

CPME-EFN-PGEU Joint Statement on the European Parliament EMPL-SANT

Joint Own-Initiative Report on the European Healthcare Workforce

The healthcare workforce is the most valuable asset of any nation's healthcare service. The levels of engagement, wellbeing, and job satisfaction of the healthcare workforce are crucial for delivering the expected health outcomes for patients. EU and national policymakers must prioritise the healthcare workforce by **“caring for those who care.”**

The longstanding neglect from Member States left them ill-prepared for the COVID-19 pandemic, which further worsened existing healthcare workforce shortages. Despite the crisis, many Member States are once again enacting budget cuts. This is compounded by the fact that most of the EU initiatives have largely fallen short of delivering concrete action on reducing the shortages. The consequences are clear and significant: EU healthcare systems are buckling under pressure as healthcare professionals are leaving the professions in large numbers, refusing to work in unsafe conditions and without adequate recognition.

CPME, EFN, and PGEU, representing over 5 million European doctors, nurses, and community pharmacists urgently call for concrete action and the full integration of their recommendations on **Recruitment, Retention, and Resilience** (the 3Rs) for an EU Healthcare Workforce Strategy, in the EMPL-SANT Joint Own-Initiative Report on the EU Healthcare Workforce:

Recruitment

Do not lower the education and qualifications standards set in the Directive 2005/36/EC, updated by the Directive 2013/55/EU & Annex V

Directive 2005/36/EC, updated by Directive 2013/55/EU and Annex V, plays a crucial role in upholding the highest education and training standards, and any reduction in its requirements will negatively impact the quality and safety of patient care in the EU. The content and duration of healthcare professionals' education should not be compromised to address workforce shortages in healthcare. A high quality of education and training is essential in ensuring the attractiveness of the health professions. Patients and their healthcare outcomes require highly educated and trained healthcare professionals.

Ensure high-quality mentorship for a smooth transition to work-life

Many students and early graduates report the lack of adequate supervision and qualified mentors during their clinical placements as a key reason why they leave their studies or the profession soon after graduation. The EU and the Member States must invest in high-quality healthcare professions' students' mentorships, ensuring a smooth transition from student to work-life. This is key to keeping the education attractive to new recruits.

EU Member States must be self-sufficient in educating and training domestic healthcare workforce

Increasingly, EU Member States are relying on unsustainable and unethical international recruitment to fill their national healthcare workforce shortages. The EU and the Member States must invest in the development of a sustainable, resilient, highly educated, domestically trained EU healthcare workforce.

Where there is pro-active outreach to recruit healthcare professionals abroad, Member States and private actors must implement ethical recruitment policies in full compliance with the WHO Global Code of Practice on the International Recruitment of Health Personnel (2010), and internationally educated healthcare professionals must comply with the qualifications standards set in the Directive 2013/55/EU.

Retention

Ensure safe working conditions and fair remuneration

Healthcare professionals deserve lawful working conditions that promote wellbeing. Poor work-life balance and inadequate remuneration that fails to reflect their expertise and responsibilities, play a critical role in driving workforce shortages across the EU. The EU must strengthen Social Dialogue, as well as monitoring and compliance with existing EU legislation such as the European Working Time Directive, and ensure appropriate remuneration for all healthcare professionals, together with concrete career prospects and professional development plans.

Develop EU policies on safe staffing levels

The European Commission must urgently develop EU policies on safe staffing levels, which must be implemented by the Member States. This is crucial, as safe staffing levels, building on best EU national and international practices, lead to better working conditions and significant improvements in the quality and safety of patients' care. Furthermore, we urgently need more accurate and reliable data for healthcare workforce planning.

Develop EU policies on zero-tolerance to violence against healthcare professionals

The unbearable levels of psychological and physical violence being experienced against healthcare professionals, especially during and after the COVID-19 pandemic, have fostered hostile and unsafe working environments. This has contributed to a serious mental health crisis in the healthcare workforce and has impacted heavily on the current departure rates from healthcare professions. The EU needs to support Member States in enforcing laws with dissuasive sanctions, implementing prevention programs, and advancing zero-tolerance policies against violence in healthcare.

Resilience

Review the Recovery and Resilience Facility (RRF) with specific focus on EU healthcare workforce shortages and capacity building

While the RRF aims to strengthen the resilience of national healthcare systems post COVID-19, the national Recovery and Resilience Plans lack a clear focus on addressing EU healthcare workforce shortages and capacity building. The European Commission must therefore review the RRF, to push for a renewed focus on building the healthcare workforce's capacity in quantity and quality that reflects the national demographic change and the rise in patients resenting with more complex needs and multi-comorbidities. This will enable the implementation of the proposed measures and better prepare the EU for the next public health crisis.

Scale-up the Social Cohesion funds to improve recruitment and retention of healthcare professionals in rural and medically underserved areas

Currently, pressing shortages of the healthcare workforce are being felt in rural and medically underserved areas, leading to so-called medical/healthcare deserts. Scaling up investment in rural and medically underserved areas through EU Cohesion funds will help retain and recruit healthcare professionals, ensuring a high level of healthcare services accessibility and availability.

*The **Standing Committee of European Doctors (CPME)** is a European not-for profit association representing 37 national medical associations across Europe, giving voice to over 1.7 million doctors.*

*The **European Federation of Nurses Associations (EFN)** is a European not-for profit association representing 36 national nurses associations and represents as such 3 million EU Nurses*

*The **Pharmaceutical Group of the European Union (PGEU)** is the association representing over 470,000 community pharmacists in 33 European countries.*

Resources

1. Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications: <https://eur-lex.europa.eu/eli/dir/2005/36/oj>
2. Directive 2013/55/EU of the European Parliament and of the Council of 20 November 2013 amending Directive 2005/36/EC on the recognition of professional qualifications and Regulation (EU) No 1024/2012 on administrative cooperation through the Internal Market Information System ('the IMI Regulation'): <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A32013L0055>
3. World Health Organization (2010) The WHO global code of practice on the international recruitment of health personnel: <https://www.who.int/publications/i/item/who-global-code-of-practice-on-the-international-recruitment-of-health-personnel>

4. Directive 2003/88/EC of the European Parliament and of the Council of 4 November 2003 concerning certain aspects of the organisation of working time: <https://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX:32003L0088>
5. Paul De Raeve, Andreas Xyrichis and Manuel Ballotta (2024). The European Parliament SANT Committee Own Initiative Report on EU Nursing Workforce Shortages. Iris J of Nur & Car. 5(2): IJNC.MS.ID.000610. DOI: 10.33552/IJNC.2024.05.000610
6. WHO Health and care workforce in Europe: time to act (<https://www.who.int/europe/publications/i/item/9789289058339>)