



Joint Action Health Workforce
Planning and Forecasting

***“Nursing Education developments
in Italy in light of the increased EU
mobility of health care
professionals:
emerging challenges and issues”***

Bulgaria, Varna, 18 February 2016

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Director of Human Resources,
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Agenda

- 1) Nursing scope of practice and advancements in skills
Facts and figures
- 2) Increasing outgoing nursing mobility in Italy as a new phenomenon
Since when and why?
- 3) Factors affecting the decision to migrate among new graduates at the moment of graduation:
What are the reasons?
- 4) Strategies that have been enacted to deal with the increased complexity in the nursing workforce
What are the strategies at the macro, meso and micro levels?

1) Nursing scope of practice and advancements in skills *Facts and figures (1)*

20 Regions

61,482,297 Population

Age structure

0-14 years: 13.5%

15-64 years: 66.3%

65 years and over: 20.2%

(Germany 17.7, Greece 17.4, Sweden 17.2)

Median age

45.3 years (2013 est.)

Net migration rate

4.47 migrant(s)/1,000 population (2013 est.)

Life expectancy at birth

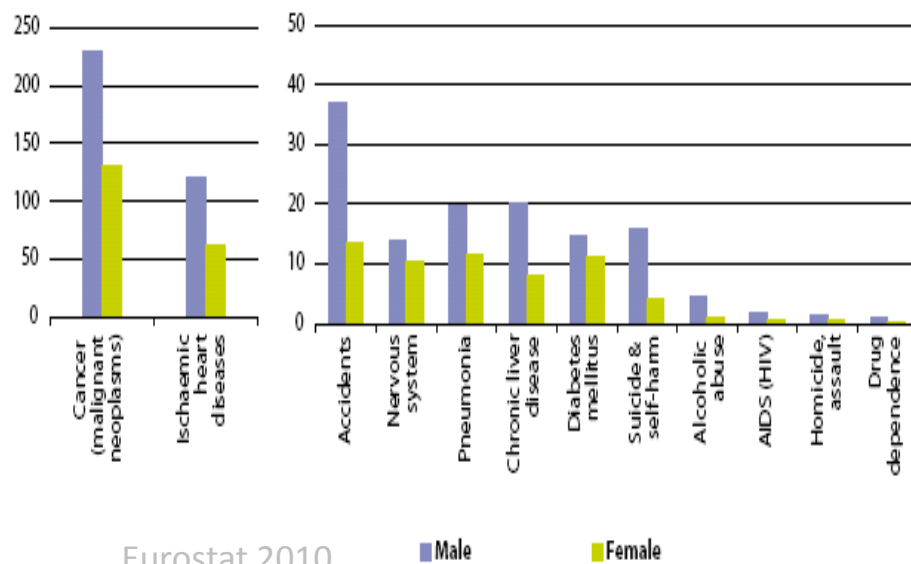
81.95 years

Hospital bed density

3.6 beds/1,000 population (2009)

Health-care needs

Increasing needs from individuals affected by chronic conditions



1) Nursing scope of practice and advancements in skills *Facts and figures (2)*

Nursing education has been established at the university level since the early 90s

- Legislative Decree 502/1992
- Ministerial Decree 739/94 e 70/97
- Italian Law 42/99
- Italian Law 509/99
- Ministerial Decree 270/04
- Italian Law 43/06

Currently:

