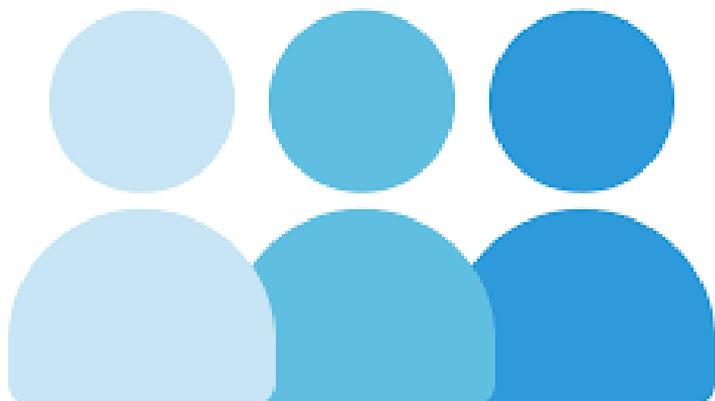


Professional specialisation in the present EU regulatory environment

*Some reflections on
current opportunities
and challenges*



ECCO: the united voice of European cancer professionals



23 member societies representing 150,000 HCPs



17 patient associations within its Patient Advisory Committee

What we stand for

“To improve outcomes for all cancer patients in Europe through multidisciplinary”

Which includes...

...strong support for the value and role of specialised cancer nursing



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EUROPEAN CANCER ORGANISATION

Value of Specialised Cancer Nursing

Position statement

November 2016 (reviewed April 2017)

Acknowledgement: This position statement has been produced by the [European CanCer Organisation \(ECCO\)](http://www.ecco-org.eu), a federation of 25 professional societies in oncology, in collaboration with the [ECCO Patient Advisory Committee \(PAC\)](#).

<https://www.ecco-org.eu/Global/News/Latest-News/2017/05/NEWS-Specialist-cancer-nurses-the-key-to-best-care-for-cancer-patients>

...and core support to the RECaN project

RECaN PROJECT: RECOGNISING EUROPEAN CANCER NURSING



RECaN – Gathering evidence on the status of cancer nursing

Recognising European Cancer Nursing (RECaN) is a major project led by the European Oncology Nursing Society (EONS) and supported by the European Cancer Organisation (ECCO).

The overall goal is to increase recognition of the value and contribution of cancer nursing across Europe – focusing on expert cancer nursing skills, research, education, clinical

FURTHER INFORMATION

ECCO Position Paper: Value of Specialised Cancer Nursing

[+ View the position paper](#)

Professor Daniel Kally gives a video introduction to the RECaN project

[+ View videos](#)

[+ Find out more](#)

Additionally...



...ECCO advances understanding and recognition of the core role of specialised cancer nursing in the provision of Quality Cancer Care through its

Essential Requirements for Quality Cancer Care documents



ESSENTIAL REQUIREMENTS FOR QUALITY CANCER CARE

www.ecco-org.eu/erqcc

#ERQCC #qualitycancercare

Example: Colorectal cancer

Nursing a person with CRC requires a range of roles. Nurses use communication, technical and observation skills to conduct a holistic assessment to identify and then address physical, psychological and social needs throughout the care pathway. They promote patient autonomy and self-management where possible, through personalised information and support. Due to the increasing complexity of care, there is a requirement for highly-specialised cancer nursing (National Cancer Action Team, 2010; Macmillan Cancer Support, 2011). Extended nursing roles for CRC (often known as nurse practitioners) are now common in some countries and they include performing endoscopy, stoma care, and delivering systemic treatments and survivorship care, including organising surveillance on consequences of treatment.

Essential requirements:

- Nurses working in CRC centres must have insight into each patient's experience of their disease, treatment and side-effects
- They must provide information and education to the patient and family and be the point of contact for them where they act as case managers
- Nurses must act in the best interest of the patient and their family to help coordinate the diagnosis, treatment and after-care of a person with CRC
- They must represent the patient's psychosocial needs and preferences within the MDT
- Nurses must help make referrals to other services, such as to a psychologist if there is a concern about distress.

See also
ERQCCs for:
-Sarcoma
-Melanoma
-Oesophageal-
gastric cancer

www.ecco-org.eu/ERQCC



In short...

