



Message from the CPME President:



Welcome to the 2nd edition of the CPME newsletter. Having received so much positive feed-back on the 1st edition encourages us to bring to you more news on CPME's work and up-dates on the most interesting developments at EU and European level. Just before the end of the year, CPME has been very busy with its Board meeting and General Assembly in Warsaw on 25-26 November. The fruitful discussions and outcomes of the CPME meetings were much welcomed and I invite you to find out more on the policies adopted in the *CPME news* section on page 3 of this issue.

Also, in the context of the CPME meetings in Warsaw a conference entitled "*Mobile Doctors, Mobile patients- How does Patient Safety travel in the EU*" took place which I had the honour to co-chair together with Dr Maciej Hamankiewicz, President of the Polish Chamber of Physicians and Dentists. The conference enabled interesting and inspiring discussions between the Polish EU Presidency (Prof Maciej Banach), the European Commission (Dr Andrzej Rys), the European Patient Forum (Ms Nicola Bedlington) and European doctors that put forth very relevant perspectives with regard to the rights and challenges for doctors and patients in a context of cross-border mobility. Warsaw was also an occasion for doctors to regretfully learn of the situation of their Slovak colleagues. CPME was shocked to hear of President Gašparovič's recommendation to use force against doctors and unanimously deemed such practices unacceptable ([Press release](#)).

In the meantime, the European Innovation Partnership on Healthy and Active Ageing, a flagship initiative by the European Commission aiming to increase the average healthy lifespan in the EU by 2 years by 2020, has also moved forwards rapidly: on 7 November 2011, the [Strategic Implementation Plan on Active and Healthy Ageing](#) was adopted setting out the next steps of the process ([Press release](#)).

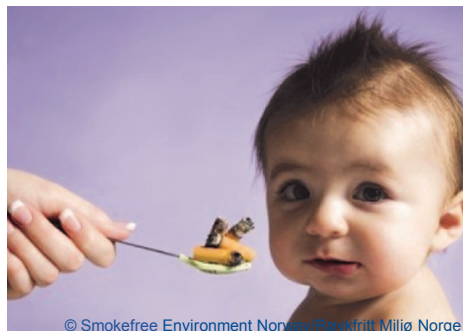
It is my wish that this newsletter will continue to keep you well-informed with regard to CPME's work.

At the end of this eventful year, I send you my heartfelt good wishes for a peaceful and merry Christmas to enjoy with your families and friends, I look forward to seeing you all again in a happy new year 2012!

Yours sincerely,
Dr Konstanty Radziwiłł
CPME President

CPME takes a Stance against Smoking in the Presence of Children

Building on a long tradition of action against tobacco-related harm, the CPME Board, at its meeting in Warsaw on 26 November 2011, adopted the [CPME Policy on Smoking in the Presence of Children](#), which addresses the specific case of tobacco exposure for children and pregnant women. While the restriction of smoking in public spaces has been the focus of increasingly effective action in recent years, children's exposure to tobacco smoke in private spaces, including inside cars, has not been discussed as broadly.



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Departing from the belief that every child has the right to live in a smoke-free environment, CPME underlines the evidence-based damage to health which threatens children and the unborn exposed to smoke and goes on to call for a shift in societal thinking and public opinion so as to eliminate such behaviour. Where this change in attitude is not observable or effective, CPME suggests considering the introduction of complementary measures.

The CPME policy is adopted against the background policy of the on-going review of the Tobacco Products Directive 2011/37/EC. The much debated revision process has seen repeated postponements of the publication of the new legislative proposal. In order to catalyse the process, CPME has co-signed a letter ([CPME 2011/ 132](#)) calling on the Commission President to accelerate and announce the definitive time-frame for the legislative negotiations. Currently the legislative proposal's publication is expected for mid 2012.

