Welcome from the Director

The Nurse Educator shortage: Who will teach nursing’s next generation?

Educating sufficient new nurses is fundamental to the development of an effective and competent nursing workforce, equipped with the ability to respond to changing demands and adopt/adapt their interventions to deliver evidence-based practice. There is, however, a major threat to sustaining excellence. The shortage of nurses willing and able to educate the future generations has emerged in many countries throughout the world, and is seriously threatening capacity to produce new nurse graduates.

A recent survey in the United States of America (USA) found that in 2008-2009 almost 50,000 qualified applicants for baccalaureate and undergraduate programmes were turned away, with almost two-thirds of the nursing schools citing faculty shortages as a reason for not accepting all qualified applications.¹ In the United Kingdom, the Nursing and Midwifery Council has estimated that 37,000 overseas registered nurses in the UK were unable to work because they could not find the supervised assessed practice placement required prior to entry to the professional register.²

When considering nursing education and nurse educators, three key issues must be addressed. Firstly, the pay and conditions of those nurses who work as educators must be sufficiently attractive to recruit and retain expert nurses; secondly there is an urgent need to address the imminent retirement of many nurse educators (see below). Thirdly, in developing countries that are looking to “scale up” the workforce, there is often a critical shortage of nurse educators.

A major factor contributing to the nurse faculty shortage in industrialised countries such as the USA is that salaries for academic positions are often lower than those that can be earned in clinical practice by nurses with similar level qualifications.¹

The ageing of the faculty nurse cohort has also been identified as a significant issue, with an average age of over 50 years for most nursing faculty in the industrialised world. For example, a 2008-2009 report on nurses in the USA found that doctorally prepared nurse professors were of an average age of 59.1, and masters prepared nurse professors were of an average age of 58.9. A 2008 Nursing Outlook study identified the average retirement age for nurse faculty as 62.5, suggesting a probable wave of retirements over the next 10 years.³

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The availability of nurse trainers is also a significant issue for many other countries, hampering efforts to address shortages in qualified nurses and improve the quality of care delivery. Distribution, as well as absolute numbers, is problematic. In Bangladesh, teacher-student ratios in nursing schools vary from as low as 1:17.5 in Barishal division to as high as 1:33 in Dhaka division. The same paper quotes 1:10 as a minimum acceptable ratio, suggesting a significant increase in nurse faculty is required.

Increasing training capacity without compromising on quality can be a further challenge. In environments where the framework for regulation and accreditation of education and training providers is weak, demand for training places can result in a proliferation of places where quality is variable, and graduates may not have adequate skills to work safely providing nursing care.

There are a range of strategies being pursued to begin to address these shortages, and approaches are as varied as the circumstances different countries face. In the USA, the need for advocacy, improved partnerships between educational institutions, innovations in models of education delivery and improved funding of nursing schools have all been suggested as well as support for nurse teachers' development through financial support such as scholarships, grants and loans, staff development strategies, mentoring and support for teaching and research.

In Brazil, 13,161 university nursing teachers were trained as part of the PROFAE (Projeto de Profissionalização dos Trabalhadores da Área de Enfermagem) Project, an innovative project to professionalise nursing workers who had no formal technical qualification. In the Pacific, a range of partners including nursing schools, aid organisations and other funders have joined to develop "Innovative Clinical Teaching Models" in the U.S. Affiliated Pacific Islands, which will aim to respond to the shared problem of nurse faculty shortage while responding to each jurisdiction's unique culture, and institution.

In response to this important issue the International Council of Nurses (ICN) and the Honor Society of Nursing, Sigma Theta Tau International (STTI), supported by The Elsevier Foundation, will conduct the Global Summit on Nurse Faculty Migration. The Summit, the first of its kind, will be held in June 2010 and will bring together nurse experts who to examine the problem, and identify realistic and measurable solutions.