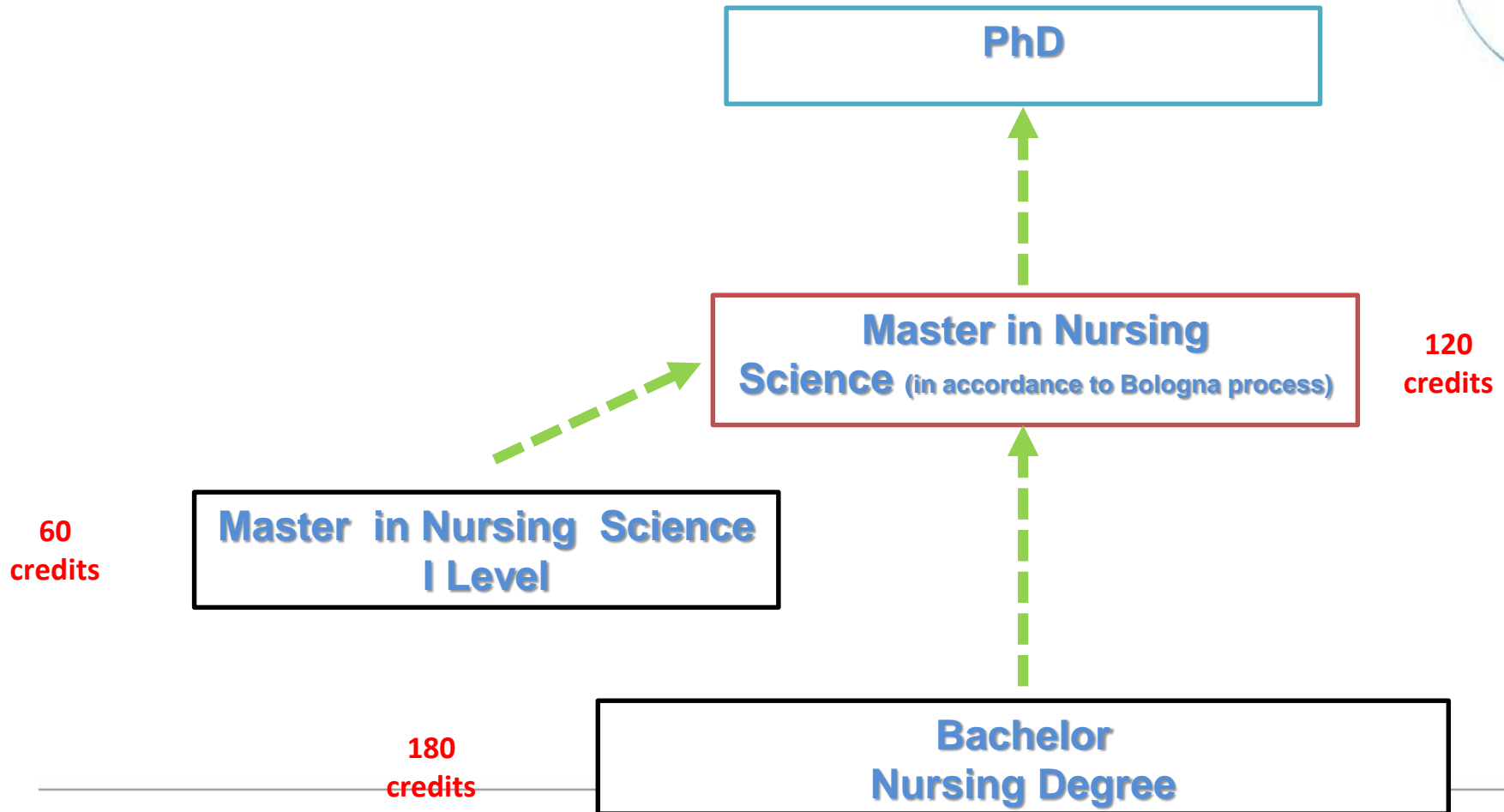
230 Bachelor Nursing Science Degrees

Duration: 3 and ½ years

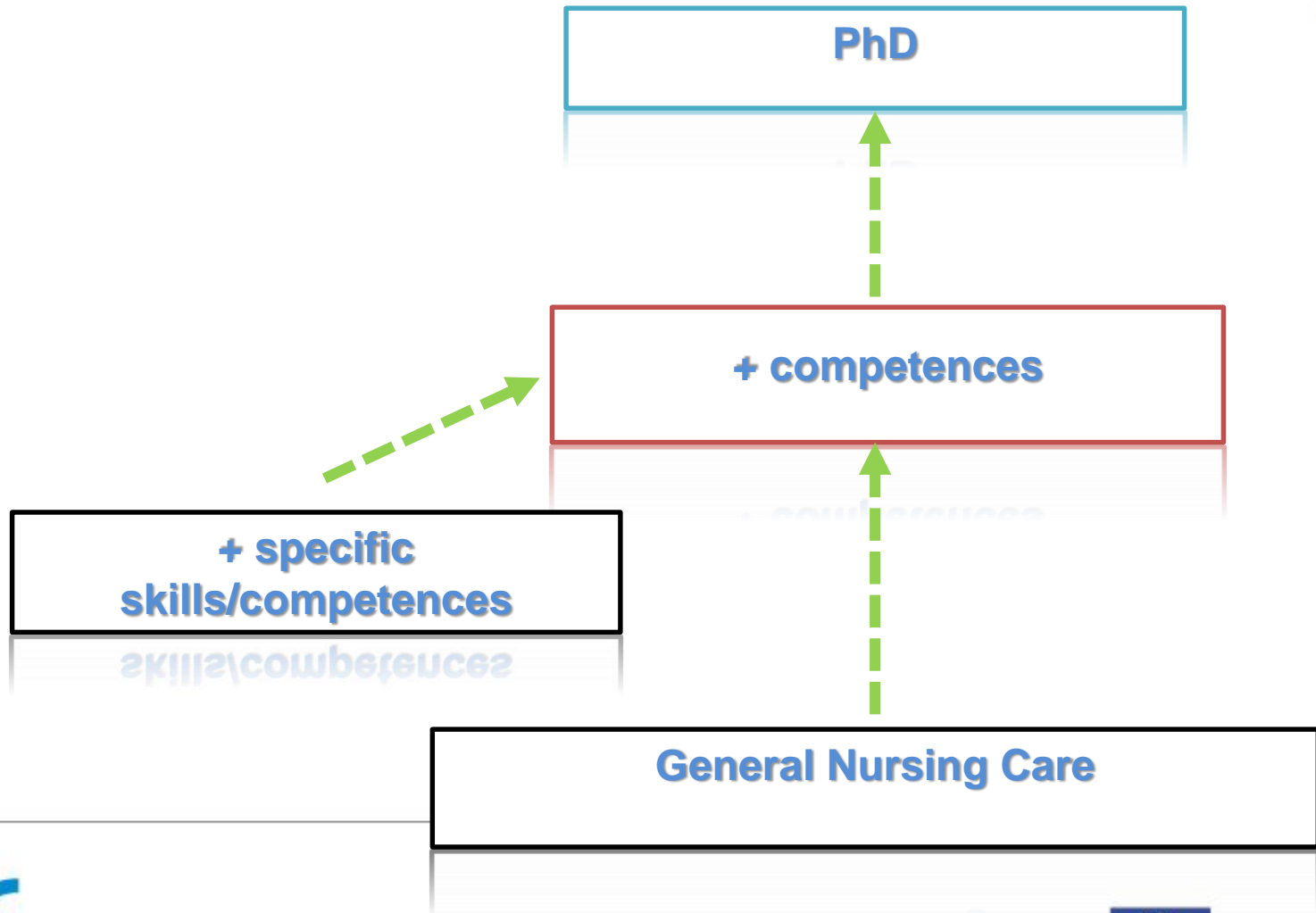
>15,000 nursing students enrolled/year

≈ 35% : Academic failure

1) Nursing scope of practice and advancements in skills *Facts and figures* (3)

