FEPI Responses to the European Commission Green Paper on the Modernising the Professional Qualifications Directive

Question 1: Do you have any comments on the respective roles of the competent authorities in the Member State of departure and the receiving Member State?

FEPI in considering the proposal in the green paper that registration assessment is done by the home country has the potential to reduce the application time for 'full' registration considerably. The home regulator prepares a dossier relevant to the individual practitioner and submits it to the host regulator for their assessment. This should speed up the time it takes for the host regulator to assess and decide on an individual application and issue the relevant registration documents.

However it should be understood that each country applies their own unique system to the regulation of nurses, some uniformity is needed to be established in all host countries;
Close cooperation between regulators in all member states is required for agreeing a strict protocol/procedure for the evaluation of qualifications for the purpose of standing over information provided from each country and therefore on each card;
FEPI as the European Council for the nursing profession has the potential to be the vehicle for the close cooperation between regulators in all member states to agree a quality assurance scheme to continually monitor and audit the EU-wide implementation of the scheme.

The proposal for the home country to provide information for the migrant worker in theory is a good one that FEPI supports in principle but in many countries it is a significant shift from current procedures. In the current proposal it is of limited benefit as employment is still dependent on the applicant being granted registration as a nurse with the host country. The observation of the Evaluation report related to trust of procedures between countries needs further follow up as there are continued issues regarding declarations by some regulators that applicants meet direct entry requirements and experience has shown that full assessments on some of these applications are required. Any change to the current system of assessment would have to allow a right for the host regulator to query the declaration of another regulator, and to seek further documentation pertinent to the registration application, through the home regulator, in order to satisfy itself that the applicant meets direct entry criteria. This approach to registration assessment would also require close cooperation between regulators to dovetail Information Technology infrastructure so that information may be exchanged in a timely and agreed format.

Question 2: Do you agree that a professional card could have the following effects, depending on the card holder's objectives?

a) The card holder moves on a temporary basis (temporary mobility):

- Option 1: the card would make any declaration which Member States can currently require under Article 7 of the Directive redundant.

- Option 2: the declaration regime is maintained but the card could be presented in place of any accompanying documents.

b) The card holder seeks automatic recognition of his qualifications: presentation of the card would accelerate the recognition procedure (receiving Member State should take a decision within two weeks instead of three months).

c) The card holder seeks recognition of his qualifications which are not subject to automatic recognition (the general system): presentation of the card would accelerate the recognition procedure (receiving Member State would have to take a decision within one month instead of four months).

FEPI agrees with the principle of each professional utilising a card that supports the recognition as a professional in their own country. However there are issues with its use and the principles underpinning its use which must be commonly understood to achieve the objective of regulation of a profession as protecting the public.

FEPI considers the reduced timeframes very ambitious especially as regards the general systems. The use of the proposed card for the purpose of providing temporary service only, may have more scope where by the individual applies to the home regulator for the card and the home country then alerts the host country of the individuals' intention to provide temporary service. However it has limitations:-

- Home country can only confirm the registration status of the individual in the home country. If the registration status, by name, title or by competence, differs from that used in the host country, then the potential employer has no benchmark to assess the individual;
- If the individual holds a registration status in the home country that is not recognised in the host country then the same problem arises for the employer and how is this addressed by the host regulator in terms of the public protection legislation in operation in the host country;
- Unless a common format and language is used how are employers to assess the validity or otherwise of the card or understand what is written;

- Employers are somehow expected to have knowledge of all the names of the regulators in each EU member state.
- Some countries due to data protection issues will not be in a position to share their database/register with IMI.

Further to the above FEPI has closely followed the work of the Steering Group for Professional Cards with CEPLIS and has feedback through CEPLIS via the Steering Group sub-group of Nurses. The comments are attached as an appendix to this document.

Question 3: Do you agree that there would be important advantages to inserting the principle of partial access and specific criteria for its application into the Directive? (Please provide specific reasons for any derogation from the principle.)

FEPI oppose partial access to the profession. Partial access to education systems to achieve full access is possible with cooperation between education providers and regulators of the profession. Patient safety would be compromised with partial access. Regulation of the profession would be severely compromised with partial access particularly in relation to accounting for standards of practice of the professional. A patient also should be able to understand the expected standards of care from a professional. This would be compromised with partial access.

