

Nursing & Midwifery  
Council

NMC

## Survey of European midwifery regulators

The Nursing & Midwifery Council exists to safeguard the health and wellbeing of the public.

- We register all nurses and midwives and ensure that they are properly qualified and competent to work in the UK.
- We set the standards of education, training and conduct that nurses and midwives need to deliver high quality healthcare consistently throughout their careers.
- We ensure that nurses and midwives keep their skills and knowledge up to date and uphold the standards of their professional Code.
- We ensure that midwives are safe to practise by setting rules for their practice and supervision.
- We have fair processes to investigate allegations made against nurses and midwives who may not have followed the Code.

# Background

**Political aspirations for an ‘ever closer Union’ have resulted in opportunities for professional mobility across Europe.**

The mobility of members of regulated professions in particular, such as midwifery, has prompted discussions on the mutual recognition of education, training and professional experience.

Considerable progress has been made in setting minimum standards for midwifery at European level and there are currently systems in place for the recognition of professional qualifications through European Directive 2005/36/EC. However, a lot remains to be done to safeguard the wellbeing of women and their babies and to promote excellence in the education and training of midwives across Europe.

Protecting women and their babies across borders is not an easy task and the competent authorities regulating midwives have a strong role to play in this area. As a starting point, it was felt that exchanging views on existing regulatory systems for midwifery in Europe was essential. This publication offers the result of these initial exchanges.

We hope that you will find this publication a useful starting point for further European collaboration among midwifery regulators.

**NMC May 2009**



# This publication’s focus

**This publication provides the results of a mapping exercise on midwifery regulation in Europe.**

The findings presented in this report resulted from a pan-European survey carried out by the Nursing & Midwifery Council (NMC), the regulator of nurses and midwives in the United Kingdom. The Ordre National des Sages-Femmes (ONSF), the regulator of midwives in France, made contributions to the drafting of the questions asked.

The survey was based on an online questionnaire, which was distributed to midwifery regulators in all countries required to comply with European Directive 2005/36/

EC on the Recognition of Professional Qualifications as well as accession countries. The survey was carried out between February and April 2009.

The responses to the survey informed the programme of the Summit of European Midwifery Regulators taking place in London on 22 May 2009. It is on the basis of these responses that the thematic areas of the summit workshops were identified.

The 21 European countries in **Table 1** responded to the survey.

**Table 1 – survey respondents**

Austria (AT)	Belgium (BE)	Croatia (HR)
Cyprus (CY)	Denmark (DK)	Estonia (EE)
France (FR)	Greece (GR)	Hungary (HU)
Ireland (IE)	Italy (IT)	Netherlands (NL)
Malta (MT)	Norway (NO)	Portugal (PT)
Romania (RO)	Slovakia (SK)	Slovenia (SI)
Spain (ES)	Sweden (SE)	United Kingdom (UK)

# Midwifery regulation

**Participants were asked to define how midwifery was regulated in their country and the type of body that was the competent authority.**



**Table 2 – responsibility for midwifery regulation**

Autonomous midwifery regulatory body	FR, HR
Autonomous joint nursing and midwifery regulatory body	CY, EE, IE, MT, UK
Joint ministerial and midwifery or nursing and midwifery regulatory body	IT, SI, ES, RO, HU
Ministry of Health	BE, NL, SK, SE
Joint responsibility of a ministry and a midwifery professional association	GR
Responsibility of a midwives' professional association	AT
National board responsible for all health professionals	DK, NO

**Table 3 – geographical organisation of midwifery regulation**

National level only	Federal OR confederal level	National AND federal/ confederal/regional level
AT, CY, DK, EE, ES, GR, HR, HU, IE, MT, NL, NO, PT, SK, SE, SI, UK	BE – education is organised at community level	FR, IT, RO

Midwifery is mostly regulated either within an autonomous joint nursing and midwifery regulatory body (CY, EE, IE, MT, UK) or through shared responsibility between a ministry and a midwifery or nursing and midwifery regulatory body (IT, SI, ES, RO). In Hungary, the regulator is a governmental body which works under the supervision of the ministry. There are also cases where midwifery is regulated by an autonomous midwifery

regulatory body (FR, HR) or at ministerial level only (BE, NL, SK). In one case (GR) there is joint responsibility of a ministry and a midwifery professional association. In another case (AT) this responsibility falls on the midwives' professional association. In Sweden regulation is done by a government agency under the Ministry of Health and in Denmark and Norway by a board of health which is the registration authority for all health professionals.

In most cases, midwifery regulation is organised at national level. There are a few cases where regulation is

combined between national and regional levels and no cases where it is organised only at regional level.

# Midwifery registration

All respondent countries require midwives to register before they are permitted to practise.



Table 4 – number of registered and practising midwives per country

All respondent countries, except Romania, were able to provide the total number of registered midwives.

However, the number of practising midwives was only available in some; the figures for both are available below (see Table 4.)

