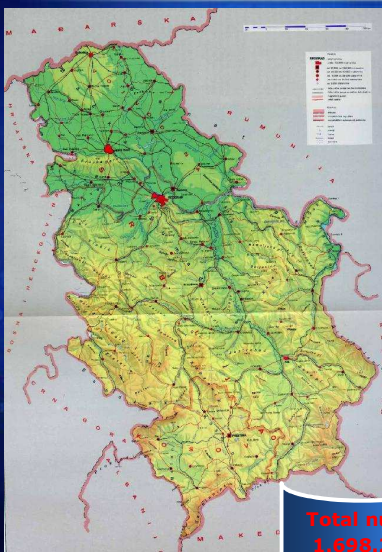




**What is the state of affairs concerning nursing education in Serbia?
Where is Serbia in complying with EU requirements?**

*Author :
Master of Medical Science, Radmila Nešić
President Association of Health Workers of Serbia*


REPUBLIC OF SERBIA



Area of the Republic of Serbia	88.499km ²
Number of inhabitants:	7,114.393
Total number of households:	2,497.187
Average age	42,6
Administrative districts	29
The capital: Belgrade	1.698.552
State health institutions	354
Private health institutions (no pharmacies and laboratories):	3725
State institutions of social protection:	181

Total number of employees
1.598.223

Total number of unemployed 746.010



SERBIA



- Life expectancy in the Republic of Serbia in 2015 is **75.05**
- 77.68 for females**
- 72.46 for males**
- Working age population aged 15 to 64 years makes **67.4%** of the total population.
- Number older than 65 years in the total population, **18.2%**.
- The rate of natural population growth was **-4.8 ‰**.
- The rate of mortality **14.0 ‰**.



European
Commission

TAIEX

STATE HEALTH CARE INSTITUTIONS



Health Care Institutions	Numbers of institutions
Pharmacy	35
Primary Health Care Centre	157
Institute (Zavod)	22
General Hospital	40
Special Hospital	37
Clinical – Hospital Centre	4
Hospital Centre	4
Clinic	6
Institute	16
Public Health Institute	23
Total	344



European
Commission

SERBIA

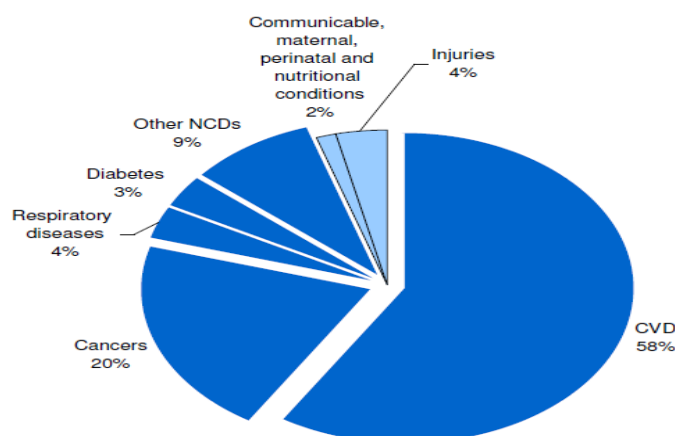
- Serbia has 947,000 households with persons aged 65 and over (37.5% of total households). In addition, most single-person households in Serbia are elderly households - even 52.8% Serbia / GNI per capita in PPC dollars
- Serbia / GNI per capita in PPC dollars 12.480 (2013.)
- GDP (nominal) per capi 6,353,96 USD (2013.)
- In Serbia, the 100,000 inhabitants, has 623 nurses (for less than a quarter of hospitals in EU countries.)



European Commission

TAIEX

Proportional mortality (% of total deaths, all ages)



NCDs are estimated to account for 95% of all deaths.

The four main NCDs are cardiovascular diseases, cancers, diabetes and chronic lung diseases.

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Religions

- Serbia is a multi-religious country.
- The dominant religion is
- Eastern Christianity (predominantly the Serbian Orthodox Church)
- Catholicism
- Roman Catholics
- Protestant Christianity
- Protestantism
- Islam
- Judaism



UNIONS

1. Union of Nurses and Technicians of Serbia
2. Union of Health and Social Protection of Serbia
3. Union of Health and Social Care Independence Serbia
4. New Health Union Serbia
5. Association of Free and Independent Trade Unions in Healthcare Serbia
6. Union of doctors and pharmacists Serbia
7. Union of Health Sloga
8. Union nonmedical workers Serbia

THREE UNIONS ARE REPRESENTATIVE AT THE STATE LEVEL FOR NEGOTIATIONS ON THE PRICE OF LABOUR AND SALARIES!



NGO

■ NGOs in Serbia are classified as follows:

1. alternative cultural organizations;
2. educational and research organizations;
3. environmental organizations,
4. societies and movements;
5. humanitarian organizations;
6. social and humanitarian organizations;
7. youth and student organizations;
8. organization for community development;
9. professional organizations;
10. human rights organizations;
11. think tanks;
12. peace organizations and groups;
13. women's organizations and groups;
14. organizations of refugees and displaced persons;
15. international organizations; i.