I would like to end this - my last editorial - on a more personal note. It has been my privilege and honour to be part of the establishment of the ICHRN, raising awareness on health human resources issues and developing tools that support excellence in nurse management and promote nurses' workplace interests. The future holds many promises as well as challenges for the nursing workforce. I wish to thank you for your continued interest and support and welcome Elizabeth Adams who is joining the ICN team, taking over responsibility for the Socio-economic Welfare Programme, including ICHRN following my retirement at the end of May 2010.

Dr Mireille Kingma
Director, ICHRN
International Council of Nurses

What's new at the ICHRN

New Resources and Publications

The Impact of the Economic Recession on Nursing and Nurses in Iceland was published in January 2010. This short monograph describes the changes to the nursing labour market and nurse employment caused by the global financial crises. It also highlights the challenges that the banking failures have introduced to the health care sector as a whole. The monograph, developed in partnership with the Icelandic Nurses Association, is the first in a new series of short monographs, Dynamic Issues in Nursing, aimed to provide timely analysis of key developments affecting nurses across the world.

Nursing Human Resources in Kenya: Case Study was published in March 2010. Developed for

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4 Aminuzamman (2007). Migration of Skilled Nurses from Bangladesh Development Research Centre of Migration, Globalization and Poverty, Brighton, UK.
7 Saipan Tribune “NMC Nursing faculty to help develop new teaching programs” Saipan Tribune, Friday February 26, 2010
ICHRN by Chris Rakuom, Chief Nursing Officer in the Chief Nursing Officer (CNO) in the Ministry of Medical Services in Kenya, this case study provides a comprehensive overview of nursing in Kenya and the issues and challenges to be addressed in building a robust and sustainable nursing workforce in this major Sub-Saharan African country.

ICHRN has recently published *Decent Pensions for Nurses*, prepared by Hedva Sarfati. This monograph provides an overview of the arrangements in place for nurses’ pensions across the world, as well as key issues affecting the ability for nurses to secure adequate pensions. The report highlights the importance of capacity building among nurses in the area of pensions, improved communication on pension issues by employers and pension funds, and highlights the importance of national nurses association participation in decisions affecting nurses pensions.

A new Fact Sheet on Skill Mix is also now available. This follows the release of the ICHRN monograph *Skill Mix Decision-Making for Nurses* by Linda McGillis Hall and Eric Buch, released in 2009.

All are available for free download now at [www.ichrn.org](http://www.ichrn.org).

**Rosemary Bryant in the Spotlight**

Rosemary Bryant, incoming ICN President, is featured in the latest ICHRN “Spotlight Interview”.

Ms Bryant’s appointment as the 26th ICN President is the latest step in a distinguished career. Ms Bryant served as ICN Second Vice President from 2005 to 2009 and is a past Executive Director of the Royal College of Nursing, Australia. In 2008 she was appointed as the inaugural Chief Nursing and Midwifery Officer at a national level in Australia. Her career has encompassed a broad range of experience in acute hospital and community nursing, as well as in government relations.

Ms Bryant outlines her vision for the International Council of Nurses over the next four years, discusses certain significant workforce reforms, and discusses the role of nurses as key drivers of health sector change. The full text of the interview is available at [www.ichrn.org](http://www.ichrn.org).

**ICHRN’s Knowledge Library**

The ICHRN Knowledge Library continues to expand and now contains over 600 resources. We encourage you to contribute reference materials and documents that you have found useful in your work and workplace. To suggest an item for inclusion, contact the ICHRN Secretariat (ichrn.secretariat@icn.ch).

**Coming up at ICHRN...**

The ICHRN continues to commission and produce a range of resources on major issues in nursing human resources.

Papers under development include country case studies on nursing in Costa Rica, Norway and Mauritius, and monographs on un- and under employment of nurses, workplace reform for primary care nursing and flexible working practices.

**Featured News**

**World Health Assembly approves Code of Practice on international recruitment of health personnel**

The draft global code of practice on the international recruitment of health personnel was approved by the World Health Assembly in May 2010.

