

STUDY OF THE NATIONAL SITUATION IN TERMS OF QUALIFICATION FRAMEWORKS

Project: Creating Opportunities and Occasions to Promote a European Results-based Actions for Training and Education - COOPERATE

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Introduction: Description of the current situation of nursing professionals in Spain.-

According to data from the National Institute of Statistics (INE) of Spain, referring to the year 2021, there are a total of 833,403 health professionals in Spain (1), of which 35.83% are nurses (330,745 professionals), compared to 30.74% (283,811) of doctors, followed, at a greater distance, by pharmacists (78,128), physiotherapists (62,691), etc.

By sex, the nursing group in Spain is mostly female, 84%, with a total of 278,368 nurses; compared to 52,377 nurses, 16%.

The rate of nurses per 100,000 inhabitants stands at 641.01 on average in the whole of the Spanish State; although, there is a great difference in terms of its geographical distribution by Regions (Autonomous Communities); going from 927.48 nurses per 100,000 inhabitants in Navarra, to 322.18 in the Canary Islands, or 678.37 in Madrid, slightly above the national average.

The most important problems of the nursing professional group (in the health sector, in general) are: The high rate of temporary employment, especially in the public sector where up to 36% do not have a permanent position (although this situation is in progress). solution with actions to stabilize the temporary employment of nearly 67,000 workers); the emotional exhaustion accumulated during the pandemic that affects 55.7% of the medical and nursing profession and the lack of places to study the *Nursing Degree*; and, consequently, of nursing professionals.

(1) This figure includes only the health professions that need to be registered to carry out their activity (doctors, nurses, physiotherapists, pharmacists, dentists and psychologists with a health specialty); not including professional categories such as: nursing assistant, assistant technician, caretaker, etc.).

Regarding the effects of the pandemic, it should be noted that a total of 40,961 health professionals have been infected by COVID-19 while carrying out their professional activity: 31,351 women, 76.5%, and 9,606 men, on 23. 5%; with a total of 52 deaths (31 men and 21 women). [Data from IS Carlos III as of May 29, 2020].

Spain needs a greater offer of places to study the *Degree in Nursing*:

Spain is "at the bottom of Europe" in terms of nursing staff, with a ratio of 5.9 nurses per 1,000 inhabitants (3.26 nurses per 1,000 inhabitants in the public sector); when the European average is 9.7 nurses per 1,000 inhabitants, according to the latest report "*Health at Glance 2021*", in which up to a total of 26 European countries are analyzed, carried out by the *Organization for Cooperation and Development Economic* (OECD); being a widespread complaint, and maintained over time, of nursing groups, about the insufficiency of *Nursing Degree places in Universities* (2). The calculations carried out by unions and other health and educational organizations predict that it would be necessary to offer about 5,000 more places each new course in the State as a whole and remain stable, at least, for five consecutive years; In addition, this deficiency in nursing staff will be aggravated by the retirement of these professionals in the coming years, which, according to estimated data, will reach 60.000 professionals in the next 10 years in the Spanish State as a whole.

The lack of nursing professionals causes two consequences among the group:

- Professional intrusion, with the execution of professional nursing tasks in which nursing competencies and the validity of the qualifications that enable them to perform are not respected (3)
- And the precarious working conditions and the deficit in attention to citizens, with constant changes of units and services, carrying out the work of two or three people, the obligation to double shifts, immediate incorporation on days off, ignorance of their shifts work or rotations between these shifts, situations that are aggravated during vacation times and that cause nursing professionals to go to other autonomous communities than their own, or to other countries, further aggravating the shortage of nurses:

The precarious working conditions cause nursing professionals more stress, suffer *burnout syndrome*, fatigue, physical, psychological and emotional exhaustion, and other problems, such as nervousness, anxiety, fear or anguish

(2).- For the 2022-2023 academic year, only 7% of new *Nursing Degree places* are authorized (a total of 13,788 new places) ; maintaining the structural deficit that the group has suffered for more than 10 years and that, every year, causes the closure of beds, floors and operating rooms due to the lack of nursing staff to attend to them.

(3).- During 2021, a total of 49 claims have been processed for alleged cases of professional intrusion; some of which reached the courts of Justice, obtaining convictions of deprivation of liberty for the commission of that professional intrusion

and changes in appetite or sleep, in addition to a clear impossibility of reconciling their work life with personal and family life; and for the user of health services, and despite the efforts made by professionals, this job insecurity leads to worse care, lack of optimal care security, longer waiting times and greater possibilities of complications, risks, readmissions and reinterventions (4).

