

HPCB

Healthcare Professionals Crossing Borders

Crossing Borders Update



Welcome to the October 2008 Update Briefing of the Healthcare Professionals Crossing Borders initiative. This briefing includes details on the forthcoming HPCB Winter Meeting in Budapest, Hungary, as well as regulatory views on the draft Directive on Patients' Rights from Norway, Germany and the UK. For more information, please visit the HPCB website at www.hpcb.eu or contact us using the details below.

Patients' right to effective healthcare regulation

For the second time this year, European regulators will meet under the auspices of HPCB to discuss Europe-wide regulatory issues.

The conference-style meeting will take place in Budapest on 8th December 2008 and will be hosted by the Hungarian Office for Authorisation and Administrative Procedures. The theme will be the rights patients have to effective healthcare regulation if they travel to other parts of Europe for healthcare treatment.

The event is timely as the European Parliament has just begun to consider the draft Directive on the Application of Patients' Rights in Cross-Border Healthcare. The draft text sets out the administrative procedures by which an EU citizen could access treatment in another European member state at the same cost of that of their home healthcare system. It also emphasises the need for safe and high-quality healthcare across the European Union and highlights the responsibility of member states to ensure this.

While the draft text refers to financial redress for patients and acknowledges they must have information about how to complain about health providers and practitioners, there is no direct reference to regulatory redress and the need for patients to have firm assurance that if they are avoidably harmed by a health professional a regulator will take fair and effective action. MEPs on the Environment and Public Health Committee and UK MEP John Bowis, as Rapporteur, are leading the Parliamentary debate on the draft Directive. However the Internal Market and Consumer Protection Committee is seeking to reserve the regulatory aspects of the draft for initial discussion under the Parliament's enhanced cooperation rules. French Socialist MEP, Mrs Bernadette Vergnaud, is the Rapporteur in the Internal Market Committee.

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European Commission developing RPQ Code of Conduct

The European Commission, together with national government officials from across the EU, are developing a Code of Conduct on the implementation of the Recognition of Professional Qualifications Directive (RPQ).

This will set out what is expected as acceptable or good practice in the process of recognising foreign degrees and diplomas for regulated professionals trained in Europe. It also sets out what is unacceptable practice.

The Code is likely to have a direct impact on the way healthcare regulators process applications for registration. The committee of National Coordinators for RPQ next meets on 18 December 2008 in Brussels and it is likely that the Code will be finalised at this meeting. Competent authorities will be expected to make the Code publicly available once it is formally published. Although the Code is not legally binding, if a member state breaches its content it could be subject to infraction proceedings.

Hungary and Norway adopt HPCB regulatory approach

Two European competent authorities have implemented agreements created under the Healthcare Professionals Crossing Borders (HPCB) initiative, to improve information exchange between healthcare regulators.

The Office of Health Authorisation and Administrative Procedures in Hungary, will sign the HPCB 'Memorandum of Understanding on Case-by-Case and Proactive Information Sharing' between regulators. Hungary is the tenth competent authority to sign the Memorandum since its publication in early 2008.

In addition, the Norwegian Registration Authority for Health Personnel has announced that on 1st October 2008 it implemented the HPCB Certificate of Current Professional Status, after it was granted the authority from the Norwegian Government. The Certificate, which was created under the HPCB Edinburgh Agreement, provides competent authorities with detailed registration information about healthcare professionals who wish to register in their country.

These developments demonstrate that both the Edinburgh and Portugal Agreements have led to practical and important changes to the way in which healthcare regulators in Europe collaborate and share information.

Claire Herbert, Project Lead of HPCB stated:

'The continued endorsement of HPCB's 'Memorandum of Understanding on Case-by-Case and Proactive Information Sharing' between regulators, and its Certificate of Current Professional Standing, demonstrates the impact the initiative is having on regulatory collaboration in Europe. 'Crossing Borders' has played, and will continue to play, a fundamental role in bringing European healthcare regulators together to further their contribution to patient safety in Europe.'

Norway responds to the draft Directive on the Application of Patients' Rights in Cross-Border Healthcare

On 10th October 2008, the Norwegian Royal Ministry of Health set out the proposed directive at a public hearing in Norway. The interested parties have been asked to make their comments before 1st December 2008.

It is of great importance that we in Europe are working together in establishing a general framework for the provision of safe, high quality and efficient cross-border healthcare. That will indeed benefit patients in Europe.

The proposed Directive's article 5, about authorities' responsibilities in the member state of treatment, is of great importance. It is very important that member states organise the delivery of healthcare, taking into account principles of universality, good quality care, equity, solidarity and privacy. This is about ensuring that healthcare providers have the necessary knowledge and skills, that the authority has established good systems for supervision and that patients can make informed choices, have the right to make complaints and are guaranteed remedies and compensation when they suffer harm arising from healthcare received.

It is of importance that every country still has the responsibility for organising their healthcare system and medical treatment in each country, but this

should, of course, not be an obstacle against the free movement of healthcare services and the rights for patients to cross-border healthcare.

It is in the best interests of every country to decide what healthcare they will pay for within their economy's possibilities and at what price. We are prepared to pay the same for healthcare in another EEA country as we would for the same kind of healthcare in Norway. We are, in connection with this, pleased to see that the proposal does differentiate between treatment outside and inside a hospital.

We are, in Norway, also prepared to contribute to this process and to collaborate with other EEA countries to ensure that patients are given the best, high-quality healthcare in a non-discriminating way, and that the patient's safety is the main principle.

(These comments are the personal views of the author)

Per Haugum, Director

Norwegian Registration Authority for Health Personnel

German Medical Association's perspective on the Patients' Rights Directive

The German Medical Association welcomes the proposed Directive, insofar as its purpose is to create a clarifying legal framework for patients and physicians when receiving or providing health services.