Question 4: Do you support lowering the current threshold of two-thirds of the Member States to one-third (i.e. nine out of twenty seven Member States) as a condition for the creation of a common platform? Do you agree on the need for an Internal Market test (based on the proportionality principle) to ensure a common platform does not constitute a barrier for service providers from non-participating Member States? (Please give specific arguments for or against this approach.)

FEPI supports the concept of common platforms. FEPI agrees with the principle of reducing the requirement from two-thirds to one third. In respect of the Internal Market test the strong optimism and expectation of FEPI is that if introduced, such a test should embrace the principles of standards to support patient safety and standards of evidenced-based care.

Question 5: Do you know any regulated professions where EU citizens might effectively face such situations? Please explain the profession, the qualifications and for which reasons these situations would not be justifiable.

FEPI supports the current requirements of the Directive 2005/36/EC. FEPI would like to see some changes and modifications to the Directive. However the general care nurse is provided for in the current Directive. Countries that have developed other professions for national purposes can utilise the provisions of the General Systems. A country that chooses to develop alternate professions that

do not comply with the requirements of the Directive should take responsibility for their national decisions and citizens and should not impose their national requirements if it compromises EU standards on other host countries.

Question 6: Would you support an obligation for Member States to ensure that information on the competent authorities and the required documents for the recognition of professional qualifications is available through a central on line access point in each Member State? Would you support an obligation to enable online completion of recognition procedures for all professionals? (Please give specific arguments for or against this approach).

FEPI supports the principles of national contact points. In relation to nursing FEPI appreciates the information the DG Internal Market collected in this regard. Requirements for the online procedures should be encouraged, however, given the fact not all professionals have equal access to the internet in all parts of the EU an alternative to online completion of recognition procedures should be guaranteed. In order for online procedures to work there needs to be consideration for:

- Close cooperation between regulators in all member states agreeing a strict protocol/procedure/Standard Operating Procedures for the evaluation of qualifications for the purpose of standing over information provided on each card;
- Close cooperation between regulators in all member states to agree a quality assurance scheme to continually monitor and audit the EU-wide implementation of the scheme.

Question 7: Do you agree that the requirement of two years' professional experience in the case of a professional coming from a non-regulating Member State should be lifted in case of consumers crossing borders and not choosing a local professional in the host Member State? Should the host Member State still be entitled to require a prior declaration in this case? (Please give specific arguments for or against this approach.)

FEPI in the interest of patient safety supports the principle that the host country regulator is accountable for the standards of care provided by health professionals in its jurisdiction. Therefore nursing as a regulated profession cannot compromise its standards. Host member states should be facilitated to require a prior declaration.

Question 8: Do you agree that the notion of "regulated education and training" could encompass all training recognised by a Member State which is relevant to a profession and not only the training which is explicitly geared towards a specific profession? (Please give specific arguments for or against this approach.)

FEPI supports the principle of regulated education and training. Understanding the ethics of a profession is most important within health care to ensure patient safety. Obtaining education in a non-regulated manner where the clinical experience is so important will compromise patient safety. An accountable professional must attest to the professional competence of a new professional as happens in regulated education and training.

Question 9: Would you support the deletion of the classification outlined in Article 11 (including Annex II)? (Please give specific arguments for or against this approach).

FEPI suggests that the current evolution of the EQF does not provide substantial evidence that Article 11 is redundant. A pilot project to examine the feasibility of the introduction of the EQF within a profession should be explored.

Question 10: If Article 11 of the Directive is deleted, should the four steps outlined above be implemented in a modernised Directive? If you do not support the implementation of all four steps, would any of them be acceptable to you? (Please give specific arguments for or against all or each of the steps.)

FEPI would like to reiterate that compensation measures are only utilised as a last resort. The onus on the host country is to ensure that the entire nursing professionals on their register are safe and competent to work. Home countries have responsibilities to their citizens to ensure they meet required criteria of the EU.

Question 11: Would you support extending the benefits of the Directive to graduates from academic training who wish to complete a period of remunerated supervised practical experience in the profession abroad? (Please give specific arguments for or against this approach.)

FEPI supports further cooperation between the education community and the regulators. In nursing a graduate has completed the requirements of the Directive so supervised training is not a feature for recognition.

Question 12: Which of the two options for the introduction of an alert mechanism for health professionals within the IMI system do you prefer?

Option 1: Extending the alert mechanism as foreseen under the Services Directive to all professionals, including health professionals? The initiating Member State would decide to which other Member States the alert should be addressed.)