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ASSOCIATION OF HEALTH WORKERS OF SERBIA

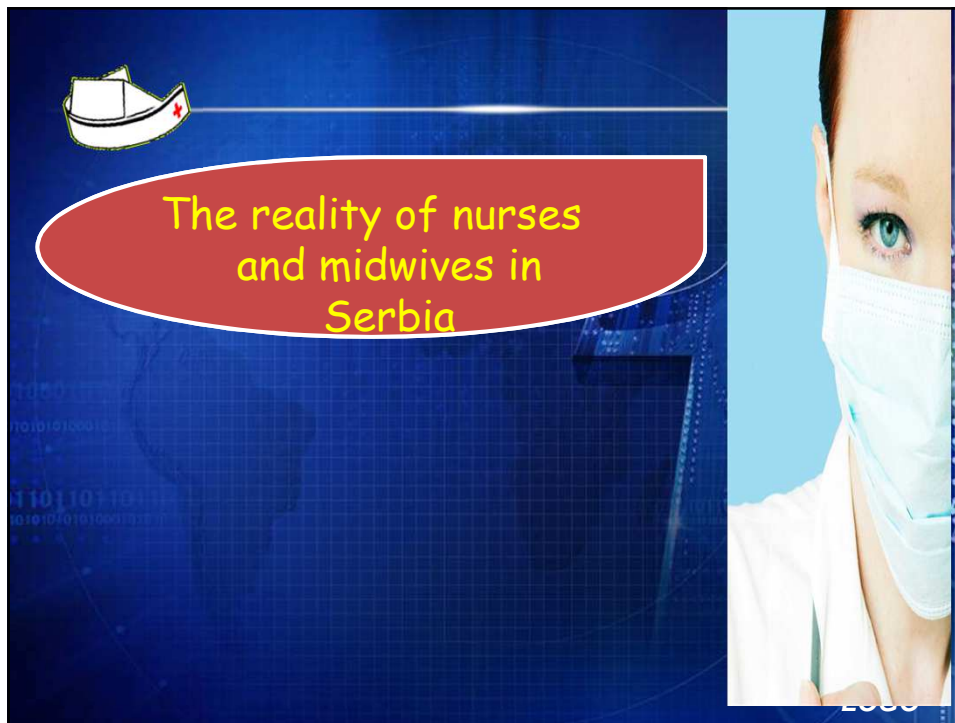
■ TOTAL NUMBER OF ASSOCIATION


1. 48 LEGAL ENTITIES - INDEPENDENT ASSOCIATION
2. 20 SUBSIDIARIES THROUGHOUT THE Republic of Serbia

■ 40.000 OF MEMBERS

- 38 000 nurses(3470 nurses according to EU standards)
- and technicians and other health workers
- 2 000 doctors and other associates in our membership paying members and not manage the Association

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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 sciences (social) and te biological and nurses knowledge for practicing health care.

***It makes** the role of leaders possible , just like the possibility of continual education edukacije at a higher levels of specialization or even higher levels of advanced nursing practice.*

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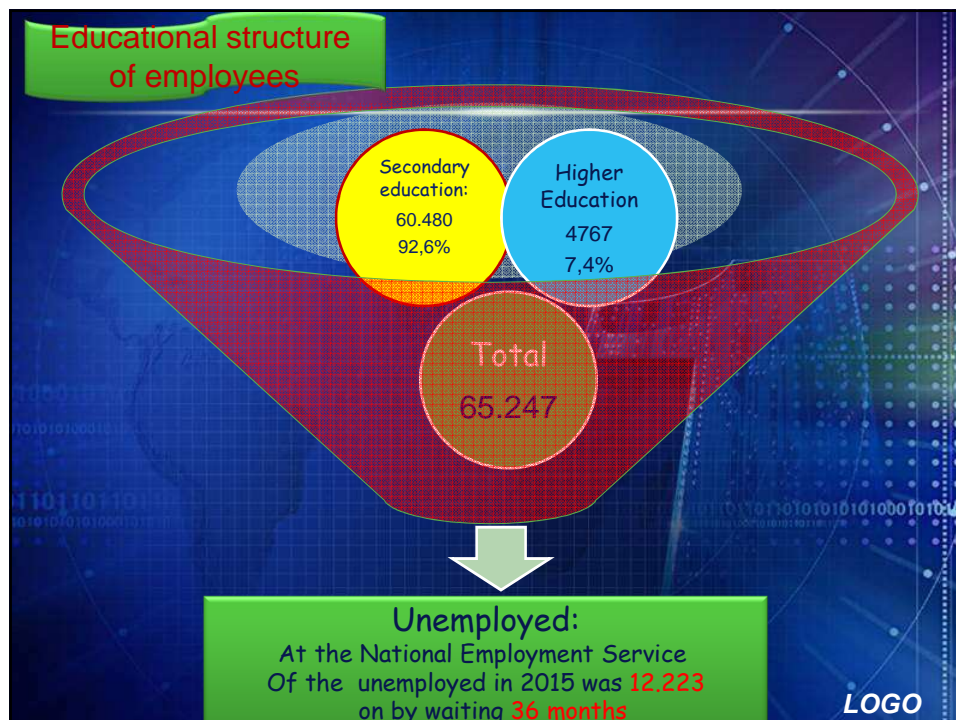
WHO - Definition



