

Medical Deserts and the Health Workforce crisis in the EU

Dr Ole Johan Bakke, CPME President

High level conference on Healthcare Human Resources crisis: Small countries facing future risks 11 April 2025, Riga (Latvia)



We represent national medical associations across Europe, covering roughly:

1.7 million European Doctors from 37 countries

We are committed to contributing the medical profession's point of view to EU institutions and European policy-making through pro-active cooperation on a wide range of health and healthcare related issues.



We promote the highest level of medical training and practice but also the provision of evidence-based, ethical and equitable healthcare services.

CDNN Members



Austria

Österreichlische Ärztekammer (Austrian Medical Chamber)



France

Conseil National de l'Ordre des Médecins (French Medical Council)



Belgium

Association Beige des Syndicets Médiceux Belgische Vereniging van Artsen Syndicaten (BVAS)



Germany

Bundesärztekammer (German Medical Association)



Bulgaria

Български Лекарски Съюз (Bulgarian Medical Association)



Greece

ΠΑΝΕΛΛΗΝΙΟΣ ΙΑΤΡΙΚΟΣ ΣΥΙΜΟΓΟΣ (Panhellenic Medical Association)



Croatta

Hrvatska lijednicka komora (Crostian Medical Chamber)



Hungary

Magyar Osvosi Kamare



Cyprus

ΠΑΓΚΥΠΡΙΟΣ ΙΑΤΡΙΚΟΣ ΣΥΜΟΓΟΣ (Cyprus Medical Association)



Czech Republic

Ceská lékarská komora



(Czech Medical Chamber)



Denmark

Leggeforeningen (Danish Medical Association)



Estonia

Eesti Aratide Liit (Estonian Medical Association)



Supmen Lääkärillitto/Finlands Läkarförbund (Finnish Medical Association)



(Hungarian Medical Chamber)



Iceland

Læknafélag falanda (Icelandic Medical Association)



Ireland

Ceardchumann Dochtúirí na hÉireann (Irish Medical Organisation)



Latyla

Letvijes Ārstu biedrība (Letylan Medical Association)



Lithuania

Lietuvos gydytojų sąjungs (Lithuanian Medical Association)



Luvembourg

Association des Médecins et Médecins-Dentistes du Grand-Duché de Luxembourg



Maila

Medical Association of Malta



Norway

Den comba legalorening (Norwegian/Hedical Association)



Poland

Named to block about the (Polish Chambier of Physicians and Demon)



Colegiul Medicilor din Românie. (Remarker College of Physicians)



Morakia

Observation behalvation bearways. (Shook Medical Chambar)



Zdravnika doprica Slovenja (Machinal Charother of Stowerts)



Sweden

Swertpen Litterfirtsund: (Swedish Medical Association)



Switzerland

Verbirobung der Schweizer Anzie (Section Manhout discoveration)



The Netherlands

Formálijús Nedelandsche Hastochappij tot Secondaring the Chemicalcurat (00840) (Royal Dutch Medical Association)



United Kingdom

British Hedical Association



Albania

Urchri i Mjekeve Te Shqiperise (Order of Physicians of Alberta)



Georgia

Georgian Medical Association



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breeli Medical Approdation



Kosovo*

Citis e Mjekëve të Rosovës". (Kosovo* Doctors Chember)



Monlenegro

Liebaraka Korrora Crose Clore (The Medical Chamber of Montenagro)



North Macedonia

Лекарска комора на Република Северна Макадонца (Doctor's Chamber of North Macedonia)



Serbia

Лекарока комора Србије (Serbian Medical Chamber)



Turkey

Türk Tebipleri Birliği



Ukraine

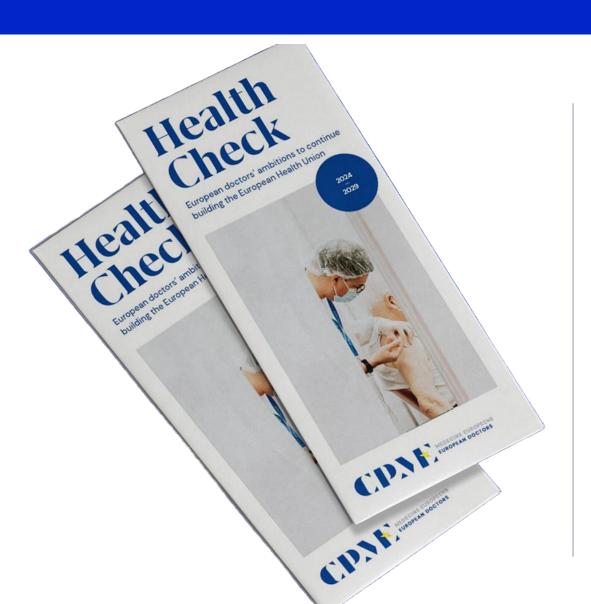
Ukraintan Medical Association (UMA)