	N° registered known	N° registered	N° practising known	N° practising	% practising/registered
AT	Yes	1958	Yes	1812	92.5
BE	Yes	8657	Don't know	-	-
CY	Yes	-	Yes	171	-
DK	Yes	2833	Don't know	-	-
EE	Yes	606	Yes	404	66.7
ES	Yes	-	Don't know	-	-
FR	Yes	22000	Yes	20000	90.9
GR	-	-	-	-	-
HR	No	-	No	-	-
HU	Yes	4519	Yes	3412	75.5
IE	Yes	17762	Yes	2500	14.1
IT	Yes	16486	-	-	-
MT	Yes	396	No	-	-
NL	Yes	3000	No	-	-
NO	Yes	3489	No	-	-
PT	Yes	2035	‡ -	-	-
RO	-	-	Yes	6000	-
SE	Yes	10194	-	-	-
SI	Yes	619	Yes	619	100.0
SK	Yes	2185	No	-	-
UK	Yes	40091	Yes	35359	88.2

‡ Portugal is not aware of the exact number of practicing midwives, as some of them are have jobs as managers or teachers. “-” means that no data was provided.

# Origin of midwifery registrants

**Respondents were asked whether the origin of the qualification of the midwives registered in their country was known.**

**Table 5 – origin of midwifery qualifications**                      Where this information was known, respondents were asked whether the qualification originated from their own country, the EU/EEA or outside the EU/EEA.

	MW qualified in your country	MW qualified elsewhere in EU/EEA	MW qualified outside EU/EEA
AT	Yes	Yes	Yes
BE	Yes	Yes	Yes
CY	Don't know	Don't know	Don't know
DK	Yes	Yes	Yes
EE	Yes	Yes	Yes
ES	Yes	No	No
FR	Yes	Yes	Yes
GR	Yes	Yes	Yes
HR	No	No	No
HU	Don't know	Don't know	Don't know
IE	Yes	Yes	Yes
IT	Yes	Don't know	Don't know
MT	Yes	Yes	Yes
NL	Yes	Yes	Yes
NO	Yes	Yes	Yes
PT	Yes	Yes	Yes
RO	Yes	Yes	-
SE	Yes	Yes	Yes
SI	Yes	No	No
SK	Yes	Yes	Yes
UK	Yes	Yes	Yes

# Origin of midwifery registrants

Respondents were then asked to identify the percentages for the three different options.

Table 6 – origin of qualifications – percentages per country

The total of these three options should have been 100% if the information was available for each and every midwife, but there are variations in the sum of the three options in some countries due to the lack of data (see Table 6).

	% MW qualified in your country	% MW qualified in Europe	% MW qualified outside Europe	Total 3 options
AT	86.3	12.3	1.4	100.0
BE	-	-	-	-
CY	-	-	-	-
DK	86.0	13.9	0.1	100.0
EE	94.7	0.1	5.2	100.0
ES	99.0	-	-	99.0
FR	94.5	3.5	2.0	100.0
GR	97.0	2.0	1.0	100.0
HR	-	-	-	-
HU	-	-	-	-
IE	70.0	29.0 <sup>§</sup>	1.0	100.0
IT	99.0	-	-	99.0
MT	93.7	5.3	1.0	100.0
NL	89.0	10.0	1.0	100.0
NO	66.0	33.0	1.0	100.0
PT	99.2	0.6	0.2	100.0
RO	-	one person	-	-
SE	96.1	2.4	1.5	100.0
SK	-	-	-	-
SI	100.0	0.0	0.0	100.0
UK	93.3	0.5	0.6	94.4

§ The vast majority of these are Irish nationals who trained in the UK



# Initial registration and maintenance of registration

**In all countries, except Slovakia, the regulatory body is the authority responsible for the registration of newly qualified midwives.**

**Table 7 – registration and CPD models**

Respondents were then asked if registration occurred once only (one-off) or periodically and whether there was any requirement to provide evidence of continuing professional development (CPD). Responses varied.

Where the “once only” registration option was selected, with or without the requirement for the payment of an annual fee, the answer is presented as “once only” registration (see **Table 7**).

Registration requirement	Country
“Once only” registration requirement	BE**, CY, DK, EE, ES, FR, GR, IE, MT, NO, PT, SE
Periodic registration with evidence of CPD yearly	IT, RO
Periodic registration with evidence of CPD every 3 years	UK
Periodic registration with evidence of CPD every 5 years	HU, NL, SK
Periodic registration every 6 years	HR
Periodic registration with evidence of CPD every 7 years	SI
Periodic registration with evidence of CPD – unspecified	AT

\*\* In Belgium midwives register “once only” but are required to prove that they have undertaken continuing professional development every 5 years.



# Removal from the register

Respondents were asked whether the regulator could remove midwives from the register (see Table 8).



Table 8 – regulator can remove midwives from the register

If the response to that question was affirmative, in what circumstances this was possible – incompetence, misconduct or health reasons (see Table 9<sup>††</sup>). The responses showed that in a number of countries, the regulator is not allowed to remove midwives from the register; however, this information must be interpreted with care because

this does not necessarily mean that it is not possible to remove a midwife’s name from the register but that, in some countries, the legal procedures mean that authorities other than the regulator are entitled to undertake this procedure. Further useful information was provided on a country basis (see Table 10 on page 10).