However, contrary to what the title suggests, the proposal does not relate solely to aspects of patient mobility, but also outlines a Community framework, with ambitions in terms of health, social and, not least, economic policy. The proposal creates a Community framework with regulations that goes far beyond the objectives stated in the Communication from the Commission of 26th September 2006 and in part extends well into competencies that are the exclusive reserve of the member states.

When reaching a decision on the proposed Directive, member states should be aware that the initiative will impact on their respective health sectors in the long

term. It is obvious that markets of the respective healthcare systems of member states, which are protected by national regulations concerning the rendering of services and their remuneration, as well as qualification and quality assurance systems, will also be "broken open" with the help of this proposed Directive.

For the entire statement from the German Medical Association, including an analysis of the respective regulations see

<http://www.baek.de/page.asp?his=0.5.33>.

GMC responds to the draft Directive on Patients' Rights in Cross-Border Healthcare in Europe

The Directive potentially represents a significant change in access to and delivery of healthcare across Europe. Whereas patient mobility is an emerging market, there is already significant mobility of doctors across Europe.

The GMC believes that the current legal framework gives higher priority to the ease with which a doctor can gain registration and take up practice in another EEA member state rather than ensuring robust regulatory safeguards across Europe. This presents a risk to patient safety. The GMC therefore urges an emphasis in the Directive on patients' rights to effective medical regulation.

The GMC will work closely with the EU institutions, the UK Government and the devolved administrations,

other UK and European regulators, and Europe-wide stakeholder groups to influence the legislative process. It will in particular focus on the themes of: assuring safe and high quality healthcare, the patient's right to effective medical regulation, information exchange between regulators and promoting the principles of good medical regulation.

Tanja Schubert
General Medical Council (UK)

Forthcoming Dates and Events

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| 6 November 2008 | European Parliament Internal Markets and Consumer Protection Committee (IMCO) meeting First exchange of views on draft Directive of the Application of Patients' Rights in Cross-Border Healthcare |
| 12 November 2008 | Health First Europe New Horizons Congress, Brussels A one-day event to address the needs and issues of patients, healthcare workers and the industry in terms of the delivery of quality healthcare services. |
| 13 November 2008 | Launch of the 'Mobility of Health Professionals' project, Brussels Project launch hosted by the Scientific Institute of the German Medical Association (WIAD) and the International Organisation for Migration (IOM), Migration Health Department. |
| 28 November 2008 | European Health Professional Card Conference, Paris A conference on the European card for health professionals, allowing participants to share experiences and learn about and discuss the issues related to the free movement of European health professionals. |
| 8 December 2008 | Healthcare Professionals Crossing Borders – 2008 Winter Meeting, Budapest Hosted by the Office of Health Authorisation and Administrative Procedures, Hungary. The theme of the meeting is 'Patients' Rights to Effective Healthcare Regulation'. |
| 11 December 2008 | Health Systems Governance in Europe: the Role of EU Law and Policy, Brussels A conference hosted by the Observatoire Social Européen. The aim of this event is to present the main findings of a forthcoming book and to discuss them with policy-makers and social managers from the healthcare sector. |

The Portugal Agreement made in Lisbon in 2007

An Agreement of the Healthcare Professionals Crossing Borders

Agreement 1

Identifying Shared Principles of Regulation:

- a) Competent authorities should ensure that patient safety is of over-riding importance within their model of professional regulation.
- b) The pursuit of safe and high quality practice by health professionals should shape the continued development of health regulation across Europe.
- c) Competent authorities should identify common or shared concepts and values of healthcare regulation through a series of focused European level discussions.
- d) Competent authorities should collectively consider how the five principles of good regulation – accountability, transparency, proportionality, consistency, targeting – may contribute to the effective development of healthcare regulation in Europe, through a series of European level discussions.

Agreement 2

Transparent and Accessible Healthcare Regulation:

- a) Competent authorities should run a website signposted or accessible via the www.healthregulation.org website and/or http://ec.europa.eu/internal_market/qualifications/compauth_en.htm.
- b) Competent authorities will share experience in the development of web-based information and publicly transparent lists of registered professionals and identify good practice.
- c) Competent authorities should work to develop real-time web-based publicly searchable lists of registered professionals.
- d) Competent authorities should work towards making all notifications of disciplinary hearings and decisions public, where legally possible.
- e) Competent authorities will continue to adopt and implement the European template for a Certificate of Current Professional Status, as appropriate, as agreed within the Edinburgh Agreement.
- f) Competent authorities will continue to work towards adopting the HPCB Memorandum of Understanding on Case by Case and Proactive information exchange.
- g) Competent authorities will continue to support the development of the European Commission's I MInet system and will utilise this information exchange tool in accordance with the provisions for administrative cooperation contained within Directive 2005/36/EC.

Agreement 3

Competence Assurance of European Healthcare Professionals:

- a) Competent authorities will identify best practice from existing competence assurance and performance enhancement initiatives from across the globe.
- b) Competent authorities will undertake an audit of all existing or proposed competence assurance and performance enhancement initiatives within the EEA.
- c) Competent authorities should, where possible, work to develop appropriate competence assurance and performance enhancement initiatives based on global good practice.
- d) Competent authorities should develop appropriate information exchange tools to provide assurance to other competent authorities of current practitioner performance competence when practitioners seek to practise in other member states.
- e) All competent authorities should take proactive steps to make new registrants familiar with the relevant professional standards, codes and guidance on registration that apply in their jurisdiction.
- f) All competent authorities should make their standards, codes and guidance publicly available.