



News from Brussels

Year 2024 – Issue n°7: 11/07/2024

Table of contents:

- 1 Patients left in pain and to die alone amid NHS shortage, survey finds
2. Program and Priorities of the Hungarian Presidency
3. Are Lithuanian Nurses worst paid in Europe?
4. Health risk assessment in Belgium.

Patients left in pain and to die alone amid NHS shortage, survey finds

The **Royal College of Nursing** says its analysis shows that only a third of shifts have enough nurses on duty, leading to “patients being left unseen in pain and in some cases to die alone because shifts do not have enough registered nurses”.

This staff shortage is very complicated to live with as the union gathered testimonies



highlighting nurses rushing and working in completely unsafe levels of care. It goes even further with nurses having to choose whom they can see or not because they are often confronted with care for dozens of patients which is at the highest limit for a single nurse.

Of course, it is not without consequences as **Charlotte Wace** explained in the **Telegraph** of the 1st of July. She mentioned the **Royal College of Nursing** highlighting that one-third of shifts have enough nurses which can lead to care for dozens of patients for each nurse, but also an increase in hospital admissions and even deaths. **The Times**, in its issue of the 1st July, emphasized the issue of medications given several hours late with patients left in pain and without the necessary personal care. Furthermore, in **The Guardian**, **Nicola Ranger**, the **RCN's Acting General Secretary and Chief Executive**, mentioned that “nursing staff are fighting a losing battle to keep patients safe” and added that “without safety-critical limits on the maximum number of patients they can care for, nurses are being made responsible for dozens at a time, often with complex needs, (which is) dangerous to patients and demoralizing for nursing staff”.

The **RCN** also published the result of their latest survey highlighting that **only a third of hospitals and staff had the right proportion of nurses, a third of hospital shifts lacked a fourth of nurses, and 40% are missing up to half of the registered nurses**. Some nurses, in exceptional situations and emergencies reported having more than 50 patients for one nurse. Some noted that the same number of patients are being unseen daily. A nurse in the West Midlands even said “I have not been able to sit with patients who are dying meaning they have

been left to die alone. I have not had the time to make sure patients are fed properly and have adequate drinks”. Another one added that the benchmark is survival.

To conclude, **Nicola Ranger** added that if patients cannot be safe in the community, their conditions are worsening and they end up in hospitals in which the situation is as severe: a vicious cycle for staff and patients that cannot continue. He called for urgent investment in the nursing workforce “but also to see safety-critical nurse-patient ratios enshrined in law. That is how we improve care and stop patients coming to harm”.

For further information about this article, please click [here](#).

Program and priorities of the Hungarian Presidency

This staff shortage does not impact only the United Kingdom, but also the European Union. In that context the **Hungarian Presidency of the Council of the European Union** recently unveiled several proposals on the matter of healthcare and nurses.

Hungary assumed the rotating Presidency of the Council of the European Union on July 1st, succeeding to their Belgian counterparts. While immigration and security are at the forefront of Budapest’s priorities, healthcare also figures high on its list.

Environment linked to health:

One of the priorities of the Presidency is to “**contribute to a healthy and pollution-free environment**”. It will be done through the triple challenge of reducing pollution, mitigating climate change, and preserving



biodiversity. The Hungarian government notes that “**pollution not only harms our health and the environment, but it is also a direct cause of the most serious illnesses and premature deaths, particularly, but not exclusively, among children, people suffering from certain**

diseases, and the elderly. Taking action against pollution is just as important as combating climate change or preserving biodiversity.”

Employment, Social Policy and Health:

Budapest has also highlighted the labor shortage, including nurses, within the EU noting that it is affecting all sectors and regions. The Presidency’s program insists on these labor-shortages that are long-standing but -are more and more intense in Europe, also due to an aging society. The shortages in question are a significant obstacle to business growth opportunities and deteriorate our competitiveness. They necessitate an urgent and effective response. Hungary proposes to counter this problem through more effective employment strategies, the implementation of EU-level employment policy linked with the European Pillar of Social Rights, and the further expansion of employment for the working-age population: *“the Hungarian Presidency aims to focus on addressing labor shortages, involving available labor market reserves, and promoting a higher employment rate among the inactive working-age population”*. Finally, Budapest wants to make jobs more attractive by promoting the work-life balance, and improving employment and working conditions.