The code of practice on the international recruitment of health personnel aims to establish and promote voluntary principles and practices for the ethical international recruitment of health personnel. It provides Member States with ethical principles for international health worker recruitment that strengthen the health systems of developing countries. It discourages states from actively recruiting health personnel from developing countries that face critical shortages of health workers, and encourages them to facilitate the "circular migration of health personnel" to maximize skills and knowledge sharing. It also enshrines equal rights of both migrant and non-migrant health workers.

**Further information:**

**NNAs respond to Haiti appeal**

National nursing associations from across the world have been rallying to support nurses in Haiti in the wake of the violent earthquake that hit
the island in January 2010. Many have sent in or pledged donations and others are undertaking fund raising activities.

The International Council of Nurses (ICN) has also been approached by a coalition of Swiss clinical facilities, nursing schools, the Swiss Nurses Association and the Swiss Red Cross to work towards the reconstruction of the national nursing school, and is meeting with them to advance the project.

The Elsevier Foundation has also granted ICN $15 000 to produce and deliver five French Mobile Libraries (Bibliothèque Mobile) specially adapted for the post disaster situation in Haiti.

ICN is deeply saddened by the terrible loss of life, destruction of homes, hospitals, schools and infrastructure in Haiti following the violent earthquake in January.

The National School of Nursing in Port-au-Prince collapsed while classes were ongoing and is completely destroyed. ICN understands that as many as 109 second year students lost their lives. The private nursing school Philomene collapsed and 400 students are reported lost. The Leogane School of Nursing also sustained some damage, but is standing and currently being used as a venue for treating the injured. Three students lost their lives at this school. Dean Hilda Alcindor is working to direct those services under extremely difficult conditions and shortages of all needed supplies.

At least eight hospitals have been completely destroyed. We have not had any reports on the loss of life in these hospitals.

The office of the Haiti NNA - the Association Nationale des Infirmières Licenciées d’Haïti was destroyed in the quake.

The suffering of so many is very hard to accept. “We know that nurses are responding to the urgent needs of victims and communities, and as individuals with their own families and communities that have been devastated they are carrying a double burden of care. We are proud of their strength and courage. We send the love and support of nurses worldwide in this terrible and difficult time,” stated David Benton, ICN’s Chief Executive Officer.

International assistance—especially medical doctors—is still absolutely necessary in Haiti to help deliver essential services to the devastated population, says the World Health Organization. Current priorities include post-operative care - scaling up of mobile clinics, provision of mental health services - as well as the “reactivation” of basic primary health services from maternal and child health to rehabilitation services and chronic diseases, it adds.

The BMJ reports that more than 40 000 people have been treated and more than 3 200 surgeries performed since the quake, which killed more than 217 000 people, caused in excess of 300 000 injuries and displaced more than one million people.

Sources: ICN; British Medical Journal BMJ 2010; 340:c1047

UK Commission on Future of Nursing and Midwifery

The Prime Minister’s Commission on the Future of Nursing and Midwifery UK, which covers England only and considers midwifery and all branches of nursing in all settings, services and sectors, launched its report in March 2010. There were 20 recommendations covering the areas of:

• Corporate responsibility for care
• Regulating advanced nursing and midwifery practice
• Regulating support workers
• Measuring progress and outcomes
• Flexible roles and career structures

As part of its announcement, the Commission also asked all nurses to make a pledge underlining their commitment to high quality care, their engagement with health service improvement and their professional accountability.

Copies of the report are available at http://cnm.independent.gov.uk

The future of nursing in the USA

The future of nursing in the USA is also under review, by the Institute of Medicine (IOM) in collaboration with the Robert Wood Johnson Foundation (RWJF).

An ad hoc committee will examine the capacity of the nursing workforce to meet the demands of a reformed health care and public health system. It will develop a set of bold national recommendations, including ones that address
the delivery of nursing services in a shortage environment and the capacity of the nursing education system. In its report, the committee will define a clear agenda and blueprint for action including changes in public and institutional policies at the national, state and local levels. Its recommendations would address a range of system changes, including innovative ways to solve the nursing shortage in the USA.

