



Ms Marie Simonsen
 Legal and policy officer
 Task Force for the Preparation and Conduct of the Negotiations
 with the United Kingdom under Article 50 TEU (TF50)

marie.simonsen@ec.europa.eu

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Dear Ms Simonsen,

Further to our previous letters regarding the vital role that the free movement of persons and the mutual recognition of professional qualifications plays in both doctors' professional development and in meeting various workforce requirements across Europe, our colleagues in the BMA (British Medical Association) have undertaken further research to analyse the crucial role that its members holding professional qualifications from other EU/EEA Member States play in delivering healthcare across the continent.

Focusing on those members who practise medicine in both the UK (United Kingdom) and one or more other EEA states, the BMA asked these doctors to respond to the following questions:

1. *Outline the benefits bi-national working arrangements bring to the following:*
 - *To your patients in all of the countries in which you practise*
 - *To your colleagues in the wider health service, in all of the countries in which you practise*
 - *To your professional development*
 - *To your personal and family life*

2. *Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices*

Responses were received from doctors practising in a wide range of specialities and in a wide range of countries across Europe. As per our previous communications on this matter, the findings provide further evidence of the critical role that such physicians play in the delivery of high-quality healthcare to Europe's citizens. Please find these testimonials and case studies in the annex.

Further information is available from our colleague – plaffin@bma.org.uk – in the British Medical Association.

We welcome the Chief Negotiator’s recognition of “the great importance free movement rights and the recognition of professional qualifications have for the European health care sector” and take note of your explanation that “the arrangements for persons crossing the border after withdrawal, when the UK has become a third country, will depend on negotiations which will only take place once the priority issues...have been settled.”

We nonetheless reiterate our conviction that the future of Europe’s healthcare is dependent upon the continued professional migration of doctors and that the resolution of this matter should be prioritised within the negotiations’ parameters.

We hope that this information is helpful. We would be delighted to have a follow-up meeting with the Taskforce 50 in person to expand upon these views and the other, numerous, Brexit related issues threatening the future provision of high-quality healthcare in Europe and will contact Mr Barnier to this end shortly. In the meantime, please do not hesitate to contact us in case of further questions.

Yours sincerely,

Dr João de Deus
President of the European Association of Senior Hospital Doctors (AEMH)

Dr José Santos
President of the European Council of Medical Orders (CEOM)

Dr Jacques de Haller
President of the Standing Committee of European Doctors (CPME)

Dr Philippe Boutin
President of the European Working Group of Practitioners and Specialists in Free Practice (EANA)

Dr Sascha Reiff
President of the European Junior Doctors Permanent Working Group (EJD)

Mr Stefan Hardt
President of the European Medical Students’ Association (EMSA)

Dr Enrico Reginato
President of the European Federation of Salaried Doctors (FEMS)

Dr Aldo Lupo
President of the European Union of General Practitioners/Family Physicians (UEMO)

Dr Romuald Krajewski
President of the European Union of Medical Specialists (UEMS)

Annex – Testimonial and case studies

Testimonial

A Polish doctor practising in both his home country and the UK, whose work in the UK provides “Polish patients in UK (with)...easier transitioning between differences of language as well as medical approach/methods”, whilst adopting innovative British approaches to patient care in Poland:

“Polish patients in Poland have an opportunity to see approaches from the UK as by practising in UK I do learn British methods/approaches - for example...Chaperoning is an unfamiliar thing in Poland and I'm thinking of introducing it in Poland.”

The mutually beneficial exchanges accrued to the Polish and British health services via such pan-European professional migration were also clearly articulated by this doctor:

“I meet new colleagues and we share experience/stories about the differences between medical practice within UK and Poland which generally gives an idea of what could be a better solution/approach to certain problems and gives us an opportunity to decide on our own and to incorporate it within our practice.”

He does, however, fear that restrictions to the mutual recognition of professional qualifications or free movement will have a significantly detrimental impact upon his ability to continue practising bi-nationally.

“I may be barred from further practice in UK or the limitations/restrictions imposed could simply make life and work in UK harder, meaning the decision to practice here could be revisited.”

Case studies (see questionnaire above)

#1: An Italian qualified doctor, in a specialty training programme in Germany (General Internal Medicine) and a Clinical Research Fellow at a British University doing mostly research in the UK but also some clinical work in a London Hospital.

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: Experience in cutting edge research in public health and patient safety learnt in the UK, experience in 'customer-care' and patient-centred care learnt in Germany.*
- *To your colleagues in the wider health service, in all of the countries in which you practise: Working in different environments helps you getting on well with colleagues from a variety of backgrounds and to understand the way different health systems work.*
- *To your professional development: In the UK I have the chance to develop my expertise in Public Health Medicine (topic not much developed elsewhere), while in Germany I have the chance to improve my clinical skills (in a UK training programme it would last ages to learn the same things...). This combination is ideal to improve my career development both clinically and in research.*
- *To your personal and family life: Great chance to live a multicultural environment in 2 great EU countries.*

Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices:

If I had to choose which country to practice clinical medicine, I would chose Germany and only collaborate with the UK on medical research.

