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Message from the CPME President:



Welcome to the first edition of the CPME Newsletter! I hope that in the future this will prove a valuable tool to bring you news on CPME's work and up-dates on the most interesting developments at EU and European level. This autumn has started with many activities: while the review of the Professional Qualifications Directive is ongoing, CPME has been very much involved in the work of the Steering Group informing the Commission's plans for a case study on professional cards. Outcomes of this case study will be presented at the Single Market Forum in Cracow, Poland on 3-4 October 2011. CPME will also be represented at this event.

CPME has also been invited by the European Commission to participate in the European Innovation Partnership on Active and Healthy Ageing and is currently contributing to drafting a Strategic Implementation Plan which is to be adopted on 7 November 2011.

Preparations for the next CPME Board meeting and General Assembly, which will be taking place in Warsaw on 25 and 26 November 2011, are already underway. I invite you to also take note of the announcement of the CPME conference on 25 November 2011 on page 3 – this event will be a great opportunity to discuss our views with a panel of expert speakers.

It is my hope that this publication will serve as a reference point for up-to-date policy news for all doctors across Europe. I hope you will enjoy this newsletter and look forward to seeing you in Warsaw!

Yours sincerely,

Dr Konstanty Radziwill
CPME President

Professional Qualifications Directive: final phase of review



The review process of the Professional Qualifications Directive (PQD) 2005/36/EC is reaching its final phase: on 22 June 2011 the European Commission published a Green Paper entitled 'Modernising the Professional Qualifications Directive' ([CPME Info 082-2011](#)) which was opened to consultation as the last formal opportunity for the public to input.

Based on the work of the CPME Working Group on Professional Qualifications, the CPME Executive Committee adopted the '[CPME response to the consultation on the Green Paper 'Modernising the Professional Qualifications Directive'](#)' on 20 September 2011. In this response, CPME comments on a number of proposals for innovation, among which the idea of a professional card or equivalent application, the establishment of a proactive alert mechanism to communicate restrictions on healthcare professionals' licence to practise and the amendment of the provisions on minimum training requirements.

The Commission will present the outcomes of this consultation at a public conference on 7 November 2011. The legislative proposal is expected for December 2011.

The European Parliament has also been active on this topic. The Parliament's Internal Market and Consumer Protection committee is currently drafting an own-initiative report ([CPME Info 102 - 2011](#)) which is scheduled for adoption in November 2011. On 8 September 2011 CPME met with the report's Rapporteur, MEP McClarkin, ([CPME Info 107 - 2011](#)) to discuss the items addressed.

The PQD will also be the focus of the CPME conference on 25 November 2011 entitled: "Mobile Doctors, Mobile

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Patients—How Does Patient Safety Travel in Europe? held in the context of the next CPME Board meeting and General Assembly in Warsaw. Please visit www.cpme.eu for the draft agenda and more information.

For further information, please contact: [Sarada Das](mailto:Sarada.Das@cpme.eu)

European Working Time Directive: all eyes on the Social Dialogue



Following the first and second phases of consultation of the Social Partners which took place in early 2010 and 2011 respectively, the review of the European Working Time Directive is now awaiting the start of the Social Partners' multilateral negotiations. While all parties have expressed their willingness to enter into negotiations, no consensus on their scope could be reached as of yet, delaying the official opening of the talks.

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Pharmacovigilance

A concept paper on Pharmacovigilance was released for public consultation on 8 September : [‘Implementing measures in order to harmonise the performance of the pharmacovigilance activities’](#).

The deadline of the public consultation is 7 November 2011.

Medicinal products

A public consultation on the revised [‘Commission Guidelines on Good Distribution Practice of Medicinal Products for Human Use’](#) was launched on 15 July 2011 and will be opened until 31 December 2011.

An impact assessment for the review of the Council directive concerning transparency measures in the pricing of medicinal products is expected to be adopted in December 2011 ([view roadmap](#)).