Despite these shortcomings and difficulties, and according to the *Observatory of Occupations for the year 2021*, carried out by the Public Employment Service of Spain, non-specialized nurses appear among the occupations with the best situation in the labor market, in the position number 4, with a 76% increase in hiring; and specialist nurses (except midwives) with a 66% increase in hires.

Regarding citizen satisfaction with the health care received, it is positive in general, with primary care being the best valued service (7.3 points out of 10), followed by hospital admissions (6.9 out of 10) and hospital emergencies (6.1 out of 10). In these assessment surveys of the *Health Barometer*, equity in the system can be seen: 86.7% affirm that gender does not influence the provision of care; 70.8% that benefits do not depend on age; 69.6% that the social level does not affect the care received and 58.6% that it is independent of nationality.

However, in the territorial dimension, only 37.7% consider that there is equality in the provision of public health services if they reside in one or another autonomous community and 43.4% if they live in a rural or urban area. Waiting lists and the overcrowding of emergency services are the problems that are perceived in the highest proportion in opinion studies.

(4). Especially serious, in this disregard of citizens, is the continuous disinvestment in hospital beds, by the different governments, which place Spain at the bottom of Europe with **3 beds per 1000 inhabitants**, just ahead of Ireland, Iceland, Denmark, UK and Sweden; and far from the more than 7 beds/1000 inhabitants in Germany and Austria, or the more than 6 in Hungary, the Czech Republic, Lithuania or Poland and the European average of 4.5 beds per 1000 inhabitants, according to the report of the Organization for Economic Cooperation and Development (OECD) "*Health at a Glance 2021*".

1. National situation in terms of Qualification Frameworks

When talking about the *qualification frameworks*, we are going to refer to three specific aspects: The qualifications necessary to practice the nursing profession in Spain, the need for registration and the professional skills acquired.

Degree in Nursing (5) :

Nursing was recognized as a university degree in Spain, in 1977, through the degree of *University Diploma in Nursing*; and, as of 2010, with the current degree *in Nursing*, opening a new door to this degree to be able to access higher studies such as the Master's and the Doctorate.

Therefore, the *Degree in Nursing* is the degree that is obtained once these university studies are completed and whose *duration is four years and 240 ECTS* (European Credit Transfer System or European Credit Transfer System) distributed in four courses, being essential to develop and publicly defend a final degree project (6).

To access the Degree in Nursing, it is necessary to meet at least one of the following requirements:

- Be in possession of the Bachelor's degree and have passed the EBAU (Evaluation of Baccalaureate for University Access).
- Have a Higher Degree Vocational Training degree from the Health branch.
- Have passed the university entrance exam for those over 25 or 45 years of age; or meet the requirements for access to the University for those over 40 years of age.
- Or, be in possession of a university degree or equivalent.

The definition of the competency profile of nursing professionals is developed through a series of functions that are defined in Spanish legislation; specific:

- ❑ Law 44/2003, of November 21, *on the organization of health professions*, which provides that: " *Health professionals carry out, among others, functions in the fields of care, research, teaching, clinical management, prevention and information and health education*" (Article 4.3).

(5). A complement to the university degree is postgraduate training, which we will refer to in the chapter dedicated to the best national practices.

(6). In the 2021-2022 academic year, the Spanish University system has 50,895 people enrolled in the *Nursing Degree*, in 62 universities where it is taught (75% of which are public and 25% private): Of these, 37,940 students study in public universities and 12,955 in private universities. [Data from the *Register of Universities, Centers and Degrees*, RUCT].

And in which the functions of the nursing professional are specified: *"It corresponds to the University Diplomas in Nursing the direction, evaluation and provision of Nursing care aimed at the promotion, maintenance and recovery of health, as well as the prevention of diseases and disabilities"* (art. 7.2)

- And, the *Royal Decree 1231/2001*, of November 8, which approves the *General Statutes of the Collegiate Nursing Organization of Spain, of the General Council and of the Organization of professional nursing activity*, defining the aspects related to the roles and responsibilities of nursing professionals, which we summarize below:
 - The functions of the nurse derive directly from the mission of nursing in society, they are carried out in accordance with the Spanish Nursing Code of Ethics, with criteria of quality and professional excellence.
 - Responsibility to provide individually, or coordinated within a health team, the care of its own competence to the individual, the family and the community, in a direct, continuous, comprehensive and individualized way, through training and practice based on principles of equity, accessibility, coverage and sustainability of care.
 - Execution of all activities that contribute to the maintenance, promotion and establishment of health, prevention of illnesses and accidents, as well as assistance, rehabilitation and social reintegration in said cases and/or aid to a dignified death.