CPNE Board of Directors 2025-2027





Ambitions for building the European Health Union



Health Check for Europe 2024-2029

European doctors' ambitions to continue building the European Health Union:

- Tackle the health workforce crisis
- 2. Ensure a safe digital transformation of healthcare
- 3. Enable healthier living
- Guarantee accessibility and effectiveness of medicines
- 5. Take climate action for better health



European Parliament event on Health Workforce crisis

- Doctors from over 30 countries brought their voices to the European Parliament to share their stories at an event hosted by MEP Dr András Kulja and MEP Tilly Metz, in collaboration with CPME.
- The meeting clearly outlined that European countries healthcare systems faced shared workforce challenges and action is needed to tackle the workforce crisis.





CPNE workforce activities in the past



EUROPEAN MEDICAL ORGANISATIONS' JOINT STATEMENT ON VIOLENCE AGAINST DOCTORS AND OTHER HEALTH PROFESSIONALS

The right to health is a fundamental pillar of human rights. It remains applicable in all circumstances and doctors have an ethical dany to ensure they treat the injured and sick.

European Medical Organisations reaffirm that physicians, safety at work is the basis of quality healthcare. European as well as internisations observe that doctors and other health professionals, working in bospitals, general d private practice, are increasingly confronted with situations of violence, sometimes n their daily practice, outside any context of conflict.

European Medical Organisations international human rights and medical ethics, it may hinder or prevent the provision of care that must be protected as effectively as possible. It is urgent and capital to take concrete and urgent actions to protect European of toes from all forms of violence that occur during daily medical practice, be it physical, verbal and/or psychological. European Medical Organisations recognise the hugely negative impact violence has on the socio-psychological wellbeing of doctors and other health professionals, the care received by patients and its contribution to rising levels of burnout experienced by the health workers, in their workplace.

commitment and to be aware of the urgent meed to protect medical personnel in the performance of their work. We ask for the establishment of an effective reporting and assisting mechanism for victims acros inplementation of violence prevention programmes and for the enfor cerning violence against doctors and other health professionals is the workplace. We ask ensure access to quality can

mmit to cooperating closely in the framework of the EMOs Joint Working group on violence pigainst doctors and other health professionals under CEOM leadership, to ensure that the European medical profession is acting as one.



PRESS RELEASE

10 March 2023, Brussels

Violence against healthcare professionals: a rising threat to the health workforce and patient care

Violence against healthcare professionals is increasing at an alarming rate across Europe. On Sunday 12 March we mark the 4th European Awareness Day of Violence Against Doctors and other Healthcare Professionals to raise attention and catalyse action.

The World Health Organization reports that up to 38% of healthcare professionals suffer physical violence at some point in their careers, and many more are exposed to verbal and online abuse. Such aggression can have devastating consequences, including physical injuries, impacts on mental health, and in the most extreme cases even death.



CPME/AD/EC/12032015/009 Final/EN

On 12 March 2015, the CPME Executive Committee adopted the 'CPME Response to the Public Consultation on the Review of the Working Time Directive (Directive 2003/88/EC)' (CPME

> CPME Response to the Public Consultation on the Review of the Working Time Directive (Directive 2003/88/EC)

Consensus Statement of the

European Medical Organisations on

Continuing Professional Development

Luxembourg, 2015

Welcome to the pages of the

This Joint Action aims to improve the capacity for health workforce planning

Planning & Forecasting

FU Joint Action on Health Workforce













European Doctors @CPME EUROPA

Our General Assembly adopted a statement of concern over UK government action seeking to limit doctors' #RightToStrike

We also express concern and opposition to the trend of physician substitution by 'Physician Assistants'

Full statement: cpme.eu/news/european-.

European doctors' concern over right to strike and physician substitution



The BMA and 5 others

European Doctors @C... · 23 Feb Four years ago this week the first COVID-19 patient in Europe was treated in Italy

Our memorial plaque with @FNOMCeO is a daily reminder of the doctors and other colleagues in the health professions who lost their lives during the pandemic

We honour their memory



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Policy on Doctors' Well-being: Promoting Work-**Life Balance and Supportive Environments**

O. Recommendations:

Healthcare institutions should

- · Implement interventions that prioritise enhancing working conditions while ensuring a safe and secure environment at the workplace. Employers must ensure that provisions relating to appropriate working conditions are complied with
- Implement benchmarks for minimum workforce capacities in healthcare to ensure safe staffing levels. This is only possible with fair financial remuneration.
- Establish confidential, easily accessible mental health services for doctors, including counselling, therapy, and helplines, while also promoting education programmes to reduce stigma and encourage doctors to seek help through clinical leadership involvement.



