

Council for Nurses and Midwives Annual Report

Year 2010



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Foreword

It is my pleasure to present the Annual Report of the Council for Nurses and Midwives.

The year under review has been quite eventful and also saw substantial changes in the set-up of the Council due to elections from amongst the members of the nursing and midwifery profession held in the year under review. The council has apart from registrar Claudette Farrugia, been assigned temporarily other persons to help process the influx of applications due to nurse shortages and the processing of warrants.

However as once again stated in last year's report the Council has still very limited resources. This notwithstanding that the same plea has been made over and over again year after year. The Council's limited resources are always stretched to the limit and it's always a feat to deal with ongoing business of the Council.

Again sadly as stated in last year's report all the council's pleas for additional staff, adequate office space, and closure by means of legislation of the second level register seem to have as yet given no concrete results. Though the Council like last year is being informed that such is still in the pipeline.

I once again thank my fellow council members, present and past and the registrar who without their full and dedicated participation all achievements in the year under review would not have been possible.

Dr. Patrick Valentino.

President

Council for Nurses and Midwives

Introduction

This Council for Nurses and Midwives (CNM) Annual Report is the sixth of its kind and covers the period from 1st January 2010 to 31st December 2010. The report aims to give a brief overview of the Council's ongoing matters during the year under review.

Law

This Council is regulated by the Health Care Professions Act (HCPA) 2003 – Chapter 464 of the Laws of Malta.

Aim

The Council for Nurses and Midwives, Malta regulates the Nursing and Midwifery Professions in Malta. Its role, functions and responsibilities are defined and specified in the Health Care Professions Act 2003 – Chapter 464 of the Laws of Malta.

One of the main functions of the CNM is to regulate the professions of both nurses and midwives as stipulated in the above-mentioned Act. The Council is also responsible for ensuring high professional and educational standards for both professions in regards to persons on the relative registers. CNM is also committed towards the attainment of excellence in the delivery of professional care by encouraging professional development amongst its registrants.

Structure of the Council

The Health Care Professions Act, 2003, provides that The Council for Nurses and Midwives shall be composed of thirteen members. All members are expected to fully participate in the council's ongoing business as any sub-committees that may be set up from time to time. The

current Council has been set up for a three-year period, this being due to the elections taking place in the year under review. CNM is the body empowered by the above mentioned legislation to assess and register applicants who satisfy the established academically and practising requirements enabling them to practice their profession within the Maltese Jurisdiction. CNM has also since recently been entrusted with the task of granting warrants to persons appearing on its registers who satisfy the set criteria. It also deals with complaints against persons on its registers from members of the public or any other complaint and where necessary sanctions any misconduct by members of the profession. This in addition to other matters that arise on a daily basis. The Council has one full time employee being the registrar, who carries out her duties from the Council's office.

SET UP OF THE COUNCIL

the following were appointed by The Prime Minister in August 2010:

President:	Dr. Patrick Valentino, B.A, LL.D
Licensed Midwife:	Dr. Rita Borg Xuereb, PhD, MSc., PQ Dip.Mid.Ed., Dip.Ed.,Adult., R.M., R.N
First level Registered Nurse:	Ms Claire Farrugia, M.Sc. Health Services Management, B.Sc (Hons) Nursing Studies
Lay Persons:	Ms. Antionette Borg Dr. Edward Curmi, B.Psych; Dott. Psicol(Padua); Dip (GPTIM)

The following were elected from amongst all nurses and midwives in an election held on 25th June 2010 by members of the said professions

Nurses:	Mr. Geoffrey Axiaq, M.Sc. Nursing (Manchester), B.Sc. Nursing, P.G.Dip. Nutrition & Dietetics.
	Mr. Rudolph Cini,
	Mr. Alexander Manche.