Consequently, the nursing professional is defined as:

the legally authorized professional, responsible for their professional acts as a nurse who has acquired sufficient knowledge and skills about the human being, their organs, their biopsychosocial functions in a state of well-being and illness, the applicable scientific method, its ways of measuring it , evaluate it and evaluate the scientifically proven facts, as well as the analysis of the results obtained, aided by the appropriate clinical and technological means and resources, in order to detect the needs, imbalances and alterations of the human being, referring to the prevention of illness, recovery of health and its rehabilitation, social reintegration and/or help to a dignified death.

Professional practice and membership :

To practice as a nurse, it is an essential requirement to be incorporated into the corresponding professional association, given its status as a health profession, as stated in article 36 of the Spanish Constitution, establishing that the law will regulate

the exercise of the nursing profession and the activities for which membership is compulsory; among them: the development of care, research, management and teaching functions.

Therefore, in order to join the association, it will be necessary to have the official Bachelor's *degree in Nursing* or the *Diploma in Nursing* , obtained in Spain; or the title of *Nurse Responsible for General Care* issued in a Member State of the European Union, together with the official recognition to practice in Spain the profession of general care nurse that may be obtained through the recognition of the title issued by the Ministry of Health Spanish, or through the *European Professional Card* .

In the case of degrees issued by an official higher education institution of a non-European Union Member State, it will also be necessary to provide the *original homologation credential issued by the Spanish Ministry of Education*.

Nursing staff competencies :

To end this section of our *National Report*, we are going to point out the general skills that correspond to the professional profile of nursing graduates:

- *Competencies associated with professional values and the role of the nurse:* Provide care promoting respect for human rights, values, customs and beliefs of the person, family and community and exercise responsibility and excellent professionalism both in autonomous activities and in interdependent.
- *Competencies associated with nursing practice and clinical decision-making:* Make judgments and clinical decisions about the subject and object of care, based on comprehensive assessments and scientific evidence; as well as maintaining competence through continuous training.
- *Ability to appropriately use a range of skills, interventions and activities to provide optimal care:* Perform assessments, procedures and techniques with full knowledge of the facts, excellent skill and ability, and with maximum safety for the person receiving it and for oneself; in addition to interventions linked to health promotion, health education, etc.
- *Knowledge and cognitive skills:* Update knowledge and keep abreast of technological and scientific advances, making sure that the application of the latter is compatible with the safety, dignity and rights of people.
- *Interpersonal and communication skills (including communication technologies):* Provide information adapted to the needs of the interlocutor, through fluid communication and provide optimal emotional support; as well as guarantee confidentiality.

- *Skills related to leadership, management and teamwork:* Ability to work and lead teams; and guarantee the quality of care for individuals, families and groups, optimizing resources.

In summary, if we look at some of the characteristics of the profile that these professionals must have, according to the Nursing Council, the general care nurse is trained to:

- Work in the general field of nursing practice, including health promotion, disease prevention, and comprehensive care for sick or disabled people of all ages and in all situations, health and socio-health institutions and other community settings;
- carry out health education;
- participate fully as an integral member of the health team;
- supervise and train the professionals themselves and the auxiliary and health personnel;
- and initiate, develop and participate in research programs and projects

2. Definition of Learning Outcomes

Next, we focus on four aspects that concentrate the main professional demands of the nursing group, from which we believe that we should structure our training course proposal: Protection against diseases and health crises; protection against attacks; teamwork and digitalization of health.

The *Observatory of occupations* analyzes both occupations in the labor market and the training needs detected in professional technical skills and, referring to nursing, establishes the following training needs:

- Adaptation to the problems derived from the new invasive pathologies caused by Covid-19.
- Computer applications for telemedicine.
- Grief and coping with pain.
- Protective equipment, putting on and taking off.
- Management of fears, uncertainties and unknowns.
- Safe patient management.
- New technologies applied in nursing: electronic records, location systems, diagnostic tools, mobility.
- Action protocols.
- And, video conferencing systems.

I.- Protection against diseases and health crises :

The appearance of COVID-19, the rapid increase in confirmed and suspected cases, the lack of personal protective equipment (PPE), the workload, the exhaustion of the staff, the over information in the media and the lack of medicines against the disease, among other reasons, have led health personnel to develop anxiety, anguish, depression and/or Burnout syndrome among other psychological pathologies.

