

CED STATEMENT

QUALITY OF DENTISTRY ACROSS BORDERS

Introduction:

The Council of European Dentists (CED) is a European not-for-profit association which represents over 340,000 dentists across Europe. The association was established in 1961 and is now composed of 33 national dental associations from 31 European countries.

The dental workforce varies across EU countries, with some Member States (MS) experiencing shortages while others having increased numbers of graduating dentists. In many countries, the dental workforce is comprised of both dentists from other EU MS (whose qualifications are therefore automatically recognised and meant to follow the Professional Qualifications Directive (PQD)) and third country dentists. It is important to note that each MS can choose how to approach and handle third country dental qualifications: this is a matter of national prerogative.

Dentistry across borders:

When referring to **dentists from EU countries**, a number of requirements are enshrined in the PQD, with the idea of ensuring quality and consistency for practicing dentistry in another EU country, including beyond the basic educational skillset:

- a legal EU requirement for continuing education, e.g. skills and knowledge test (for all dentists in EU) – as enshrined in the PQD Article 22 b: *‘in accordance with the procedures specific to each Member State, continuing education and training shall ensure that persons who have completed their studies are able to keep abreast of professional developments to the extent necessary to maintain safe and effective practice.’*¹
- requirement that the mother tongue of the patient must be mastered at a sufficient level: *as already enshrined in the PQD, Article 53, Knowledge of languages: ‘Persons benefiting from the recognition of professional qualifications shall have a knowledge of languages necessary for practising the profession in the host Member State.’*²

Nevertheless, despite the existing requirements of the PQD, there are, at times, discrepancies involving dentists coming to practice from one EU country to another. This also goes beyond the required skillset and educational level and extends to other matters: those include patient communication, teamwork, sufficient knowledge of the country of work’s healthcare system, as well as awareness of the principles of professional ethics applicable in this country.

The issue is exacerbated when it comes **to third country (foreign trained) dentists**. Since recognising qualifications of third country dentists is a national prerogative, often there is a need for a balance between addressing workforce shortages in a rapid way (e.g. not overstressing the length of recognition of qualifications of third country dentists) while also ensuring that high quality standards for skills, language and additional knowledge are met. This is also of crucial importance for patient safety across the EU.

Making sure that foreign trained dentists meet the requirements of their host country is also connected to the issue of delegation of tasks: reports from CED members highlight that in some

¹ Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A32005L0036>

² Ibid.

countries, it is possible for non-registered dentists to perform work delegated under registered dentists.

Another level of the issue is also involving corporate chains, which seek to attract and employ third country dentists, which leads to a similar question of whether the necessary educational and everyday skills are met: this also includes linguistic knowledge, awareness of the health system of the country and the principles of professional ethics, administrative and bureaucratic knowledge, communication with patients.

At the EU level, beyond the PQD for EU trained dentists, the issue of recognising third country qualifications has not been prominent – especially considering that it is a matter of MS choice, process and decisions. However, in 2025, two documents have emerged that address this topic from an EU institutional/multi-MS perspective:

- the **European Union of Skills Communication** from March 2025: the document refers to different initiatives meant to address the EU's need for more skilled professionals (including from the health professions) and fixing skill shortages. The Communication refers specifically to the European Commission '*exploring whether to propose common rules for simpler procedures for handling the recognition and validation of qualifications and skills of third country nationals*'.³ This goes hand in hand with other proposed actions such as a '*Visa Strategy which will include measures to support the arrival of top students, researchers and trained workers from third countries*'.⁴
- **Non-paper of CZ, DE, EE, FI, HR, IE, LT, LV, NL, PT, SE, SI, SK on a blueprint for the new horizontal Single Market Strategy** – the non-paper, prepared in advance of one of the Competitiveness Council meetings at EU level, calls for measures such as '*Monitoring and supporting work on the recognition of professional qualifications for third-country nationals*'.⁵

Main CED principles – third country (foreign) nationals:

In light of the status quo and the two texts outlined above, CED wishes to underline that **any policy initiatives and decisions involving healthcare professions (dentistry included) must be taking into account first and foremost the need for ensuring the highest quality of care and patient safety**, rather than placing financial or economic matters first.