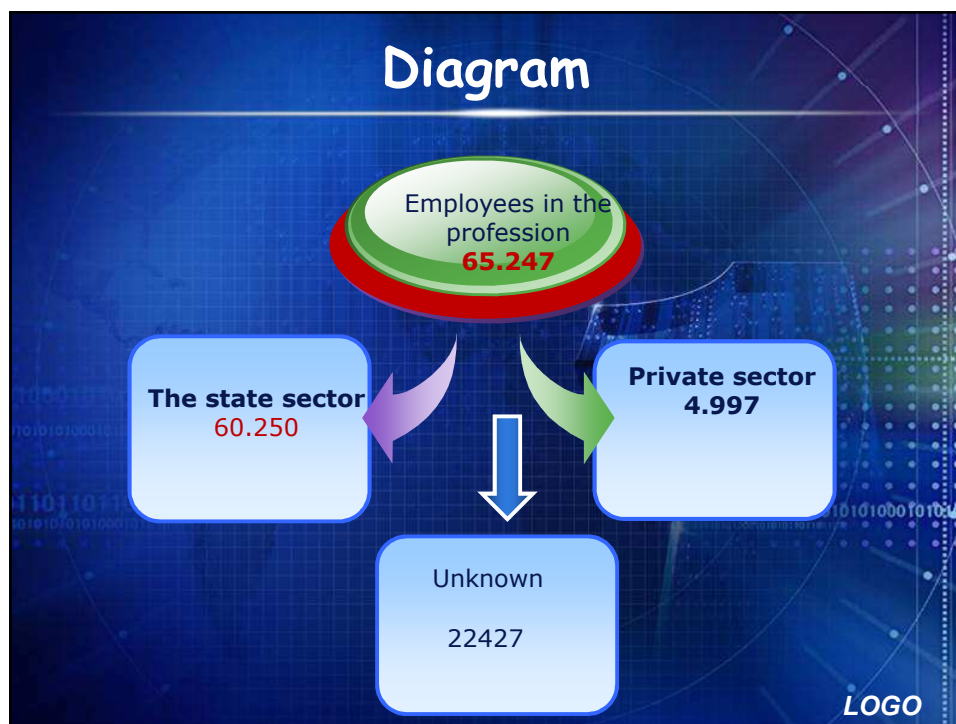
- "Nursing is a concept by which we imply the whole activity of nurses and midwives, which we comprehend as the role in preserving health, prevention of diseases, health care and treatment of the patients, and they role in the process of healing "

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Educational structure of employees



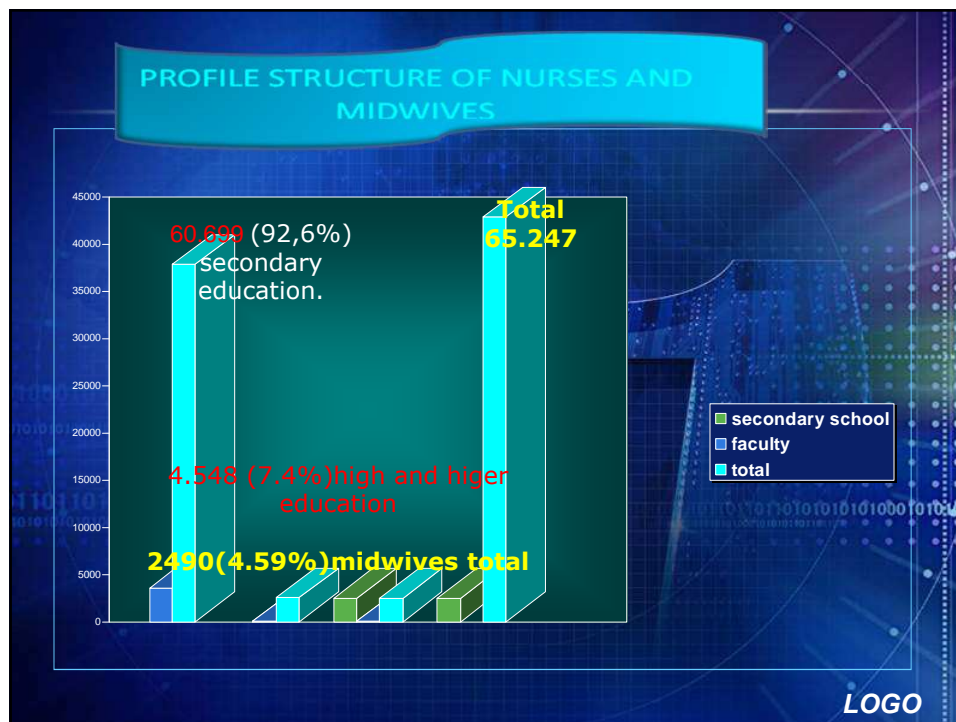
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Employees in state health institutions of Serbia.2014

- Employed a total of **112.202**
Health workers and collaborators 85.242(76%)
- 21.098 (18,8%) are Doctors
- 2099 (8%) Dentists
- 2188 (8%) Pharmacists
- 1713 (6%) are Other professionals
- 49.320 Health workers and associates have secondary education, of whom
- **33,168 (67%)** are **Nurses-medical technicians**
- 8824 health workers and associates with High education ,of whom
- **4767 (54%)** Nurses- medical technicians

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THE EXISTING LEGAL REGULATION:

- *LOW ON HEALTH CARE PROTECTION*
- *LOW ON HEALTH INSURANCE*
- *LOW ON CHAMBERS OF HEALTH WORKERS*
- *LAW ON HEALTH DOCUMENTS IN THE FIELD OF HEALTH*
- *LAW ON PATIENT RIGHTS*
- *DEVELOPMENT PLAN FOR HEALTH CARE 2010-2015.*
- *STATUTE OF HEALTH INSTITUTIONS*
- *Rules on detailed conditions for the establishment and performance of health services in health institutions and private practice*
- *Rules on continuing medical education*
- *National Expert Commission on health care (2009god.) And disbanded*
- *The working group for drafting the National Strategy for Nursing and Midwifery established 2013.*

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STATE OF EDUCATION ?

