Update of the activities of UEMS-EACCME



Dr. Bernard Maillet Secretary General UEMS - EACCME



UEMS 50 Years Celebration *Brussels April 2008*

- Meetings:
 - –Sections and Boards
 - CESMA issue discussed
 - -Ceremony
 - Many prominent speakers
 - History and Future of UEMS
 - -Council
 - New Members
 - New Section (Medical Microbiology)
 - Strategy document approved



- Strategy paper
- Future Structure of the UEMS
- Voting rights for Sections and Boards
- E-Health
- European Examinations CESMA
 - Harmonisation of the process
 - Common position of UEMS on the issue
 - Glasgow Declaration
 - First step to create a EACPGT



- Membership:
 - -Full Members
 - Lithuania, Bulgaria, Romania
 - Observer Members
 - Georgia, Azerbadjan
- European issues :
 - European Working Time Directive
 - Recognition of Qualification Directive
 - Health Service Directive
 - e-Health



- Section issues:
 - Creation of a Distinct Section of Medical Microbiology
 - Creation of a Division for Balneology in the PRM Section was rejected
 - -Updating of Chapter 6 (Training)
 - -Endorsement of Section documents
 - -Specific Section related problem

Importance of the update of Chapter VI:

- -Term of training of all specialties has to be updated to the 2008 situation (last version dates from 1973)
- Content of training
- Denomination of the specialty
- Globalization of this issue (contacts with USA and Canada)
- Quality to enhance health care for patients



UEMS Council MeetingCopenhagen, October 2008

- Election of a new Executive
- Serbia : application for membership will have to be reviewed
- Start of the implementation of the UEMS Strategy
- Discussion Forum
 - Proposed Directive of Cross Border
 Healthcare
 - UEMS Resolution



Executive1st January 2009

President:

Tresurer:

Liaison Officer:

Secretary General:

Vice-President:

Dr. Zlatko Fras (Slovenia)

Dr. Giorgio Berchicci (Italy)

Dr. Gerd Hofmann (Germany)

Dr. Bernard Maillet (Belgium)

Dr. Ricard Gutiérrez (Spain)

Dr. Romuald Krajewski (Poland)

Dr. Zoltán Magyari (Hungary)

Dr. Kari Pylkkänen (Finland)



Sections and Boards Brussels, February 2009

- Implementation of the Strategy
- European Examinations CESMA
 - Harmonisation of the process
 - Glasgow Declaration
 - First step to create a EACPGT presentation
- Visitation of Departments
- Issues concerning some Sections
- Report on the EACCME
- European Issues



Last Council Meeting Brussels, April 2009

- Launching of the ECAMSQ
- Green Paper on Health care Workforce
- Issues concerning some Sections
 - Curriculum for Emergency Medicine
 - Curriculum for Pediatric Surgery
 - Creation of a Division of Interventional Radiology and Head and Neck Oncology
- Report on the EACCME
- European Issues



Green Paper on Health Care Workforce

- All over Europe we are experiencing a shortage of Medical Workforce
- Different solutions are provided by different Member States
- Harmonization is of utmost importance
- Different problems
 - Working time conditions
 - Needs and the ageing of the population
 - Free movement (patients, services, doctors)



Green Paper on Health Care Workforce

- Legal framework in the EU
 - Free movement Subsidiarity
- Demography
- Public Health Capacity
- Training
- Mobility of the workforce
- Global migration of workforce
- Data to support decision making
- Cohesion (harmonization)



Requirements to enjoy automatic recognition

- To be recognized in the home country
- The specialty must be recognized in the host country
- The specialty must be listed in the addendum of the Directive 2006/100/EC
- Both countries (host as well as home)
 must be mentioned in this list
- Alternate solution : individual decision based on portfolio



Challenges in the next (close) future

- Evolution on the Working Time Directive
- Revision of the Directive on Mutual Recognition of Qualification in 2012
- Implementation of the Directive on Patient Care in Cross Border Health Care
- Evolution concerning the Green Paper on Healthcare Workforce

a lot of work for all of us...