Second Level Registered Nurse: Mrs. Rita Briffa

Nurse whose name is entered in any of the special parts of the Register of Nurses:

Mr. Francis Ripard

Licensed Midwives:

Ms. Thresanne Howland MSc (Midwifery) (Glasgow),
BSc (Midwifery) (Glasgow), Dip (Midwifery), R.M
Ms. Astrid Zarb

Ex-officio (Director Nursing Services):

Mr. Jesmond Sharples, MBA. MMus (Comp)
(London), BSc (Hons) (Nurs), Dip. Ger., FLCM, SRN

Registrar:

Ms. Claudette Debono Farrugia, MLJ, B.A., M.A

Duration of Appointments

The President, members of the Council appointed by the Prime Minister as well as the elected members hold their appointment for a period of three years, as laid down by the Health Care Professions Act, 2003.

Meetings

Council meetings of an administrative disposition were held regularly, that is to say on a more or less monthly basis during the year under review. Amongst the subjects discussed, suffice to mention, applications for registration, the procedure of registration for nurses and midwives, complaints by the public, nursing warrants, and other matters that arise from time to time.

Committees

The Health Care Professions Act, 2003, in Section 22. (2), provides that the Council “may set up committees for the purposes of enforcing professional and ethical standards applicable to nurses and midwives and generally in order to perform its functions”

The Council set up 6 committees during the year under review. These committees met whenever any exigency arose. In most cases they are entrusted with the groundwork in particular and specific matters which is later discussed, approved or endorsed by the Council as the case may be. Meeting of such sub-committees are always attended by the registrar who gives her support and reports any discussions to the Council.

The committees established in the year under review were the following:

Committee for vetting the applications for midwives

Dr. Rita Borg Xuereb, Ms. Astrid Zarb, Ms. Thresanne Howland, Advisory member Mr. Jesmond Sharples.

Committee for vetting the applications for nurses

Ms. Rita Briffa, Mr. Alex Manche’, Claire Farrugia, Advisory member Mr. Jesmond Sharples.

Disciplinary Committee

Dr. Patrick Valentino, Dr. Edward Curmi, Mr. Rudolph Cini (in case of a nurse), Ms. Astrid Zarb (in case of a midwife)

Committee for the Administration of Funds

Mr. Rudolph Cini, Ms. Astrid Zarb, Ms. Antoinette Borg

Legal Committee

Dr. Patrick Valentino, Mr. Jesmond Sharples, Mr. Rudolph Cini.

Committee for Live Register and Continuing Education

Dr. Rita Borg Xuereb, Ms. Claire Farrugia, Mr. Jesmond Sharples

Fees

Levying of fees is in accordance with the Health Care Professions Act, 2003. With the issue of a legal notice and the setting up of a below the line account, this Council started collecting fees for new applications and other services that it offers.

According to legal notice 178/2008, the Council is currently collecting a €12 fee per application for EU member state citizens, €175 for non-member states citizens, change of details on registration certificates €5 and verification certificates €12.

Registers

The registers lie at the heart of the Council's activity. In terms of the enabling legislation no person can practice the profession of a nurse and/or midwife in Malta without effective registration with the Council.

There are at present, 6,201 registered nurses and midwives on CNM registers. 285 of which are midwives, 3,653 are registered on the First part of the register for nurses, 245 are registered on temporary basis on the First part of the register for nurses, 1,912 are registered on the second part of the register for nurses, 6 are registered on temporary basis on the second part of the register for nurses and 100 are registered in the special parts of the register for nurses.