Yes	No
BE, CY, DK, EE, FR, GR, HR, HU, IE, IT, MT, PT, NO, RO, SI, UK	AT, ES, NL, SE, SK

Table 9 – potential reasons for removal of a midwife’s name from the register

Other reasons for removal from the register included: In Hungary, it is possible to remove someone from the register if they don’t fulfil the compulsory continuing training. In Belgium, a midwife can have their licence suspended for lack of permanent training.

	AT	CY	DK	EE	FR	GR	HR	HU	IE	IT	MT	PT	RO	SI	UK
Incompetence	Yes	Yes	Yes	No	Yes	Yes	Yes	-	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Misconduct	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes
Health reasons	Yes	-	Yes	No	Yes	-	-	Yes	Yes	No	-	No	Yes	No	Yes

<sup>††</sup> “Health reasons” such as alcoholism, drug addiction or psychological problems (this was not made clear in the survey).

# Priority areas of discussion for the summit

Respondents were then asked to identify the areas of interest they would like to see discussed at the summit.

The following themes emerged from the analysis of the suggested topics:

**Education**

- Length and content of training
- Continuous professional development
- Masters in midwifery

**Freedom of movement and mutual recognition**

- Language competence
- Independent midwives
- Public safety
- Information sharing on fitness to practise
- Acquired rights and competence

**Practice**

- Community care
- Differences in scope of practice and competence
- Harmonise theory with practice

**European Commission (EC) issues**

- The European Commission's interpretation of Directives
- Redress by EC in cases of non-implementation of Directive 2005/36/EC

**Miscellaneous**

- Mobility statistics
- Midwifery as a nursing speciality

Table 10 – other removal reasons

Austria	The regional governor can pull the license by verified reasons suggested by the competent authority
Estonia	The Health Care Board can revoke a registration certificate if a conviction by a court deprives the person of the right to practise midwifery
Ireland	Erasure from the register requires confirmation by the High Court
Netherlands	A midwife can only be removed from the register after a judicial decision of a disciplinary court or a criminal court
Sweden	The National Board of Health and Welfare is responsible for the register and removes midwives from the register upon decision of the Medical Responsibility Board (HSAN)

# Respondents

Austria	Österreichisches Hebammengremium – <a href="http://www.hebammen.at">www.hebammen.at</a>
Belgium	FOD Volksgezondheid, Veiligheid van de Voedselketen en Leefmilieu / SPF Santé publique, Sécurité de la Chaîne alimentaire et Environnement – <a href="http://www.health.fgov.be">www.health.fgov.be</a>
Croatia	Croatian Chamber of Midwives – <a href="http://www.udrugaprimajja.hr">www.udrugaprimajja.hr</a>
Cyprus	Cyprus Nursing and Midwifery Council – <a href="http://www.cyna.org">www.cyna.org</a>
Denmark	National Board of Health – <a href="http://www.sst.dk">www.sst.dk</a>
Estonia	Health Care Board – <a href="http://www.tervishoiuamet.ee">www.tervishoiuamet.ee</a>
France	Conseil National de l'Ordre des Sages-Femmes – <a href="http://www.ordre-sages-femmes.fr">www.ordre-sages-femmes.fr</a>
Greece	Board of Hellenic Midwives Association – <a href="http://www.semma.gr">www.semma.gr</a>
Hungary	Office of Health Authorisation and Administrative Procedures – <a href="http://www.eekh.hu">www.eekh.hu</a>
Ireland	An Bord Altranais – <a href="http://www.nursingboard.ie">www.nursingboard.ie</a>
Italy	Federazione Nazionale Dei Collegi Delle Ostetriche – <a href="http://www.fnco.it">www.fnco.it</a>
Malta	Council for Nurses and Midwives
Netherlands	Ministry of Health, Welfare and Sports – <a href="http://www.minvws.nl">www.minvws.nl</a>
Norway	Norwegian Registration Authority for Health Personnel – <a href="http://www.safh.no">www.safh.no</a>
Portugal	Ordem dos Enfermeiros – <a href="http://www.ordemenfermeiros.pt">www.ordemenfermeiros.pt</a>
Romania	Order of Nurses and Midwives in Romania – <a href="http://www.oamr.ro">www.oamr.ro</a>
Slovakia	Slovak Chamber of Nurses and Midwives – <a href="http://www.sksapa.sk">www.sksapa.sk</a>
Slovenia	Chamber of Nursing and Midwifery – <a href="http://www.zbornica-zveza.si">www.zbornica-zveza.si</a>
Spain	Consejo General de Enfermería de España – <a href="http://www.cge.enfermundi.com">www.cge.enfermundi.com</a>
Sweden	The National Board of Health and Welfare – <a href="http://www.socialstyrelsen.se">www.socialstyrelsen.se</a>
United Kingdom	Nursing & Midwifery Council – <a href="http://www.nmc-uk.org">www.nmc-uk.org</a>

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