Welcome!

The Swedish Medical Association (SMA) is open to all doctors. This booklet provides information about what the SMA is and what we can do to help our members. It also contains a brief description of how the labour market and salary formation operate in Sweden.

The Swedish Medical Association

The Swedish Medical Association is the union and professional organisation for medical practitioners. Important issues that we deal with include doctors’ work environment, salaries, working hours, training and research. The Swedish Medical Association also has a key role to play in influencing the development of healthcare in Sweden. About 42,000 doctors and medical students belong to The Swedish Medical Association.

The SMA enters into collective agreements on behalf of its members in areas such as general employment conditions, which includes salaries, working hours, holidays, sick and parental leave and pensions. Membership of the Swedish Medical Association entitles you to:

- Advice and support in matters relating to your salary, contract, and general working conditions as well as insurance and pensions.
- Help with salary negotiations, and up-to-date salary statistics.
- Legal assistance on disciplinary matters, such as negligence claims or probation, and on general matters of healthcare, tax and labour law.
- Peer support for doctors undergoing a personal crisis.

As a member of the Swedish Medical Association, you will be registered at a local branch in the area where you are working. You can also belong to a professional association, which is a national society for members with the same professional position, e.g. district medical officer, company physician, military surgeon, private practitioner or chief medical officer. Before becoming a specialist, you will belong to the Swedish Junior Hospital Doctors’ Association (SYLF), which organises doctors who are completing their internship and specialist training (residency). The association has about 7,000 members and deals with union issues of importance to young doctors, such as training, general working conditions and salaries.

Swedish Medical Association’s student organisation, the Swedish Medical Students Association (MSF), has over 5,500 members and in addition to training-related issues also works with salary and employment conditions for doctors doing their internship and working on a supply basis as assistant physicians.

Before the National Board of Health and Welfare has determined your conditions for medical registration in Sweden, you will belong to the Section for foreign doctors.

Conditions for working in Sweden

As a citizen in the EU/EES you have the right to work in Sweden without a work permit or a residence permit. The same pass for your family members. You and your family members have the right to start working immediately. If you want to stay longer than three months you have to register this at the Swedish Migration Board.

If you are a citizen of a country outside EU and want to work in Sweden you will need a residence permit to practise. If you mean to work further than three months you will need a residence permit.

Applications for residence and work permits are generally made to the Swedish diplomatic representation in your country of residence, or if you are already living in Sweden, to the police immigration department.

Once you have received a residence permit, your next step is to register as a resident. You do this by presenting your passport and residence permit at
the tax office, which will supply you with your own 10-digit personal ID number when registration is complete. You often use this in contacts with employers, authorities, banks and other organisations.

If you are applying for employment as a doctor in Sweden, and hold a qualification from another country, certain conditions will need to be fulfilled. These conditions vary depending on whether or not you trained in another EU/EES country or Switzerland.

For several years, the SMA has been trying to make it easier for foreign doctors to obtain medical authorisation and enter the Swedish healthcare system.

**USEFUL TO KNOW**

Doctors with medical authorisation from an EU/EES country or Switzerland need no complementary training in order to be registered as a doctor in Sweden. Registration is made at the National Board of Health and Welfare and must be accompanied by a certificate of good standing from the relevant authority in the doctor’s home country confirming that his or her professional authorisation has not been limited or revoked. Such a certificate must not be more than three months old.

Doctors from a country outside the EU/EES area need to undergo complementary training in order to be registered as a doctor in Sweden. The National Board of Health and Welfare assesses the medical competence of each individual applicant and decides on what conditions need to be fulfilled (i.e. what complementary training is needed) for registration. Before the Board assesses your medical competence, you must present evidence of sufficient knowledge of the Swedish language.

For more information about the complementary training, please contact The National Board of Health and Welfare.

**Applying for employment as a doctor**

You can apply for employment as a doctor by replying to adverts, using your contacts, or by contacting the employer yourself. Swedish employers have a great deal of freedom to choose who they want to employ; however, Swedish law prohibits discrimination on grounds of gender, ethnic origins and the like. The Swedish Medical Association endeavours to monitor this.

Advertisements for vacant positions are mainly found in "Läkartidningen" (The Swedish Medical Journal). Advertisements for medical posts are also advertised in other magazines, such as "Moderna Läkare", and are registered at the employment office, on different websites, including those of the county councils and major hospitals.

When you find a job that interests you, it is always a good idea to contact the employer before submitting your application. This will give you a chance to acquire important information about the post you want to apply for, and help you to gain an impression of the workplace. It will also give you a personal contact with the person responsible for recruitment.

We recommend that you write your own application. In general, an application consists of a personal letter and a CV (a list of courses and jobs in chronological order). The letter allows you to introduce yourself and to say what you have done before and why you want this particular job. You should base the letter on what the advert asks for, and preferably make it no longer than one side of A4.

