



CONCLUSIONS OF THE I INTERNATIONAL CONGRESS ON COMMUNITY NURSING, IV FAECAP AND II SEMAP MEETINGS

DEBATE TABLE:

Linda Lathan: President, Irish Practice Nurses Association

Manuel López Morales: President of the Federation of Associations of Community Nursing and Primary Care, (FAECAP).

The role in the advanced practice of Community Nursing requires:

- Increasing autonomy and resolution capability
- An attributed Population per nurse and increasing the population accessibility
- Increasing researching initiative and development.
- Taking on Community Health Care leadership.

The present diverse framework for the professional work makes the need to establish international mutual help links more important than ever.

I Round Table: Health needs according to populations. Community Nurses Performance.

M^a Nubia Romero: Teacher, Universidad Pedagógica y Tecnológica, Nursing College.

Rachel Spector: Community Nursing Consultant, Honorary Teacher, University of Alicante.

Joan Carles Contel: Assistant, Primary Care Nursing, Catalonian Health Care Center, Associated Profesor, University of Barcelona. Home-care expert.

In order to develop health care, Community Nurses should take up the health beliefs of the population and the traditional practices it develops.

Community Nurses have consolidated professional leadership in the field of Home Care, whose organizational models gradually adapt themselves to social changes of the population.

II Round Table: Community participation modalities. Nurses as mediators.

Marco Marchoni: Sociologist, community participation training expert.

Denise Gastaldo: Professor, University of Toronto.

Manuela Lacida Baró: Technician, Regional Ministry of health care development and innovation, Andalusian Health Care Service.

The population should commit itself with health matters through community participation in health care, with the complicity of the administration.

Simply increasing the number of professionals does not guarantee an improvement in the health status of the population. The strategic vision lies in the commitment of the population.

Emphasis should be placed in fostering the participation of the population, of liaison subjects and of key informants.

'Case Manager Nurses', 'Liaison Nurses'... these different models may be an engine for changes, since they manage and/or apply home care in coordination with all professionals involved in the care of patients and their carers.

III Round Table: Community Nursing Training. International Comparative Analysis.

Esperanza Arriaga Piñeiro: President, Spanish Association of Nursing Teaching

Concha Germán Bes: Profesor, University of Zaragoza. Expert, European Tuning Project.

Emilia Sánchez Chamorro: General Deputee Director, Specialities, Ministry of Health Care and Science.

In order to guarantee the generic and specific competences of nurses, the degree should include 240 credits (although some options prefer a 180 credits degree).

The National Commission for the specialty of Family and Community Nursing will be formed at the end of the current year.

The Nursing profession will finally no longer have a 'ceiling' and may continue on to obtain a PhD.

It would be both desirable and very suitable to assign a specific number of credits to the specialities when taking an academic master course and continue later towards a PhD.

IV Round Table: Community Nursing Research. Seeking evidence.

Alberto Gálvez Toro: Director, Evidencia magazine and of the Evidence Based Nursing Observatory.

Nicky Cullum: Director, Evidence Based Nursing Center, University of Cork. Publisher of Evidence Based Nursing.

Research and evidence are the most robust instruments to help nurses make certain decisions in their day-to-day work.

We should seek political recognition to obtain research resources and funds.

Only if we develop research programs that are politically sensitive and geared to clinical practice needs, may we be able to continue forward.

V Round Table: The role of community nurses in the development of cooperation. Health Care education for the population.

Cristina Rey Francisco: European Union Consultant Nurse in matters of International Cooperation for Development.

Modesta Medja: (Equatorial Guinea) National Nursing Director of the country.

Julia García Salinero: Consultant Nurse in matters of International Cooperation for Development

The goal of cooperation is to achieve autonomy for persons or groups.

Development is raising the dignity of the people; for this purpose the will to achieve it, as well as the suitable resources, are necessary.

To improve cooperation it is necessary that the Nursing profession is in decision making bodies.