Brexit update

Nicola While
CEOM meeting – 29 November 2019
General Medical Council

- We are the UK competent authority for doctors - an independent organisation that helps to protect patients and improve medical education and practice across the UK. We are not a Government body:
  - We decide which doctors are qualified to work in the UK – we maintain the register
  - We quality assure UK medical education and training
  - We set the standards and ethics (deontological guidelines) that doctors need to follow
  - We take action when we believe a doctor may be putting the safety of patients at risk – fitness to practise
Recruitment: Non-UK trained doctors joining the register

50% of all new doctors are non-UK graduates

Sudden increase of 40% from outside the EEA in 2018

Around 2000 EEA qualified doctors per year coming to the UK and contributing to the NHS
## Primary Medical Qualification by EEA country

<table>
<thead>
<tr>
<th>Rank</th>
<th>PMQ Country</th>
<th>Licensed doctors</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ireland</td>
<td>3,248</td>
</tr>
<tr>
<td>2</td>
<td>Greece</td>
<td>2,427</td>
</tr>
<tr>
<td>3</td>
<td>Romania</td>
<td>2,327</td>
</tr>
<tr>
<td>4</td>
<td>Italy</td>
<td>2,178</td>
</tr>
<tr>
<td>5</td>
<td>Germany</td>
<td>1,991</td>
</tr>
<tr>
<td>6</td>
<td>Poland</td>
<td>1,837</td>
</tr>
<tr>
<td>7</td>
<td>Spain</td>
<td>1,244</td>
</tr>
<tr>
<td>8</td>
<td>Czech Republic</td>
<td>1,223</td>
</tr>
<tr>
<td>9</td>
<td>Hungary</td>
<td>1,085</td>
</tr>
<tr>
<td>10</td>
<td>Bulgaria</td>
<td>801</td>
</tr>
</tbody>
</table>
Specialties with dependency on EEA graduates

- Other or multiple specialty groups: 25.0%
- Ophthalmology: 24.3%
- Surgery: 18.0%
- Radiology: 13.9%
- Obstetrics and gynaecology: 13.9%
- Pathology: 13.6%
- Medicine: 13.0%
- Paediatrics: 13.0%
- Anaesthetics and intensive care medicine: 12.2%
- Psychiatry: 11.9%
- Occupational medicine: 9.1%
- Public health: 7.2%
- Emergency medicine: 6.7%
We welcome EEA doctors in the UK

- It is essential that exiting the EU does not either deliberately or inadvertently deter the approximately 2,000 EEA qualified doctors who come here each year and contribute to the NHS

- Our health service benefits considerably from the contribution of overseas doctors and this has not changed because of the vote to leave the EU
Impact of a ‘no deal’ Brexit

- Brexit will not impact on the GMC’s standards and ethics – our codes will remain the same

- Brexit will not have an impact on the length, content or quality of our medical education and training

- There are no plans to diverge from the EU rules set out in the 2005/36/EC Directive
Potential Brexit scenarios

1. Withdrawal Agreement adopted – transition until 31 December 2020
   - Status quo for mutual recognition professional qualifications until end of 2020 – nothing changes
   - UK remains part of the IMI system

2. Withdrawal Agreement fails – ‘no deal’ Brexit as of 31 January 2020
   - No mutual recognition of professional qualifications
   - No access to IMI as of 31 January 2020
Impact of ‘no deal’ on EEA qualified doctors

- UK Government has legislated to ensure that EEA qualified doctors can register with the GMC in a timely and streamlined way if we have a ‘no deal’ Brexit.

- Primary or specialist qualifications listed in Annex V of the RPQ Directive on 31 January 2020 will be recognised as evidence of knowledge, skill and experience regardless of the nationality of the holder.

- Doctors with qualifications that are not in the Annex V will need to apply for registration via the international medical graduate route.

- Removal of temporary & occasional registration.

- System to be reviewed two years after coming into force.
Impact of ‘no deal’ on UK qualified doctors

- Qualifications obtained in the UK (by UK or EEA nationals) as of the withdrawal date will be classed as 3rd country qualifications for the purpose of EU law.

- **BUT** – each competent authority has the choice to continue to automatically recognise UK qualifications or to put a special regime in place for UK qualifications.
Brexit and the British Medical Association

Paul Laffin, EU Public Affairs Manager

25 November, 2019
©British Medical Association
Number of foreign nationals studying medicine in the UK

- Ireland: 568
- Belgium: 104
- France: 195
- Portugal: 174
- Spain: 293
- Italy: 457
- Luxembourg: 27
- Netherlands: 179
- Germany: 628
- Austria: 100
- Slovenia: 100
- Romania: 108
- Greece: 431
- Cyprus: 331
The Parties should also develop appropriate arrangements on those professional qualifications which are necessary to the pursuit of regulated professions, where in the Parties' mutual interest.

The Parties should establish a framework for voluntary regulatory cooperation in areas of mutual interest, including exchange of information and sharing of best practice.
Medicines and Medical Devices

• The Parties envisage having an ambitious trading relationship on goods on the basis of a Free Trade Agreement, with a view to facilitating the ease of legitimate trade.

• The Parties will also explore the possibility of cooperation of United Kingdom authorities with Union agencies such as the European Medicines Agency (EMA)...
DISEASE KNOWS NO BOUNDARIES
A pathogen can travel from a remote village to major cities around the world in as little as 36 hours.

www.cdc.gov/globalhealth/healthprotection
• The Parties should cooperate in matters of health security in line with existing Union arrangements with third countries.

• The Parties will aim to cooperate in international fora on prevention, detection, preparation for and response to established and emerging threats to health security in a consistent manner.
The Irish question

County Donegal

Londonderry

Dublin
Ireland

• The United Kingdom and Ireland may continue to make arrangements between themselves relating to the movement of persons between their territories (the ‘Common Travel Area’),

• The Parties recall their shared commitment to delivering a future PEACE PLUS programme to sustain work on reconciliation and a shared future in Northern Ireland, maintaining the current funding proportions for the future programme.
• the Parties will establish general principles, terms and conditions for the United Kingdom's participation in Union programmes...*in areas such as science and innovation*

• *These should include a fair and appropriate financial contribution...fair treatment of participants, and management and consultation appropriate to the nature of the cooperation between the Parties.*

• *The Parties agree to consider conditions for entry and stay for purposes such as research, study, training and youth exchanges.*
organisation...
The future of Europe’s healthcare is dependent upon the continued professional migration of doctors and that the resolution of this matter should be prioritised within the negotiations’ parameters.
Letter to the EU in August 2017
doctors working before Brexit can continue to work in their host countries. Their professional qualifications will continue to be recognised, just like in other professions.

Statement by Michel Barnier at the plenary session of the European Parliament, 13 December 2017