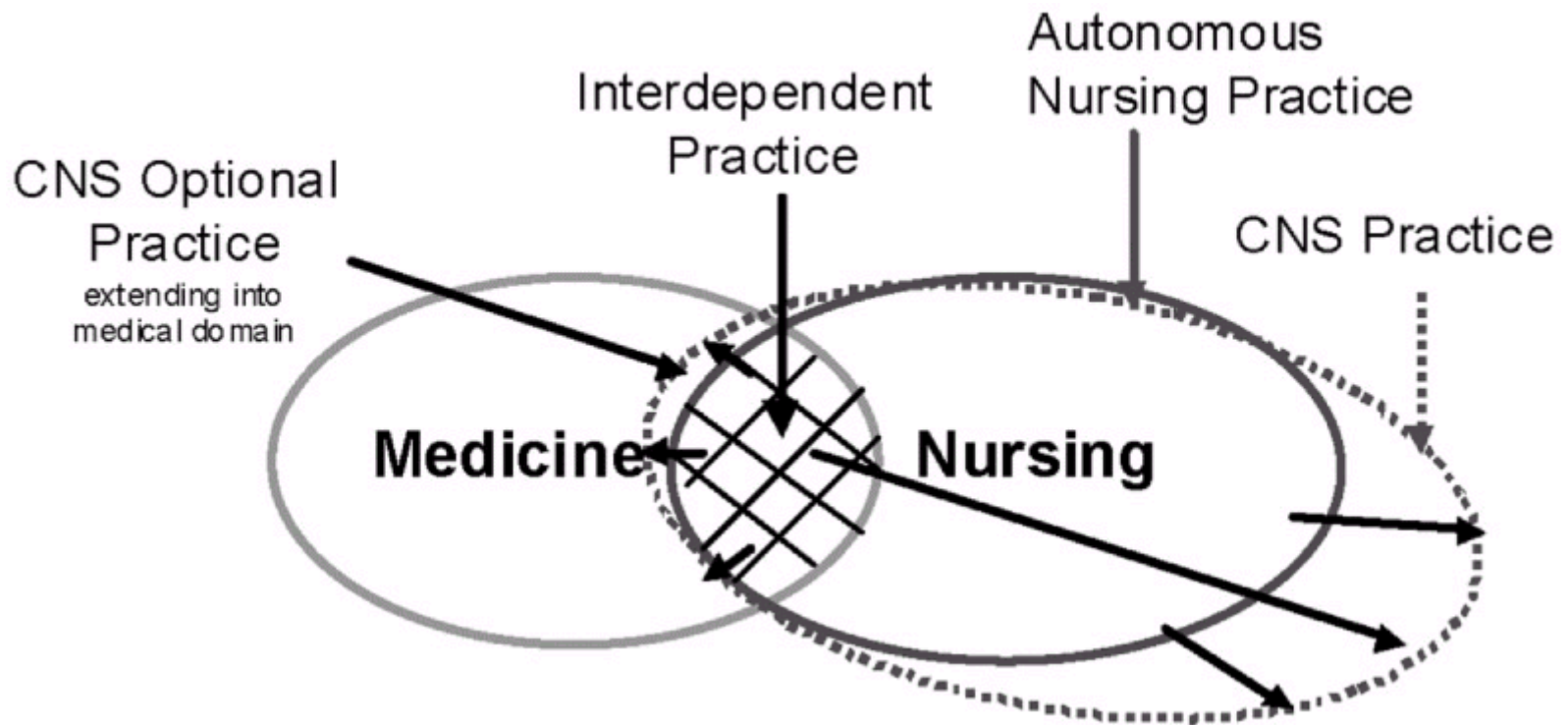


1) Nursing scope of practice and advancements in skills *Facts and figures* (4)



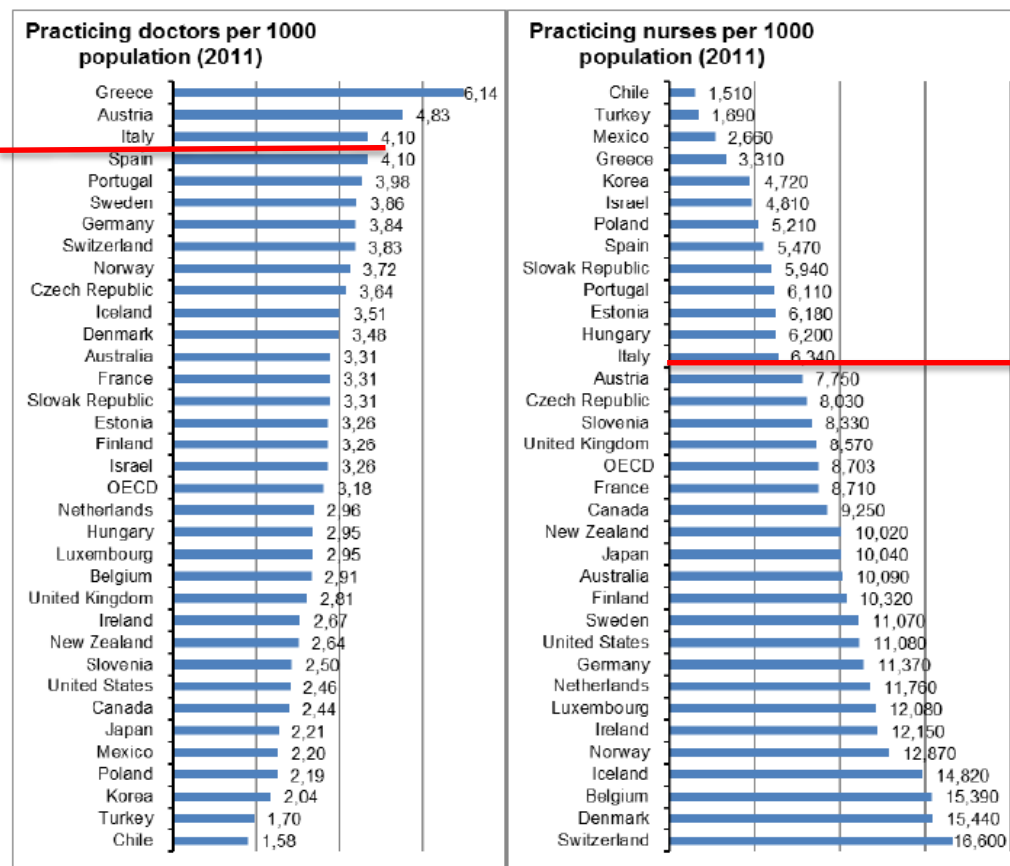
1) Nursing scope of practice and advancements in skills

