The recognition of professional qualifications for specialists in laboratory medicine

•The importance of EU Directive 2013/55/EU

Progress towards achieving a Common Training
Framework for specialists in laboratory medicine

 Attracting 10 European Union member states as signatories

•Timelines

# EU Directive 2013/55/EU



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#### **Objectives:**

- Raise the level of cross-border service delivery to ensure a more equitable distribution of skills and resources across the EU Community
- Increase professional mobility
- Protect patients' safety

# Timelines

 9/10/13:Adoption by the European Parliament: Approved 596 votes to 37 (31 abstentions)

- 15/11/13: Unanimous adoption by the Council of the European Union
- 17/01/14: Published in the Official EU Journal
- Jan 2016: Transposition into national law

#### **Implementation issues**

- European Professional Card
- Alert Mechanism
- Language Skills
- Continuous Professional Development
- Common Training Frameworks

# **Common Training Framework**

The new Directive makes it possible for EU Member States to decide on a common set of knowledge, skills and competences that are needed to pursue a given profession.

- Some countries may be exempted from the system under specific conditions
- Professionals who have gained their qualifications under such a common training framework will be able to have their qualification recognised automatically, without further compensation measures, in all participating countries.

# Requirements of a Common Training Framework

- Equivalence of standards in education and training (in laboratory medicine)
- Syllabus for education and training
- Identification of competencies
- Code of conduct

• The support of 10 EU member states

### EC4's Equivalence of Standards

- Academic and professional training to a minimum of 10 years
- Five years academic training including a Masters or equivalent qualification in Medicine, Pharmacy or Science
- Five years specialist training concluding in a recognised exit qualification

## EC4's Equivalence of standards

- Content to include an agreed balance of 4 disciplines from clinical chemistry/immunology, haematology/blood transfusion, microbiology, in vitro fertilisation/genetics
- General clinical chemistry of at least 35%
- General chemistry plus haematology of at least 65%
- Flexibility as to the remaining 35%, including general chemistry, haematology, microbiology, and genetics and IVF in a proportion consistent with the requirements in the country of destination

## Laboratory Medicine's specialties



Clinical chemistry



Microbiology/Virology



Haematology



#### Immunology



#### **Blood transfusion**



Molecular diagnostics

## **Professional profile**



# Polyvalency v monovalency



# **Frequently Asked Questions**

• Are the current definition of Equivalence of Standards a fixed definition?

No. Whilst EC4 has proposed a set of standards it is for governments to determine and agree requirements for education and training. Not being in concordance with EC4's current definition (eg in length of training) does NOT prevent participation

• Is government recognition of education and training programmes a pre-requisite to being one of the 10 EU member states?

Not necessarily. If a government can show good intent to meeting the requirements of a Common Training Framework then potentially it can be one of the 10 in support of the framework now

# **Frequently Asked Questions**

 Is the door closed after 2015 to presenting a Common Training Framework?

Whilst opportunities will arise in future, 2015 is the year when the Commission will value early exemplar professions during the transposition of the Directive into national law

#### • What should we do now?

Assess current education and training programmes against EC4's definition of Equivalence of Standards, identify a national lead able to liaise at governmental level regards the education and training needs for specialists in laboratory medicine