

# The last steps toward Emergency Medicine specialization in Spain

## *El último paso para la especialidad de Medicina de Urgencias y Emergencias en España*

Javier Millán Soria<sup>1,2</sup>, Manuel Vázquez Lima<sup>3,4</sup>

On Friday, September 8<sup>th</sup>, the Spanish Ministry of Health published and initiated the public hearing and information process for the draft Royal Decree establishing the title of Specialist in Emergency and Critical Care Medicine,<sup>1</sup> barely 3 months after it had “upheld the request for the creation of the specialist title in Health Sciences and initiated the procedure for drafting the regulation”,<sup>2</sup> as proposed by the plenary session of the Human Resources Commission of the Spanish National Health System on March 21<sup>st</sup>. Therefore, we can now affirm that we are in its final phase and that the creation of the specialty of Emergency and Critical Care Medicine is becoming an unstoppable reality in Spain.

This specialty not only fully meets all the requirements of RD 589/2022<sup>3</sup> to be recognized as a new specialty, successfully completing each of the established administrative procedures step by step,<sup>4</sup> but it also emerges at a pivotal moment in which it is necessary to address, with a spirit of consensus, the major challenges facing our health system if we wish to continue advancing toward a modern form of medicine—aligned with the rest of Europe and capable of responding to the real needs of citizens. This has been understood by most of the Autonomous Communities, scientific societies, and professional organizations, as reflected in the reports issued by the Spanish Ministry of Universities, the General Council of Official Medical Colleges, and the Standing Committee of the National Council of Specialties in Health Sciences.

Although long expected and necessary for years, seeing the creation of the specialty of Emergency and Critical Care Medicine in this document is no less reassuring and exciting. The effort has been worthwhile. It meets all our expectations and opens an inspiring future for our professional practice—clinically, academically, and in research.

Recognized as a primary specialty with its corresponding National Specialty Commis-

sion, and with timelines defined for the development of its specific training program, it is structured as a tool for improving and strengthening the National Health System per se, providing professionals with standardized, regulated training and their own set of competencies,<sup>5</sup> ensuring quality and equity of care. The catalogue of specialties contained in Annex I of Royal Decree 183/2008<sup>6</sup> of February 8<sup>th</sup>, which determines and classifies specialties in Health Sciences, is thus updated, aligning us with Europe in the recognition of professional qualifications (Directive 2005/36/EC<sup>7</sup>) and contributing—inevitably—to better medium- and long-term planning of resources in our services. As stated in the Regulatory Impact Analysis Report, any other option or pathway would unnecessarily delay the entry of professionals into the workforce and would entail additional training costs for public administrations.<sup>8</sup>

In addition, we would like to highlight 2 other fundamental aspects of the document: it establishes a broad extraordinary process for obtaining the specialist title in Emergency and Critical Care Medicine for professionals currently working in these services, and even for trainees who complete their training before the first cohort of specialists concludes; and it introduces flexibility in the training system through a training period with shared competencies with the specialty of Family and Community Medicine, which may later incorporate other specialties, as provided for in Article 19.2 of Law 44/2003 of November 21<sup>st</sup>, concerning training in a new specialization.<sup>9</sup> All of this ensures that anyone wishing to pursue the specialty of Emergency and Critical Care Medicine may do so, within a transition process that considers the reality of our health system and the situation of its professionals.

Nevertheless, the public comment period—open until September 28—will undoubtedly enrich this draft Royal Decree. The Spanish Society of Emergency and Critical Care

### Author Affiliations:

<sup>1</sup>Secretaría de Relaciones Institucionales, Sociedad Española de Medicina de Urgencias y Emergencias.

<sup>2</sup>Servicio de Urgencias, Hospital Universitari i Politècnic La Fe, Valencia, Spain.

<sup>3</sup>Presidente de la Sociedad Española de Medicina de Urgencias y Emergencias.

<sup>4</sup>Servicio de Urgencias, Hospital do Salnes, Vilagarcía de Aousa, Spain.

### E-mail:

millan\_jav@gva.es

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Medicine (SEMES) will also submit contributions, many of them proposed by our members, with the aim of improving the final text from a broad, comprehensive perspective of emergency care, consistent with the professional and legal context of the European Union and of the main countries around us.

Therefore, at this moment we must not—and I do not want to—forget all the emergency physicians who, for more than 30 years, have worked and fought for the recognition of the specialty in Spain.<sup>10</sup> They are the foundation that has supported our scientific society's arguments. We are merely the stewards of the work carried out over so many years. We know the frustrations and bitter experi-

ences many colleagues endured in the past.<sup>11-21</sup> We only hope to repay them for their effort and dedication.

Congratulations to the entire SEMES Executive Board, which has managed to bring this long and tortuous path to completion, and, in general, to all the professionals who work daily in emergency and critical care services, guaranteeing the care our citizens require 24 hours a day, 365 days a year, and thereby forming a key pillar of our health care system. The specialty is also a further recognition of this work. Your determination, perseverance, and professionalism have been essential to achieving this milestone. We hope to see the final text of the Royal Decree published in the Official State Gazette (BOE) soon.

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