The local labour market conditions differ widely from one county council to another. It is therefore important to think about where you want to find employment. Applying for a job in an area where there is a shortage of doctors will give greater chances of success.
**USEFUL TO KNOW**

Most doctors in Sweden are employed in the county council sector at hospitals and clinics. The remainder work in the private sector as company physicians, doctors working in research and development, or practitioners running their own private surgery.

A medical training also provides a solid grounding for careers in a range of sectors, such as in the pharmaceutical industry, environment and healthcare services, and healthcare administration.

The future prospects for doctors are considered to be very bright. There are already shortages of doctors in many specialist fields and in certain parts of the country, and demand is expected to increase as many doctors will be retiring within the next 10 to 15 years.

Following a decision by the Swedish parliament, all doctors who have taken their medical degree in Sweden and doctors with a qualification from a country outside the EU/EES who are required to complete their internship in order to become registered, are to be provided with a sufficient number and range of internship specialties (“AT blocks”) to allow them to complete the practice their training requires.

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**Employment contract**

When you have been accepted and have reached an agreement with the employer about important terms and conditions, such as salary, employment conditions and start date, you are then considered officially employed. To avoid any ambiguities about what the position entails, the contract should be in writing. You must not accept a position before your salary has been negotiated or commence work before the employment conditions have been laid down. If you start working it is assumed that you have accepted the conditions offered by the employer, even though you might not have discussed or come to an agreement on your salary and other individual conditions.

The employment contract normally covers such employment terms and conditions as work obligations, working hours, holidays, sickness and leave benefits, insurance and pension benefits and emergency standby and on-call compensation. These conditions are often governed by a collective agreement and may be formulated slightly differently by different employers; either way, they should be stated clearly in your employment contract.

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**Your salary**

Your salary will primarily be decided in negotiations between you and the person in charge of salaries, and is based on your position, responsibilities, competence, background and the current market situation. This system of individual and differentiated salaries means that salary levels differ considerably from one person to another.

It is particularly important to negotiate your salary whenever you are start a new job. This applies at the start of your professional career as well as during it whenever you change position or employer. Your salary will also be influenced on other occasions during your career, for example when you improve your level of competence or areas of responsibility, or at a local salary review. The Swedish Medical Association and the local medical associations have here a support and advisory function for their members, providing help in the form of salary statistics and practical advice. It is always advisable, therefore, to contact your local medical association before negotiating your salary.

Doctors who undergo a period of probationary service before the National Board of Health and Welfare has determined the conditions required for authorisation are covered by the "Medical Student Agreement", which applies to medical students working as supply assistant doctors before they qualify as a doctor. The salary specified in the agreement is a minimum salary, which means that although you cannot earn any lower than this, you can negotiate it upwards.

Doctors also receive a salary supplement for being on emergency standby and, in certain cases, compensation for working unsocial hours and overtime. Doctors’ salaries are set on an individual basis. For up-to-date salary statistics, see www.lakarforbundet.se or call the members consulting at the Swedish Medical Association +46 8 790 35 10.
Employment protection
The Security of Employment Act embodies regulations that protect you in your professional role. The Act applies in principle to all employers in the public and private sectors. The main rule in the Act is that a period of employment is considered permanent unless otherwise agreed. Agreements can be signed on different forms of temporary employment, both short- and long-term.

A permanent employment contract may only be terminated by the employer on well-founded reasons and with a certain period of notice. Well-founded reasons can be either personal or due to lack of work. The period of notice also applies if you wish to resign.

If you are on a temporary contract, instead of being formally dismissed, your period of employment ceases when the agreement expires. The primary rule as laid down in the Security of Employment Act is that a temporary contract may not be prematurely terminated by either party unless agreed otherwise beforehand. This does not, however, apply if you are employed in the county council sector.

As a member of the SMA, you are entitled to contact us if you wish to discuss your salary and other employment conditions, or are having problems with your job or your contract. The SMA has also produced a leaflet called “Din lön” (Your salary), in which you can read more about these issues (only in Swedish).

USEFUL TO KNOW
The legislative rules governing the relationship between employer and employee are collectively known as labour law. These rules are reproduced in labour law legislation, collective agreements and individual employment contracts.

The collective agreement regulates the employees’ employment conditions and the general relationship between the employee and the employer. The party to the agreement on the employee side is a union organisation.

The Swedish healthcare culture
Healthcare is a central feature of the Swedish welfare state. It is the largest of all public sectors, and accounts for a large proportion of public consumption. A decent healthcare service with high accessibility and quality also constitutes a valuable resource for the entire population. It is our most important insurance against ill health.

One of the cornerstones of the Swedish healthcare system is that the cost is spread over the entire population via tax. Another is that healthcare is to be available to all on equal terms throughout the country.

Another cornerstone is the strong position enjoyed by the patient. All patients are to feel a sense of involvement in their dealings with the healthcare services; they are entitled to choose their doctor within primary care and suitable treatment when several medically justified therapeutic options are available, and to obtain a second opinion in the event of a difficult or complicated diagnosis. Patients are also entitled to demand detailed and comprehensive information on their condition and the therapy offered. It is therefore important that the healthcare personnel with whom patients have contact have a good command of Swedish and can make themselves understood in conversations with the patient.