Revision of the Directive on Mutual Recognition of Qualification

- Update of the list of specialties
- Update of the content and length of training
- Introduction of the concept of "Particular Competences"
 - Oncology
 - Intensive Care
 - Emergency Medicine
 - Hand Surgery



Recognition of Qualifications

New Concept

Particular Competence:

Following a basic specialty
Can be started from different basic specialties
For particular fields of activities
Have to be introduced
Actual Directive only recognizes Basic
Specialties

Examples: Oncology, Intensive Care, Emergency Medicine, Sports Medicine, Hand Surgery...



EACCME

- Task Force on CME-CPD
- Improvements
 - Webbased application form
 - Agreements with Sections and Boards
 - Agreements with National Authorities
 - Contacts with other parts of the world
 - Contacts with UEMO
 - Contacts with other Health Care Professionals



National Medical Associations

Very different organisation depending on the EU Member State

From Professional Organisation to Trade Union

General Practioners / Family Medicine included or not

National versus regional structure



How is the Medical Profession organized in Europe

CPME Standing Committee of European Doctors

UEMS European Union of Medical Specialists

UEMO European Union of GP/Family Medicine

PWG Junior Doctor's Organization (trainees)

AEMH Hospital Doctor's Organization

FEMS Salaried Doctor's Organization

EANA Self Employed Doctor's Organization

CEO Organization of European Medical Orders



Webbased application form

www.eaccme.eu



Organiser Request > 3 months **UEMS - EACCME** Sections N.A.A. Evaluation < 3 weeks Evaluation **UEMS - EACCME** Certificate of Recognition Organiser



European Accreditation Council for Continuous Medical Education

Purpose UEMS policy

Contribute to quality and harmonization of CME in Europe
To make life easier for our colleagues by easing access to international CME Developing quality guidelines
Maintaining national authority



Current:

- Anaesthesiology
- Child and Adolescent Psychiatry
- Dermatology
- Ear, Nose and Throat (ORL)
- Endocrinology
- Gastro-Enterology
- Geriatric Medicine
- Internal Medicine
- Medical Biopathology



Current:

- Nephrology
- Neurology
- Neurosurgery
- Nuclear Medicine
- Occupational Medicine
- Ophtalmology
- Oral and Maxillofacial Surgery Stomatology
- Orthopaedics
- Paediatric Surgery

Current:

- Pathology
- Physical and Rehabilitation Medicine
- Plastic Surgery
- Psychiatry
- Radiology
- Rheumatology
- Emergency Medicine
- Intensive Care Medicine
- Sport Medicine
- Oncology (ACOE)

Signed recently:

Cardiology (EBAC)

Infectious Diseases (EBAID)

Pneumology (EBAP)

Genetics (MJC)

25-11-2007

13-1-2009

17-2-2009

22-11-2008

Pending in the future:

- Allergology
- Surgery
- Urology
- Vascular Surgery

Formal Agreements with National Accreditation Authorities

Current:

Spain, Cyprus, Greece, RCSI, Malta, RCPI, Turkey, Slovakia, Norway, Luxemburg, Belgium, Romania, Slovenia, Sweden, Regione Lombardia, Finland

Soon:

Czech Republic

Near Future:

France, Regione Veneto, Regione Frluli...

Future:

Germany, UK (RCoP), Poland, Portugal, Italy...



Agreement with the American Medical Association on Mutual Recognition of Credits

Till June 30th 2006:

Pilot project for 2 years each time

From July 1st 2006:

Real agreement for 4 years



Agreement with the American Medical Association on Mutual Recognition of Credits

- Credits granted to events taking place in the United States and approved by an ACCME accredited provider are recognized in Europe
- Credits granted to events taking place in Europe approved by EACCME can be recognized in the US as AMA PRA Category I[®]credits



Draft Flowchart Accreditation in Europe

Credits UEMS suggestion

Full credits (E CME C)

No weighted factors

1 ECMEC per hour of activity

3 ECMEC for a half day / 6 ECMEC for a full day activity

Translation of these E CME C's to National credits can follow the rules of the National Accreditation Authority