Facts and figures (5)



1) Nursing scope of practice and advancements in skills *Facts and figures (6)*

Medici e infermieri in rapporto alla popolazione, dati OCSE 2013



1) Increasing outgoing nursing mobility in Italy as a new phenomenon: *since when and why* (1)

Economical Constrains

1) NHS nursing positions has been frozen or reduced, and due to retirement policies revisions, likelihood of retirement have diminished therefore reducing the opportunity for new graduates to be employed (EFN 2012)

2) The above-mentioned factors have increased nurse unemployment ratios which have become one of the most important issues in several countries such as Italy, resulting from an unbalance interaction between demand and supply of nurses (ICHRN 2011; Vaughan-Whitehead 2012)

Employment ratio: **65% after 1 year of graduation (Almalaurea, 2015)**

1) Increasing outgoing nursing mobility in Italy as a new phenomenon: *since when and why* (2)

Italy was a ***Receiving country***

Until 2008/2009 = Nursing shortages

International recruitment (\approx 30,000 nurses from Eastern/Central Europe)

Italy is now a ***Donor country***

Around 2,000 newly RNs have left Italy in the last 2 years

3) Factors affecting the decision to migrate among new graduates at the moment of graduation (1)

What are the reasons?

- a. Factors affecting the decision to leave Italy: target sample of nursing students at the moment of their graduation
- b. Ethical implications in leaving the country: target sample of those RNs already migrated

Aiming at identifying policies to better prepare a European workforce, but also to create new opportunities for those nurses who desire to remain in Italy

3) Factors affecting the decision to migrate among new graduates at the moment of graduation (2)

What are the reasons?

Factors/items	I will search for a nursing job in Italy (=1500)	I will search for a nursing job abroad (=575)	p-value ^a
Being professionally satisfied	7.22 (7.01-7.43)	8.69 (8.42-8.96)	0.000
Being satisfied after 3 hard years of nursing education	7.55 (7.34-7.76)	8.25 (7.90-8.59)	0.005
Applying knowledge acquired in nursing education	7.43 (7.24-7.62)	8.12 (7.79-8.46)	0.000
Being recognised in the competences	7.12 (6.91-7.34)	8.47 (8.12-8.82)	0.000
Growing as a person	6.74 (6.52-6.96)	8.98 (9.72-9.24)	0.000
Growing as a nurse	6.51 (6.29-6.74)	8.71 (8.43-8.99)	0.000
Receiving a satisfying salary	6.38 (6.14-6.61)	7.60 (7.21-7.99)	0.000
Health professionals relationship based on mutual respect	7.00 (6.76-7.24)	8.39 (8.05-8.73)	0.000
Growth country	6.00 (5.74-6.27)	7.86 (7.47-8.25)	0.000
Economically strong	5.49 (5.23-5.75)	7.06 (6.59-7.52)	0.000
Finding a job as a nurse is possible	5.49 (5.25-5.70)	7.13 (6.70-7.56)	0.000
Working with acceptable workloads	6.74 (6.51-6.97)	7.29 (6.86-7.72)	0.001
Working in safety context	6.77 (6.53-7.01)	7.28 (6.84-7.73)	0.125
Working in a clinical setting to me known	6.66 (6.43-6.89)	4.43 (3.89-4.96)	0.000
Working with acceptable nurse-to-patient ratios	4.98 (4.74-5.23)	5.63 (5.15-6.12)	0.004