Clinical trials

The European Commission expects to adopt the legislative proposal to revise the directive on clinical trials in October 2011.

Medical Devices

A new version of the [‘Manual on Borderline and classification in the community regulatory framework for medical devices’](#) was released on 23 August 2011.

Patients’ Rights in Cross-Border Healthcare

The [directive on the application of patients rights in cross-border healthcare](#) adopted by the EU on 9 March 2011 gives member states until 25 October 2013 to transpose this directive into the various national legal and administrative systems.

Health inequalities

The result of a European Commission funded study on health inequalities in the European Union was released on 9 September 2011 ([view full report](#)).

At a recent meeting between CPME and DG EMPL ([CPME Info 083-2011](#)), the Commission set out a series of possible outcomes of the negotiations and the Commission’s role and reaction in each case. While it is expected for the negotiations to kick-off in autumn 2011, outcomes cannot be expected before mid 2012 at the earliest.

For CPME the next steps will be to contact the negotiating Social Partners during the talks to raise awareness for the CPME position. The Commission is looking forward to cooperating with CPME in the months to come on this important topic and is especially interested in collecting information on the implementation of the Directive as regards the medical profession. We therefore invite you to share your views on the implementation’s success in your Member State by responding to the email address below.

For further information, please contact:
[Sarada Das](#)

The European Commission Shapes the Design of the Future Joint Action on Health Workforce

The actions indicated by the European Commission in its ‘Communication on New Skills and Jobs’ to address the shortcomings identified by the ‘Green Paper on the European Workforce for Health’ are starting to take shape. In these papers, the Commission acknowledges the critical situation of the health workforce market in the EU, with data indicating a shortage of 1-2 million health professionals by the year 2020. CPME, represented by Dr Radziwill, among other stakeholders of the healthcare sector, was invited to meetings with the Commission in June and September 2011 to design the actions to be undertaken in the medium term, namely:

a) A Joint Action on Workforce Planning (JA). The main objective is to address the shortage of health professionals in the EU, mainly by:

- Developing and reinforcing EU health workforce forecasting and planning in Member States; and
- Providing expertise and evidence from Member States and stakeholder organisations (such as CPME) to support decisions on forecasting and planning in Member States.

The JA is planned to be implemented from 2012 to 2015 and is expected to be funded with circa 3 million EUR. CPME expressed its interest in participating in the JA (financial allocations might be possible under certain criteria).

b) An Action Plan, to be proposed by the Commission in 2012 and aimed at inviting EU Member States to implement concrete actions in the medium term.

The Commission appreciated CPME willingness in actively inputting both the JA and the Action Plan and praised the knowledge that CPME could bring to the future work in the health workforce area.

The next meeting will take place in November 2011 (concrete date to be confirmed). The main issue of discussion will be to fine tune the scope of the JA and agree on financing resources and next steps.

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The views of CPME in the ‘Health and Technology’- special edition of European Voice



Below you can read the quote of CPME included in the ‘Technology and Health’ special report, published by the Brussels based newspaper ‘European Voice’ on 22 September 2011.

*‘The attitude of European doctors towards the use of e-health has evolved from caution to co-operation, says the **Comité Permanent des Médecins Européens (CPME)**. Doctors have realised they need to be more closely involved to maximise the contribution of e-health to quality of patient care. New perspectives are needed to meet society’s challenges in terms of health – which include the lack of qualified personnel in some medical specialisations as well as a shortage of doctors in general. Certainly, e-health should play a major role in the management of chronic diseases such as diabetes or asthma, or in remote patient monitoring for pulmonary diseases and heart conditions.*

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The use of electronic medical records in hospitals and doctors' offices is also valuable, the CPME says.

But there is as yet little quantifiable evidence that e-health is improving health-care, quality of care, or patient safety, it maintains. And doctors have serious concerns over confidentiality of sensitive personal data in a world where hackers and identity theft remain insufficiently tackled, and over access to patient data and its ownership. Doctors believe that only they should have the authority to change or update such information, while patients should be entitled to define accessibility to their medical records.'