...specialist cancer nursing is central to quality multidisciplinary care to cancer patients; the heart of the ECCO mission.

Be assured of ECCO's fulsome support for the advancement of specialist cancer nursing!

<https://www.ecco-org.eu/About-Ecco/Mission/>

Some reflections on current opportunities and challenges for specialised cancer nursing recognition in the current EU policy environment



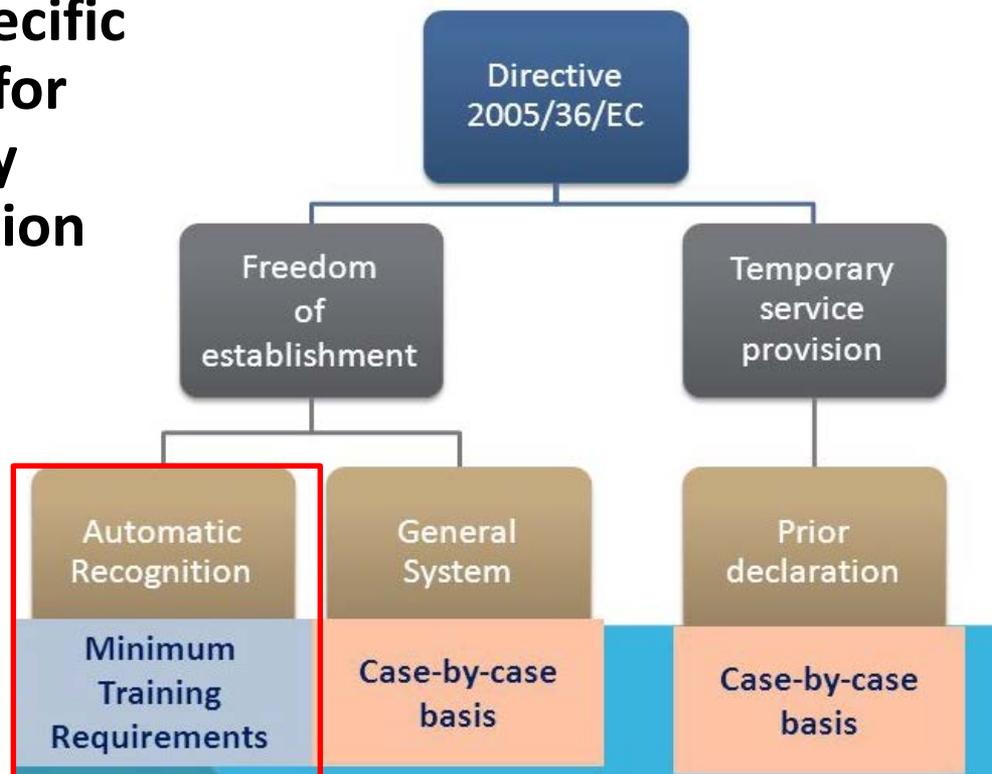


Background: the Professional Qualifications Directive

7 professions “automatically recognised”:

- Doctors
- Dentists
- Nurses**
- Pharmacists
- Midwives
- Veterinarians
- Architects

} **With specific articles for specialty recognition**



Current context: the 2013 update

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Opportunity?

- Common training framework & common training test

Challenge

- Proportionality Test Directive

Something of both:

- European Commission regulated professions database

Opportunity? Common training principles

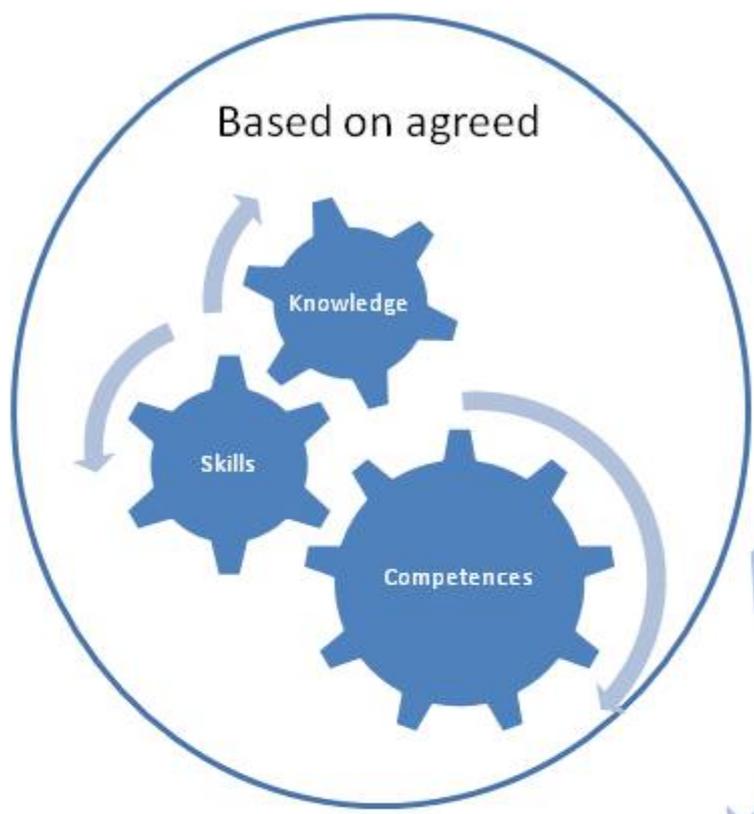
The modernised directive introduces the possibility to set up "common training frameworks" and "common training tests", aimed at offering **a new avenue for automatic recognition.**

A common training framework should be based on **a common set of knowledge, skills and competences** necessary to pursue a profession.

Opportunity? Common training principles

A common training framework or test can be set up if the education and training leading to the profession is regulated in at least one third of the Member States.

Specialties of sectoral professions may also develop common training principles. The Commission may introduce such frameworks by delegated acts. Member States may be exempted under specific conditions.



Linked to the **European Qualifications Framework**

Operates on a **voluntary basis**

Common Training Framework

Minimum of 10 EU states

'**automatic recognition**' across countries

Professional associations can take the lead



Opportunity? Common training principles

- Many prospective professions interested including: engineers, specialist veterinarians, laboratory medicine, and hospital pharmacists.
- No profession has yet completed a legalised common training framework
- Guidance and other active assistance from the Commission has not yet been forthcoming

Challenge: Proportionality Test Directive

- Part of overall efforts by the European Union to reduce regulatory burden and obstacles to labour mobility
- Directive mandates that new regulations for a profession adopted by any Member State are supported by a **proportionality assessment**, substantiated by qualitative and, wherever possible, quantitative evidence

Challenge: Proportionality Test Directive

- A campaign to exclude health professions from these requirements was not fully successful but did give some recognition to the special case for healthcare professional regulation
- Cases for new regulation, such as specialist cancer nursing, can very likely meet these proportionality tests, but it does underline the need for a strong supporting evidence base

For awareness: Regulatory modernisation exercise

- As an additional regulatory modernization exercise the Commission has now constructed a “regulated professions database”
- It aims to improve access to reliable information about the regulation of professions across Europe
- Likely to have both regulatory and de-regulatory impacts

In summary:

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For specialist cancer nursing, and any potential legal recognition at EU level...

- **The case must be made at both EU and national levels in a coordinated way**
- The evidence base to support the case must be strong and well presented
- De-regulatory ‘chill’ winds are likely to persist but are by no means insurmountable for core health specialties such as cancer nursing.

Before I finish...

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Lets continue the conversation...

ECCO2018
EUROPEAN CANCER SUMMIT

SAVE THE DATE
7-9 September 2018
Vienna, Austria

 **European
CanCer
Organisation**

eccosummit.eu



..and ensure European health systems value cancer nursing!

Access and Value: Its about the entire cancer pathway

NEW HORIZON SESSION

Those involved in cancer care know well the transformative impact of non-pharmaceutical treatments and care. Improving patient outcomes is about so much more than new medicines. Yet this does not seem adequately reflected in the current access debate.

Part 1 of the session will examine the potential for applying scales for assessing value in the pharmaceutical domain to innovations in the non-systemic treatment sector (e.g. radiation oncology and surgery).

Part 2 of the session will examine how the role of professional care to cancer patients, and other interventions, can be better valued and recognised within national health systems.

THANK YOU