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

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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 SEMSTRE AND GIVES ONE A CERTAIN NUMBER OF CREDITS
- NEW METHOD OF GRADING
- THE CHAMBER ISSUED LICENCES FOR WORK

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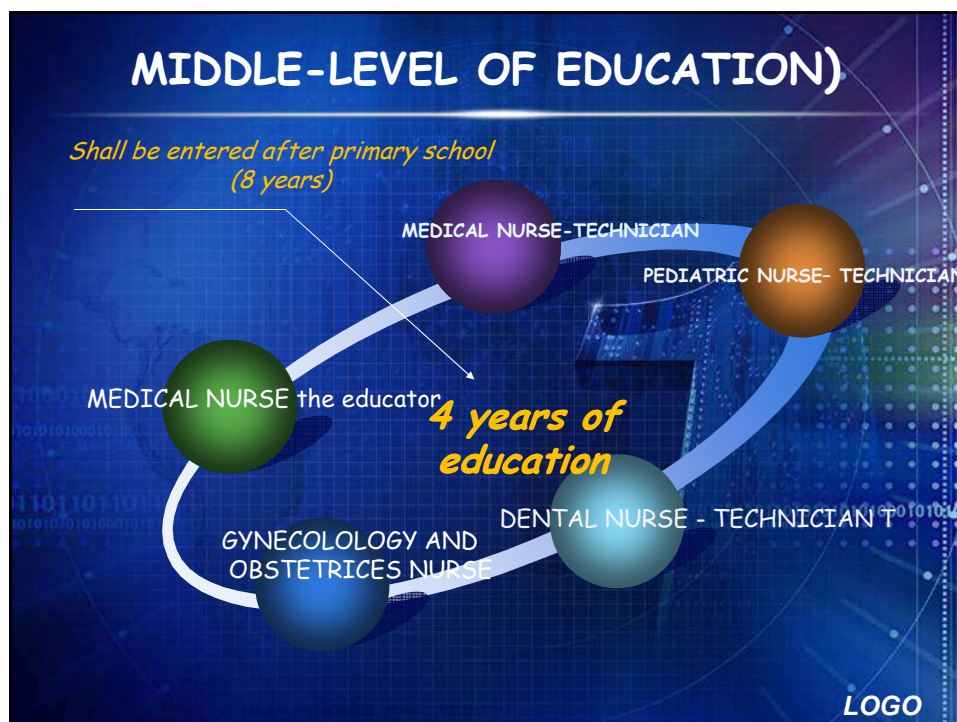
THE EDUCATION OF NURSES IS REALIZED :