The Council has as always strived during the year under review to maintain an up to date as

possible database of all nurses and midwives who are registered with the Council. CNM endeavours to keep a fully updated database as regards to personal data of all persons currently on its registers. . This data apart from assisting the operations of CNM is a source for official statistics for various local entities as well as for WHO and the EU

Table 1: Queries for Registrations and actual registrations for 2010 –EU

EU Member States	Applied for Registration	Registered as 1st level Nurses - Males	Registered as 1st level nurses - Females	Registered in the Special Parts	Registered as Midwives
Malta	129	29	86	5	9
Belgium	1	0	1	0	0
Bulgaria	3	0	4	0	0
Czech Republic	1	1	0	0	0
Denmark	1	0	0	0	0
Germany	1	0	0	0	0
Hungary	1	0	2	0	0
Ireland	1	0	0	0	0
Italy	1	0	0	0	0
Poland	2	1	0	0	0
Romania	3	1	3	0	0
United Kingdom	7	1	5	0	0
Total	151	33	101	5	9

Table 2: Queries for Registrations and actual registrations for 2010—Non-EU

Non EU Member States	Applied for Registration	Registered as 1st level Nurses - Males	Registered as 1st level nurses - Females	Registered as Temporary 1st level nurses - males	Registered as Temporary 1st level nurses - females	Registered as Temporary 2nd level nurses - males	Registered as Temporary 2nd level nurses - females
China	1	0	0	0	0	0	0
India	222	5	1	52	78	1	5
Nigeria	1	0	0	0	0	0	0
Pakistan	225	11	35	37	76	0	0
Philippines	35	0	0	0	0	0	0
Russia	1	0	0	0	0	0	0
Serbia	1	0	0	0	0	0	0
Slovakia	1	0	0	0	0	0	0
Ukraine	3	0	0	0	1	0	0
Total	490	16	36	89	155	1	5

Health Care Appeals Committee

The appeals committee is established within the Health Care Professions Act, 2003. According to section 49(4) of the same Act, any aggrieved party by any Council decision as to registration has the right to appeal before the appeals committee within 20 days from a Council's decision. The Appeals Committee is completely independent from the Council for Nurses and Midwives.

During the year in question, this Council had 7 appeal cases in from of the Health Care Appeals Committee.

Complaints/ Allegations of misconduct

Anyone person or body who feels aggrieved may any conduct of any registered nurse or midwife in the exercise of his or her profession may seek redress by reporting such alleged misconduct to CNM. The Council considers every complaint lodged and if necessary sanctions the individual if any form of misconduct in the exercise of the profession is proven. This process enables and ensures that every registrant carries out his profession in the highest professional and ethical standards

On receipt by CNM of a complaint on the conduct of a nurse and/or midwife, the complaint is forwarded to the council's president and members. This is then discussed during a Council meeting whereby the aforementioned considers the complaint and the necessary actions to be taken which may include the summoning of the relative individual before a disciplinary committee to be sanctioned should any misconduct be proven.

During the covering year the council received one complaint, which was examined and closed.

Conferences/Summits

The Council strives to keep up to date with new procedures and keep abreast with practices of regulation in foreign jurisdictions. In this regard, where possible and given a number of financial limitations, in the year under review a number of Council members and/or the Registrar have attended various conferences/seminars/summits organized by diverse entities.

These being:

- The EU Midwifery Regulators Network – Policy Working Group Meeting held on the 7th of May 2010 in Brescia, Italy.
- Meeting of the European Competent Authorities for Nurses held on the 25th of May 2010, London
- The Regulators Forum organized by the ICN held on the 12th and 13th of May 2010 in Genève, Switzerland.
- The EU Midwifery Regulators Summit held on the 21st of June 2010 in Brussels.
- Second meeting of the European Competent Authorities for Nurses held on the 22nd of June 2010 in Brussels.

Administration

In 2010, 631 files were opened, 520 of which were opened for the new applications received the remaining were opened for administration purposes. The Council has dealt with numerous correspondences on various issues from different entities, constituted bodies and members of the public. The Registrar filled/compiled various verification letters on current registration and good conduct for various registered nurses and midwives, who applied for registration in foreign jurisdictions..

Queries were dealt with either by phone, e-mail, letters or on a one to one basis at the CNM

office.

The CNM website is also continuously being updated.

