

FINE LUXEMBOURG DECLARATION
FOR
THE FUTURE OF NURSING EDUCATION IN
EUROPE



On behalf of the FINE

Cécile DURY, FINE President (Belgium)

Executive Board members: Maria Cassar (FINE Vice-president, Malta), Antonio Bonacaro (Italy), Dimitris Theofanidis (Greece), Helga Bragadóttir (Iceland), Jean-Francois Jézégou (France), Mirko Prosen (Slovenia), Olivier Morenon (Switzerland), Sara Pinto (Portugal).

To cite this document:

European Federation of Educators in Nursing Science. FINE Luxembourg declaration for the future of nursing education in Europe. Place: European Federation of Educators in Nursing Science; 2025. Available from: https://www.fine-europe.eu/

Website: www.fine-europe.eu Contact: cecile.dury@henallux.be

This work is published under the responsibility of the executive board of FINE. The declaration was adopted during the workgroup meeting in Luxembourg on 5th and 6th December 2024, organised in collaboration with FINE BEL - LUX, l'Ecole Nationale de Santé du Luxembourg and the University of Luxembourg.

This declaration reflects the collective input and consensus of the participants, and the collaborative efforts of all the participants are integral to its content.

The executive board of FINE, acknowledges their valuable contributions and presents this statement on their behalf.





FINE Luxembourg declaration for the future of nursing education in Europe

Representatives of the *European Federation of Educators in Nursing Science* (FINE), speaking on behalf of nursing education institutions across Europe, gathered in Luxembourg in December 2024 to participate in the Workgroup on the future of nursing education, under the theme "*Meeting healthcare needs through nurse education in Europe*". Acknowledging the critical importance of adaptable and future-focused education systems to meet societal health demands, and reiterating FINE's commitment to advancing nursing education as a pillar of high-quality, patient-centred healthcare, FINE commits to:

- Developing and integrating innovative, evidence-based approaches to nursing education across Europe, ensuring alignment with the health needs of populations and encompassing both pre-registration and continuing education.
- Fostering the development of an enduring and dynamic network of experts and stakeholders in nursing education, dedicated to driving innovation, sharing knowledge, and proposing actionable solutions at institutional, national, and international levels.

Through this declaration, FINE confirms its commitment to the ongoing enhancement of nursing education. FINE strives for excellence and innovation to prepare a skilled, adaptable, and sustainable nursing workforce that prioritises the well-being of all people and is equipped to tackle the evolving healthcare challenges of the future.





FINE aims

- Identify the strengths and weaknesses of current nursing education systems.
- Describe and discuss the challenges and opportunities for the development of nursing education.
- Share the countries' experiences that have changed or aligned pre- registration nurse education to the *European Qualifications Framework* (EQF) level 6.
- Develop a case for establishing a clear continuum of nursing education across Europe.
- Discuss how innovation may influence the education and career pathways of nurse educators.
- Sustain a network of partners to pursue the discussion on pre- registration and continuing nursing education.





Current trends and facts

The healthcare workforce and the need for a sustainable nursing profession

Ensuring a strong and sustainable nursing workforce is crucial for maintaining high-quality healthcare systems. Healthcare plays a significant role in Europe's economy, accounting for approximately 10% of the region's Gross domestic product (GDP).

Within this sector, healthcare professionals represent around 10% of the workforce, with nurses representing the largest group. Nurses play a pivotal role in delivering care across countless countries and healthcare contexts. The expertise and dedication of nurses are fundamental to the effective functioning of healthcare systems and key players in safeguarding and promoting the health and well-being of populations.

However, despite their vital contributions, the sustainability of the nursing workforce faces several ongoing challenges.

Missed potential of nurses' competencies and inefficient resource allocation

According to the Organisation for Economic Co-operation and Development (OECD, 2016), there is a significant discrepancy between nurses' qualifications and the work performed. While 40% of nurses report feeling insufficiently qualified for key functions like problem- solving, self-organisation, and clinical leadership, 70% to 80% of the nursing workforce believes they are overqualified for routine tasks such as meal distribution, cleaning rooms, and sanitising equipment.

- Many countries face widespread resource wastage due to inadequate investment in health promotion and prevention at all levels.
- The inefficient and inappropriate use of nurses' skills and competencies is prevalent across many healthcare systems. This problem is further exacerbated by a lack of alignment between nursing education, the *EQF* and the Bologna Process. Additionally, these frameworks do not adequately address how to measure the competencies acquired through nursing education for general care.
- According to the *Organisation for Economic Co-operation and Development* (OECD, 2016), 1 there is a significant discrepancy between .