The committee may examine and produce recommendations related to the following issues, with the goal of identifying vital roles for nurses in designing and implementing a more effective and efficient health care system:

• Recommitalizing the role of nurses within the context of the entire workforce, the shortage, societal issues, and current and future technology;
• Expanding nursing faculty, increasing the capacity of nursing schools, and redesigning nursing education to assure that it can produce an adequate number of well prepared nurses able to meet current and future health care demands;
• Examining innovative solutions related to care delivery and health professional education by focusing on nursing and the delivery of nursing services; and
• Attracting and retaining well prepared nurses in multiple care settings, including acute, ambulatory, primary care, long term care, community and public health

Source & further information: Institute of Medicine of the National Academies www.iom.edu/Activities/Workforce/Nursing.aspx

Positive Practice Environments Campaign debuts in Africa
The PPE Campaign is poised to take off in Uganda and Zambia over the next few weeks. National PPE workshops were held in March 2010, bringing together the National PPE Steering Committee members, as well as National PPE Collaborating Partners, representatives of the Ministry of Health and WHO country offices. The participants convened for three days under the guidance of expert facilitator Francis Supparayen, former President of the Mauritius Nurses Association.

The workshop brought together critical partners in health to work toward a common goal related to PPEs, analyse the practice environments in their countries, review a working draft of the national PPE Case Study, and build strategic alliances. Results included a common advocacy platform as well as an approved National PPE Implementation strategy for year one of the project. A similar national PPE workshop is planned to be held in Morocco in May of 2010. National PPE Case Studies will be finalized and prepared for publication subsequent to the respective workshops.

The campaign, Quality Workplaces for Quality Care, is spearheaded by the health professions including the International Council of Nurses, International Pharmaceutical Federation, World Confederation for Physical Therapy, World Dental Federation and World Medical Association together with the International Hospital Federation.

With the support of the Global Health Workforce Alliance, the multiyear, multi-stakeholder campaign promotes safe, cost-effective and healthy workplaces, thereby strengthening health systems and improving patient safety.

Campaign partners launched the Positive Practice Environments (PPE) Campaign website in April. The site provides a portal to PPE resources, tools and events. Visit www.ppecampaign.org to learn and share expertise to improve practice environments.

To receive regular project updates, sign up to receive the PPE newsletter at ppe@icn.ch

New World Bank report highlights nurse shortages in the Caribbean
Nursing shortages across the English-speaking Caribbean limit access and quality of health services and affect the region’s competitiveness, says a new World Bank report.

According to The Nurse Labor and Education Markets in the English-Speaking CARICOM - Issues and Options for Reform, the region is facing a rapidly growing shortage of nurses as demand for quality health care increases and high numbers of nurses emigrate to Canada, the UK and the USA.

The report says these shortages may compromise the ability of English-speaking CARICOM countries to meet their key health care service needs, especially in the areas of disease prevention and care. In addition, the
shortage of highly trained nurses reduces the capacity of countries to offer quality health care at a time when Caribbean countries aim to attract businesses and retirees as an important pillar of growth. The World Bank expects that unmet demand for nurses will more than triple during the next 15 years from 3,300 nurses in 2006 to 10,700 nurses in 2025.

The World Bank estimates that there are 7,800 nurses working in the English-speaking CARICOM, or 1.25 nurses per 1,000 people, roughly one-tenth the concentration in some OECD countries. In addition, demand for nurses exceeds their supply throughout the region, estimating that 30 percent of all positions in the sector were vacant at the time of the study.

The report also points to high demand for nurse education but low completion rates (55 percent) as a challenge and opportunity in tackling nurse shortages. Having more nurse tutors available, maximizing completion rates and accepting more students into programmes would significantly bolster the number of new nurses entering the health system.

“Massive” pay rise for nurses in Sierra Leone
Doctors and nurses in Sierra Leone ended a ten-day strike in March 2010 after the country’s President Ernest Bai Koroma agreed to increase their pay six-fold pay rise, reports the BBC. Nurses currently earn about £27 (US$41) per month.