Warrants

Following the publication of Legal Notice 276/08, first level nurses were entitled to be granted a warrant to practice their profession (on satisfaction of several criteria). In 2009 a letter circular was sent to a total of 2,400 registered nurses. Till the end of 2010 the Council received 1,542 applications for the attainment of such a warrant. A number of ceremonies were held, whereby 234 were distributed in January, 213 in February, 196 in March, 106 in September, 214 in October, and 181 in November. 190 of such applicants did not satisfy set criteria and were duly informed. More warrants will be distributed in 2011. During the year under review a letter circular was also sent to all registered Mental Health Nurses to apply for the warrant. Such warrants will be processed in 2011.

The Internal Market Information (IMI) System

In order to comply with the 'mutual assistance provisions' in the European internal market legislation, administrators throughout the European Economic Area are required to exchange information with their counterparts in other countries. The IMI System is an electronic tool designed to help in this cooperation. IMI consists of a computer application that is accessible via the Internet without the need to install any additional software. It was developed by the European Commission in close cooperation with Member States.

IMI is designed as a flexible system that can be used for all sorts of internal market legislation. It is currently used for the directive on the recognition of professional qualifications (2005/36/EC)

During the year in review the Council did not receive requests by this system.

Appendix I

Report of the meeting held in Italy with regards the EU Midwifery Regulators Network – Policy Working Group – 7th May 2010

Members Present

Marianne Benoit Truong-Canh – ONSF, Head of EU and international affairs

Julie-Jeanne Regnault – ONSF, EU policy adviser

Andras Zsigmond- Hungarian Office of Health Authorisation and Administrative Procedures, Head of the Office

Miriam Guana - Federazione Nazionale dei Collegi delle Ostetriche, President

Vania Cirese - Federazione Nazionale dei Collegi delle Ostetriche, lawyer

Antonella CINOTTI- Federazione Nazionale dei Collegi delle Ostetriche, Vice-President

Ursula Byrne – An Bord Altranais, acting Director of regulation

Claudette Debono Farrugia-Malta Council for Nurses and Midwives, Registrar

Per Haugum – Norwegian registration authority for health personnel, Director

Christina McKenzie, NMC, Head of Midwifery

David Hubert – NMC, EU and international policy adviser

Things Discussed:

Experience reports

Introduction

The European Commission wants to collect National Experience Reports, by means of a questionnaire, from Competent Authorities of each sectoral profession covered by the

Directive. Experience Reports should enable the Commission to know precisely how the directive works in practice. The EC wants to use the Network of European Midwifery Regulators to coordinate this “ad hoc” exercise.

1.1 Questionnaires

The model of questionnaire should be adapted to the midwifery profession and more specific questions should be added

Some countries may have specific issues with other specific countries: this should be reported without necessarily naming countries

A question should be added about the relation between competent authorities and regulators: how do they work together?

Each questionnaire should be signed by the CA mentioned in the list provided by the European Commission. Regulators that are not mentioned in the list should contact the CA and collaborate with it. Completed questionnaires must also be sent to national coordinators for validation before being sent to the European Commission.

Ursula suggested that National Directors of Midwifery Care should be consulted as well
Vania underlined the need to differentiate between the problems caused by the text and those due to the implementation in Member States

Christina informed that the NMC has been designated as coordinator of the evaluation exercise for nursing competent authorities and regulators. A meeting will take place in Brussels on 22 June, the day after the midwifery summit.

No need to create a specific email address to collect the responses

Common paper

PWG agrees to prepare a draft common paper to be discussed in June. This common paper will address the common views of the participants of the Network. It should include the positive effects as well as the problems of the text

Participants will be invited to send “pre-draft” responses to the questionnaire before the meeting in June in order to feed the discussion on the common paper

Main issues: education programme (annex), language requirements, exchange of

information on FTP, general system

Timeline:

Mid-May: sending of invitations for the Summit 21 June

Mid-June: pre-draft of questionnaire to be sent to the policy working group

21 June: Summit> information from the European Commission

17 August: deadline for sending the completed questionnaire to the Network and to national coordinators

3 September: meeting of the policy working group in Paris> discussion about the completed questionnaires and finalisation of common paper

The possibly 27 completed questionnaires + common paper have to be send to the European Commission by 17 September.