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Upcoming events:

CPME conference on 25 November 2011
'Mobile Doctors, Mobile Patients - How Does Patient Safety Travel in Europe?'
held in the context of the next
CPME Board meeting and General Assembly in Warsaw.



The 'Chain of Trust' eHealth Project successfully on the move!

The CPME is one of the partners of the Consortium 'Chain of Trust' (CoT), responsible for designing and implementing a European-wide project aimed at assessing the patients' and health professionals' views, needs and barriers regarding the use of telehealth. The project is co-financed by the EU Commission (60% contribution), with a duration of 24 months and a budget amounting to 585 000€. In addition to CPME, the other members of the Consortium are the European Patients' Forum (EPF), the European Federation of Nurses Associations (EFN), the Pharmaceutical Group of the EU (PGEU), the Thalassæmia International Federation (TIF), the Norwegian Centre for Integrated Care and Telemedicine (NST) and the Latvian Umbrella Body of Disability Organisations (Sustento).

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Internal Market Information System regulation proposal

On 29 August 2011, the Commission adopted a [Proposal for a Regulation on administrative cooperation through the Internal Market Information System \(IMI\)](#). The proposal addresses the processing of personal data, the legal provisions supported by IMI and clarifies the roles of the different actors involved. The proposal will have to be approved by the European Parliament and the Council of Ministers.

The EU Regulation on 'food labelling' adopted by the Council

Following the adoption of a compromise text in the Council, the Regulation of the European Parliament and of the Council on the provision of food information to consumers was adopted on 29 September 2011. The Regulation provides that by the end of the five-year implementation phase all pre-packed food must be labelled with a mandatory nutrition declaration, consisting of the energy value and the quantities of fat, saturates, carbohydrates, protein, sugars and salt of the product per 100g/100ml. The system of 'traffic-light' labelling to indicate the quantities of these ingredients by using clear colour codes as backed by CPME and other health stakeholders ([CPME 2010/018 FINAL](#)) does not form part of the final legislation.

The Council's official Press Release, including information on further changes to food labelling e.g. on 'country of origin' information, can be accessed [here](#).

Standardisation

On 1 June 2011 the European Commission submitted a Proposal for a [Regulation of the European Parliament and of the Council on European Standardisation](#) and amending Council Directives 89/686/EEC and 93/15/EEC and Directives 94/9/EC, 94/25/EC, 95/16/EC, 97/23/EC, 98/34/EC, 2004/22/EC, 2007/23/EC, 2009/105/EC and 2009/23/EC of the European Parliament and of the Council.

CPME Debates Medical Adherence at the European Parliament

On 21 September 2011, in a lunch debate held at the European Parliament in Brussels, CPME together with the European Patients' Forum (EPF), the Pharmaceutical Group of the European Union (PGEU) and the European Federation of Pharmaceutical Industries and Associations (EFPIA) brought together perspectives of patients, doctors, community pharmacists and the research-based pharmaceutical industry presenting examples of best practices on adherence to therapies. This event demonstrated how a coordinated, multi-stakeholder and patient-centred approach – involving patients, their carers/families, health professionals, industry, and the public, is a key factor in improving patient safety and the quality of healthcare tailored to patients' needs. Hosting MEPs Linda McAvan (S&D), Christofer Fjellner (PPE) and Cristian Silviu Busoi (ALDE) opened the event by emphasising the vital importance of adherence to therapies.

"In the EU alone 194,500 deaths each year are due to misdose of and non-adherence to prescribed medication. Poor adherence carries a huge cost, both in terms of patient safety and quality of life. It also presents a serious problem for health systems, both in terms of inferior health outcomes, unnecessary treatments and hospitalisations" said Linda McAvan.

"The World Health Organisation has stressed that increasing the effectiveness of adherence interventions may have a far greater impact on the health of the population than any improvement in specific medical treatments" added Christofer Fjellner.