The CED would like to highlight the following principles:

- CED continues to firmly support the free movement of workforce. The European Union should develop a stronger harmonisation of education and skills as well as ensure that the free movement of workforce, inherent to the EU, does not come at the expense of strong clinical skills and patient safety. Nevertheless, **it is crucial that each country**

³ COMMUNICATION FROM THE COMMISSION TO THE EUROPEAN PARLIAMENT, THE EUROPEAN COUNCIL, THE COUNCIL, THE EUROPEAN ECONOMIC AND SOCIAL COMMITTEE AND THE COMMITTEE OF THE REGIONS, p. 13, https://employment-social-affairs.ec.europa.eu/document/915b147d-c5af-44bb-9820-c252d872fd31_en

⁴ Ibid. p.16

⁵ Non-paper of CZ, DE, EE, FI, HR, IE, LT, LV, NL, PT, SE, SI, SK on a blueprint for the new horizontal Single Market Strategy, https://finlandabroad.fi/web/eu/news/-/asset_publisher/omOkBRW9O3yT/content/1-non-paper-of-cz-de-ee-fi-hr-ie-lt-lv-nl-pt-se-si-sk-on-a-blueprint-for-the-new-horizontal-single-market-strategy/384951

focuses on balancing the required workforce at its national level, thus lessening the likelihood of brain drain and other negative impacts. This includes addressing issues of capacity and quality of dental workforce.

- **The CED urges all EU MS to rigorously scrutinise the dental qualifications acquired in third countries,** to ensure that they meet or exceed the minimum training requirements as stipulated in the PQD. This is crucial for maintaining the highest standards of dental care and ensuring the safety of patients across the EU⁶. The recognition of qualifications from third countries lies within the competence of the individual EU member state. The recognition of a qualification from a third country in one EU country should therefore not lead to automatic recognition in other EU countries.
- For patient safety reasons it is not only necessary to secure a harmonisation of the theoretical and clinical skills (as per the PQD), **but also to ensure that foreign educated (third country) dentists have the necessary language skills and a sufficient knowledge of the health system of their country of work. The competent national bodies, working hand in hand with the national dental associations, should strive to provide a solution on this.**
- **Recognising the importance of effective communication between dentists and patients, as well as between dentists and other healthcare professionals, the CED encourages Member States to establish clear language requirements for dentists seeking recognition.** Language proficiency should be evaluated as part of the recognition process, ensuring that dental professionals can provide safe and effective care to patients.⁷
- **Solutions must be tailored to the relevant national situation and existing specifics to tackle problems of workforce quality:** e.g. focusing on dealing with the declaration process for insurance purposes, dealing with other supervisory authorities, fitting into the dental team and working together, real mastery of the local language, focus on prevention, patient rights, principles of professional ethics, to name a few.
- **Since the dentist is the team leader and has the full responsibility, he/she is also in charge of deciding on and ensuring the proper delegation of tasks,** based on his/her diagnosis and expertise: e.g. either to a specialist (e.g. an orthodontist) or to a skilled and properly registered and trained member of the dental team. This might also help prevent situations of non-registered dentists from third countries working under delegating dentists in some MS.
- **International recruitment of oral health professionals by Member States should be carried out in an ethical manner** respecting the *WHO Global Code of Practice on the International Recruitment of Health Personnel* which discourages the active recruitment

⁶ As per *CED Position Recognition Professional of Dental Qualifications acquired in Third Countries from 2023*, <https://www.cedentists.eu/wp-content/uploads/2023/11/CED-DOC-2023-026-E-FIN.pdf>

⁷ As per *CED Position Recognition Professional of Dental Qualifications acquired in Third Countries from 2023*, <https://www.cedentists.eu/wp-content/uploads/2023/11/CED-DOC-2023-026-E-FIN.pdf>

of health personnel from developing countries facing critical shortages of health personnel.

-ENDS-

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