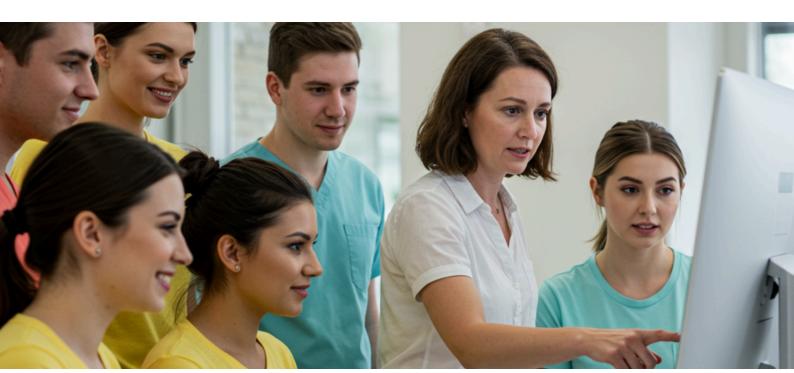
¹ OECD. Health Workforce Policies in OECD Countries: Right Jobs, Right Skills, Right Places [Internet]. Paris: OECD Health Policy Studies, OECD Publishing; 2016. doi: https://doi.org/10.1787/9789264239517-en.



Missed potential of nurses' competencies and inefficient resource allocation

According to the Organisation for Economic Co-operation and Development (OECD, 2016), there is a significant discrepancy between nurses' qualifications and the work performed. While 40% of nurses report feeling insufficiently qualified for key functions like problem- solving, self-organisation, and clinical leadership, 70% to 80% of the nursing workforce believes they are overqualified for routine tasks such as meal distribution, cleaning rooms, and sanitising equipment. 2

- Many countries face widespread resource wastage due to inadequate investment in health promotion and prevention at all levels. 3
- The inefficient and inappropriate use of nurses' skills and competencies is prevalent across many healthcare systems. This problem is further exacerbated by a lack of alignment between nursing education, the EQF and the Bologna Process. Additionally, these frameworks do not adequately address how to measure the competencies acquired through nursing education for general care.
- According to the Organisation for Economic Co-operation and Development (OECD, 2016), there is a significant discrepancy between.



¹ OECD. Health Workforce Policies in OECD Countries: Right Jobs, Right Skills, Right Places [Internet]. Paris: OECD

Health Policy Studies, OECD Publishing; 2016. doi: https://doi.org/10.1787/9789264239517-en.

Anderson M, Taylor N, Rowley T, Owens C, Iacob E. Understanding factors influencing nursing faculty departure and intentions. Nurse Educ. 2024;49(4):222–226. doi:10.1097/NNE.00000000001612.

³ Fang D, Zangaro GA, Kesten K. Assessment of nursing faculty retirement projections. Nurs Outlook. 2024;72(2):102135. doi:10.1016/j.outlook.2024.102135.



Challenges in (pre-registration) nurse education

Effective nurse education is essential for addressing ongoing healthcare challenges. However, several barriers remain, namely:

- The European Directive 2005/36/EC 'Directive', ⁴ reviewed in 2013, does not adequately reference the EQF or the Bologna Process.⁵ As a result, it fails to support the synchronization of nursing education programmes across countries and not facilitate the automatic recognition of nursing competencies among Member States. Consequently, it has the contrary effect of what the Directive intended.
- In some Member States, there are two parallel pre-registration programmes for nurses responsible for general care, aligned at different levels of the EQF, specifically levels 5 and 6, spanning vocational and higher education. Although these professionals follow distinctly different educational paths, they both receive the same title of nurse responsible for general care and perform identical roles. These countries claim that they comply with the minimum requirements set by the Directive. However, the lack of alignment between the Directive, the EQF, and Bologna levels makes it challenging for Member States to prioritise the costlier and often more comprehensive higher education pathway, especially during critical nursing shortages. While choosing more cost-effective education may result in immediate savings, it can incur greater long-term costs, as the retention of nurses and the development of their competencies are more effectively fostered through comprehensive higher education. With the increasing number of elderly, frail, and chronically ill patients, the complexity of nursing care and healthcare, in general, necessitates more advanced and specialised competencies.