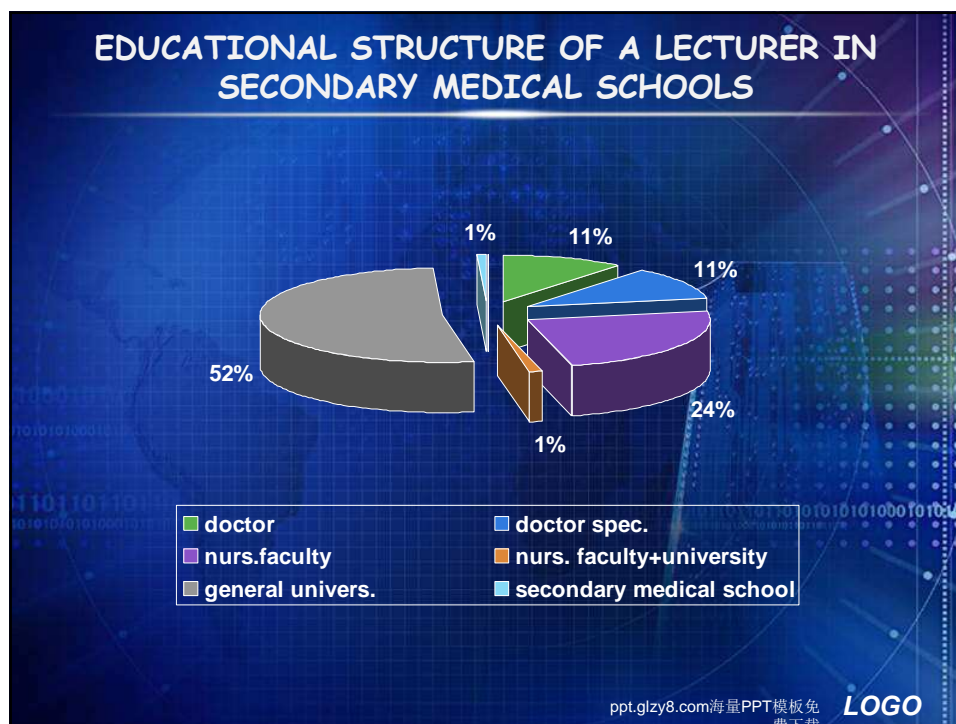
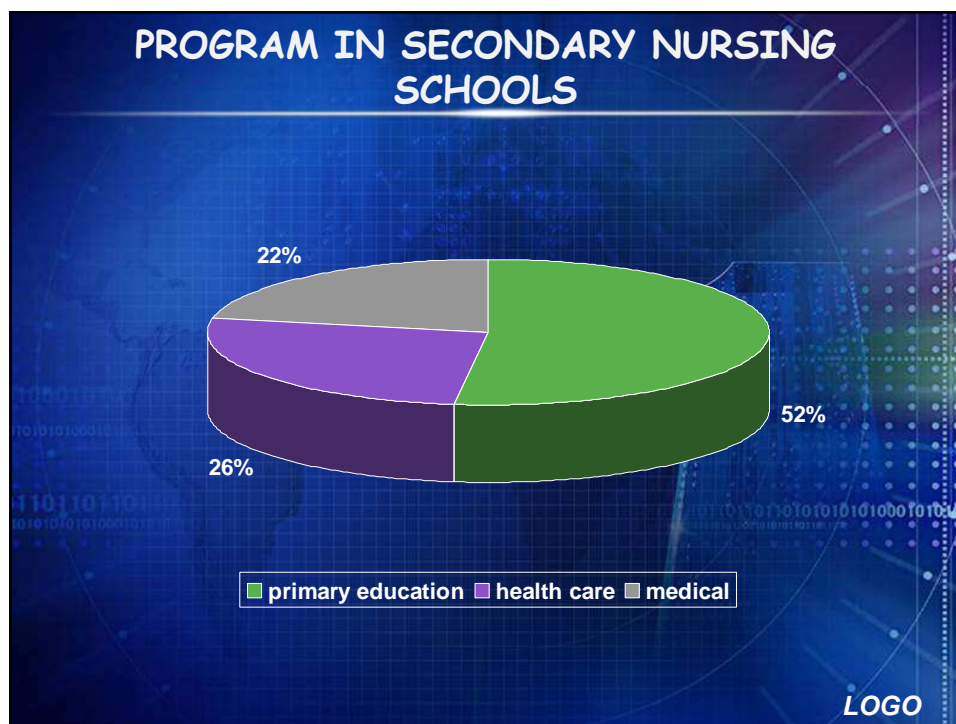
- ❖ *MIDDLE-LEVEL OF EDUCATION) Shall be entered after primary school(8 years)is(4 years of education)*
- ❖ 35 STATE SECONDARY SCHOOLS
- ❖ 6 PRIVATE SECONDARY SCHOOLS

With 5 major

1. MEDICAL NURSE-TECHNICIAN (4 years of education)
2. PEDIATRIC NURSE- TECHNICIAN
3. GYNECOLOLOGY AND OBSTETRICES NURSE
4. MEDICAL NURSE the educator
5. DENTAL NURSE - TECHNICIAN

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LECTURERS

- THEORETICAL TRAINING on the basis of future nurses acquire the professional knowledge, insights and skills. This training provides teachers with **doctors!!!**
- PRACTICAL TRAINING in the block: leads High nurse - technician.
&
- REQUALIFICATION
- ADDITIONAL QUALIFICATION



HIGHER EDUCATION OF NURSES

The proposal of the National Qualifications Framework for Higher Education Serbia (hereinafter: NQFS) adopted by the National Council for Higher Education on 23 April 2010.

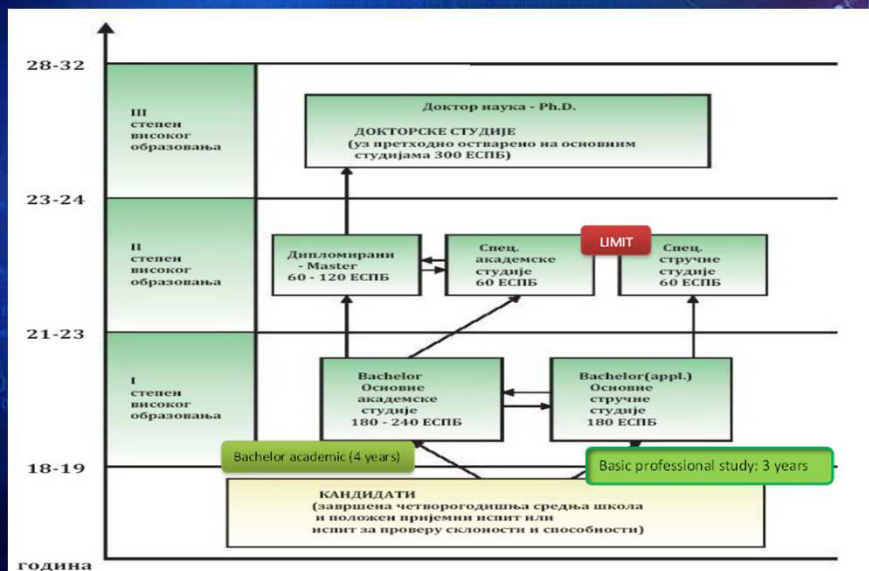
Оквир квалификација ЕУ (нивои)	Оквир квалификација европског простора високог образовања (Болоњски процес)	Српски национални оквир квалификација високог образовања				
		Академске студије			Струковне студије	ЕСПС
8	3. циклус	Докторске BA-3	Специјалистичке BA-20			180
7	2. циклус	Дипломске BA-2a		Интегрисане BA-2a	Медицина BA-2a	120-60
6	1. циклус	Основне 3г BA-1a	Основне 4г BA-1b		Специјалистичке BC-2	180-240
					Основне BC-1	180-240
						0

Слика 1.

