

Berlin Statement

13 September 2010

European Commission's evaluation of Directive 2005/36/EC on the mutual recognition of professional qualifications

Since May 2010 the informal network of competent authorities for the recognition of professional qualifications for doctors has held a series of meetings to discuss and share their experiences with the implementation of Directive 2005/36/EC on the mutual recognition of professional qualifications.

The network has brought together 28 competent authorities from 23 member states to stimulate discussions and support the drafting of national experience reports on the Directive.

The network agrees that the system of automatic recognition provided by Directive 2005/36/EC has proven successful in facilitating the recognition of medical qualifications within the European Economic Area.

The network has also shown that with a high level of doctor mobility around Europe, competent authorities are keen to work cooperatively and collaboratively to contribute to safe healthcare in Europe, and declare their intention to continue their collaboration within the structures of the informal network. To enhance transparency within the recognition of professional qualifications competent authorities intend to work together voluntarily to create a repository of detailed information on the content of medical training for each specialty. This may include historical information of titles and name of documents.

Competent authorities see the Commission's current evaluation of Directive 2005/36/EC as a valuable opportunity to highlight a number of areas that would benefit from further examination to ensure that professional mobility is maintained and to enhance patient safety. We would like to express our appreciation of the open and co-operative approach undertaken by the Commission in the course of the evaluation process.

Further to our meetings and the exchange of experiences in relation to the evaluation of the Directive we call on the Commission to:

- Continue to facilitate the identification of competent authorities responsible for the recognition of qualifications for doctors; require competent authorities to be listed on the Internal Market Information system (IMI); oblige competent authorities to respond to all queries in an appropriate timeframe regardless of whether they are sent through IMI or through other means; develop and improve IMI to allow competent authorities to carry out primary source verification of documents.

- Examine in cooperation with the Competent Authorities appropriate competence assurance mechanisms (e.g. CPD/CME, revalidation, etc.) for doctors. This will enhance trust in the recognition of professional qualifications and ensure patient safety by allowing competent authorities to assure themselves that the doctors they register have kept their skills and competence up to date since the award of their medical qualifications.
- Consider including the Certificate of Current Professional Status / Certificate of Good Standing to the documents listed in Annex VII.
- Explore mechanisms, such as the alert mechanism provided for by the Services Directive, that will improve the exchange of information about doctors that has a bearing on patient safety in Europe and on professional competence. Facilitate the identification of competent authorities responsible for taking regulatory action against doctors¹ to ensure that only those doctors that are fit and safe to practise avail themselves of the benefits of freedom of movement within the EEA.
- Ensure that there is legal clarity about regulatory responsibility in instances of cross-border provision of services. This should also be considered in the light of developments in the field of telemedicine and remote diagnosis, where neither the patient nor the doctor physically moves.
- Provide clarification about the term ‘temporary and occasional’; support competent authorities in developing a common framework that will assist them in dealing with recognition in cases of subsequent applications for temporary and occasional provision of services (e.g. seasonal mobility).
- Examine the language provisions in the Directive to address the concerns of competent authorities in relation to language proficiency of migrant doctors in the interest of patient safety.
- Examine within the course of the revision of the Directive the increasing occurrences of false documents and fraud and find means of combating these effectively.

Further information and concrete case studies and examples in support of this statement are contained in the national experience reports submitted by competent authorities to the European Commission in September 2010.

¹ For example, the removal of a licence to practise.

Competent authorities in support of the Berlin statement

Austria	Österreichische Ärztekammer
Cyprus	IATPIKO ΣΥΜΒΟΥΛΙΟ ΚΥΠΡΟΥ
Czech Republic	Ministerstvo zdravotnictví
Denmark	Sundhedsstyrelsen
Estonia	Tervisemet
Finland	Sosiaali- ja terveystieteiden valvonta- ja valvontavirasto, Valvira
France	Conseil National de l'Ordre de Médecins Ministère de la Santé
Germany	Bundesärztekammer
Hungary	Egészségügyi Engedélyezési és Közigazgatási Hivatal
Ireland	Medical Council
Italy	Ministero del lavoro, della salute e delle politiche sociali
Latvia	Latvijas Ārstu biedrība
Lithuania	Sveikatos apsaugos ministerija
Luxembourg	Ministère de la Santé
Malta	Kunsill Mediku
The Netherlands	Koninklijke Nederlandsche Maatschappij tot bevordering der Geneeskunst Ministerie van Volksgezondheid Welzijn en Sport - BIG register
Norway	Statens autorisasjonskontor for helsepersonell
Portugal	Ordem dos Médicos
Romania	Colegiul Medicilor din Romania
Slovenia	Ministrstvo za zdravje
Spain	Ministerio de Sanidad y Política Social
Sweden	Socialstyrelsen
UK	General Medical Council