⁴ European Commission. Directive 2011/24/EU of the European Parliament and of the Council of 9 March 2011 on the application of patients' rights in cross-border healthcare. OJEC. 2011; L 88: 45–65. https://eurlex.europa.eu/eli/dir/2011/24/oj

⁵ European Commission. The Bologna Process and the European Higher Education Area [Internet]. European Education Area; 2022. Available from: https://education.ec.europa.eu/education-levels/higher-education/inclusive-and-connected-higher-education/bologna-process

⁶ Rafferty AM, Busse R, Zander-Jentsch B, Sermeus W, Bruyneel L, eds. Strengthening health systems through nursing: Evidence from 14 European countries. Copenhague (Danemark): European Observatory on Health Systems and Policies; 2019. (Health Policy Series, n° 52). ISBN: 978-92-890-5174-3. Disponible à l'adresse: https://apps.who.int/iris/handle/10665/326183



The definition of clinical training and the number of hours specified in the Directive primarily focus on bedside care and do not accommodate contemporary and innovative teaching and learning methods, such as simulation. These methods could enhance clinical practice and support the delivery of safe, high-quality, and effective nursing care.

Recommendations indicate that innovative approaches are more likely to enable the development of the competencies required for nursing practice.

Furthermore, there is a lack of evidence demonstrating that the number of hours of clinical training stipulated by the Directive contributes to developing the expected competencies. Simulations in nursing education is an educational modality that creates or recreates a clinical situation (whether in a hospital, out of-hospital), with one or more healthy or sick people, a community, among others) or an environment that enables learners in initial or continuing education to experience a representation of a real event for the purposes of practice, learning, assessment, testing, or to better understand human systems or actions. This modality replaces or amplifies real-world experiences with guided





The definition of clinical training and the number of hours specified in the Directive primarily focus on bedside care and do not accommodate contemporary and innovative teaching and learning methods, such as simulation. These methods could enhance clinical practice and support the delivery of safe, high-quality, and effective nursing care. Recommendations indicate that innovative approaches are more likely to enable the development of the competencies required for nursing practice. Furthermore, there is a lack of evidence demonstrating that the number of hours of clinical training stipulated by the Directive contributes to developing the expected competencies. Simulations in nursing education is an educational modality that creates or recreates a clinical situation (whether in a hospital, out of-hospital), with one or more healthy or sick people, a community, among others) or an environment that enables learners in initial or continuing education to experience a representation of a real event for the purposes of practice, learning, assessment, testing, or to better understand human systems or actions. This modality replaces or amplifies real-world experiences with guided experiments that evoke or reproduce substantial aspects of the real world in a fully interactive way. 7, 8, 9, 10



⁷ Lioce L (Ed.), Downing D, Chang TP, Robertson JM, Anderson M, Diaz DA, & Spain AE. (Assoc. Eds.) and the Terminology and Concepts Working Group. Healthcare Simulation Dictionary. 2nd ed. Rockville, MD: Agency for Healthcare Research and Quality; 2020.

⁸ INACSL Standards Committee, Watts PI, McDermott DS, Alinier G, Charnetski M, & Nawathe PA. Healthcare Simulation Standards of Best Practice™: Simulation Design. Clin Simul Nurs. 2021; 58: 14–21. doi: https://doi.org/10.1016/j.ecns.2021.08.009.

⁹ Gaba DM. The future vision of simulation in health care. Qual Saf Health Care. 2004;13 Suppl 1(Suppl 1): i2–i10. doi:10.1136/qhc.13.suppl_1.i2

¹⁰ Lewis KL, Bohnert CA, Gammon WL, et al. The Association of Standardized Patient Educators (ASPE) Standards of Best Practice (SOBP). Adv Simul. 2017;2:10. doi:10.1186/s41077-017-0043-4.

Harder N. Replace is Not a Four Letter Word. Clinical Simulation in Nursing. 2015;11(7):273–274. doi:10.1016/j.ecns.2015.03.005. Disponible à l'adresse : https://www.nursingsimulation.org/article/S1876-1399(15)00057-2/fulltext



During clinical practice, students face several challenges. One major issue is being assigned tasks that do not align with their learning objectives, allocated with insufficient mentorship and professional guidance. Additionally, supervision is often provided by nurses who may have similar or even fewer qualifications than the students, which can limit opportunities for advanced mentorship and skill development.

Simulation-based learning offers a valuable opportunity for clinical education without compromising the quality of care in clinical settings. However, its integration remains not fully leveraged in many contexts.