CPME/AD/Brd/140309/034 final/EN

At the CPME Board Meeting in Prague on 14 March 2009, CPME adopted the following document "GREEN PAPER on the European Workforce for Health" (CPME 2009/034 final EN/Fr)" (referring to CPME 2009/034 EN/Fr)

GREEN PAPER on the European Workforce for Health

CPME comments to the Commission consultation

CPME welcomes this Green paper and the opportunity to comment the issues it addresses. The European doctors consider a well-educated, motivated and sufficient health workforce as a necessity to guarantee high quality of care and safety of patients in all European countries. It is therefore important to link health workforce issues to the ongoing work of the European Union in the field of patient safety.

MEDECINS EUROPEEN
EUROPEAN DOCTORS

POLICY NOVEMBER 2023

12:16 PM · Nov 14, 2023 · 64.2K Views

CDN Health workforce crisis in the EU

- Healthcare professionals are the backbone of the health system.
- Excessive workload, violence and verbal abuse towards healthcare professionals is rising with devastating consequences for their mental and physical health.
- Dysfunctional digitalisation of healthcare increasing administrative burden on doctors.
- Medicine's declining appeal as a lifelong profession threatens the sustainability of the health workforce.

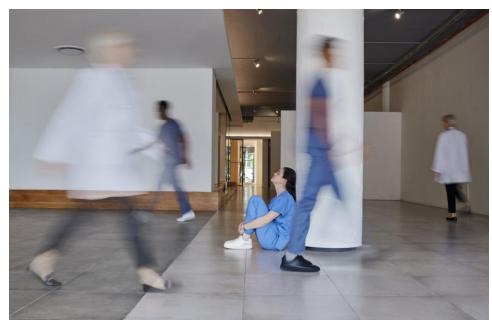


Image: iStock

Policies on health workforce



POLICY NOVEMBER 2023

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- Implement interventions to enhance working conditions and ensure a safe and secure environment.
- Ensure effective enforcement of existing EU labor legislation such as Working Time Directive and Parental Leave Directive.
- Implement benchmarks for minimum workforce capacities for safe staffing levels.

CDA 8 Policies on health workforce



















1. Introduction:

The European Medical Organisations recognise the urgent need for immediate and coordinated action to tackle the health workforce crisis gripping Europe.

The ongoing health workforce crisis should not be considered merely a result of an increase in retirements of health professionals, not compensated by recruitment; it is a multifaceted challenge driven by various factors. These include rising demands for healthcare services due to demographic shifts, the enduring impact of the COVID-19 pandemic, and evolving consumer expectations regarding healthcare delivery.

- In 2025, CPME and 8 other European Medical Organisations adopted a joint Policy on the Health Workforce crisis.
- Immediate and coordinated action is needed to tackle the health workforce crisis.
- Shared recommendations including addressing workload and management, addressing working conditions, and investing in education and training.

CDNN Medical deserts

- Medical deserts include both rural and underserved areas lacking enough doctors.
- Shortages of doctors and unsafe staffing levels lead to excessive workloads and poor working conditions.
- In some countries, rural doctor shortages prevent physicians from taking leave or retiring.



Image: Al Generated

CDN Strategies to address medical deserts

- There is no quick fix or short cuts, effective recruitment and retention strategies need to be designed and implemented.
- Our members have reported on several promising approaches including:

Recruiting medical students from rural areas, as they are more likely to stay after completing training.

Promoting exposure to rural practice through workplace visits or internships in family medicine practices in remote areas.

Implementing policies to attract doctors to underserved areas, including through the use of financial incentives.

 Incentive-based retention strategies <u>must</u> be prioritised over forced allocation to ensure long-term sustainability, job satisfaction, and prevent burnout.

CPN Improve data collection on Health Workforce



- Accurate data collection is critical to assessing the true capacity of healthcare professionals available for care delivery.
- Using reporting standards like Full-Time Equivalents (FTEs) enhances health workforce forecasting and supports more reliable, robust workforce planning.
- Better reporting and collection of data on the health workforce facilitates objective measurement of the effectiveness of recruitment and retention strategies.

Recommendations & Conclusions

- There has been insufficient political prioritization of the health workforce for far too long.
- Greater European cooperation is essential to address the health workforce crisis.
- A coordinated effort across policy areas is needed to improve retention and recruitment of healthcare professionals.
- We need an EU Health Workforce Strategy!

Thank you for your attention!

For more information, please contact CPME Secretariat:

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