

(English version)

Priority question for written answer P-004116/25
to the Commission
Benoit Cassart (Renew)
(20 October 2025)

Subject: Medical staff shortages in rural areas

Medical staff shortages in rural areas within the EU threaten social justice and will be a serious challenge in the coming years. These shortages are the result of an aging population, an increasing demand for healthcare and difficult working conditions in these areas due to a lack of housing and transport infrastructure, leading to excessive workloads.

Although, in principle, public health in Europe falls within the remit of the Member States, Article 28 of Directive 2005/36/EC of 7 September 2005 on the recognition of professional qualifications provides for the possibility to undertake 'practical training given by an approved hospital ... the duration of that practical training may, up to a maximum of one year, be included in the duration provided for in the first subparagraph for certificates of training issued on or after 1 January 2006'.

1. Is the Commission planning to update this 2005 Directive to include in Article 28 the possibility of carrying out an traineeship in areas experiencing shortages?
2. In the same vein, might it incorporate into this directive innovative solutions that support the use of AI to boost access to healthcare in rural areas?

Submitted: 20.10.2025

Answer given by Executive Vice-President Mînzatu on behalf of the European Commission
(7 November 2025)

Articles 24 and 28 of Directive 2005/36/EC ⁽¹⁾ regulate minimum training requirements for basic medical training and the ensuing specific training for general practitioners, respectively ⁽²⁾.

The directive regulates elements such as the duration, the training institutions and the knowledge and skills to be acquired. However, it leaves it to the Member States to decide how the training will be provided, including in which geographic areas students or doctors would complete practical parts of their training ⁽³⁾.

Consequently, the directive does not prevent Member States from carrying out training in geographic areas experiencing healthcare shortages.

The EU4Health programme has promoted upskilling of health professionals in relation to the digital transformation of health systems.

The Commission funds several projects aiming to improve access to healthcare, also in rural areas, including COMPASS-AI ⁽⁴⁾ that establishes a community of experts to advance the safe and effective use of artificial intelligence (AI) in healthcare. This is one of the flagship measures in the Commission's recent Apply AI Strategy. ⁽⁵⁾

In addition, the Commission will establish European AI-powered advanced screening centres to accelerate the introduction of innovative tools for prevention and diagnosis, in particular for cancer and cardiovascular disease, with the aim of also alleviating the pressure created by the shortage of specialised staff in remote areas.

Other EU funding opportunities have also been used in partnership with the Member States to address healthcare shortages, such as the Recovery and Resilience Facility, Cohesion Policy funds, or the Technical Support Instruments, in line with the respective policy objectives and eligibility rules.

⁽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/eli/dir/2005/36/oj/eng>.

⁽²⁾ Including the specific rule referred to in the question. Article 28 of Directive 2005/36/EC requires three years of specific training in general medical practice. However, it envisages an exception: if the preceding basic medical training comprised practical training (satisfying certain conditions), the duration of such basic training may, up to a maximum of one year, be included in this three years period.

⁽³⁾ In line with Articles 165 and 168 of the Treaty on the Functioning of the European Union (TFEU), the Union supports and complements the actions of Member States in the field of education and public health, respecting Member States' responsibility for the content and organisation of such services. Consequently, Member States are ultimately responsible for the organisation of education and healthcare services, including basic medical training for doctors and specific training for general practitioners.

⁽⁴⁾ <https://ec.europa.eu/info/funding-tenders/opportunities/portal/screen/opportunities/projects-details/43332642/101233553>.

⁽⁵⁾ <https://digital-strategy.ec.europa.eu/en/policies/apply-ai/>.