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A thousand nurses a year leave Spain in search of work.



An interesting article was published the 8th of February on the website thinkspain.com. According to the author, during the last five years, nearly 5,000 Spanish nurses have immigrated to other European Union Member States in search of work.

“According to official statistical data, Spanish nurses who, in the past, used to travel abroad to gain personal and professional experience and to improve their knowledge of languages are today leaving their country merely to be able to get a job.

Around 20,000 nurses in the State health service in Spain have been made redundant since the beginning of 2013.

The majority of those who have left the country to find work since the beginning of 2010 have gone to the United Kingdom, followed by France, Italy, Finland, The Netherlands and Germany.

In comparison, ten years before, in 2003, a total of 536 nurses had moved abroad, mainly to improve their CV and

to experience life in another language and culture.

By 2014, this number had more than doubled – up to 1,108 – and most admitted they had left Spain just to be able to find a job.

On average, those who emigrate stay in their work country for a period of 18 months to two years.

For many among them, moving abroad also meant to backwards step in their professional development as they are now working in roles below their level of qualification.

According to the data, a high number among the Spanish nurses who have moved to Germany were not able to work as qualified professionals until their level of German was considered sufficiently high.

The number of nurses leaving Spain, has created a shortage bringing the nurse-patient ratio in that country below the European average (To achieve it, means taking on a further 136,000 nurses in the country).

Spain has 506 nurses per 100,000 inhabitants, compared to the EU average of 797 per 100,000.

The ratio of nurses to physicians in Spain is just 52.9%, compared to an EU average of 70.8%, which rises to 82.4% in Denmark and 89.1% in Finland.

For any further information about this issue, please don't hesitate to contact our secretariat.

Every foreign recruit to NHS will have to take an English test.



The Daily Mail published an article the 28th of January announcing that every foreign recruit to the British National Health Service will have to take an English test.

Nurses from the European Union will for the first time have their language skills checked before working for the NHS (British National Health Service).

From March, applicants from the EU will have to sit a language test if they cannot prove to medical regulators that they have adequate skills to communicate with physicians and patients.

It will finally overturn a loophole in the law which saw Brussels block the move, claiming it would infringe strict EU rules on the freedom of movement of workers.

While the rules were changed to allow language tests for EU doctors last year, they have now been extended to cover nurses, midwives, dentists, pharmacists as well as other dental professionals and technicians, from the EU.

The tests for nurses and midwives will be carried out by the Nursing and

Midwifery Council, as they already are for applicants from outside the EU, before foreign staffs are allowed to register.

It is not yet clear what form the English assessment would take, such as whether it would be an oral test or a written one.

Hospitals are not allowed to employ staff unless they are signed up with the NMC – meaning that failure to pass the language tests will ban them from NHS work. EU dentists will have to prove their language skills to the General Dental Council, while pharmacists will have to do the same for the General Pharmaceutical Council. Regulations will be laid before Parliament, paving the way for a Commons vote on the move over the next few weeks. With cross-party support, it is hoped the law will be changed by March.

Health minister Dr Dan Poulter said the move was a major step forward for patient safety. There are concerns foreign nurses with poor English would be unable to understand instructions or even the words for numbers, so they can make up correct drug doses.

Frail patients also find it harder to explain to staff who cannot speak English well that they need food, water or help to go to the toilet – or even that they are in pain.

Dr Poulter said: ‘These new powers will make it easier for regulatory bodies to carry out checks to ensure healthcare professionals have the necessary knowledge of English.’

The number of nurses hired from abroad has soared in recent years as the

number of British-trained nurses has failed to keep up with hospitals' needs. As many as 20,000 full-time posts – one in 20 – are vacant. As a result, many trusts are going overseas and hiring up to 60 at a time. Last year no fewer than 5,778 nurses were hired by the NHS – a four-fold rise on the previous year.

A Mail investigation in November found hospitals are hiring hundreds of nurses from the EU without properly checking their English.

Healthcare regulators are already allowed to carry out language tests on staff trained outside the EU – but have

been prevented from doing the same for those from the continent because of EU rules.

The Department of Health said: 'Regulatory bodies such as the Nursing and Midwifery Council already carry out rigorous language testing of foreign healthcare professionals from outside the EU, so it makes sense to allow regulatory bodies to check applicants from inside the EU also.'

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Towards better health systems: more accessible, effective and resilient.



Maria Iglesia Gomez, Head of Unit “Healthcare systems”, European Commission, DG Health and Food Safety published her opinion in the Health-EU Newsletter about how to improve the EU health-system.

“What is the most precious asset you own? Some of us are very satisfied with our car, our house, or maybe our boat. But I think that if we stop a little while and we reflect sincerely, we will probably agree that it is health that we value at most: ours and that of our loved ones.

That is why we spend so much money taking care of it. In fact, our governments put in place complex systems to provide us with the best healthcare. In DG SANTE we are committed to continuously improve our health systems.

In a Communication adopted last year, the Commission proposes an agenda to have health systems which are open and accessible, effective at improving our health, and capable to cope with

the challenges they face and to respond with innovative solutions.

As we said, health systems are really complex. They comprehend many different professionals – doctors, nurses, dentists, just to name a very few– and several organizations, such as hospitals, ambulatory facilities, pharmacies, and so on. If we want to improve any system, especially if it is complex, we have first to understand how it works. Technically: we need to assess its performance.

With this goal in mind, the Commission set up an expert group on health systems performance assessment last autumn. This group represents a forum where countries can exchange their experiences and learn from each other. It will also identify tools and methodologies for better assessing the working of our systems, and ultimately, to improve them.”

As you know, FEPI has participated in the expert group in question. For any further information, please don't hesitate to contact our secretariat.

The health workers who are fighting Ebola are the real heroes of 2014.



Ebola fighters have been designated person of the year 2014 by the Time magazine. It certainly is not a coincidence that the work of health professionals is recognized by this reward. More than Ebola fighters, this is an opportunity to credit the work of all health professional, and among them, nurses.

The following announcement is from Christos Stylianides, European Commissioner in charge of Humanitarian Aid & Crisis Management:

“I welcome the recognition that Time magazine has given to the health workers fighting Ebola with the 2014 Person of the Year Award. This honor is more than deserved.

2014 has been marked by the Ebola epidemic in West Africa and the ripple of fear it sent around the world. But even more remarkable has been the response – of men and women, doctors and nurses, epidemiologists and paramedics, soldiers and volunteers, who flew in from around the world to save lives, putting their own lives at risk every day they go to work. What they do is a feat, an act of courage and dedication, an act of selfless humanism.

The majority of the Ebola responders are local people, fighting to save their communities. I am proud to count so many brave Europeans among those who have joined this effort. I am honored to have met some of them in Liberia, Sierra Leone and Guinea.

The health workers who are fighting Ebola are the real heroes of 2014. Thanks to them, we are already seeing a difference. And it is thanks to them that we will defeat the Ebola epidemic.

But we urgently need more health workers on the ground. The crisis is not over, and will not be unless we scale up the numbers of medical staff, field hospitals, laboratories and humanitarian aid. Europe is doing its part: we have already mobilized 1.1 billion EUR (more than 1.3 billion US dollars). Together with my colleague Commissioner Andriukaitis, I am working with European capitals so that we can do more, send more doctors and nurses and build up our capacity to evacuate them if we need to.”

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