Political resolution

A common resolution/paper of the Network will be adopted by September.

Other political positions of the Network may be adopted in the framework of the evaluation process of the directive.

21 June Summit

Ursula accepted to chair the 3rd Summit in Brussels

Lunch will be organised in the place of the meeting, costs will be shared between some members of the PWG

The meeting will be divided into two sessions:

Morning informative session with the European Commission open to CA and Regulators

Afternoon session with members of the Network to discuss about the common paper and activities of the Network

Website

David presented the web platform for the Network's he created
PWG members agree to use a contractant to create a website for the Network in CMS
Costs can be shared between PWG members
Designer proposal will be send to all
Objective of presenting a draft website in June

Briefing about meeting with The Netherlands and strategy to attract new Members

David and Julie-Jeanne reported about the meeting with the Netherlands authorities end of March
Slides will be circulated to PWG
Netherlands will participate in the meeting in June
Per agreed to liaise with his Swedish and Finnish colleagues, Andras will try to identify MW regulators in the Czech Republic.

Cooperation with EMA

Christina mentioned a meeting she had with EMA President, Mervi Jokinen. EMA now understands the Network's mission
Italy will represent the Network at the EMA educational conference in Portugal in November 2010
The presentation about midwifery regulation in Europe will be prepared by David & Julie-Jeanne

Any other business

Ursula informed about recent development in Ireland regarding the midwifery profession: new bill in discussion will strength the identity of midwifery; nurses and midwives will

become separated profession, Nursing Council will become nursing and midwifery council

Per asked about the benefits of having a direct entry for midwifery training compared to a nursing specialisation.

Marianne presented the work in progress at ICM level. ICM is working on international standards of Midwifery regulation. Marianne will forward the draft document for comments from Networks' participants.

David is preparing a proposal for a participation of the Network in ICM Congress 2011

Vania insisted on the importance for the Network to be officially recognised by the European Commission and get a funding as it is the case for the European Jurist Network.

Per is invited as representative of HPCB to take part in the next EPSO meeting in Tallinn.

Compiled by:

Claudette Debono Farrugia
Registrar
Council for Nurses and Midwives Malta

Appendix II

Meeting of the European Competent Authorities for Nurses

25th May 2010

This meeting was held at the Nursing and Midwifery Council (NMC) in London since NMC was identified as the coordinating body for evaluating feedback from nurses' and midwives' competent authorities on the Directive 2005/36/EU.

Following a brief introduction by Profs Tony Hazel, Chair NMC, Ms Kathy George gave an overview of the scope of this meeting. A Romanian nurse, currently registered with NMC was invited to share her experience in obtaining registration in the UK and the challenges she faced especially related to communication. The aim of this sharing was to have first hand experience of the impact of Dir 2005/36 on migrating professionals.

Mr Jurgen Tiedje, Head of Unit, Professional Qualifications at EU Commission presented the details related to the consultation process for review of the Directive. Draft responses to the questionnaire, which was about to be reviewed during this meeting, are to reach the coordinating body for nurses and midwives by the next meeting on the 22nd June in Brussels. The final version has to be compiled by 7th September 2010 for the meeting in Madrid. The Commission is aware of problems related to Article 10 and Article 11 but is expecting first hand feedback on what is working in various countries and what is creating ambiguity and difficulties. Transposition report will be issued by end September or October on how all Member States (MS) are implementing Directive 2005/36/EU. By end of 2010, a public consultation will be launched so that citizens who are the beneficiaries of health care services are give the opportunity to voice their views. A conference will then be held around autumn 2011 to summarise the key points. While one is aware that the current directive has many old parts which are now out of date, one needs to be cautious not to give the message that the

acquis is outdated and hence migratory nurses were doing so on a faulty system. Mr Tiedje also stressed the need for good communication between national authorities and competent authorities in all MS. He also remarked that the EU Commission has a database on regulated professionals from 2005 onwards. However MS deliver data late and incomplete. Finally by early 2012, this part of the process is complete to allow time for the legislative work to be carried out within the office of the current Commissioner and EU parliament.