Option 2: Introducing the wider and more rigorous alert obligation for Member States to immediately alert all other Member States if a health professional is no longer allowed to practise due to a disciplinary sanction? The initiating Member State would be obliged to address each alert to all other Member States.)

FEPI strongly supports Option 2.

Question 13: Which of the two options outlines above do you prefer?

Option 1: Clarifying the existing rules in the Code of Conduct;
Option 2: Amending the Directive itself with regard to health professionals having direct contact with patients and benefiting from automatic recognition.

FEPI supports Option 2.
As previously presented in the submission to the public consultation the use of the term 'Code of Conduct' in this context is inappropriate as in the majority of health professions it is used and understood very differently.

Question 14: Would you support a three-phase approach to modernisation of the minimum training requirements under the Directive consisting of the following phases:
- the first phase to review the foundations, notably the minimum training periods, and preparing the institutional framework for further adaptations, as part of the modernisation of the Directive in 2011-2012;
- the second phase (2013-2014) to build on the reviewed foundations, including, where necessary, the revision of training subjects and initial work on adding competences using the new institutional framework; and
- the third phase (post-2014) to address the issue of ECTS credits using the new institutional framework?

FEPI supports a three phase approach but suggests the timeframes are too long. The implication of the timelines should reflect the opportunity to address the workforce shortages in 2020. FEPI would welcome discussions on shortening the timeframes to achieve full agreement by 2014 with implementation by 2016 and graduates therefore by the early 2020's educated within a modern Directive.

Question 15: Once professionals seek establishment in a Member State other than that in which they acquired their qualifications, they should demonstrate to the host Member State that they have the right to exercise their profession in the home Member State. This principle applies in the case of temporary mobility. Should it be extended to cases where a professional wishes to establish himself? (Please give specific arguments for or against this approach.) Is there a need for the Directive to address the question of continuing professional development more extensively?

FEPI agrees that the principle should be extended to someone who wishes to establish themselves.

FEPI strongly supports the Directive including a requirement for each professional to maintain professional competence on an on-going basis. Continuing professional development is a component of professional competence. A key consideration is the principle that all nursing practice should be informed by current evidence. FEPI takes this opportunity to support the excellent provision in the Green Paper for Continuing Professional Development and suggests it is further supported in the final Directive as a necessity. The implementation of schemes to ensure continued professional development and or competence should be a national issue.

Question 16: Would you support clarifying the minimum training requirements for doctors, nurses and midwives to state that the conditions relating to the minimum years of training and the minimum hours of training apply cumulatively? (Please give specific arguments for or against this approach.)

FEPI supports continuing the requirement for 4600 hours in the nursing programme. In supporting 4600 hours FEPI also supports the breakdown of the theory and clinical practice elements in the programmes as currently required by Directive 2005/36/EC. The requirement for 3 or 4 years should be a national one but FEPI is aware that in a 3 year university based course is will be difficult to achieve in the 4600 hours.

Question 17: Do you agree that Member States should make notifications as soon as a new program of education and training is approved? Would you support an obligation for Member States to submit a report to the Commission on the compliance of each programme of education and training leading to the acquisition of a title notified to the Commission with the Directive? Should Member States designate a national compliance function for this purpose? (Please give specific arguments for or against this approach.)

FEPI from its membership has realised that varying approaches are adopted throughout Europe related to the accreditation of education programmes. A more transparent and open system would be appreciated by all FEPI members.

Question 20: Which of the options outlined above do you prefer?

Option 1: Maintaining the requirement of ten years of general school education

Option 2: Increasing the requirement of ten years to twelve years of general school education

FEPI strongly supports Option 2. FEPI wishes to underline the need for at least 12 years education to support a workforce that has the capacity for independent thought, analysis of problems and critical thinking. This is required in the interest of patient safety and cannot be guaranteed with any less education than 12 years.

Question 24: Do you consider it necessary to make adjustments to the treatment of EU citizens holding third country qualifications under the Directive, for example by reducing the three years rule in Article 3 (3)? Would you welcome such adjustment also for third country nationals, including those falling under the European Neighbourhood Policy, who benefit from an equal treatment clause under relevant European legislation? (Please give specific arguments for or against this approach.)

FEPI considers the current requirements within Directive 2005/36/EC sufficiently meets the needs of recognising third country qualifications.