For instance: can have a maximum

weighting factors can be introduced nationally



Updating of Agreements

Spain

Financial aspects (fee)
Credits translation table

1 ECMEC = 0,12 Spanish Credits



Conversion Table

Spain

1 ECMEC = 0,12 Spanish Credits

Belgium

1 ECMEC = 1 CP

Romania

1 ECMEC = 1 Romanian Credit

Sweden

1 ECMEC = 1 Swedish Credit

Germany

6 ECMEC = 8 German Credits



Fees

- Based on a sliding scale
- Number of participants (expected)
- Three invoices can be expected:
 - -UEMS
 - -Section
 - -National Accreditation Authority



E.M.S.*			
Fees			
Number	UEMS	Section	NAA
up till 250	100€	100€	100 €
251 - 500	200 €	200 €	200€
501 - 1.000	300 €	300 €	300 €
1.001 - 2.000	400 €	400 €	→ 400 €
2.001 - 5.000	500€	500€	500 €
> 5.000	1.000 €	1.000 €	1.000 €



Future

- Systematic evaluation of meetings by the participants
- Long Distance Learning
- More agreements with the Sections
- More agreements with the National Accreditation Authorities
- Contacts with other parts of the world
- Contacts with UEMO
- Contacts with other Health Care Professionals



e-Learning

- The next big project started on April 6th 2009 is the inclusion of e-learning programmes
- The quality criteria for e-learning material have been revised
- Costs of evaluation of e-learning events are different because the workload in assessment is more demanding

600 € for the first module and 600 € per next hour

 We do not envisage authorising provider accreditation for e-learning



Feed-back form for participants

- Did I learn something
- Did the meeting change my practice
- Was the meeting well organised
- Quality of content
- Quality of speakers
- Was the venue appropriate
- Did I feel the meeting was biased

Yes	Neutral			No
1	2	3	4	5



Accreditation Requests





Sections and Boards

Are the backbone of the UEMS

Propose minimal training schemes for specialisation

Facilitate the harmonisation of training
About 2000 specialists active in the work in
Europe



Sections and Boards

38 Sections

Divisions

7 Multidisciplinary Joint Committees



What are Sections and Boards

Sections

Two delegates of the Specialty from each EU member state
Mandated by their National Medical Association

Boards

Working Group of the Section

Delegates from the Section together with
representatives of the Scientific Society



UEMS Rules of Procedures VI.3. Sections, Membership

A. Conditions and procedure of admission
The quality of a medical specialist,
independently practising is required in order to
represent a full or associate Member within the
Sections.



UEMS Rules of Procedures VI.3. Sections, Membership

Each Section includes as members two specialist doctors:

- as representatives of each of the member countries of UEMS;
- in active practice in the relevant specialty or involved in negotiating on behalf of medical specialists;
- competent either in French or in English;
- approved by their national professional Organisation, their nominations having been agreed by the national Organisation representing specialist doctors of that country within the UEMS Council.

The latter national organisation gives its formal approval and advises the Secretary General of the UEMS by official letter.



Tasks of Sections and Boards

- Determine Core Curicullum for training
- Propose a log-book
- Helps in the harmonization of training and qualification
- Helps in the harmonization of health care services with visitation



EACQM (?)

European Advisory Council for Quality Management of Specialist Medical Practice

Committees (?)

National authorities and UEMS Sections (???)

EACCME*

European Accreditation Council for CME

Advisory Council

National authorities and UEMS Sections

Executive*

Daily management
President, Secretary General,
Treasurer, Liaison Officer
+ Vice-Presidents (4)

ECAMSQ

European Council for Accreditation of Medical Specialist Qualification

CESMA

WG PGT
National Licensing Authorities
and UEMS Sections

Council*

Plenary decisions 2 delegates per country

Board*

Financial matters

1 Head of delegation per country

Specialist Sections*

2 delegates nominated by the national monospecialist association

European Boards*

2 delegates per country (Balance profession-academia)



How can we assess PGT

- Examinations
- On training evaluation
- Visitations
- 360 apraisal

European Council for Accreditation of Medical Specialist Qualification (ECAMSQ)