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

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EU Innovation
Partnership on
Active and
Healthy Ageing

Doctors stand behind the European Innovation Partnership on Active and Healthy Ageing and adopt the 1st Strategic Implementation Plan

The Strategic Implementation Plan on Active and Healthy Ageing was adopted on 7 November 2011 by CPME and the other members of the European Innovation Partnership on Active and Healthy Ageing (EIPAH) Steering Group. As one of the seven flagship initiatives of the EU 2020 Strategy, the partnership aims to add two extra healthy life years to citizens by 2020.

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EU Institutions News

• 19 October 2011:

The European Alcohol and Health Forum Plenary meeting. For further information please consult the following Flash Report or the European Commission website:

http://ec.europa.eu/health/alcohol/events/ev_20111019_en.htm

• 7 November 2011:

Adoption of the Strategic Implementation Plan on Active and Healthy Ageing:

- Strategic Plan
- Operational Plan

• 15 November 2011:

The European Parliament adopted the resolution on the Implementation of the Professional Qualifications Directive (2005/36/EC). For further information please consult the European Parliament website:

<http://www.europarl.europa.eu/sides/getDoc.do?type=TA&language=EN&reference=P7-TA-2011-0490>

• 29 November 2011:

The thirteenth plenary meeting of the High Level Group on Nutrition and Physical Activity, Brussels. For further information please consult the following Flash Report or the European Commission website:

http://ec.europa.eu/health/nutrition_physical_activity/events/ev_20111129_hlg_en.htm

• 1 - 2 December 2011:

Council adopts conclusions on closing health gaps within the EU through concerted action to promote healthy lifestyle behaviours. Further information can be accessed here:

http://www.consilium.europa.eu/uedocs/cms_data/docs/pressdata/en/lsa/126524.pdf

Within CPME, the implementation was discussed during the recent meeting of the Working Group on Active and Healthy Ageing and the CPME Board meeting in Warsaw on 26 November 2011.

So as to launch action shortly, CPME invited its members to actively contribute to the specific commitments made by CPME within the partnership as regards activities on:

1. Prevention of frailty
2. Functional capacity evaluation
3. Prescribing in polypharmacy cases

Following the invitation to its members, CPME set up three topical subgroups corresponding to the EIPAH commitments and disseminated the Strategic implementation Plan.

Additionally, CPME will engage to promote an approach to innovation that is effective and will cooperate with relevant stakeholders to achieve this objective.

For further information, please contact:
[Anamaria Corca](#)

Mental Health – Tackling the Burden of Stigmatisation



In the context of the series of thematic conferences hosted by the European Commission in implementation of the European Pact for Mental Health and Well-being 2009 – 2011, the CPME Board adopted the

[**CPME Statement on Mental health, combating stigma and social exclusion.**](#)

The statement highlights the immense burden stigmatisation and consequent social exclusion pose, not only for patients affected by mental health problems, but also for their families and carers as well as society as a whole. The paper goes on to illustrate factors which influence the situation of the patient, both negatively and positively, and discusses possible incidences and consequences of stigmatisation, such as discrimination by professionals in social and healthcare services and the development of self stigmatisation.

Having identified 'gaps' in the current situation of mental health patients, concerning access to and quality of healthcare, as well as preventative action and human rights, the statement sets out key messages and recommendations for combating stigma, highlighting the importance of inclusion of patients in communities, workplaces and education.

The role of doctors is elaborated specifically, by underlining the necessity to include mental health in medical training at all levels, so as to eradicate discriminatory behaviour among medical professionals and equip them with the skills necessary to provide the best possible care and support to patients.

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



CPME calls for exclusion of healthcare services from scope of European Standardisation Regulation

The CPME Board adopted the [**CPME Position on the legislative proposal for a Regulation on European Standardisation**](#) to voice European doctors' unanimous support to exempt healthcare services from the scope of application of the provisions envisioned by the legislative proposal for a Regulation on European Standardisation ([COM \(2011\) 315 final](#)).