Степени стручне спреме	Факултет/академија/висока школа/универзитет		Виша школа		Оквир квалификација европског простора високог образовања (Болоњски процес)	Оквир квалификација ЕУ (нивои)
VIII	Докторат наука				3. циклус	8
VII-2	Магистратура наука	Специјализација			2. циклус	7
VII-1	II Степен	Редовне студије (диплома)			1. циклус	6
VI-2			Специјализација	Студије 2 или 2,5 године	Кратки циклус	5
VI-1	I степен			Студије 3 године		

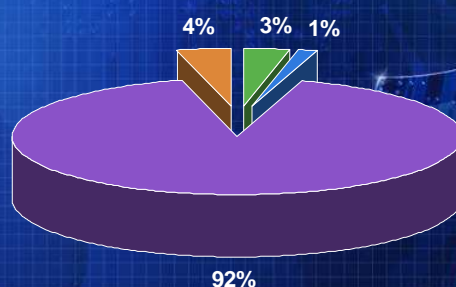
Слика 2.

HIGHER EDUCATION IN SERBIA-LEVELS



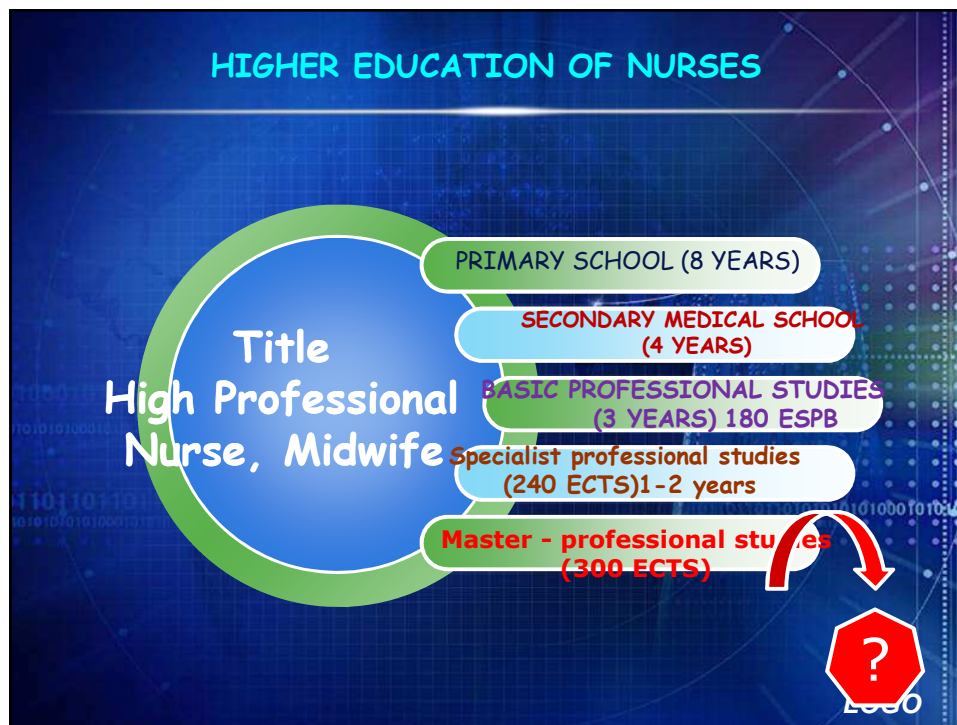
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THE EDUCATIONAL STRUCTURE OF A LECTURER IN FACULTIES FOR NURSES