Sierra Leone is a low income country, recovering from a 1991-2001 war, and has one of the world’s highest rates of maternal mortality. The country is preparing to introduce free medical health care for pregant women and breast-feeding mothers, as well as children under five years, resulting in huge workload increases for health workers

Sources: “Sierra Leone Doctors and nurses get massive pay rise” BBC, http://news.bbc.co.uk/1/hi/world/africa/8591682.stm
“S. Leone doctors get sixfold pay rise, end strike” Reuters www.alertnet.org/thenews/newsdesk/LDE62S0PT.htm

Nursing school for southern Sudan
A Diploma nursing and midwifery training is being established in Southern Sudan for the first time, at Juba teaching hospital.

The project is supported by the Directorate of Nursing, Midwifery and Human Resources (Sudan) in collaboration with UNFPA and a consortium of donors that includes the World Health Organization Southern Sudan, the Japanese International Cooperation Agency (JICA) and Real Medicine Foundation of USA.

While challenges remain, particularly in relation to securing faculty, it is understood that the first intake of students is likely to commence studies in May 2010 and will complete their three years of training in 2013, leading to a Diploma in Nursing and Midwifery.

‘Kaeru’ project for nurses in Japan
The Japanese Nurses Association (JNA) is working with clinical professionals to improve the shift work system and reduce overtime work. The project responds to a survey of approximately 20,000 nurses throughout Japan which found that many nurses were working dangerously long hours, including rotating shifts and overtime levels of more than 60 hours.

In 2008, a Japanese court acknowledged that working conditions such as these had led to the ‘karoshi’ (death from overwork) of two young nurses, and approved claims for compensation.

The JNA is calling on health care institutions to immediately put an end to these high-risk work styles, and to collaborate with managers and staff to better assess and improve working conditions. The JNA is also acting to advocate for improved systems and policies, provide support including training for nurse managers, collect and share information on good practice and establish a partnership between the Ministry of Health, Labour and Welfare, hospital associations and labour unions.

In a separate initiative, the JNA is also calling for the introduction of more flexible working styles in order to improve recruitment and retention.

Nurses in Japan are often required to work in rotating shifts, including night shifts. Nurses who are unable to work full time are often employed as “part-time workers” with less favourable conditions and career prospects. This makes it difficult for nurses – particularly those with family commitments such as young children – to continue full time employment.

A survey conducted by JNA in 2007 found that 70% of respondents thought that the introduction
of a flexible working style was effective in securing nurses in the profession.

Source: JNA News release 2010 Vol 2

Not guilty verdict for Texas nurse
A Texas Nurse charged with a third-degree felony of “misuse of official information” was found not guilty in a Texas court in February 2010. Fired from her job in June 2009, the nurse faced a maximum sentence of 10 years prison if found guilty.

The nurse wrote to the medical board after raising complaints internally that she felt had not been heeded. The charges raised such concern in Texas that the New York Times reports that the executive director of the Texas Medical Board wrote to prosecutors warning that the case would have a “significant chilling effect” on the reporting of malpractice.

The American Nurses Association, who has joined with the Texas Nursing Association to raise public awareness of the issue, welcomed the decision.

“The message the jury sent is clear,” said ANA President Rebecca Patton. “The freedom for nurses to report a physician’s unsafe medical practices is non-negotiable.”

Sources & further information:
New York Times 6 February 2010
ANA Media Alert, February 11 2010

Other news in brief

Economic recession hits Irish nurses
Irish nursing graduates are looking abroad for employment as the embargo on nurse recruitment introduced by the HSE in September 2007 enters into its third year.

The Irish Nurses Association’s professional development director, Annette Kennedy, predicted in a recent article that 90% of the 1 600 nurses who graduated in 2009 would emigrate due to better job prospects and conditions of employment available overseas.

Concerns about pension security and continuation of employment contracts have resulted in retirements and the departure of the large number of nurses recruited from overseas between 2000 and 2006.

There are concerns about the long term impact for the health service, as labour shortages are predicted over the coming years.