The legislative proposal for the Regulation sets out the extension of its application of scope from goods to include services as one of the main innovations to the existing legal framework on standardisation, pointing to the implementation of the Services Directive 2006/123/EC as a rationale for this change. The CPME position highlights the exemption granted to healthcare services from the scope of the Services Directive and calls for the equivalent to apply to the scope of the Regulation for European Standardisation, so as to adequately ensure quality of care and patient safety. Furthermore, CPME positively comments on the provisions advancing interoperability of ICT applications, as well as the mechanisms on civil society stakeholder involvement.

The legislative proposal is currently in review at the European Parliament's Committee for Internal Market and Consumer Protection (IMCO), led by Rapporteur Lara Comi MEP (EPP, IT). The committee vote is scheduled to take place during March 2012, the plenary vote for May 2012.

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

Health Technology Assessment from the European doctors' point of view



Following the adoption of the Directive on the application of patients' rights in cross-border healthcare 2011/24/EC, European cooperation on Health Technology Assessment (HTA) has gained momentum. CPME has been following this process as a member of the Stakeholder Forum of the [EUnetHTA Joint Action](#).

At its meeting in Warsaw on 26 November 2011, the CPME Board adopted the [CPME Statement on Health Technology Assessment \(HTA\) in relation to Cross-Border Healthcare](#) setting out the approach to and mechanism of HTA from a European doctors' point of view.

The statement illustrates the background to more cooperation on HTA, pointing to the need to process an increasing volume of research findings and scientific knowledge systematically. The overall aim of the process must be to identify the most effective and beneficial health technologies and thus provide an evidence-based foundation for healthcare in Europe. CPME believes not only that these assessments should be carried out transparently and according to explicitly defined standards, but also that social and ethical considerations should be further elaborated. Moreover HTA struc-

tures should be developed with a service dimension in mind, allowing for the exchange of information. Exchange of information should not be restricted to HTA bodies but also include a wider range of stakeholders, in order to bridge gaps between science and everyday healthcare. CPME will continue its work in this area and its commitment to EUnetHTA. At EU level activities will also be developed in the framework of a second Joint Action scheduled to start in the coming months.

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

Opportunity to provide input into a Feasibility Study on Health Workforce



As reported in the [CPME Newsletter](#) issued in October

2011, the European Commission is taking action to address the critical situation of the health workforce market in the EU. Potential actions are expected to be adopted through: a) a Joint Action on Workforce Planning, planned to be implemented over 2012-2015 with a budget of circa 3 million EUR; and b) an Action Plan, to be proposed by the Commission by the end of 2012 and aimed at inviting EU Member States to implement concrete actions in the medium term.

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CPME News

- 7 November 2011:

Joint Statement of the European Sectoral Professions: "Quality and integrity of qualifications must be preserved"

For further information, please consult:

The CPME [Press release](#)

- 26 November 2011:

The CPME Board adopted the following policies and statements (please click each title to open the document) :

The CPME Policy on Smoking in the Presence of Children and Pregnant Women

The CPME Statement on Mental Health – Combating Stigma and Social Exclusion

The CPME Statement on Health Technology Assessment in Relation to Cross-Border Healthcare

The CPME Position on the legislative proposal for a Regulation on European Standardisation (COM (2011) 315 FINAL)

The Declaration of CPME regarding the Situation of Slovak Doctors.

For further information, please consult:

The CPME [Press release](#)

Guest commentary:

CPME values your feedback!
Feel free to leave us a message by [clicking here](#) or by simply [contacting us](#).

CPME bids farewell to Dr Roland Lemye



It is with great regret that CPME sees an old friend and colleague, Dr Roland Lemye (Belgium) step down from his role as CPME Vice-President and chair of the Working Group on Pharmaceuticals.

CPME would like to express its sincere gratitude and great respect for Dr Lemye's work and expertise from which the organisation has benefited for decades. His valuable contribution also extended to the economic and fiscal management of the organisation in his role as CPME treasurer. His special expertise in pharmaceuticals and also his commitment to ethics, which are at the heart of the profession, were held in high esteem.

