

Department for Business, Energy & Industrial Strategy

1 Victoria Street
London
SW1H 0ET

By email

23rd October 2020

Dear Sir/Madam,

Recognition of professional qualifications and regulation of professions: call for evidence

The BMA (British Medical Association) is a professional association and trade union representing and negotiating on behalf of all doctors and medical students in the UK. It is a leading voice advocating for outstanding health care and a healthy population.

Since the EU referendum in June 2016, the BMA has highlighted the many ways in which the UK's membership of the EU has benefited patients, the health workforce and health services as well as the detrimental effect Brexit could have on them. It is highly unlikely that any Brexit deal could ever deliver the range of benefits which the UK's current membership of the EU confers on patients, the medical workforce and health services across the UK and Europe. A 'no deal' outcome could have dire consequences across the health and social care sector, including for EU nationals working in health services, for patient access to medicines, reciprocal healthcare, treatments and for NHS funding.

In relation to the UK's approach to the mutual recognition of professional qualifications (MRPQ), we have repeatedly called for the continuation of a system of recognition that is as close to the current system of automatic recognition as possible. In the UK, nearly 22,000 doctors gained their primary medical qualification from another EEA country. The mutual recognition of qualifications is also a particularly vital issue in Northern Ireland, where clinicians move freely between both jurisdictions. The loss of MRPQ could, for example, lead to significant difficulties for medical students from Northern Ireland who opt to study and train in the Republic of Ireland, but who wish to return home to practise medicine in Northern Ireland.

We therefore welcomed the establishment of a temporary UK system of recognition that, in a 'no deal' Brexit, would allow holders of EU, EEA EFTA and Swiss qualifications to seek recognition of their qualifications in a timely and streamlined way for a period of up to two years. This provides some reassurance that the NHS workforce will not face an immediate impact at the end

of the transition period. It will therefore be important to resist political pressure to unnecessarily bring forward a revised UK framework that does not match the benefits contained in the temporary UK arrangement – we would support the extension of the two year period until such time as an equally beneficial system is developed.

In terms of the proposals put forward during Brexit trade deal negotiations, it is helpful that the UK and the EU share the same ambition of ensuring mutual recognition of qualifications. However, the negotiating proposals put forward by each side are very different. The BMA strongly favours a provision that would enshrine MRPQ directly in the free trade agreement, applies to every Member State on equal footing and that can immediately enter into force upon ratification. This would ensure continuity and legal certainty for both students and professionals at the end of the transition period. A solution which relies on future bilateral mutual recognition agreements to be agreed is – for all its flexibility – a largely untested process which is likely to require significant time to take shape.

In the absence of a system of automatic recognition for doctors, patient safety (as impacted by medical workforce numbers) should be the underlying concern for any UK approach, rather than the pursuit of economic or financial interests. We would therefore encourage the development of a separate system of MRPQ for health and care professionals, rather than a single UK approach covering the full range of diverse sectors currently addressed by related EU Directives.

We would also like to note our strong support for the Department of Health and Social Care's current professional regulation reform programme as it relates to the simplification of the current outdated system of ensuring equivalence when assessing international medical graduates. These reforms should give the General Medical Council more discretion for determining how senior international doctors can demonstrate their knowledge and skills.

As a key stakeholder in the regulation of the medical profession we have shared for your information our 2018 consultation response to the Government's proposals on '*Promoting professionalism, reforming regulation*'.

We hope this information is helpful.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Stella Dunn', with a stylized, cursive flourish extending to the right.

Stella Dunn
Acting Director of Policy