

Commissioner for the Internal Market  
European Commission  
Rue de la Loi / Wetstraat 200  
1049 Brussels  
Belgium

15<sup>th</sup> November 2019

### **Brexit and the European Medical Profession**

Dear Commissioner Breton,

I am writing to you on behalf of the British medical profession and, firstly, would like to congratulate you on your appointment as the European Commissioner for the Internal Market.

You will be all too aware that Brexit – the UK's (United Kingdom) impending departure from the EU (European Union) - and the related uncertainty will have profound repercussions for the medical profession and its ongoing ability to provide high quality healthcare to patients across Europe.

Currently, the more than 22,000<sup>1</sup> EEA (European Economic Area) qualified doctors in the UK can practise there and in other member states due to the mutual recognition of professional medical qualifications (MRPQ) and the principle of free movement. In addition to facilitating such cross-border working, these principles play a crucial role in both doctors' professional development and in meeting various workforce requirements across Europe.

Worryingly, our own research<sup>2</sup> indicates that over 1/3 of such EEA qualified doctors – many of whom provide vital healthcare in several member states – in the UK are considering moving abroad due to Brexit, with 18% per cent of that number thinking about leaving Europe entirely.

Such an exodus may include, for example, the Polish doctor<sup>3</sup> practising in both his home country and the UK, whose work in the UK has led to the adoption of 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.*

<sup>1</sup> [https://www.gmc-uk.org/-/media/documents/our-data-about-doctors-with-an-eea-pmq-2019\\_pdf-80536969.pdf](https://www.gmc-uk.org/-/media/documents/our-data-about-doctors-with-an-eea-pmq-2019_pdf-80536969.pdf)

<sup>2</sup> <https://www.bma.org.uk/collective-voice/influence/europe/brexit/eu-survey-2018>

<sup>3</sup> Letter of 27 August 2017 to 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)



Or the Romanian Consultant general surgeon working in both the UK and his home country who “can use my 30 years of surgical experience in the benefit of the patients, in both countries.”

Thankfully, your institution has helped to secure a draft withdrawal agreement that seeks to mitigate Brexit’s impact upon the European medical profession and confirms Michel Barnier’s assertion<sup>4</sup> that “doctors working before Brexit can continue to work in their host countries” and that “their professional qualifications will continue to be recognised.”

Nevertheless, and being fully cognisant that the UK may depart from the EU without having ratified the draft withdrawal agreement, much more must be done to mitigate Brexit’s impact on the European medical profession and the patients it serves across the continent.

Therefore, and echoing the points that we have already made to the EU’s Chief Negotiator, we would reaffirm our view, which is shared both the European Council and the UK government that “the future partnership should include ambitious provisions on movement of natural persons...in areas such as (the) recognition of professional qualifications<sup>5</sup>. ”

In addition to this view, and in the interests of securing patient safety across Europe, we believe that maintaining UK involvement in the current system of sharing fitness to practise alerts, via the (IMI) internal market information system, is equally vital.

We recognise that the development of a system of MRPQ “presents particular difficulties, notably in light of the integrity of the single market that should not be underestimated” and are cognisant of the fact that “so far, the European Union has not entered into a horizontal agreement on mutual recognition of professional qualifications with a third country<sup>6</sup>. ”

Without prejudice towards these views, and as detailed above, we believe that MRPQ has been of enormous benefit for both doctors and patients across Europe.

Accordingly, and as you will play a lead role within the EU’s consideration of such matters, we would urge you to help deliver pragmatic solutions that permit such a system of MRPQ to safeguard European doctors’ ongoing provision of essential health services to Europe’s patients.

I hope that this information is helpful and can advise that our EU Public Affairs Manager, Paul Laffin – who will be in touch separately, would be delighted to meet with you and/or your team in person to expand upon these views.

Yours sincerely,



Dr Chaand Nagpaul CBE, Chair of BMA UK Council

<sup>4</sup> Statement by Michel Barnier at the plenary session of the European Parliament on the state of play of the Article 50 negotiations with the UK, Strasbourg, 13 December 2017

<sup>5</sup> [https://ec.europa.eu/commission/sites/beta-political/files/revised\\_political\\_declaration.pdf](https://ec.europa.eu/commission/sites/beta-political/files/revised_political_declaration.pdf)

<sup>6</sup> Michel Barnier letter (6 March 2018) to the Presidents of UEMS, CEOM, EJD, UEMO, FEMS, CPME, EMSA and AEMH