"Fusion" of the Working Group PGT of the Council and CESMA

- Electronic Platform
- Certification
- CME activities
- Re-certification



Council for European Specialist Assessment (CESMA)

- Initiated by the Section of Pediatric Surgery in February 2007
- Started with 11 involved Sections and now 26 are participating
- Proposed the "Glasgow declaration"
- Delegates from the Sections of UEMS and one delegate from PWG
- Harmonization of the Assessment process in Europe



Council for European Specialist Assessment (CESMA)

- Chairman : Zeev Goldik (Anesthesiology)
- Board: John Boorman, Robert Carracki, (Bernard Maillet, Zlatko Fras)
- Next meeting : November 21st 2009 in Brussels
- Exams have no legal value but can help in portfolio



Council for European Specialist Assessment (CESMA)

 Negociations have been started with American Board of Medical Specialities to have a kind of mutual recognition over the Atlantic Ocean



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Situation for Occupational Medicine

- Occupational Medicine is mentioned in the Annex to the Directive 2006/100
- It is recognized as a basic specialty in the 26 Member States (not in Estonia)
- The minimal length for training mentioned is 4 years



OCCUPATIONAL MEDICINE Minimum length of training course: 4 years

Belgique/België/Belgien

България Česka republika Danmark Deutschland Eesti Ελλάς Médecine du travail / arbeidsgeneeskunde
Трудова медицина
Pracovni lekařstvi
Arbejdsmedicin
Arbeitsmedizin

Ιατρική της Εργασίας

Dir 2006/100 EC



Glasgow Declaration

- 1. The role of European Board Examinations is complementary to National Examinations where they exist
- 2. Countries which do not have their own examination are encouraged to consider using the appropriate European Board Examination
- 3. European Board Examinations are regarded as a quality mark for independent practice at the end of specialist training. Passing a European Board Examination does not give a right to practise in any UEMS country. Such rights are granted solely by the relevant National Authority



Glasgow Declaration

- 4. All European Board Examinations shall publish both a Curriculum (as set out in Chapter 6 of the UEMS Training Charter) and minimum requirements for examination
- 5. Candidates for the final part of a European Board Examination must be medical graduates and should be either
 - I. Certified specialists in any country or
 - II. Trainees in the final year of specialist training, in a UEMS member country, who have fulfilled the requirements of that national training body where one exists



Glasgow Declaration

- 6. Candidates of any nationality shall be eligible to sit the European Board Examinations
- 7. Candidates who pass a European Board Examination and who are certified specialists may call themselves "Fellow of the European Board of ..." and will receive a certificate
- 8. Trade sponsorship should not be used to subsidise the examination
- It is proposed to establish an UEMS Council for European Specialist Medical Assessments (UEMS-CESMA) as a part of the EACPGMT (European Advisory Council for Postgraduate Medical Training), an advisory body to the UEMS Council



What is needed for a good (specialist) training

Harmonization

- Clear Definition of Specialties throughout Europe
- Harmonized training program
- Log book
- Decent working conditions for the trainees (income and working times)



European Examinations

Allergology Anaesthesiology Cardiology **Dermatology** Ear, Nose and Troath **Hand Surgery Internal Medicine** Neurology Neurosurgery **Nuclear Medicine Ophthalmology** Oral & Maxillofacial Surgery



European Examinations

Orthopaedics and Traumatology Paediatric Surgery **Pathology Paediatrics Pediatric Surgery** Physical Medicine and Rehabilitation Plastic, Reconstructive and Aesthetic Surgery Radiology Surgery **Urology** Vascular Surgery



Go raibh maith agaibh Schön dank

Благодаря

Mult obrigado

Merci Dekuji

Gracies Dank U

сбасиво

Thank you

Grazzi

Tack

Dakujem

Muchas gracias

Multamesc

Takk

Grazie mille

εφχαριστώ

Faleminderit

Kiitos

Köszönöm

Ginkuje

Dekoju



U.E.M.S.

Union Européenne des Médecins Spécialistes

European Union of Medical Specialists

www.uems.net