The Hungarian Presidency also intends to address the issue of mental health, intergenerational solidarity, and the integration of persons with disabilities.: *“In the area of health, following the coronavirus epidemic, particular attention must be devoted to the segments of health policy that have been neglected or where necessary reforms have been delayed in the past. The Hungarian Presidency intends to make progress in the negotiation of the EU pharmaceutical package, which could be one of the most ambitious commitments of Member States. Closely linked to both demographic and overall competitiveness priorities, the Presidency’s health priority is tackling cardiovascular disease and reflecting on organ transplantation.”* At the same time, **Budapest wishes to devote special attention to occupational health and safety for the implementation of the European Occupational Health and Safety Framework Strategy for 2021–2027.** Emphasis is put on taking action against cardiovascular diseases and addressing practical issues linked to organ donation. **In this context the Hungarian government plans to hold high-level conferences and to allow room for discussion on other topics such as rare diseases, mental health, and cooperation between member states on the affordability of medicines.**

Education Youth, Culture and Sport Council

In the context of youth and sport, the Hungarian Presidency wishes to promote mental health and the health-promoting aspect of sport (resonating with the priority objective of the EU Sport Work Plan to promote physical activity to maintain and improve health) and access to culture.

It is interesting to note that the Presidency underlines that ***“due to the crises of recent years, the State aid framework has changed. The aim of the Hungarian Presidency to initiate a debate about reconsidering State aid rules in order to protect European competitiveness and healthy industrial development.”***

For further information about the program of the Hungarian Presidency, please click [here](#).

Are Lithuanian nurses worst paid in Europe ?

Recently, **a member of the opposition in Lithuania, Vilija Blinkevičiūtė, the Social Democratic Party leader**, declared that Lithuanian nurses are paid the lowest wage in Europe : “I want to draw attention to (...) a problem and how the current government is not solving it. Our Lithuanian nurses earn the lowest wages in all the 27 EU countries. **Orinta Leiputė, from the same party**, also added that these low wages go with high workloads. This can be demonstrated because Lithuania is last in the list of nurses’ wages in the ranking of the Organization for Economic Cooperation and Development (still, Romania and Bulgaria are not included in the list). To make a relevant comparison between countries, we also have to take into account the purchasing power of nurses, but still, Lithuanian nurses are the last in this category.

In absolute figures, Lithuanian nurses earn the national average salary of 1.300 euros after tax (half of the physician’s



wage), which is not a new phenomenon but a long-standing one. This is the result of political

decisions that do not try to increase the funding says the **Chairwoman of the Board of the Lithuanian Medics Movement, Auristida Gerliakienė**. The MP Leiputė adds that **this leads to nurses emigrating leaving the Lithuanian medical institutions understaffed, and thus increasing even more the excessive workloads that are not regulated by law**. At the same time, nurses also try to join the private sector with better wages or to join the popular beauty sector.

The problem of high workload and low wages hinder the attractiveness of the nursing professions in the eyes of the young generation. The Lithuanian Medics' Movement observes a gradual but significant aging of the profession, with an increasing number of nurses reaching the retirement age each year. **Gerliakienė** added : *“Most nurses [in Lithuania] are over 50 years old, young people do not go into nursing. It is hard work, a lot of responsibility, sometimes even dangerous because of possible violence. Nurses are also subject to a lot of mobbing. Not every institution provides nurses with the right tools to protect their health”*.

The **Ministry of Health** answered that wages are defined by hospitals and clinics, not by the State. Nonetheless, **Gerliakienė** insisted on the lack of recognition nurses receive with a “prevailing tendency that a physician’s work is valued and that of a nurse is unseen”.

For further information about this article, please click [here](#).

Health risk assessment in Belgium

After the Covid pandemic and the different problems highlighted in terms of cross-border risk of propagation of disease, the European Parliament and the Council of the European Union has adopted in 2022 a Regulation on serious border threats to health. They also underlined the importance to align prevention plans



and response between Member States. It is relevant to highlight that topic in the context of geopolitical instability at the European border, and the need to be prepared for bacterial, chemical or radio-nuclear threats. The consequences of climate change are also affecting health risks via animals' migration and not only. Member States have to auto-evaluate their progress in dealing with these issues, following a grid of analysis, that the **European Center for Disease prevention and Control (ECDC)** has to assess. Nine months later after the assessment of the ECDC, a report has to be transmitted by the Member State on the path of improvements adopted, and finally, the process is reassessed once each 3 years.

Belgium, who held the Presidency of the Council of the European Union till the end of June, is the first country to be part of that assessment, a process that has just been completed. Concretely, the ECDC visited different sites and strategic locations, and analyzed thoroughly 5 of the 16 criteria : **capabilities in terms of laboratory analysis, surveillance, management of health emergencies, zoonotic (animal-borne) diseases and environmental threats, and antimicrobial resistance and healthcare-associated infections.**

The conclusion of the rapport has underlined the necessity to improve the legal basis of the responsibilities and decision-making due in particular to the complex Belgian federal system, even if the coordination and collaboration between the federal and the federated entities have a solid basis. The ECDC also highlighted the need to include agriculture for example in the case of avian flu and more generally zoonotic frame.

For further information about this article, please click [here](#).