Governance for improved human resources for health
In March 2010, ICN joined with WHO, the Royal Tropical Institute (KIT) and Cordaid to host an international conference focusing on the contribution that responsible governance can make to improving human resources for health (HRH) policy implementation.

There was great interest in the conference with 181 participants attending from 31 countries. Authoritative key note speakers reflected the global and local issues pertaining to HRH and governance; and over 30 case studies were presented addressing experiences with various governance issues in different countries. A summary of the conference proceedings is available at www.kit.nl/net/KIT_Publicaties_output/ShowFile2.aspx?e=1646

Retention of rural health workers
The WHO is leading a programme to support countries in tackling rural health workforce retention and improve distribution. The work programme will review and evaluate past and ongoing strategies, with a view to developing policy recommendations and guidelines, supported by country case studies.

It is anticipated that guidelines will be ready for launch in September 2010.

Further information:
www.who.int/hrh/migration/flyer.retention.pdf
California doctors challenge nurse anaesthetists

The California Medical Association and the California Society of Anaesthesiologists have filed a lawsuit against the state’s Governor, Arnold Schwarzenegger, claiming patients are being put at risk by a new regulation allowing nurses to administer anaesthesia without the supervision of a physician, according to a Health Leaders Media report.

The physicians claim the Government ignored various procedural steps requiring consultation with licensing agencies. However, the California Hospital Association has supported the use of nurse anaesthetists, particularly at small and rural hospitals where anaesthesiologists are not always available.

A federal rule allowing states to opt out of the Medicare requirement that anaesthesiologists supervise nurse anaesthetists was introduced in 2001. The opt-out provision has been used by small states with large rural populations.

Source: Health Leaders media
www.healthleadersmedia.com/content/PHY-245956/Doctors-Sue-To-Stop-Unsupervised-Nurse-Anesthetists-from-Administering-Anesthesia.html

Building the health workforce in Francophone Africa

Representatives from the University of Geneva and the WHO Department of Human Resources for Health met in Geneva to launch a new Masters Degree Programme with a focus on Health Workforce Development in Francophone Africa.

In line with recommendations of its Taskforce on "Scaling Up Education and Training", the Global Health Workforce Alliance will play a catalyst role in supporting education and training by securing funding for the initial development phase, as well as for the first two years of the programme. Alliance Executive Director Dr Mubashar Sheikh acknowledged this new initiative as a crucial measure to tackle shortages of health workers, not only because it will foster North-South partnerships, but particularly because it is designed for French speaking African countries.


Global Health Workforce Alliance YouTube Channel

The Global Health Workforce Alliance has launched a dedicated YouTube channel to focus on health workforce issues and invites all members and partners to join the community. Visit the channel at: www.youtube.com/user/ghwavideos

Taiwan Nurses Association honoured

The Taiwan Nurses Association (TWNA) has been awarded the Outstanding NGO Award by the country’s Ministry of the Interior. The award recognises TWNA’s continuous growth in membership and active participation in society. The award recognised a range of activities including allocating money to fund initiatives in response to the Morakot Typhoon, conducting more than 140 workshops with over 30,000 registrations, launching an active Taiwan-China exchange programme and publishing three official nursing journals, as well as successfully organising for more than 180 members to participate in the ICN 24th Quadrennial Conference in Durban.

EC network of nurse educators and regulators

The European Commission has called for proposals to create a pilot network of nurse educators and regulators in order to exchange best practices and thus to improve the qualifications of health care workers, health care assistants and lower-skilled nursing personnel.

There is a need to examine and find solutions to the current employment situation in the health sector, particularly in relation to professional qualifications and duties carried out by health care workers, health care assistants and lower-skilled nursing personnel and to examine the effects of cross-border mobility both in the host country and the country of origin.

This follows release of the Commission's Green Paper on the European Workforce for Health which started a process of detailed consideration of health workforce planning and supply and the impact of health worker mobility within Member States and within the EU.