primary education doctor Slice 3 nursing fac+university

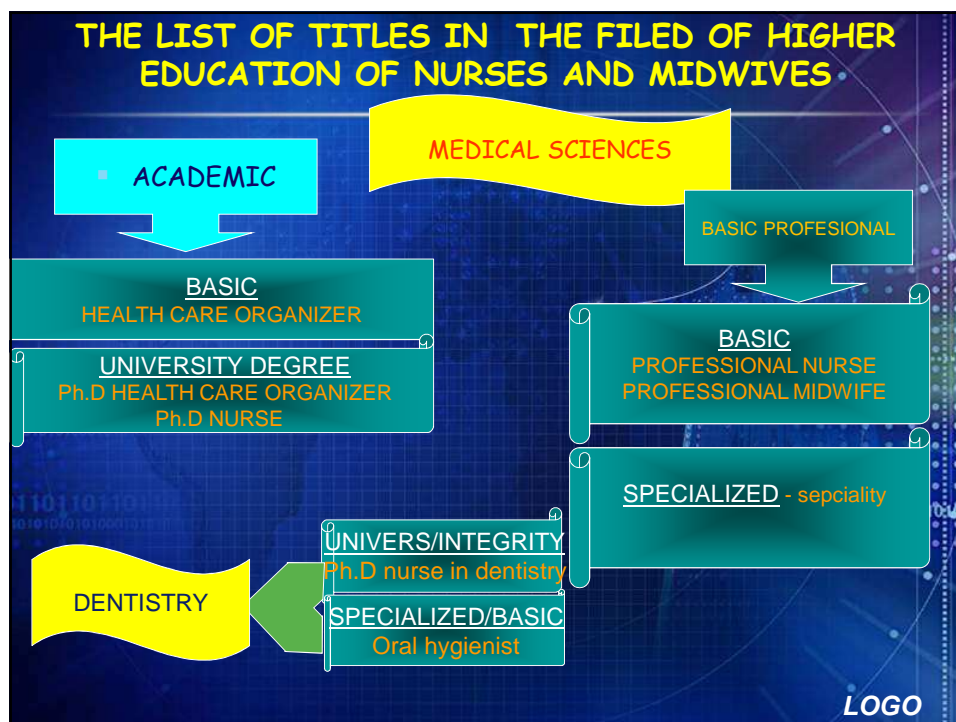
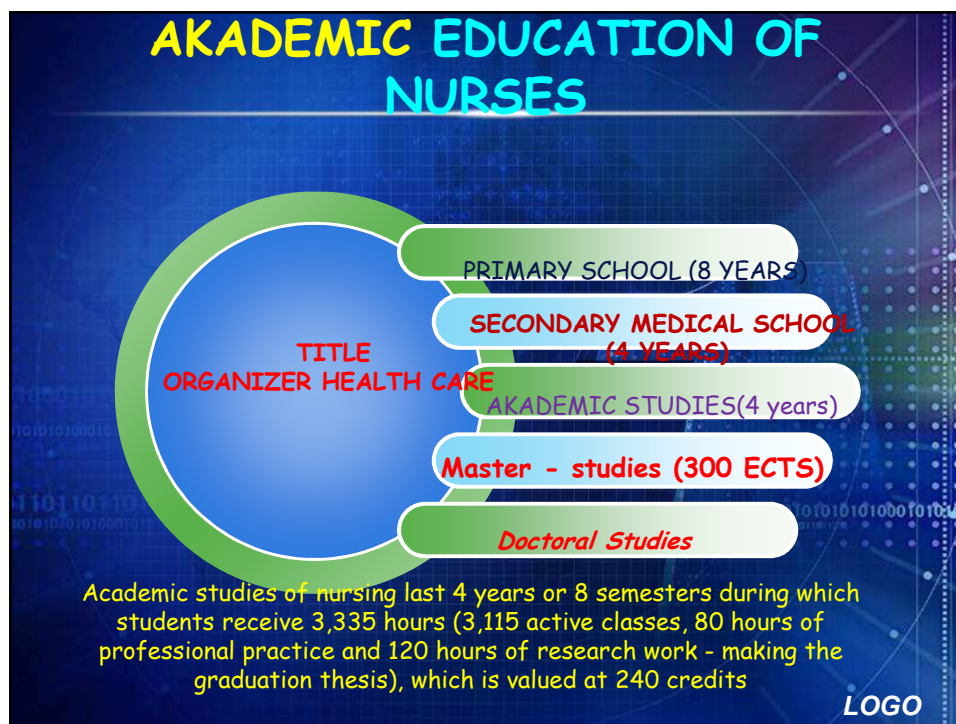
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BASIC PROFESSIONAL STUDIES

- PROFESSIONAL STUDIES (3 years) 180 ECTS (3615 hours)
 1. High vocational school, government (2)
 2. Vocational High School, a private (2)
 3. Medical schools (4)
- Name: *High vocational nurse / midwife*
- SPECIALIZATION (1 year)
 1. PUBLIC HEALTH
 2. TEACHING METHODS
 3. CARE OF ELDERLY
 4. CLINICAL CARE
 5. CARE IN PEDIATRICS
 6. INSTRUMENTING
 7. ANESTHESIA AND RESUSCITATION


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- SYSTEM OF EDUCATION OF NURSES AND MIDWIFES is able TRANSITION
- IT IS NOT COHERENT
- IS NOT CONCEPTION FINISHED
- IT IS NOT COORDINATED WITH THE STANDARDS OF EU
- MISSING 10 YEARS OF PRIMARY EDUCATION
- In secondary schools are reclassified non-medical health care workers
- NO LAW ON NURSING
- THERE IS NO LAW ON HEALTH CARE
- OUR TITLES ARE NOT HARMONIZED WITH THE NOMENCLATURE POSITIONS IN EU
- Our qualifications are not internationally recognized,

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- Chamber issued a license to work nurses with secondary and higher education
- Highly educated nurses have no license
- Our Titles are not harmonized with the nomenclature position in EU.
- SOME TITLES THERE NOT ARE IN THE LAW ON HEALTH CARE IN NO NOKS-in SERBIA

