



**Briefing for the Internal Market and Consumer Protection (IMCO) committee  
Amendments to the proposal amending the recognition of professional  
qualifications Directive (2005/36/EC)**

**November 2012**

1. The Alliance of UK Health Regulators on Europe (AURE) brings together 9 of the health and social care regulators (competent authorities) in the United Kingdom to work collaboratively on European issues affecting patient and client safety. As regulators, our purpose is to protect and promote patient safety through effective regulation and ensuring proper standards in the practice of health and social care.
2. As the UK is a net importer of healthcare professionals, both from Europe and internationally, AURE members have significant experience with both the benefits and challenges of high levels of professional mobility.
3. We have closely followed the review of the recognition of professional qualifications Directive (2005/36/EC) and have welcomed IMCO's draft report (see [AURE briefing – September 2012](#)). This briefing paper sets out AURE's position on some of the key amendments tabled in the IMCO committee ahead of the vote on 23/24 January 2013.

**Language Assessment (Article 53)**

It is essential for all healthcare professionals to be able to effectively communicate with their patients and colleagues in the official language of the host Member State. In this context, we consider that competent authorities should be allowed to make **access to the profession conditional on a professional's language competence**. This would respect the fundamental principle of recognising qualifications but would acknowledge the legitimate need for competent authorities to assess the language skills of the professional before they are granted access to the profession. This should be without precluding the important role an employer plays in ensuring a professional meets the specific requirements of a particular role.

**AURE supports amendments 599, 601, 605, 610, 611**

In addition, we consider that the cost of any language assessment, where required, should be reasonable but borne by the applicant rather than the competent authority. It should be the professional's responsibility to ensure that they have the appropriate language skills to practise the profession safely in the Member State where they are applying to practise.

**AURE supports amendments 613, 616, 619**



### **European Professional card (Article 4a-4e)**

We consider that responsibility for recognising qualifications under the card should lie exclusively with the host Member State to ensure professionals are appropriately qualified in the country in which they intend to practise.

#### **AURE supports amendments 93**

We consider that the most effective way to ensure the successful implementation of the proposed professional card would be to have a number of pilot projects before being fully introduced to ensure that the system and timelines are safe, robust and realistic and can deliver real benefits for the profession and competent authorities.

#### **AURE supports amendments 91, 219, 231, 279**

AURE considers that tacit authorisation should not apply to health and social care professionals, as it would represent a serious risk to patient safety for professionals to start practising, even temporarily, without explicit authorisation by the host competent authority.

#### **AURE supports amendments 297-302**

We consider that the professional card must only be used for the recognition process and not as a way to confirm the registration status of a professional with patients or employers. In the UK, healthcare professional regulators make web-based searchable lists of registration and disciplinary information freely available to the public. These are live and updated daily. We consider this is a much more effective and safe way to confirm the status of a professional than checking the authenticity of a 'card' which would be in effect out of date as soon as it is printed. Such registers are also all the more important when some health professions are still not represented on the Internal Market Information system (IMI).

#### **AURE supports amendment 323**

**AURE is concerned that amendment 256 has the potential to confuse patients, employers and colleagues about the registration status of professionals**



### **Alert mechanism (Article 56a)**

It is essential that all alerts about all healthcare professionals be treated with the same urgency. Therefore, we consider the alert mechanism should be extended to all healthcare professionals, regardless of whether they benefit from automatic recognition or general systems.

#### **AURE supports amendments 653-656**

Furthermore, we consider that the alert mechanism must cover any restriction on a professional's licence to practise, according to national law. Restrictions short of removal from the register or suspension, such as conditions on a licence or limitations to scope of practice, can indicate serious issues about a professional's practice and these should be communicated to all other competent authorities.

#### **AURE supports amendments 158, 647, and 649**

We also support amendments which extend the alert mechanism to the exchange of information about fraudulent applications. This would provide assurances to competent authorities that the professionals they register are appropriately qualified.

#### **AURE supports amendments 82 and 662**

### **Continuous competence of professionals**

AURE considers professionals should provide evidence of current practice as a condition for automatic recognition. Currently, competent authorities are required to automatically register professionals who may be out of practice or have not kept their knowledge and skills up to date. To address this, we consider competent authorities should be allowed to introduce additional checks when professionals are out of practice.

#### **AURE supports amendment 444**

**AURE supports amendments 75 and 643 but do not consider checks should be free of charge for applicants. It should be the professional's responsibility to ensure they have the appropriate skills to practise safely and remedy any gaps in their practice (as it is in the UK for domestic and international applicants outside the EEA)**



## **Common training frameworks**

We believe that common training frameworks should not apply to any sectoral profession. This would introduce a third route to recognition for these professions, in addition to automatic recognition and generals systems, and would cause confusion to professionals and competent authorities.

## **AURE supports amendment 563**

**AURE is concerned that amendment 562 has the potential to create an additional and unnecessary route to recognition for the sectoral professions**

## **Partial access (article 4.f)**

We consider that healthcare professionals should be exempt from the provisions on partial access. It would pose a risk to patient safety if healthcare professionals were given access to the profession, even in a limited capacity.

## **AURE supports amendments 349, 352, 354, 359, 360 and 361**

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