Source & further information: http://ec.europa.eu/health/ph_systems/call_workforce_en.htm
OECD meeting on the advanced roles of nurses

In February 2010 the Organisation for Economic Co-operation and Development (OECD) hosted a meeting in Paris to discuss the preliminary findings of a study undertaken by the OECD Health Division, and co-funded by DG Sanco to review and evaluate recent developments in the implementation of advanced practice roles for nurses in 13 OECD developed countries (Australia, Belgium, Canada, Cyprus, Czech Republic, France, Finland, Greece, Ireland, Japan, Poland, United Kingdom, and United States).

The study’s main recommendations focused on the development of national legislation, education, payment systems, evaluation and research.

Nursing Funds Included in US President’s Budget Proposal

The American Nurses Association is pleased to report that President Obama’s fiscal year 2011 budget proposal includes significant funding for strengthening the nation’s nursing workforce. Proposed funds will go toward the recruitment, education and retention of 20,000 nursing students and registered nurses, and support over 1,370 loan repayments and scholarship awards. In addition to workforce funding, the budget includes monies for programmes to improve access to health services. These initiatives bring primary health providers, including nurse practitioners, to underserved areas.

The Department of Health and Human Services (DHHS) has announced awards totalling $33 million to expand the training of health care professionals. The funds which are part of $500 million allotted to the DHHS’ Health Resources and Services Administration under the American Recovery and Reinvestment Act (ARRA) will include grants to promote nursing workforce diversity.


Research briefs

Decent Pensions for Nurses
Author: Hedva Sarfati
Publication date: 2010
Link: www.ichrn.org

Nursing Human Resources in Kenya: Case Study
Author: Chris Rakuom
Publication date: 2010
Link: www.ichrn.org

Scaling up nursing and medical education
Report on WHO/PEPFAR Planning meeting on scaling up medical/nursing education.
Author: World Health Organization
Publication date: 2010
Link: www.who.int/hrh/resources/scaling-up/en/index.html

The Nurse Labor & Education Markets in the English-Speaking CARICOM: Issues and Options for Reform
Author: World Bank
Publication Date: 2009

Policy Brief: International Migration of Health Workers: Improving International Co-Operation to address the Global Health Workforce Crisis
Author: Organization for Economic Cooperation and Development
Publication Date: 2010
Link: www.oecd.org/dataoecd/8/1/44783473.pdf
Announcements

9th Scientific Conference and 3rd Quadrennial Meeting, East Central and Southern African College of Nursing
Location: Lusaka, Zambia
Date(s): 23-27 August, 2010
Event Organiser: The East Central and Southern African College of Nursing
URL: www.ecsa.or.tz/

6th International Nurse Practitioner/Advanced Practice Nursing Network Conference
Location: Brisbane, Australia
Date: 8-11 September 2010
Event Organiser: Royal College of Nursing, Australia
URL: www.rcna.org.au/conferences/inpapnn

ICNN Neonatal Nursing Conference
Location: Durban, South Africa
Date(s): 23 October 2010
Event Organiser: International Council of Neonatal Nurses
URL: www.coinnurses.org

15th South Pacific Nurses Forum
Location: Auckland, New Zealand
Date: 8-11 November, 2010
Event Organiser: New Zealand Nurses Association
URL: spnf@nzno.org.nz

“Nurses Driving Access, Quality and Health”: ICN Conference and CNR
Location: Valetta, Malta.
Date(s): 2-8 May 2011
Event Organiser: International Council of Nurses/Malta Union of Nurses and Midwives
URL: www.icn2011.ch/

Second Global Forum on Human Resources for Health
Location: Bangkok, Thailand
Date: 25-29 January, 2011
Event Organiser: Global Health Workforce Alliance, the Prince Mahidol Award Conference, the World Health Organization and the Japan International Cooperation Agency

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The International Centre for Human Resources in Nursing was established in 2006 by the International Council of Nurses (ICN) and its premier foundation the Florence Nightingale International Foundation (FNIF). The Centre is dedicated to strengthening the nursing workforce globally through the development, ongoing monitoring and dissemination of comprehensive information and tools on nursing human resources policy, management, research and practice.

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