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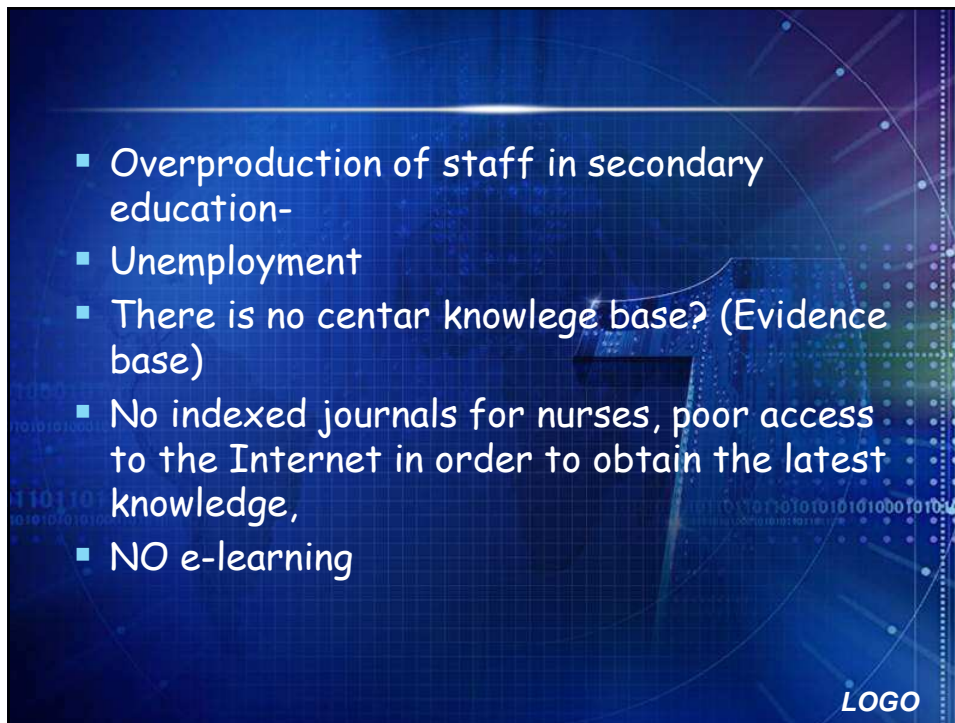
- STUDENTS DO NOT HAVE HORIZONTAL AND VERTICAL PERMANENCE
- DIFFERENCES EXIST IN:
 - CURRICULUM
 - THE NUMBER OF CLASSES NOT EQUALIZED AND ARE BETWEEN 1785 AND 3660, WHICH IS NOT ENOUGH (*European standard is at least 4600*)
- UNEQUALIZED RELATION OF THEORY AND PRACTICE
 63% - 37% do 27% - 73% (*European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

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Some of the facts about the position in nursing in Serbia

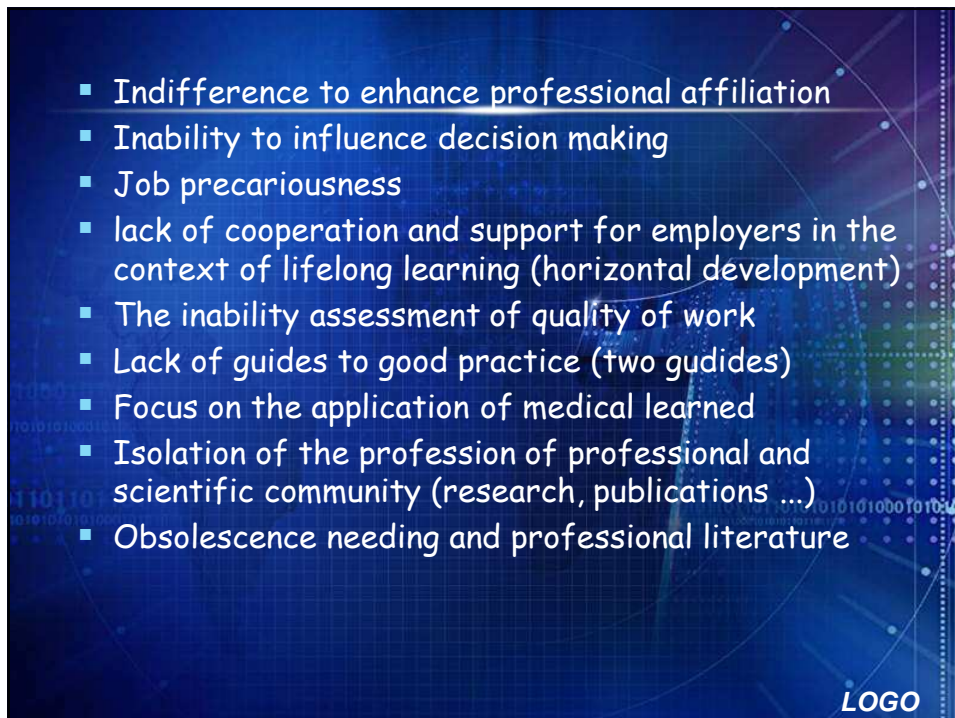
- Necessary educational vertical line
- Lack of registered nurse
- Lack of educated professionals in the structure of nurses employed
- No possibility to professional advance
- **Work load of nurses that affects the growth of health problems in nursing**
- Youth unmotivated for nursing

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- Overproduction of staff in secondary education-
- Unemployment
- There is no central knowledge base? (Evidence base)
- No indexed journals for nurses, poor access to the Internet in order to obtain the latest knowledge,
- NO e-learning

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- Indifference to enhance professional affiliation
- Inability to influence decision making
- Job precariousness
- lack of cooperation and support for employers in the context of lifelong learning (horizontal development)
- The inability assessment of quality of work
- Lack of guides to good practice (two guides)
- Focus on the application of medical learned
- Isolation of the profession of professional and scientific community (research, publications ...)
- Obsolescence needing and professional literature

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- 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.

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