The rest of the meeting was dedicated to reviewing evaluation questionnaire. Each question was discussed and any amendments done as recommended. Throughout the discussion, Mr Tiedje highlighted areas which require more information from MS on the way forward. These included professional cards, data protection issues, continuous professional development, and language tests to mention a few. The updated questionnaire was to be circulated to all competent authorities of all MS for feedback.

Before concluding, Mr Tiedje invited members present to bring along any questions related to IMI for the meeting in Brussels in June. He also stated his concern regarding gerontology nursing or geriatric care nurses and would like feedback about whether MS consider this an area for concern and to identify ideas for the way forward. Geriatric care is mainly provided in private homes by the independent sector and these are not regulated. He also mentioned the scenario where a nurse was struck off by NMC and then opted to work in the elderly setting.

Mr Tiedje requested all MS to give detailed responses, if possible also to include real experiences, problems and challenges. Different countries were requested to present specific sections of the questionnaire during the next meeting. Malta was identified to present Section B on temporary mobility of self employed or employed workers.

Claire Farrugia

Appendix III

Report on the regulators forum held in Genève by the ICN on the 12th and 13th May, 2010.

Attendees (Members of the subcommittee related to the Registration of foreign nurses, also representing the Council of Nurses and Midwives in Malta): Mrs. Rita Briffa and Mr. Alexander Manche

The **aim** of attending this forum was

To broaden our information with regards to the difficulties encountered while assessing documents handed in by foreign nurses for the purpose of registration with the Council of Nurses in Malta.

To be updated with the developments from ICN and ICM.

To share interesting topics and best practices which arise from time to time.

To develop potential solutions and challenges.

Outcome

It emerged that all countries meet various difficulties when registering nurses from other countries. Considering that we encounter an influx of nurses from India and Pakistan, we aimed at communicating with other delegates who face similar situations in their respective countries. This turned out to be an encouraging experience as we were informed on how to watch out for false documentation/certification and how to verify with the respective authorities issuing such documents.

Various delegates also reported that they encountered false documentation coming from non-

existing nursing schools/institutes and several other fraudulent deeds. Hence, we thrived to organise one-to-one conversations that very often took place during coffee or lunch breaks as we lacked the facility of meeting forum members since we were staying at a distant hotel. We managed to gain trust from different parties and were able to convince other members to support us with this issue.

Compiled by Mr. Alexander Manche

Appendix IV

EU Midwifery Regulators Summit – June 2010, Brussels

Ursula Byrne, Acting Director of Regulation of An Bord Altranais and Chair of the meeting welcomed participants and recalled about the origin of the Network of European Midwifery Regulators, an informal network of cooperation between regulatory bodies in charge of midwives set up in 2009.

The objective of the 21 June meeting organized on request of the European Commission is to provide explanations about the assessment process of directive 2005/36/EC and the questionnaire. It is an enlarged meeting of the Network with regulators and competent authorities for midwives.

Thomas Wiedmann from the European Commission (DG Markt) in charge of the midwifery profession gave a presentation about the main provisions of directive 2005/36/EC.

Mr Wiedmann gave information about the evaluation process.

The scope of the evaluation of the directive is very large: the European Commission will look into all aspects of the text.