Nursing professionals (although not only them) continue to assume a fundamental role in emergency and disaster situations that, during the pandemic, has been a real challenge for professionals, who have been affected both in their work performance and in their personal welfare. In order for these personnel to be able to carry out their work effectively, it is essential that they maintain both physical and psychological health; something that has not been promoted by the Administrations since the appearance of COVID-19, causing a negative impact on both the physical health and the psychological well-being of nurses.

This situation has had its continuity in our country, very recently, with the appearance of monkeypox and nursing health professionals have once again demanded that the health administrations guarantee the safety of nurses in these situations, demanding a *zero contagion* between nursing and health professionals, in general (7).

For these reasons, it is necessary to include in generic training a series of aspects that help nursing professionals to mitigate stress in their workplace and to face the psychosocial risks associated with this physical and emotional overload. Among these topics, we can mention: stress control; the management of fears, uncertainties and unknowns; psychosocial and communication skills (active listening, effective communication, non-verbal language, etc); motivation, empathy, creativity, commitment, assertiveness, autonomy, responsibility, etc.

II.- Care Insecurity: Protection against aggressions :

In 2020, the last year for which there is data in our country, nursing staff suffered a total of 1,657 attacks in the Spanish State as a whole; highlighting the 583 produced in Andalusia and the nearly 180 from Castilla y León, the Basque Country and the Balearic Islands (data from *the National Aggression Observatory* (8) of Spain). The information available brings us closer to the following conclusions:

- Between 38 and 40% of nurses have been victims of some type of aggression
- Most of the aggressions are verbal, 69%; against 25% physical and 6% threats
- Most of these attacks are carried out by a family member of the patient, 52%; 42% are performed by patients and 6% by companions.
- Most of the attacks occur in specialized care, 53%; by 44% in Primary Care and 3% in emergencies.
- The main cause of aggression is not meeting their expectations in terms of waiting times/tests performed, 41%; disagreement with diagnosis, 27%; rejection of the demands made, 12% and others, 20%

(7). In this sense, we want to remember, because we believe that it may be an element that we must consider in the implementation of our project, that the *Framework Strategic Plan on Safety and Health at Work 2021-2027* , incorporates among its measures a series of initiatives to prepare for and respond quickly to threats such as COVID-19; between them:

- Establish new preventive measures, at the national and transnational level, to protect workers from the COVID-19 crisis
- Promote safe work procedures and the provision of adequate training to deal with the dangers of the health sector
- Or, maintain and improve safety and health standards for workers, promoting the adoption of measures in cooperation with the social partners

(8). The Observatory has a record of attacks on nurses at the national level; studies, analyzes and disseminates information with an annual report; formulates improvement proposals for the Administration and organizations; proposes guiding criteria for action to professionals; promotes training plans in aggression prevention and promotes meetings between professionals and experts. With its actions, aggression against health personnel has been considered a crime and the creation of the police interlocutor has been favored, as an instrument for channeling complaints and advising the health professional.

- The vast majority of professionals attacked, 82%, do not file a legal complaint for having suffered these attacks.

III.- Teamwork as a guarantee of multidisciplinary effectiveness :

Another of the weaknesses of the Spanish health system can be found in the absence of a multidisciplinary work culture with an effective and dynamic distribution of roles that affects communication between professionals and functional units; causing that, on occasions, work is approached from watertight compartments, which has hindered the necessary relationship between professionals from different fields. This situation makes it necessary to address training aspects where special attention is paid to the management and coordination of people (other professionals, clients and the public); the direction, organization, planning and coordination of the tasks of the personnel in charge; the analysis of the problems that may arise, the search for solutions and the resolution of conflicts and decision making.

IV.- Digital Health as an instrument to improve the health profession :

The most imminent training and organizational challenge for the health profession focuses on the implementation of **digital health** motivated by the COVID-19 pandemic crisis, which has shown both the need to have resources capable of providing care and health care in changing scenarios; such as the importance of having accurate, complete and reliable information, practically immediately, to make decisions of enormous importance regarding people's lives and the functioning of society as a whole.

In this way, advanced digital technologies such as massive data analysis ("big data"), Artificial Intelligence or the Internet of Things (IoT), have the potential to transform the health system into the daily activity of healthcare professionals. health and its relationship with patients, with greater support in the use of data in the anticipation of risks, in the greater precision of medical treatments and in the development of research, or the global management of the system and its resources.

