Regulatory models and shared challenges

• ‘Without a doubt, healthcare workers are on the move. In the new millennium, they are moving across national borders in significant numbers, and policy analysts and academics are taking note of the phenomenon’ (Choy 2010, p.13)

• Nurse migration affects both the health of the country they leave and the nation they adopt (Stievan et al., 2018)

• In some way, the effects of nurse migration have a very broad magnitude, as those effects range from health to social phenomena (e.g. the regulation of nurses has an impact on the status of women in both host and native countries)
Regulatory models and shared challenges

• And why regulation in this context:

  • ‘What is typically involved [in regulation] is the oversight of curricula and accreditation of schools, the maintenance of the register and the management of misconduct’ (Nelson 2013, p. 86)

  • Regulation also provides a number of important strategies and answers to the current professional challenges (shared or/and peculiar)

• Nursing regulatory bodies traditionally change in response to many factors such as societal turns, national health priorities and global economics. **What about ITALY?**
Regulatory models in Italy: a glance via some milestones

• Italy’s national health service (NHS) → 1978. Nursing regulatory board was established in 1954 → (Law 1049/1954)

• A number of normative advancements have conducted to the current nursing status:
  • Nursing is a **self-regulated profession** and practice is addressed by 3 main tenets (law 42/1999):
    1. Professional Profile (Decree of the Ministry of Health 739/1994)
    2. Education
    3. Ethical code (last was approved in May 2019)

• Recently, **Law 3/2018** has confirmed and strengthen the nursing profession autonomy, recognizing the complete fulfillment of the nursing regulatory body
## Context

### Registered Nurses in Italy (2018)

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<tr>
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<th>N</th>
<th>%</th>
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<tbody>
<tr>
<td>Italian RNs</td>
<td>418,462</td>
<td>94.0</td>
</tr>
<tr>
<td>FENs (Europe)</td>
<td>16,316</td>
<td>3.7</td>
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<tr>
<td>FENs (outside Europe)</td>
<td>10,036</td>
<td>2.3</td>
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<td><strong>Total</strong></td>
<td><strong>444,814</strong></td>
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102 OPIs
1 Federation of OPIs (FNOPI)
In a Glance

• Nursing Regulatory system in Italy:
  • It aims to **protect the public**, and **support** and **guarantee the professionalism of nurses**

• Implications:
  • Political weight of nurses in the country (?)
  • Mid- and long- term strategy
  • Mapping of the actual challenges that require action

• Relationships with **policy-makers**, **institutions/healthcare organizations**, **trade unions/syndicates**, **professional associations**, **universities**, and **society** (Public)!
In a Glance: debates

• Do we need to broaden the nursing scope of practice in Italy?
• In which way?

  • Who (which nurses? Advanced practitioners?)
  • What (prescription, planning, primary care, …)
  • When (now, tomorrow or when?)
  • Where (in all the country?)
  • Why (shortages in primary, secondary and tertiary care, sustainability, …)
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