According to the new rules of the Lisbon Treaty, qualified majority will apply in the Council for modifying the text. It was unanimity before. However, according to Mr Wiedmann changing any article of the directive will be a very complex exercise. It is particularly true for the midwifery profession which is low harmonised. It was already very difficult to get an agreement on the current provisions.

In the first phase (until September 2010) the Commission will collect evidence of the implementation of the Directive in each member state. To this end a questionnaire about the implementation will be given to competent authorities (C.A.) to guide the national implementation reports which are to be completed by 17 September 2010.

On the basis of a formal impact assessment with several options, the European

Commission will launch a public consultation by the end of the year.

It is likely that the Commission will make a proposal for changes to the Directive early 2012 after the second phase of the consultation – in 2011- which would call for suggested changes.

Thomas Wiedmann reviewed the questionnaire (see questionnaires in annex, available in Spanish, Italian, German, English and French). Exchanges took place about:

The general system and compensation measures. The choice of the applicant between an adaptation period and a test is problematic to some countries. In Germany, the applicant is sent to a MW school for a 1 year training. In Spain, they go through a 16 weeks of internship evaluated by a tutor in hospitals (can repeat if 4 times if this is not satisfactory)

Specialisation in MW: does not seem to exist in the EU

CPD obligation at EU level: for the European Commission, there is a risk of introducing new barriers and make more difficult automatic recognition of diploma and access direct to profession

NMC suggested adding a question about the scope of practice. There are great differences in the scope of practice of EU midwives. In the UK, supervisors saying that some EEA qualified MW are unable to do a lot of things in the normal UK scope of practice. In France, the scope of practice has been recently extended to gynaecological follow up of healthy women and prescription of contraceptives which does rarely match the scope of practice of EU qualified MW.

Julie-Jeanne Régnault from the French Chamber of Midwives gave information about the timing and way to collect the questionnaires (see annex).

Mr Tiedje informed participants that National Experience Reports will be made public.

Reports should be sent to National coordinators before circulating to all.

Julie-Jeanne will circulate the list of National Coordinators.

Question was asked about the language of the contributions. The European Commission answered after the meeting that: « *It is finally left up to each Member State to decide in which language it will draw up its experience report. That said, each Member State is invited to consider how to share information not only with the Commission but also with other competent authorities during this evaluation, such as drawing up a report in a language customary to the language used at the meetings of these authorities or*

providing an additional summary in such a language. » (Jurgen Tiedje, DG Markt, Head of the Unit Regulated Professions, 22 June 2010)

The Chair stressed the importance of collaborating with national coordinators when answering the questionnaire. Collaboration between regulators and competent authorities, when different, is also of great importance in this process.

Mrs Marian Grubben, Head of the Unit Administrative Cooperation of the DG Markt made a presentation about the alert system mechanism used in the IMI system applied to the services directive (see presentation in annex).

Important efforts are made by the European Commission to ensure that exchanges are based on confidentiality; in respect of data protection rules and the right of defence (check list before sending an alert, alert not sent to all competent authorities, no storage of information).

Technically this alert can be used for health professionals if the legal basis is created for it.

Mr Tiedje said CAs should not hesitate to mention in their contributions to the questionnaire whether they would be interested that an alert mechanism is included in the IMI system for the 2005/36/EC directive.

UK, France, Italy, Malta and Hungary made presentations about their experience in respect of implementing the Directive (see presentations in annex).

The debate then focused on:

Language skills and test. CAs can ask the applicant to provide evidence that he/she have a sufficient level but systematic testing is not possible. Mr Tiedje asked what measures are taken by CAs or Regulators to help applicants improving their language skills.