In recent years, many different organisational forms for healthcare have been tried. The previously rather strict national control of the healthcare sector has been abandoned, creating greater opportunities for local organisational solutions. The statutory division of responsibility between different categories of personnel has also been relaxed. Old territories and hierarchies between different professions are starting to make way for teamwork and greater convergence of opinion as to how the healthcare services are to be run. The
mutual cooperation between doctors and nurses is based on respect for each other’s skills and qualifications. The SMA is convinced that a richer ethnic diversity in the healthcare sector promotes pragmatic care for the benefit of the patient.

The Swedish healthcare services
Practical responsibility for the healthcare services in Sweden rests on the county and municipal councils, which are known as the healthcare principals. The municipal councils are responsible for the care and nursing of elderly and disabled people who do not require medical help. The county council has responsibility for all other healthcare services. The private healthcare sector is relatively small, but has expanded considerably over the past few years.

USEFUL TO KNOW
Sweden has 18 county councils, two regions and one general council (Gotland) with the equivalent authority over the healthcare area, and 290 municipal councils. The county councils, regions and municipal councils are politically controlled bodies.

The county council health services are provided on three levels: primary/outpatient care, county health services and regional health services.
Primary care forms the basis of the healthcare system; it is also meant to operate preventively and for the health of the entire population. All illnesses, diseases and injuries that do not require hospitalisation or other specialist treatment are taken care of at this level. The county hospitals possess the competence and medical equipment for more or less all illnesses and diseases. Sweden’s county councils (and regions) collaborate through six healthcare regions, each of which has one regional hospital that treats more unusual or complicated diseases or injuries.

Further information
The Swedish Medical Association gives you as a member qualified advice and support in matters relating to your employment in areas such as salaries or general employment conditions, working environment, education, legal assistance on matters of healthcare or questions about foreign exams.
Phone: +46 8-790 35 10
E-mail: medlemsradgivningen@slf.se
### Swedish Medical Association – Membership application

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I wish to join the following associations: (More details below)

- Local association (mandatory)
- Professional association (mandatory)

### Membership application for the Swedish Medical Association

- Date
- Signature
- I wish to get my welcome information by e-mail
- I wish to get my welcome information by traditional mail
- I am interested in automatic payment
- Campaign, if any

### * Reg. conditions from NBHW for Doctors with a degree/registration from outside the EU

Before you can be admitted to the Swedish Medical Association, the National Board of Health and Welfare (NBHW) must first determine the conditions of your registration. Do not forget, therefore to write in the date of the decision in your application and enclose a copy of the NBHW’s notification. If the date is not included, you will belong to the Swedish Medical Student Association until such time as your conditions are determined and you notify us accordingly.

### The Personal Data Act (PUL)

The Swedish Medical Association is responsible for the processing of all personal information provided in your application. This information helps the Association to look after your interests as regards conditions of employment, labour law, and in accordance with the Association’s articles. This means that your personal details may be used as a basis for salary statistics and made available to associated companies and organisations. These details are also provided when the Association has a statutory obligation to do so.

The Swedish Medical Association makes every effort to ensure that the information about you is correct and that inaccuracies are rectified without delay. It is therefore important that you notify the Association of any change of circumstances. Under the terms of the PUL you are entitled to receive a record of all your personal details stored in our database. Such a request shall be sent in writing to the Association.

### Professional associations

The Swedish Medical Association has 7 Professional associations for members with common position in the profession. You will belong to at least one of them.

- Sjukhusläkarföreningen
- Svenska Distriktsläkarföreningen
- Svenska Företagsläkarföreningen
- Svenska Militärläkarföreningen
- Svenska Privatläkarföreningen
- Sveriges läkarförbunds chefsförening
- Sveriges Yngre Läkares Förening

### Local associations

The Swedish Medical Association has 28 local associations. You will belong to the local association where you work.

- Blekinge läkarförening
- Dalarnas läkarförening
- Gotlands läkarförening
- Gästrike-Hälsinge läkarförening
- Göteborgs läkarförening
- Hallands läkarförening
- Jämtlands läns läkarförening
- Jönköpings läns läkarförening
- Karlmar läns läkarförening
- Kronobergs läns läkarförening
- Malmö läkarförening
- Medelpads läkarförening
- Mellersta Skånes läkarförening
- Nordvästra Götalands läkarförening
- Nordvästra Skånes läkarförening
- Norrbottens läkarförening
- Skaraborgs läkarförening
- Stockholms läkarförening
- Södermanlands läkarförening
- Upplands Allmänna läkarförening
- Värmlands läkarförening
- Västerbottens läns läkarförening
- Västmanlands läns läkarförening
- Ångermanlands läkarförening
- Örebro läns läkarförening
- Östergötlands läkarförening
- Östra Skånes läkarförening

### Membership queries:

E-mail: medlem@slf.se  Telephone: +46 8 790 35 70

Send your application to:
The Swedish Medical Association, Svarspost 20080445, SE-110 05 Stockholm. (Postage is payed)