3. National best practices

It is proposed that, in this phase of our *Report*, we address what are the good practices and quality professional training programs at the national level, aimed at the nursing community, installed in our country. Thus, we are going to refer to three aspects: postgraduate training, permanent professional training and the digitization of health.

Postgraduate training :

From the Bachelor's *degree in Nursing* you can choose a total of seven specialties (obstetric-gynecological nursing, midwife-, mental health, geriatric nursing, occupational nursing, medical-surgical care nursing, family and community nursing or pediatric nursing) for which it is necessary to carry out specific approved training by the Ministry of Education and FP, Spanish. To study these specialties, it is necessary to access the programs of training places in the modality of Resident Nurse (EIR); although the number of places offered is very limited (only 9,073 in the 2016-2022 period).

In addition, up to 30 study alternatives are offered, among which are, to name a few examples, the Degrees in physiotherapy, occupational therapy, human nutrition and dietetics; master's degrees in research in social and health sciences, primary care, health sciences or nursing sciences, palliative care, etc.; There are specialized courses depending on the area in which you want to work: emergencies and health catastrophes, infectious diseases, sports nursing, food and nutrition, etc.

Permanent professional training :

In Spain we have a training and qualification service for employment (lifelong learning), regulated by Law and constituted by *the set of initiatives, programs and instruments that have as their purpose: " Promote and extend between companies and employed and unemployed workers training that contributes to the personal and professional development of workers and their promotion at work that responds to the needs of the labor market"*.

This *Vocational Training System for Employment* pursues two objectives: To improve the employability of workers and business competitiveness, and *to promote the acquisition, improvement and permanent updating of professional skills and qualifications, favoring training throughout the life of the active population, and combining the needs of people, companies, territories and productive sectors.*

These courses have the corresponding public homologation and, with their completion, credits are obtained (similar to ECTS) that are an instrument to advance in the individual professional career of the professional. To carry it out, it uses 4 initiatives such as the training of workers by their companies or by Public Administrations; the

training of unemployed workers; and the existence of individual training permits alternating with employment; among them: Choosing a work shift and accessing remote work, when regularly studying to obtain an academic or professional degree; adapt the ordinary working day to attend professional training courses; carry out professional improvement courses with job reservations; or the existence of a paid leave of 20 hours per year of professional training for employment, linked to the activity of the company, cumulative for a period of up to five years, for workers with a seniority of 1 year in the company.

It is important to point out that trade unions participate in the preparation of these training actions for lifelong learning, both in the detection of needs and in the execution and management phase of the same.

Digital Health as an improvement strategy :

The Digital Health Strategy of the Spanish SNS (ESD-SNS) aims to contribute to the maintenance of a good level of health in the Spanish population and strengthen the health system, through the transforming capacity of digital technologies aimed at people, health **professionals, health**, organizations providing health services and other related agents. And it is carried out within the framework of *the Recovery and Resilience Plan* and within the framework of the *Digital Transition* established by the European Commission for the period 2021-2027.

This *Strategy* aims to increase the autonomy and decision-making capacity of patients and the development of health professionals, from the recognition that health protection is a shared task that requires communication between both, and tries to prioritize innovative actions that provide, with more evidence, positive health outcomes.

If we look at the objective of our **Cooperate project**, this Spanish Digital Health Strategy is aimed at support professional performance through flexible technologies both for the relationship with the patient and for multidisciplinary work and digital tools that support activity, decision-making in matters of health promotion, disease and disability prevention and clinical assistance, as well as the development of skills.

4. Summary and suggestions

Based on what is stated in this *National Report* and based on the fact that there is an adequate training structure for our Nursing professionals, although it is insufficient in terms of the number of places offered both to obtain the Bachelor's *degree in Nursing* and to access *Specialties*, we have to focus, in our attempt to design a **Training Course proposal**, on two aspects of special importance for Nursing professionals.

- a) On the one hand, the **aspects related to the personal care of nursing professionals in situations of stress, physical and mental exhaustion or burnout syndrome; as well as in those derived from situations of aggression** that, as we have pointed out, is a permanent scourge for health professionals; and your protection against the risks arising from your professional activity (COVID, biological risks, radiation, etc.)
- b) And, on the other hand, the most specific of **professional development in their work activity, such as the elements that integrate multidisciplinary teamwork and knowledge of new technologies.**

Therefore, our proposal is to design a course (or a training itinerary through several courses) that contains these aspects distributed in their corresponding modules, with the establishment of a series of guidelines that allow nursing health professionals to improve their working and professional conditions and fight against the psychosocial risks that affect their professional activity.

