Council of International Neonatal Nursing
Position Statement on Ethical Migration of Neonatal Nurses

COINN Position:

COINN supports the International Council of Nurses (ICN) (2001) position on ethical nurse recruitment. COINN recognizes that quality neonatal care cannot be given without an adequate supply of well qualified and educated nurses.

COINN supports an individual’s right to migrate to another country for better quality of life, working conditions, or other personal reasons.

COINN supports ethical recruitment for employment which provides adequate training, orientation and support or supervision.

COINN supports the World Health Organization global alliance to develop principles to guide ethical international recruitment, including a code of practice which, though not legally binding, would have political weight and provide a benchmark by which international recruitment could be monitored.

Guideline Principles for Ethical Migration include but are not limited to:

1. Active involvement by the employing institution or another governing body to ensure that standards of practice are upheld when no national regulatory bodies are in place.
2. If specialized knowledge is required such as neonatal or maternal child nursing that adequate orientation and training is provided for a sufficient length of time to ensure competency.
3. Support for specialized evidence based care in neonatology or maternal child is available through nursing or medicine and that equipment is available if a nurse is recruited in this area of specialization. Nurses (or alternate care providers) are appropriately trained in using, maintaining and checking equipment.
4. Strengthen education and training by continued acquisition of knowledge and demonstration of competency in neonatal or maternal child care is an expectation and is supported by the recruiting country.
5. Monitoring for quality of care provided and performance appraisal of the individual nurse must be ongoing in the areas of newborn, maternal, and family care.
6. Consideration of cultural differences of the nurse and the need for cultural sensitivity in the new work environment must be addressed.
7. Language acquisition must be supported. This acquisition is to include written, verbal, and comprehension.
8. Language fluency is critical before nurses start caring for patients.
9. Nurses have the right to work in a safe working environment and one that adheres to the ICN Code of Ethics for Nurses or if available the recruiting country’s national nursing code of ethics in addition to the United Nations’ (1948) Universal Declaration of Human Rights.

10. Active involvement by the employing institution or another governing body in the development of a national workforce plan.

Background and Significance

Maternal Child and Neonatal Nursing is a growing specialty area that is experiencing a nursing shortage and thus there is a need for recruitment. COINN recognizes that corporations are entering this critical healthcare delivery concern as brokers to recruit nurses on behalf of healthcare delivery systems and then arrange for their transportation to the country of need. Some of these agents are legitimate and others are bartering or trading nurses for a substantial sum of money. Developed countries have increased their acquisition of nurses from developing countries, adding to the global shortage (Buchan, Parkin, & Sochalski, 2003). Given the growing global nursing shortage as documented by the ICN and other such organizations, the problem of bartering or trading nurses for profit is going to increase as well. Ideally westernized countries should be able to manage their workforce effectively and not be reliant on other countries. However, COINN recognizes that short term migration may be needed to meet the maternal child health care needs. This migration must be done with consideration of the potential “brain drain” from the country sending the nurses and the need for transition training in the country to which the nurse is migrating. When this migration is necessary there should be a limit on the number of nurses migrating, countries from which migration is acceptable and duration of time during which this migration is permitted so that this migration is not at the behest of a shortfall. Retention strategies should be employed so that nurses have incentives to stay in their own countries rather than migrate. These strategies could include but are not limited to: better working conditions, decreased number of hours, better patient to nurse ratios, and better compensation-wages and benefits.

A global alliance for the healthcare workforce will be launched by the World Health Organization in 2006, with the purpose of strengthening advocacy and supporting partnerships at global and country levels for building an effective healthcare workforce during the next decade. Some of the specific targets are: (1) within five years every country, poor or rich, should have a strategic national workforce plan; (2) investment to prepare the workforce through strengthening education and training should be dramatically increased; and (3) local and national innovations should be strengthened through the systematic extension and application of workforce strategies, including better knowledge management.

References


COINN is the only international organization that represents the global community of neonatal nurses and their organizational partners. COINN advances neonatal nursing care and the profession of neonatal nursing by speaking with one strong voice. Working together we are able to contribute to the formulation of health policy, promote quality neonatal care and advance neonatal nursing knowledge while fostering high standards of neonatal nursing as a profession and practice.

COINN acknowledges that some countries may not be able to implement the recommendations as written due to limited resources-personnel, financial, and equipment. However, to improve health outcomes all the neonatal community must strive to uphold these recommendations. Determinations must be made within local and national organizations as to what constitutes basic, essential, and advanced care.

Approved by COINN Board of Directors

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Representing over 50 countries and 15,000 nurses.
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