The qualifications required for ¹nursing educators differ across Europe, ranging from bachelor's degrees to doctoral-level degrees. Additionally, the training for nurse educators significantly differs between countries and contexts. A strong understanding of nursing knowledge is essential for helping students grasp the essence of nursing and structure effective nursing interventions. This understanding is crucial for the development of students' professional competencies and identities.

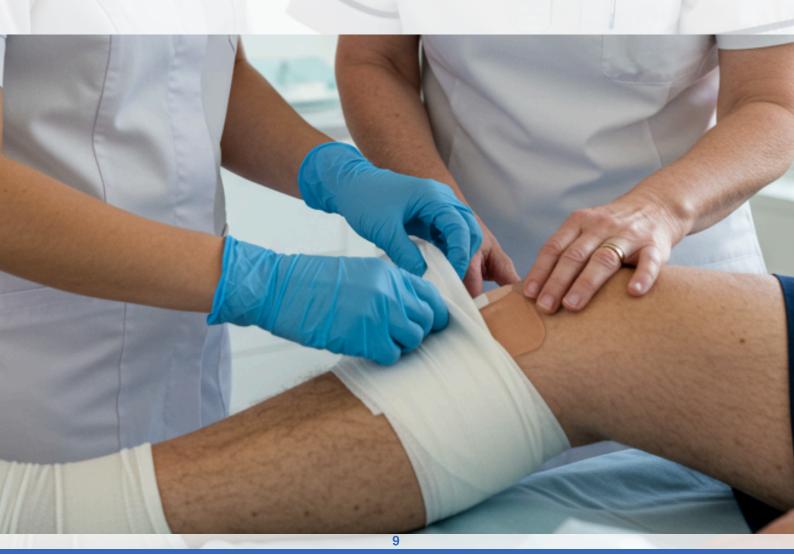
Many countries experience a lack of training in providing support to trainees, which can lead to issues such as bullying and a poor welcome for new students.





Attractiveness and mobility challenges in the nursing profession

- The nursing profession faces ongoing challenges in attracting new talent, primarily
 due to poor work conditions and limited opportunities for career development.
 These issues persist despite the critical role nurses play in healthcare systems.
- The migration of nurses from lower-income countries to higher-income countries worsens global healthcare disparities. This movement diminishes the workforce in resource-poor regions, making it increasingly difficult to meet rising care demands.
- The aging nursing faculty poses a significant threat to the sustainability of nursing education and the quality of patient care. As experienced nursing educators retire, a critical knowledge gap emerges, compromising the preparation of future nurses.
 To ensure the best patient outcomes, it is imperative to invest in strategies that attract and retain nursing faculty. This includes offering competitive salaries, reducing workloads, and providing opportunities for professional development.





Against this backdrop FINE envisions to:

Encourage better alignment and more effective use of healthcare professionals' competences, particularly general care nurses and advanced practice nurses, ensuring that the right people, with the right skills are in the appropriate roles. 12

To achieve this, a common tool should be provided to establish a shared vision of the roles and skills expected at each level of training. This approach should consider equitable resource distribution, focusing on sustainability and reducing health disparities across Europe. Additionally, it should address the importance for safe staffing and establish evidence-based patient-to-nurse ratios. This work must be conducted in close collaboration between academia and the healthcare sector.

¹² International Council of Nurses. *Guidelines on advanced practice nursing 2020*. Geneva: ICN-International Council of Nurses; 2020.



Strengthen knowledge and skills in pre-registration and continuing education

- Strengthen the knowledge and skills of nurses by integrating cutting-edge technologies, evidence-based practices, and Artificial Intelligence (AI)-driven tools into nursing programmes, in collaboration with healthcare systems and technological advances. This includes the use of simulation, virtual and augmented reality, elearning platforms, and digital tools to enhance the learning experience. Additionally, include modules on climate change-related health impacts and sustainable healthcare practices.
- Develop initiatives that support the social, mental and spiritual health of nursing students. This includes providing access to social and psychological services, establishing peer support groups, and offering dedicated mental health resources within educational and training institutions.
- Establish the roles of specialist and advanced practice nurses within health care systems.





- Amend Directive revised in 2013, by:
- Requiring nurses responsible for general care to hold an EQF level 6 qualification, a bachelor's degree, and to complete a nursing education curriculum that offers European Credit Transferred System (ECTS) credits, including clinical training.
- Extending the definition of clinical education to include simulation activities and the development of other competencies beyond direct care, similar to practices in other countries where the quality of nursing education is recognised. ¹³
- Revising Annex V of the Directive to include contemporary concepts related to nurses and nursing care delivery, ensuring alignment with current realities across Europe and future-proofing the profession. ^{14, 15}
- Including dedicated modules on community health, environmental health and palliative care nursing, which address social determinants of health and strategies to reduce health inequalities among diverse populations.
- Integrating training on digital healthcare platforms and telehealth into nursing education, equipping nurses with the necessary skills to provide high-quality, patient-centered remote care in an increasingly digital healthcare landscape.