#2: Croatian qualified medical doctors, working in the UK as an ACCS Emergency medicine trainee and working in Croatia as a prehospital ambulance doctor

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: Broader experience and bringing better practice to both directions*
- *To your colleagues in the wider health service, in all of the countries in which you practise: Broader experience and bringing better practice to both directions*
- *To your professional development: Keep in touch with prehospital medicine because there is no opportunity in the UK at my level of training to do any prehospital medicine*
- *To your personal and family life: Stay in touch with my family and friends/colleagues at old workplace in Croatia*

#3: Dutch qualified Paediatrician, working in the UK fulltime, but participating in European funded international research projects

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: Being able to bring patients to a centre of excellence as we are, we ensure the best chances for an optimal outcome for our patients, which cannot be achieved would treatment be split over different countries.*
- *To your colleagues in the wider health service, in all of the countries in which you practise: We advise colleagues locally, regionally, nationally and internationally. We are invited to teach colleagues at international conferences. We are dealing with rare diseases but making progress as we are able to concentrate care, and learn from experiences, which would not be possible if treatment would have to take place in the home country. We welcome international fellows to work with us, and always have one or two at any time. We teach them, and we learn from them.*
- *To your professional development: Being able to receive referrals from all over the world (note these come with funding from their respective governments) we are able to build on our experience as well, seeing more patients with similar conditions helps in developing and improving healthcare for the children. In our work, having an open mind and hearing other peoples' experiences managing patients with rare conditions is vital. Our team consists of individuals from both the UK and EU, but also outside the EU.*
- *To your personal and family life: It is very satisfactory to see progress being made in our area of expertise. We are currently in the process of adopting a child in the UK system.*

Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices:

Mutual recognition as it is already insufficient. Not being able to keep my dual registration will impact my career opportunities. It will cripple our team and the improvement of care to our (both UK and international) patients and would not just in a stand-still, but would be a step back.

#4: Portuguese qualified doctor working full time in Lisbon and weekend locum work in UK

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: Better understanding of different reality home and abroad*
- *To your colleagues in the wider health service, in all of the countries in which you practise: Better understanding of different reality home and abroad*
- *To your professional development: Similar Health Services with different pros and cons*
- *To your personal and family life: Eldest daughter in the UK, youngest in Portugal*

Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices:

Will stop coming to the UK for work

#5: Estonian qualified neurology consultant working 3 days per week in Scotland and doing 2 days of research. Practiced in Estonia for 5 months during 2016

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: See the advantages of different approaches in different health service systems.*
- *To your colleagues in the wider health service, in all of the countries in which you practise: Can suggest ideas that may work better having seen these in practice in other systems.*
- *To your professional development: Definite benefit as above.*
- *To your personal and family life: I am married to a British national, and having the option to work in either country would ultimately increase the chances that we would stay in the UK for longer.*

Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices:

It would be difficult for me as I plan to go back to Estonia at some point for a few years, with an intention to probably return to UK again later. This would prohibit my movements and my family's movements and force us in a situation where we have to choose one country over another.

#6: An Italian medical graduate, training as a GP in the UK.

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: Expertise and wide ranging cohorts of patients seen in practice. Knowledge of different cultural aspects and practices impacting on health and on health beliefs.*
- *To your colleagues in the wider health service, in all of the countries in which you practise: Different perspectives and experiences. Knowledge of different models of organisation and structures of healthcare that can be integrated or adapted in practice.*

- *To your professional development: New view and different and varied approaches to problems.*
- *To your personal and family life: My family is European and the freedom and possibility of going back to live in Europe should not be precluded to me.*

Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices:

I would like to be able to one day return and share my knowledge and experience gained abroad in my home country. At the same time I would like to be able to practice medicine in the country where I am currently training as to give back to the service and the population that has accepted me. I believe freedom of movement and mutual recognition of professional qualification is essential to allow both a wealth of knowledge to be shared across the nations and also to allow professionals that have moved for economic or systemic reasons from some countries (so called "brain drain") to return and share their skills and knowledge, like I would like to do in the future

#7: Romanian Consultant general surgeon working 8-10 weeks per year in UK, as a locum surgeon. In the rest of the year I am working in Romania.

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: I can use my 30 years of surgical experience in the benefit of the patients, in both country.*
- *To your colleagues in the wider health service, in all of the countries in which you practise: I can share with my colleague in both country, my experience.*
- *To your professional development: Working in different environment I can see new or different way of treatment, which is good for my professional development.*
- *To your personal and family life: My family benefit is the increased income and better life.*

#8: Polish qualified, junior doctor. Locum in Poland once every 3 months for a week

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: Knowing both systems and main stream treatments*
- *To your colleagues in the wider health service, in all of the countries in which you practise: Able to explain why and etc in ref to patients coming from different countries*
- *To your professional development: I need to keep up with medical trends in both countries*
- *To your personal and family life: Contact with the roots and culture*

Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices:

I will have to limit my practice to one country, it will impact my patients since I will not be on top of the new trends in the other country, nor will I have easy stream of information and experience.

#9: Lithuania qualified GP working 8 months per year as a locum in UK and 2 months in Lithuania

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: Better quality of care to UK patients, especially for not born in UK.*
- *To your colleagues in the wider health service, in all of the countries in which you practise: Colleagues like to know about health systems in other countries.*
- *To your professional development: Slightly different system. Huge NHS problems keeps very alert and be up to date with current situation.*
- *To your personal and family life: It is nice to have an opportunities to work and at same time to explore a new countries*

Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices:

Probably I will not work in UK if I have to deal with visas and other paperwork.

#10: A Germany qualified Haematologist and Allogeneic Stem cell Transplanter now working in Austria but has previously, and may do so again, undertaken locum work in the UK.

Outline the benefits bi-national working arrangements bring to the following:

- *To your patients in all of the countries in which you practise: Experience is always good*
- *To your colleagues in the wider health service, in all of the countries in which you practise: In time of doctor shortage anyone benefits*
- *To your professional development: OK*
- *To your personal and family life: Neutral*

Outline how restrictions to the EU's policy of free movement and the mutual recognition of professional qualifications may impact upon your future career choices:

Put off by various UK measures in the past: Revalidation, lower locum pay, higher taxes, lack of NHS support by the Conservatives, good permanent posts for English colleagues only regardless of experience. Brexit caused 15% less £ earning power, Brexit makes you feel less welcome