CPME wishes all the best to Dr Roland Lemye for all future endeavours both for his professional plans as well as his personal life and family. We very much hope that he stays in close contact with his friends and colleagues from CPME.

...and welcomes Dr Heikki Pälve as new Executive Committee Member



At its General Assembly in Warsaw on 26 November 2011 the CPME membership elected Dr Heikki Pälve (Finland) as new Executive Committee Member, taking over from Dr Roland Lemye who stepped down from his functions. Dr. Heikki Pälve graduated from the University of Turku in South-West Finland 1980, got his diploma in Anesthesia and Intensive Care in 1987 and Ph.D. in 1991. He is the head of the Finnish delegation to CPME.

Editorial Board

Oscar Arias
Senior Policy Advisor

Sarada Das
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EMSA Intern to CPME

Ahead of the adoption of the Joint Action, the Commission has commissioned a 'Feasibility Study' aimed at mapping the current situation of the health workforce across the EU 27 Member States as regards a) education and training, b) planning structures and approaches of national/regional authorities, as well as main challenges ahead. The final study is expected to be published by end of 2011.

Even more interesting are the 'Case Studies' that are being currently developed in 12 European countries, aimed at deepening the findings of the Feasibility Study mentioned above. The main focus of the case studies are a) assessing the current challenges at national level (e.g. data collection, horizon scanning, etc); and b) assessing the national governments' work to tackle the challenges and possible actions for the short to medium term. The countries selected for the case studies are: Belgium, Romania, Spain, Finland, Hungary, Ireland, Iceland, Italy, the Netherlands, Slovenia, the UK, and Lithuania.

Information is being currently gathered from two types of sources, namely national authorities (for smaller/centralized countries) and national and/or local authorities (for larger/federal states). The author of the case studies will be willing to receive input from CPME members on current and future challenges regarding workforce issues on the countries mentioned above. Furthermore, input on Bulgaria is very welcomed, due to the difficulty to gather information on the issue from the Bulgarian national authorities.

Those CPME members interested in having a first phone interview (1hr slot maximum) are invited to approach the CPME Secretariat before **19 December 2011**. Note that participation is limited to one representative per national medical chamber.

For further information, please contact:

[Oscar Arias](#)

Fundamental Rights Conference 2011: Dignity and Rights of Irregular Migrants



**Médecins du Monde
(MdM) / Doctors of
the World and CPME**

Since 2010, extensive work has been conducted by the European Fundamental Rights Agency (FRA) on the rights of migrants in an irregular situation. The FRA produced four reports, one of them in October 2011 on the access to health care in 10 EU Member States in which a number of suggestions were made, such as **"access to basic forms of health-care cannot depend on a person's legal status"** and **"healthcare should be disconnected from immigration control policies"**, and several **ways to improve this access** were proposed. They are in the line with the recommendations made by MdM, the CPME and the "European Declaration of health professionals for non discriminatory access to healthcare" released to EU authorities in March 2011.

A FRA Conference took place in Warsaw on 21-22 November 2011. Healthcare was not the main issue, but was mentioned throughout as one of the first three fundamental rights. Emphasis was put on the need for improvements in access to care for children and pregnant women, and on the specific situation of "un-removable" migrants, among whom there are seriously ill patients who cannot access adequate care in their country of origin: they should be protected against expulsion and have full

access to care in Europe. The audience consisted of many representatives from governmental bodies and other institutions, civil society, trade unions and national or international organisations. It is clear that there is still a lot to be done in order to guarantee the effectiveness of the rights of migrants in Europe and to propose new ones.

Médecins du Monde/Doctors of the World was present at the conference with its most recent publications and testimonies on regulations and practices concerning access to healthcare for migrants, as observed in France and other European countries; the [CPME position paper](#) was also presented at the "Market place" session.

For further information, please contact:

[Nathalie Simonnot](#)
[Médecins du Monde](#)

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.



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS
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