"Doctors believe that much can be done from the communication point of view in order to improve medical adherence. eHealth tools could be used on a more regular basis in order to facilitate easy and fast communication, particularly between doctors and pharmacists, under the condition that data protection and privacy is safeguarded" added Dr Lemye, Vice-President of CPME, who presented the role of doctors in a health care team with patients and pharmacists.

To read the event press release, please access the link below:

<http://efpia.blogspot.com/2011/09/event-improving-sustainability-of.html>

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- EU Health Workforce
- Information to patients
- Cross-border healthcare
- Pharmaceuticals
- Medical devices
- Counterfeit medicines



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- European Working Time Directive
- Professional qualifications
- Public health



Anamaria Corca
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- Active and healthy ageing
- Patient safety
- Chronic disease management
- Communication
- Personal assistance to CPME Secretary General



Iza Ene
EMSA Intern

During the first half of 2011 the 'Chain of Trust' (CoT) Consortium conducted a literature review with the objective of understanding the views of patients and health professionals as regards the use of telehealth.

The review was completed in June 2011 after analysing more than 200 articles on the issue.

The findings provided by the literature review set the ground for the design and implementation of an online survey targeting the four user groups identified in this project i.e. doctors, patients, nurses and pharmacists. The online survey was available in 13 languages and ran during June and July 2011. A total of 6700 responses across 30 European countries were validated, which is well above the 4000 responses target set by the European Commission. Thank you to those CPME members who actively participated in disseminating the questionnaire, particularly our members from Latvia, the Netherlands, Norway and Denmark.

The Consortium is now working towards the third core project activity, i.e. the national workshops. These are being carried out between October and November 2011 in six European countries, namely Greece, Latvia, the Netherlands, Norway, Poland and Portugal. Their ultimate objective is to validate the findings of the literature review and the online surveys, as well as providing input for the national roundtables to be held in Brussels by the beginning of 2012. The project will be concluded with a high level conference in Brussels by September 2012, when the final findings will be shared and debated with EU policy makers.

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COMITÉ PERMANENT DES MÉDECINS EUROPÉENS
STANDING COMMITTEE OF EUROPEAN DOCTORS



The Standing Committee of European Doctors (CPME) represents medical doctors across Europe and is composed of the most representative National Medical Associations of 27 European countries. CPME aims to promote the highest standards of medical training and medical practice in order to achieve the highest quality of healthcare for all patients in Europe. CPME is also concerned with the promotion of public health, the relationship between patients and doctors, and the free movement of doctors within the EU. CPME also cooperates closely with national medical associations from associated and observer countries, as well as with specialised European medical organisations and international medical associations.

CPME will contribute to drafting the 1st Strategic Implementation Plan on Active and Healthy Ageing

The European Commission has invited CPME to become member of the Steering Group of the European Innovation Partnership on Active and Healthy Ageing (EIP AHA), next to other selected stakeholders, Member States and Commission officials.

The CPME has taken a very active role so far. CPME President Dr Konstanty Radziwill chaired two workshops, one during the Digital Agenda Assembly on [Addressing demographic change: a socio-demographic challenge for Europe](#) and a second one on [Prevention, Screening and Early Diagnosis](#), which was organised with CPME support and co-leadership.

On 16 September 2011, CPME President Dr Konstanty Radziwill attended the Steering Group meeting on EIP AHA chaired by Commissioners Neelie Kroes and John Dalli, which agreed on five main areas for action:

1. Health literacy, patient empowerment, ethics and adherence programmes based on innovative tools and services;
2. Innovation enabled personal guidance systems, including programs on prevention of falls and early-diagnosis;
3. Disease prevention and early-diagnosis;
4. Capacity building and replicability of successful integrated care systems based on innovative tools and services;
5. Flexible and interoperable ICT solutions for active and independent living.

Next steps:

1. **The Strategic Implementation Plan** will be voted on 7 November 2011 by the Steering Group.
2. The main action areas are expected to receive funding support through calls for projects within the **next two years**.

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