT COORDINATED WITH THE STANDARDS OF EU
WE MISS 10 YEARS OF PRIMARY EDUCATION
THERE IS RE-QUALIFICATION OF WORKERS INTO HEALTH WORKERS IN HIGH SCHOOLS
NO LAW ON NURSING
NO LAW ON HEALTH CARE

OUR KNOWLEDGE IS NOT COORDINATED WITH NUMENCLATURE OF TITLES IN EU
OUR QUALIFICATIONS ARE NOT INTERNATIONALLY RECOGNIZED
THERE IS NO CLEAR DEFINITION OF TITLES-MINISTRY OF EDUCATION IN RELATION TO EDUCATIONAL PROFILES FOR WORKING IN HEALTH CARE
SOME TITLES DOES NOT EXIST IN THE LAW OF HEALTH PROTECTION

STUDENTS DO NOT HAVE HORIZONTAL AND VERTICAL PERMANENCE
DIFFERENCES EXIST IN:
CURRICULUM
THE NUMBER OF CLASSES NOT EQUALIZED AND ARE BETWEEN 1785 AND 3660, WHICH IS NOT ENOUGH (EUropean standard is at least 4600)
UNEQUALIZED RELATION OF THEORY AND PRACTICE
63% - 37% do 27% - 73% (European standard is 1/3 theory and 2/3 of practice)

HYPERPRODUCTION OF STAFF IN SECONDARY SCHOOLS-UNEMPLOYMENT
THERE IS NOT A CENTER OF BASE KNOWLEDGE (evidence base)
NO index magazines for nurses, low use of internet in order to come to new knowledges,
NO e-learning

Some of the facts about the position in nursing in Serbia
Necessary educational vertical line
Lack of registered nurse
Lack of educated professionals in the structure of nurses employed
No possibility to professional advance
Workload of nurses that affects the growth of health problems in nursing
Youth unmotivated for nursing

Lack of interest in forcing professional qualification
Lack of possibility to influence making decision
Uncertainty in workplaces
Lack of cooperation and employer support in the context of lifetime education (horizontal improvement)
Lack to evaluate a quality work
On the positions of head nurses – nurses who finished secondary schools and/or other profiles...

- Low professional status
- Health care is:
  - Invisible
  - Undefined
  - Dependent
  - Hardly caring.

Where are we and what should we solve?

- On a half way to the goal...

We decided to respect the regulatory heritage of EU:

EU *acquis*, (fr.) which means "The thing that is compatible”

Not even one policy of nursing or nurses and midwives won't be developed and applied without active participation of the representatives of the profession.

We cannot wait to start it from above! "Revolution” always starts undeneath, from the base!
OUR WAY IS TOWARDS EUROPE

Literatura