

ENMCA response to the EC European professional card consultation

May 2014

The [European Network of Medical Competent Authorities](#) (ENMCA) brings together organisations in Europe responsible for recognising medical qualifications under Directive 2005/36/EC as amended by Directive 2013/55/EU. As doctors are one of the most mobile professions in Europe, ENMCA participants have significant experience with the benefits and challenges of high levels of professional mobility and recognition under both the automatic and the general system.

In responding to the European professional card (EPC) questionnaire, we wish to highlight that patient safeguards must take precedence over the facilitation of professional mobility. Any new system of recognition must ensure patient safety and must safeguard the checks and balances currently in place.

The EPC may bring certain improvements to the recognition process. Home competent authorities (CAs) should certify documents they themselves have issued, thus reducing the workload for host CAs, in particular for automatic recognition. If the EPC is introduced after taking on board CA feedback, it has the potential to increase collaboration between authorities and, in the long term, trust.

However, network participants also recognise that the possible introduction of the EPC will bring some challenges. For recognition with an EPC to work, it will be essential for the European Commission to address these through ongoing constructive dialogue with CAs.

Application procedures

Documentation

The EPC implementing act must not impede the ability of CAs to safeguard patient safety and to carry out their duties effectively in terms of the documentation they require to process an application. These requirements need to be flexible. Host CAs should still be able to request further documents if necessary to establish a doctor's qualification and right to practise, as long as this is proportionate. This is especially relevant for more complex general system cases where specialist doctors should be able to provide evidence of training and experience in a variety of ways without undermining the qualitative elements of the assessment.

Fees

It is essential that the fees charged for recognition are left to the discretion of CAs. The calculation should be based on the workload invested into and cost of processing each application. ENMCA supports the facilitation of the recognition process but believes that the decision about acceptable forms of payment should be at the discretion of each CA.

Online procedures

A recent ENMCA survey¹ shows that not all CAs currently allow online applications.

Suitability of EPC procedure for the medical profession

General system applications

Despite the advantages that the EPC could bring to the automatic recognition procedure, many ENMCA participants continue to have concerns about the suitability of the EPC for general system applications. The latter necessitate an in-depth examination of a medical professional's training and experience which can often be complex. This may have been obtained in multiple countries, including non-EEA countries. To examine a doctor's training and experience, CAs often contract with external experts in a specific field of medical specialty. For CAs' patient safety obligations to be met, it is unlikely that such applications can be processed within the deadlines set out in the Directive.

Development of IMI

The implementation of the EPC makes a thorough testing of all required structures ahead of its introduction necessary. ENMCA calls on the Commission to continue to hold regular focus groups with CAs. In the first instance, to discuss the documentary requirements, which the 25 March meeting did not cover, and subsequently to advise on the development of IMI as the Commission thinking progresses.

CAs are also keen to help the EC and member state representatives agree a definition of the home member state. This needs to accommodate doctors with complex backgrounds who may not have completed all of their education, training and experience in one country.

National procedures

The EPC process, as described in the Directive, is limited to recognition and does not cover the other requirements² doctors need to fulfil before they can practise medicine. In several member states, there is only one administrative step which grants recognition and access to the profession simultaneously. It is important that CAs are given adequate time to adapt their processes, should an EPC be introduced, to ensure that these essential patient safety checks take place before doctors are granted access to the profession.

Third party accessibility and printed version

Many ENMCA participants already have live, online registers which demonstrate to the public, patients and employers the current registration status of a doctor. As the card represents proof of recognition only and does not give access to the profession, making it available to third parties and allowing it to be printed is likely to cause confusion. ENMCA therefore calls on third party accessibility not to be implemented for the medical profession.

¹ Survey available here : <http://www.enmca.eu/analysis-enmca-european-professional-card-epc-implementation-167>

² As permitted and outlined in Annex VII and article 53

ENMCA position

Further information

Please visit the ENMCA website: <http://www.enmca.eu/>

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