From 0 (not important) , 10 (really important), Palese, Saiani et al, under publication

3) Factors affecting the decision to migrate among new graduates at the moment of graduation (3)

What are the reasons?

Human rights conflicts experienced by nurses migrating between developed countries

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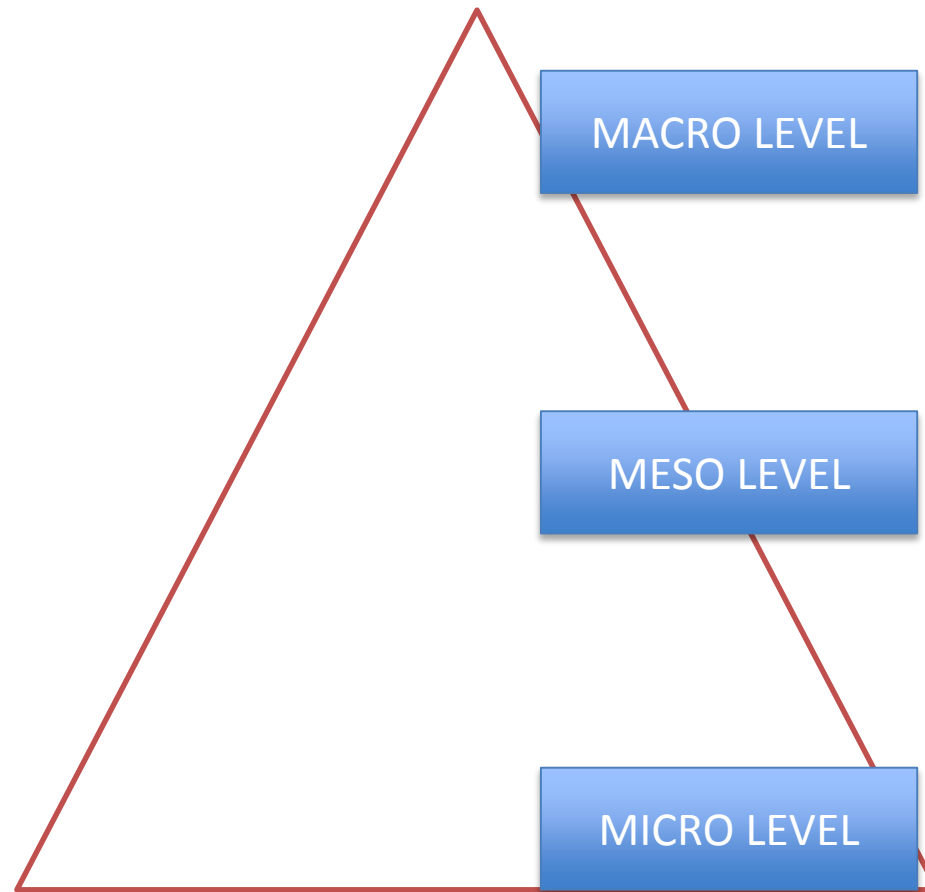
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3) Strategies that have been enacted in Italy to deal with the increased complexity of the nursing workforce (1)



3) Strategies (2)

MACRO – LEVEL

Health system

- a. WP5 outcomes! quantitative model based planning methodologies (both supply-side and demand-side), for the first time in Italy
- b. Developing policies defining the skill-mix as well as the nurse – to – patient ratios at the hospital and community levels
- c. Creating the basis for the recognition of the advanced competences/skills acquired by nurses at the academic level