ICT Training - Digital Health

The ICT infrastructure is essential to face the digital transformation and the incorporation of human resources trained in ICT for health at all levels, is necessary to be able to guarantee better professional performance both in the relationship with the patient and for multidisciplinary work; improving the decision-making of health professionals in health promotion, disease prevention or clinical care.

To do this, we propose to define a series of objectives, among which are:

- Establish the concept of digitization and learn about the digital transition in the European framework
- Establish the necessary elements to address a just digital transition
- Inform about the risks and values that digitization may entail in the health sector
- Detect the needs for health workers to adapt to the digital transition
- Establish the necessary skills in digital aspects: Identify, locate, obtain, store, organize and analyze digital information, data and digital content, evaluating its purpose and relevance for the different professional tasks; and communicate in digital environments, share own resources through online tools, connect and collaborate with others through digital tools, interact and participate in communities and networks and achieve a digital culture.

Work Training in Multidisciplinary Teams

We intend to address knowledge about teamwork and, from it, analyze and manage the dynamics of any work meeting, learn techniques to prepare meetings well and attend to their effective development.

Thus, in the programming of this course, we propose the following as objectives.

- Address the consideration of teamwork as a basic element of work in an Organization: its advantages and benefits
- Know how teamwork works: Characteristics and different management models
- Establish the qualities that must be met to work in a team and how to configure a work team
- Analyze and manage the dynamics of any work meeting.
- Learn techniques to prepare meetings well and attend to their effective development
- Establish criteria when resolving conflicts that may arise from work
- Establish criteria to be effective in decision making

Training in Mental Health to fight against stress, mental exhaustion, Burnout...

Starting from the right to health that every worker has and with special emphasis on mental health, in the design of this course, we intend to know the existence of psychosocial risks in the workplace, identifying their causes. To this end, the proposed objectives would be specified in:

- Offer the student strategies to fight against psychosocial risks
- Provide skills in group communication
- Facilitate coexistence and interpersonal relationships
- Promote teamwork and the identity of a collaborative organization
- Establish instruments to mitigate psychosocial risks in the workplace, aimed at the nursing profession
- Apply relaxation techniques that help fight work stress

Training in conflict prevention and resolution to avoid aggression

Nobody wants to have conflicts in our workplace, but the fact of bringing a group of people together and interacting can cause conflict situations that need to be addressed. We have already referred to the insecurity, the attacks suffered by health professionals and the need to deal with them.

Aware of this reality, with this course we intend to help establish and understand what we can understand by conflictive or difficult situations in the workplace, providing procedures for the prevention and solution of these problems in the same, aimed, fundamentally, at citizens who use those services.

Thus, we will address what we understand by *conflict* in the workplace, defining its causes, how to deal with them and what are the consequences of this situation of conflict, stopping at conflicts of an "external nature", those produced between professionals and users of the health, addressing their resolution: From prevention, as well as the response we must give to this situation, including how to "defend" against physical aggression that may arise.

Finally, we believe that it would be appropriate to provide workers with some communication skills that help them solve conflict situations in the workplace: Active listening, assertiveness or the use of non-verbal language, among others.

Training in prevention and approach to risks due to health crises in the health sector

Two of the key objectives of the *EU Strategic Framework for occupational safety and health 2021-2027* are: To improve the prevention of occupational accidents and illnesses, seeking a "vision zero" approach to work-related deaths worked; and increase preparedness to respond to current and future health crises.

In this context, our course should focus on the preventive aspects that make it possible to achieve this zero vision of work-related deaths through aspects of raising awareness about the risks related to work accidents and occupational diseases, the reinforcement of the application of the existing standards and guidelines and the evaluation of an overall vision on health and safety in the health sector, paying special attention to the prevention of the fight against cancer, occupational cardiovascular diseases, respiratory diseases; and musculoskeletal disorders; or the risks produced by *dangerous substances* present in almost all workplaces.

The second line of action, referring to the appearance of new health crises, involves preparing a series of studies and analyzes that allow us to analyze the risks caused by the virus in the health and care professions; as well as those that have appeared due to changes in the way of working, and to study whether there have been work accidents due to non-compliance with health and safety provisions in the treatment of the pandemic, establishing new preventive measures.

It will be from this investigation, when we can develop an adequate training course that allows us to promote safe work procedures and the provision of adequate training to address the dangers of the health sector in this pandemic situation.

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