¹³ European Commission. Directive 2013/55/EU of the European Parliament and of the Council of 20 November 2013 amending Directive 2005/36/EC on the recognition of professional qualifications and Regulation (EU) No 1024/2012 on administrative cooperation through the Internal Market Information System ('the IMI Regulation'). OJEC. 2013; L 354/132. https://eur-lex.europa.eu/eli/dir/2013/55/oj/eng

¹⁴ Rosa W (editor). A new era in global health: Nursing and the United Nations 2030 agenda for sustainable development. New York, NY: Springer Publishing Company; 2017.

¹⁵ Dossey BM, Rosa WE, Beck DM. Nursing and the Sustainable Development Goals: From Nightingale to Now. Am J Nurs. 2019;119(5):44-49. doi:10.1097/01.NAJ.0000557912.35398.8f.



Standardisation of nursing programmes

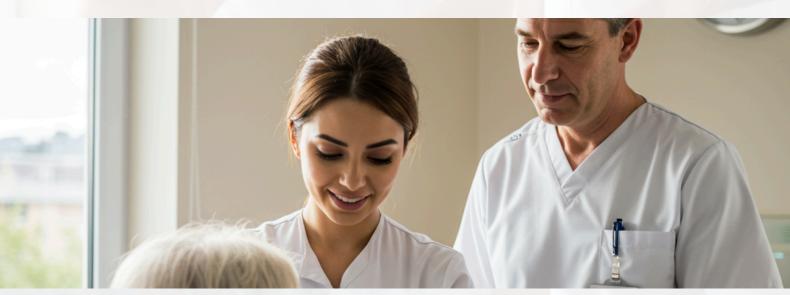
FINE advocates for the standardisation of nursing education programmes across Europe, encompassing:

- Pre-registration education
- Post-registration education
- Specialised training

This effort aims to:

- Enhance the mobility of students, faculty, and healthcare professionals,
- while addressing the complex needs of the population throughout their life cycle.
- For instance, despite the rise in chronic and life-threatening diseases, many nursing curricula lack adequate palliative care content. Legislation should clarify mandatory areas, while allowing some flexibility based on each country's specific needs.
- Ensure high-quality and consistent nursing care, as well as preparedness for global health challenges such as:
 - The global burden of health-related suffering
 - Pandemics
 - Climate crises

This standardisation will also facilitate the mobility of healthcare professionals within the European Union.





Key proposals include:

Establishing a clear continuum of education and training opportunities, outlining:

- · Descriptions of roles,
- · Competencies,
- Professional scope,
- Alongside nursing education programs that meet the proposed standards.

The continuum in nurse education programmes based on EQF levels includes:

- Level 4 to 5: nursing care assistant, health care assistant, or equivalent role
- Level 6: nurse responsible for general care
- Levels 6 to 8: specialist nurse, advanced practitioner, or consultant (depending on the country context)
- The title of "nurse responsible for general care" is specific to Level 6 (bachelor's degree) of the EQF.

Additional key measures:

- Establishing a Europe-wide mentorship programme, in which experienced nurses
 provide guidance and support to students and early-career professionals, fostering
 competence development and career growth.
- Reserving the title of nurse responsible for general care (registered nurse, RN) for those educated and trained to level 6 of the EQF.
- Avoiding the offering of different education programmes for nurses responsible for general care within the same country.
- Reserving the title and requirements for advanced practice nurses for those with at least level 7 EQF education (such as a master's degree or higher), in line with International Council of Nurses recommendations¹⁶.
- Fostering a unified European nursing identity by launching communication campaigns that enhance the public image of nursing and attract more candidates to the profession.
- These campaigns should emphasise the diversity, professionalism, and societal impact of nursing roles.

¹⁶ International Council of Nurses. Guidelines on Advanced Practice Nursing 2020. Geneva: ICN – International Council of Nurses; 2020.