Training programme: some regulators suggested to calculate in hours, extend the list of subjects, as well as the training duration

Separating the recognition of professional qualification and licence to practice: appears impossible to the EC

Having feedback of MW working abroad can be also interesting

Making registration compulsory and having register on line

Harmonizing CPD requirements

David Hubert from the NMC made an update about the activities of the Network of

Midwifery Regulators:

Launch of a specific website of the Network: www.nemir.eu

3rd issue of the Newsletter of the Network will be published in July: contributions welcome

Call for ideas for next Survey

Representatives of the NMC have had contacts with EMA and the Network will be represented in the EMA Education Conference in Madeira (November 2010)

Ursula and Marianne mentioned activities in progress at ICM. ICM works on standards for midwifery regulation. The draft documents will be circulated in the Network.

Compiled by: Claudette Debono Farrugia

Registrar

Council for Nurses and Midwives

Appendix V

2nd Meeting of European Competent Authorities for Nurses

22nd June 2010, 11:00hrs – 16:30hrs Brussels

Ms Kathy George, Executive Director NMC, introduced the meeting and invited Marian Grubben from the EU Commission to present the Internal Market Information (IMI) system. After an overview of the IMI system, Ms Grubben discussed the legal basis for alerts in Services Directive where Member States (MS) are obliged to quickly inform each other about service activities that can cause serious damage to the health or safety of persons or the environment. The aim is to improve supervision of service providers and to enable alert authorities to take necessary preventive action. The alert criteria in Services Directive are related to the service which must be covered by the said Directive and dangerous conduct must be related to the service activity. In addition the risk must be caused by the service provider and there is serious damage to health or the environment. This has a cross border effect. The European Data Protection Supervisor has argued that alert subject should be informed if an alert mechanism is sent about him/her. Ms Grubben also mentioned the safety measures included in IMI so that no alert mechanisms are initiated unnecessarily. There is also the possibility of withdrawal or correction of alert. After 6months, all personal details are removed from the database and the Commission will only see details about alert. Since such alert systems require legal backing, Ms Grubben stated that this could either be included in this directive or have a separate directive for alert mechanisms for health care professionals. One wonders what would happen if there is legislation which sets the basis for alert systems but then there are potential problems with data protection issues which arise from Data Protection Directive as transposed in national laws.

Paula Tanasa then gave a brief presentation of the Database of Regulated Professions. The professions listed are covered by Directive 2005/36/EU and applies to professions regulated in the EU member states, EEA countries and Switzerland. The database includes the professions falling under the general system of mutual recognition of professional qualifications, professions in the craft, industry and commerce sectors benefiting from

automatic recognition of professional experience and the sectoral professions benefiting from automatic recognition on the basis of harmonisation of minimum training conditions, including doctors, nurses, midwives, pharmacists, dentists, veterinary surgeons and architects. Ms Tanasa stated that during the previous month, May 2010, the website registered 480,000 hits. However, it is the responsibility of the national coordinator to update data regularly.

During the rest of the meeting, the identified countries presented their responses to the sections of the questionnaire. I presented our answers to Section B of the questionnaire related to temporary mobility of self employed or an employed worker.

It was also stated that agreement was reached with national coordinators that answers to the questionnaires will be made public. By July, answers have to be completed and then put them on shared portal. Each country has a period to view what others included in questionnaires and have a chance to amend and finalise their replies. This has to be completed by the end of August 2010. By the end of October 2010, National parliament and MEPs have to discuss the professional qualifications directive and hence this feedback has to reach them by the end of September 2010.

Some countries expressed difficulties in obtaining feedback from the various regions of the same country. This is necessary in order to have reports which actually represent the whole country.

Finally there was a brief discussion on the care of older people and the role of geriatric nurses. The participants were asked whether any training or specialisation has been introduced in their country in geriatric care and whether this exists as a specialisation at all. Similar to Malta, domestic care is provided by community nursing services and by those who had some vocational training. Some countries like Spain have a two year course for geriatric nurse specialisation. NMC has commissioned a study to review whether there is the need for regulating this area. Nurses were struck off the register by NMC and are now working as support workers. Ireland offers a post qualification diploma or Masters. Given the changing demographics, this is an area which demands further attention.

Claire Farrugia

