

ACADEMY OF MEDICAL ROYAL COLLEGES

Comments on the Proposal for a Directive of the European Parliament and the Council on the recognition of professional qualifications

1.0 General remarks

- 1.1 The Academy represents the views of the Medical Royal Colleges and Faculties of the British Isles. Colleges are charitable institutions and their individual Charters emphasise their concern for standards of medical practice and for the postgraduate training of doctors.
- 1.2 The Academy understands that the Proposal is intended to facilitate the free movement of labour throughout the European Union and that it applies to disciplines other than medicine. Nonetheless, it is important to recognise that there will be implications for the provision of clinical care which will be directly affected by the Proposal and which, in the opinion of the members of the Academy, must be safeguarded.
- 1.3 Member States have developed individual mechanisms for assuring patient safety. Until these mechanisms have themselves been harmonised within the EU, the Academy considers that great care must be taken to ensure that their effectiveness is maintained.
- 1.4 Standards of postgraduate medical education currently vary between Member States since doctors are trained to meet the needs of the relevant national system of health care. Those appointing doctors to posts within a given national health care system do not have detailed knowledge of the training programmes of other Member States. The Proposal will provide an opportunity to assess this training objectively in some disciplines at the time of migration to a new Member State. This principle is welcomed by the Academy.

2.0 Specific issues

2.1 *Short-term provision of services*

This part of the Proposal would permit a European professional to practise in another member state for up to 16 weeks without informing the local regulatory authority. The Academy is greatly concerned about the lack of professional regulation implied in these arrangements. In particular, there appears to be a possibility that a professional found guilty of inappropriate clinical practice in one Member State could continue to practise within another State. This is clearly unacceptable. The Academy endorses the suggestion of the Alliance of UK Health Regulators in Europe that an additional article should be inserted with the following wording:

“This title does not apply to healthcare professionals where the profession in question is regulated in the host Member State. In order to provide a high

level of human health protection, Member States may restrict the free provision of services by health professionals from other Member States to the extent that they may require registration with a competent authority prior to the professional commencing the professional activity in the host State.”

2.2 *Recognition of specialties*

- The Academy accepts that specialties recognised by all 15 Member States should continue to have automatic recognition but continues to regret the lack of opportunity for Host States to assess training in these disciplines.
- The Academy notes that remaining specialties (listed in Annex VI of the consultation document) will in future be considered under the regulations of the General Directive. Under these regulations, compensation measures are possible. While welcoming this principle, the Academy has concerns that the precise arrangements remain ambiguous and the implications and logistics of the proposed mechanism (a compulsory test or a compulsory adaptation period) give cause for concern. The need for knowledge of appropriate linguistic ability is noted but the mechanism for ensuring this remains imprecise.
- Arrangements for the training and professional activities of general practitioners are also a cause for concern and will be addressed in greater detail in a separate submission from the Joint Committee for Postgraduate Training of General Practitioners.
- A specific area of concern is that Annex VI does not list Haematology as a discipline for which training is recognised in the United Kingdom.

2.3 *Recognition of training*

- The general rule of recognition allows migrants to enter the profession at the level immediately below that required in the host Member State. This means that EU migrants could bypass UK domestic training regulations.
- The Proposal provides for the automatic recognition of qualifications on the basis of experience. The STA has expended considerable effort, since the expiry of the transitional arrangements for specialist registration, in resisting further erosion of the principle that recognition for registration should be based exclusively on training. Although the Proposal relates solely to EU citizens, this recommendation could, in the future, have significant implications for overseas-qualified doctors currently excluded from specialist registration.

2.4 *Consultation with the profession*

- Advisory committees (including ACMT) are to be abolished. It appears that CSOPH (Committee of Senior Officers of Public Health) will also be disestablished. A single committee is to be set up for the recognition of all qualifications (not just medical) covered by this Proposal. It seems essential to establish some mechanism whereby opinions of medical professionals can be transmitted to the European Parliament and other institutions.

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