Promote Research

- Promote nursing research to develop nursing interventions and to verify their effect, improve health outcomes, and influence health policy.
- Nursing education should be evidence-based, integrating research to ensure nurses
 have the necessary knowledge and skills to conduct research and shape policy.
- Nurses should have access to continuing professional development opportunities.
- Develop doctoral-level study programmes in nursing to support the advancement of the nursing discipline and science, ensuring the delivery of high-quality nursing care and the sustainability of the nursing profession.
- Establish a standardised European framework for evaluating the effectiveness of nursing education programs, focusing on:
 - Student competencies
 - Patient outcomes
 - Institutional performance

Influence Public Health Policy

FINE highlights the critical role of nursing education in shaping public health policy.

By equipping nurses with the skills necessary for:

- Political analyses
- Policy advocacy
- Leadership
- Decision-making

We can ensure that their expertise contributes to the development of equitable, preventionfocused, and sustainable health systems across Europe.



Promote Inclusion, Diversity, and Ethical Practice While Fostering Sustainability and Environmental Friendliness

Promoting inclusion and diversity in study programs is essential for preparing future healthcare professionals to work in multicultural environments and to effectively meet the needs of diverse populations.

Incorporate Ethical and Sustainable Frameworks

- Incorporating an ethical framework that emphasises:
 - Equity
 - Cultural sensitivity
 - Respect for diverse identities

in education, training, and research.

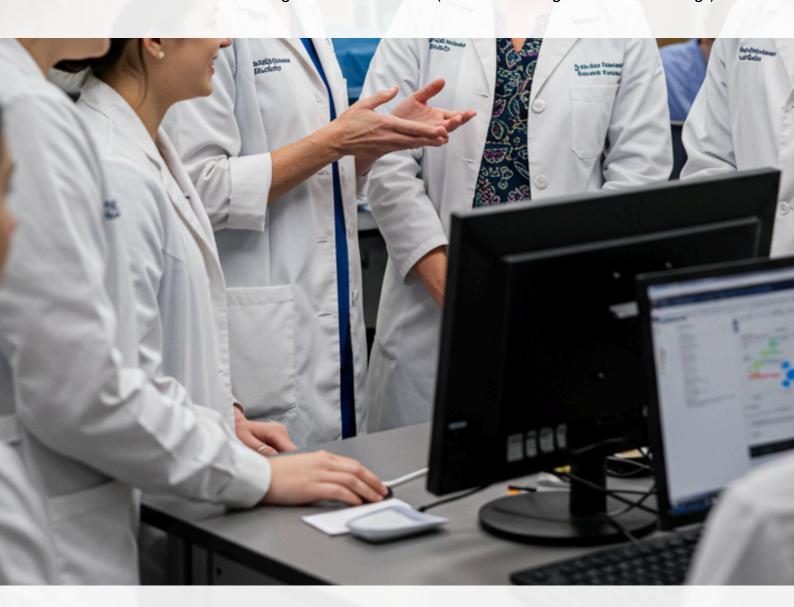
This includes fostering awareness of unconscious biases and ensuring that curricula reflect the diverse needs and values of all patient populations.

- Integrating modules on ethical decision-making into nursing curricula, addressing topics such as:
 - Equity
 - Digital confidentiality
 - Ethical implications of emerging technologies in healthcare
- Integrating sustainability principles into nursing theories and programs, focusing on:
 - Environmentally friendly healthcare practices
 - Green nursing initiatives
- This involves addressing the health impacts of climate change, and preparing nurses to manage health crisesrelated to environmental changes, such as:
 - Pandemics
 - Heatwaves
 - Natural disasters



Strengthening the Skills of Nursing Educators in Both Theoretical and Clinical Education and Training

- Provide education and training in nursing at least up to master's level (EQF level
 7), while providing tailored support for all nurse clinical educators/mentors.
- Provide pedagogical education and training for nursing academic educators, to help them develop the expected skills.
- Integrate research of academic educators and teaching at all levels of nursing education.
- Integrate experiential teaching methods, embracing a holistic approach to nursing that also focuses on cognitive embodiment ("holistic nursing = holistic teaching").



¹⁷ World Health Organization. Nurse Educator Core Competencies. Geneva: WHO Library Cataloguing-in-Publication; 2016.

17



Conclusion

In conclusion, we affirm FINE's commitment to advancing nursing education in Europe to address current and future challenges.

As a unifying network, FINE plays a pivotal role in fostering collaboration among nursing education institutions, advocating for matched standards, and driving innovation through evidence-based practices and innovative educational methods.

Together, we strive to ensure that nurses are prepared to provide high-quality, efficient, and resource-conscious care to all, with a strong focus on prevention, health promotion, and the relief of suffering.

