

GREEN PAPER ON THE EUROPEAN WORKFORCE FOR HEALTH

OPINION OF THE *CONSEJO GENERAL DE COLEGIOS MÉDICOS DE ESPAÑA*

The *Consejo General de Colegios Médicos de España* (General Medical Council) welcomes the proposal from the European Commission to tackle jointly the problems common to the health workforce in the EU. However, we understand that it is convenient not to mix some professions with others, distinguishing between the skills of each health professional in order to be able to make the best use of them for the benefit of patients and health systems.

There is a general use of the terms "**health workforce**" and "**health professionals**", and this may give rise to confusion between the functions of each of the professions.

The working conditions for the health workforce, and specifically for doctors in the EU, are set out in three specific Directives:

- the Directive on the recognition of professional qualifications
- the proposal for a Directive on working time
- the draft Directive on patients' rights in relation to cross-border healthcare.

The Directive on the recognition of professional qualifications (2005/36/EC) distinguishes between the various health professions, with the articles laying down the minimum training requirements for each one, and with a specific section for each of the regulated health professions.

Negotiations on the proposal for a Directive on working time have also analysed emergency medical services, off-duty time and the "opt-out" clause specifically for this profession owing to the need to organise working and rest times with sufficient guarantees for the health and safety of both doctor and patient.

With regard to the draft Directive on patients' rights in relation to cross-border healthcare, it would be necessary to develop the European health professional card as a guarantee of sufficient qualifications for professionals working in other countries.

We consider it important to analyse the Green Paper from the point of view of the doctor and his role in the future health care system; to study ways of seeing how health professionals can adapt their skills, abilities and responsibilities, given the fact that it is sometimes easily assumed that a doctor's tasks can be transferred to other health professionals. But this is too simplistic and ignores the important point that the doctor has a wider and more holistic view of the patient and is the only health professional to accept the assumption of risks and uncertainty as part of the diagnostic process.

In order to ensure sufficient quality and safety of care, the doctor must have sufficient time for his patients, as well as for updating his knowledge, organising his work, collaborating with other colleagues and conducting research.

To make the profession attractive to doctors in the future, factors such as remuneration, working conditions and the professional's recognition and social status must be borne in mind. This presupposes a significant effort to combat "burn-out", which is one of the causes recognised as a source of demotivation, reduced performance and abandonment of the profession.

Distributing health professionals among all the areas where they are needed requires additional incentives and knowledge of the language of the area, which must be tackled at EU level. Similarly, we also consider it very important to provide information on specific cultural and local characteristics in order to provide a better knowledge and understanding of the patient and his environment.

Movements of trained health workers outside the European Union require the implementation of precise and standard criteria throughout the EU, especially in the



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accreditation and recognition of qualifications. This process must also be flexible and demanding, bringing levels of training into line throughout Europe.

It is not clear how some of the proposals referred to in the Green Paper are to be implemented without infringing Community law. It would be useful for the European Commission to provide more details in this regard in order not to cause a conflict with the competences of the Member States in terms of organising and managing health systems.

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