Education system

- a. Designing strategies supporting students who desire to gain experience in the EU
- b. Including English language (and other languages) as mandatory learning outcomes and credits both at the Bachelors and at the Masters levels of education
- c. Evaluating on annual basis, the ratio of students who have experience abroad (also as a source of funding for the Universities from the Ministry of Education)
- d. Increasing support towards the creation of Bachelors involving foreign teachers as well as different languages (international Degrees)

3) Strategies (3)

MACRO – LEVEL

Proportion of nursing students with Erasmus experience at graduation

2014: 3.5%

2009: 2.6%

2004: 1.6%

(Almalaurea, 2015)

3) Strategies (4)

MESO – LEVEL

Italy

**Working Group on
Designing and Implementing
The Supplement Diploma**

**Working Groups on skill advancements
and education pathways**

**Working groups on how to redesign
clinical environments and nursing
leadership**

International Groups

Multiple research groups

- a. Factors affecting the learning outcomes of students at the EU level
- b. Educational pathways with regard to clinical learning and skills acquired by nursing students
- c. Framework and methods used to evaluate skills in international students

Aimed at harmonising education pathways/outcomes and sharing different experiences

3) Strategies (5)

International Groups



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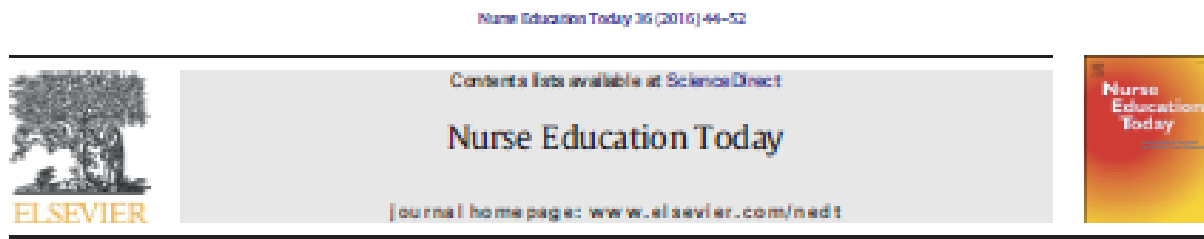


Nursing student profiles and occurrence of early academic failure: Findings from an explorative European study

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3) Strategies (6)

International Groups



Patterns of clinical mentorship in undergraduate nurse education: A comparative case analysis of eleven EU and non-EU countries☆



Beata Dobrowolska ^{a*}, Ian McGonagle ^{b,1}, Roslyn Kane ^{b,2}, Christine S. Jackson ^{b,3}, Barbara Kegl ^{c,4}, Michael Bergin ^{d,5}, Esther Cabrera ^{a,6}, Dianne Cooney-Miner ^{d,7}, Veronika Di Cara ^{a,8}, Zvonko Dimoski ^{b,9}, Divna Kekus ^{1,10}, Majda Pajnikhar ^{1,11}, Nada Prije ^{k,12}, Arun K. Sigurdardottir ^{1,13}, John Wells ^{m,14}, Alvisa Palese ^{a,15}

3) Strategies (8)

MICRO – LEVEL

Increasing strategies for Internationalization at Home

- a. 'Buddy system' is offered in several universities where local nurse students take care of foreign nursing students during their experience
- b. Briefing and Debriefing seminars in English are offered both for those internationally educated students and not, aimed at sharing experience and knowledge
- c. Increased exchange of teachers aimed at sharing educational tools and developing/harmonising strategies for students studying abroad
- d. Increased opportunity also for clinical instructors to have experience abroad inside of the Bilateral Agreements developed between institutions

3) Strategies (9)

MICRO – LEVEL

Increasing the degree of preparedness of outgoing students

- a. Developing cultural sensitivity and knowledge with regard to the host country
- b. Understanding the nursing scope of practice and the needs of patients by reading international literature
- c. Designing the project as self-directed learners, aimed at increasing self-directed learning and the ability to adapt the learning goals on the basis of the challenges encountered in the new Country/ontext
- d. Sharing with other students the learning experience, using technologies (e.g. Skype) also during the experience abroad aimed also at maintaining contacts and the sense of the community.

Lessons we have learnt

Thank you!