# CPME COMITÉ PERMANENT DES MÉDECINS EUROPÉENS 🖉

# CPME Newsletter

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Message from the CPME President:

Welcome to the 3<sup>rd</sup> edition of the CPME Newsletter. The beginning of 2012 promises an eventful and interesting year and here at CPME, we look forward to many activities to come. This spring edition features topics of high interest for doctors and patients including responses to the recent Commission proposals on data protection, European standardisation, and professional qualifications as well as insights from the Commission itself on cross-border health threats and measures to combat antimicrobial resistance.

This edition also continues to bring you news on CPME events. On 4 May 2012, CPME and ECDC will co-host a multi-stakeholder debate on the role of vaccinations as a prevention tool in healthcare to which we invite you most cordially.

Furthermore, the European Innovation Partnership on Active and Healthy Ageing has also moved into a different stage, from plan to action. CPME continues to support the action priorities by working towards the 2020 goal that the average healthy lifespan in the EU increases by 2 years.

Being active on the European arena CPME keeps close contact with our national members. In the recent period, we sent letters of support for doctors in Slovakia, Bulgaria, Romania, Poland and also Turkey facing different problems in their countries.

I hope that this 3<sup>rd</sup> newsletter issue will continue to keep you wellinformed with regard to CPME's work and wish you all the best for the activities to come.

#### Yours sincerely, Dr Konstanty Radziwill CPME President

## European Standardisation – vote in IMCO committee approaching

In the past months, CPME has met with decision-makers in the EU institutions to present the CPME position on the legislative proposal for a Regulation on European Standardisation (COM (2011) 315 final), as adopted by the CPME Board in November 2011. Joint action with other healthcare professionals' representative bodies, in particular the Council of European Dentists (CED) and the Pharmaceutical Group of the European Union (PGEU), has proven very fruitful in this matter. Ahead of the vote of the IMCO committee on 20 March 2012 on the European Parliament's draft report, several MEPs have tabled amend-



ments calling for an exemption of healthcare services from the scope of the Regulation. This exemption reflects CPME's position that patient safety and quality of care can only be ensured if standards in healthcare services continue to be established by the national bodies competent to best safeguard the technical qualifications, ethical requirements and professional regulations of their provision. In a meeting between CPME and the

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Danish Presidency, it was indicated that in parallel, the Council has been elaborating a provision which acknowledges that the Regulation must respect the division of competences between the European Union and the Member States as set out in the treaties, including a reference to the special position of healthcare services. It is hoped that an amendment excluding these services from the Regulation's scope can find consensus among the two co-legislators.

Following the IMCO committee's vote, the European Parliament's plenary plans to adopt the report during its session from 21 to 24 May 2012.

For further information, please contact: <u>Sarada Das</u>

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# Draft Commission proposal on Data Protection legislation: new responsibilities for physicians



On 25 January 2012, the European Commission adopted new proposals to update and modernise the principles enshrined in the 1995 Data Pro-

tection Directive to guarantee privacy rights in the future. They include a <u>policy Communication</u> setting out the Commission's objectives and two legislative proposals: a Regulation setting out a general EU framework for data protection and a Directive on protecting personal data processed for related judicial activities.

The Commission's proposed Regulation defines how personal data (including health data) should be collected, processed, stored and exchanged. The draft proposal introduces the definition of 'data subject's consent', which would need to be 'explicit' and compulsory for all processing of medical data. Furthermore, the proposal introduces the figures of the 'controller' and the 'processor', resulting in new responsibilities for all physicians, particularly for those working in medical practices different from hospitals.

Further to the new legal responsibilities proposed for physicians, the draft Regulation will result in an additional economic burden, particularly for those doctors working in smaller medical practices. The draft Regulation will require the obligation to designate a 'data protection officer', together with the need to commission data protection 'impact assessments' to ensure that the physician is fully complying with the new legislation. In order to minimize costs, the necessary provisions to comply with these last two obligations can be either shared by medical practices, offered by national associations or by umbrella European ones.

A detailed analysis of the Commission proposal is under preparation by the CPME Secretariat and will be sent for discussion to the CPME members of the eHealth Working Group before the end of March 2012.

For further information, please contact: Oscar Arias



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# GUEST ARTICLES FROM THE EUROPEAN COMMISSION

## EU Commission announces 5-year Action Plan to combat antimicrobial resistance (AMR)

The European Commission has tabled on 17 November 2011 a comprehensive Action Plan on Antimicrobial resistance (AMR) which unveils 12 concrete actions to be implemented in close cooperation with the Member States. With about 25,000 patients dying per year from infections caused by drug resistant bacteria and related costs of over 1.5 billion Euros in healthcare expenses and productivity losses, antimicrobial resistance is a growing health problem in the EU.

Antimicrobials are essential drugs for human and animal health and welfare, and as disinfectants, antiseptics and hygiene products. Antimicrobial resistance (AMR) is a health concern related to both human and non-human antimicrobial usage.

Its management and prevention have become more difficult over the past decades due to the slower introduction on the market of new classes of antimicrobial medicinal products.

The European Centre for Disease Control (ECDC), the European Medicines Agency (EMA) and the European Food Safety Authority (EFSA) have published alarming reports on the increasing resistance of zoonotic agents to antibiotics used for human treatment. For example, resistance to pathogens which frequently cause pneumonia and urinary tract infections in hospitals is increasing across the EU and is now established in several countries. The Action plan against the rising threats from Antimicrobial Resistance is a holistic 5-year approach cutting across several sectors. For more information please consult the European Commission website.

For further information, please contact: <u>Tim Sauler</u> DG SANCO Health Threats Unit European Commission EU Commission proposes measures to better protect citizens from a wide range of cross-border health threats

The European Union and its Member States have developed capacities to prevent serious cross-border health threats and to coordinate the management of health crises. However, until now, health threats emerging from biological, chemical and environmental events are not addressed in the same way as those from communicable diseases.

On 8 December 2011 the Commission has, therefore, adopted a legal proposal for a Decision on serious cross-border threats to health to provide for a coordinated response in the event of a crisis.

Building on lessons learned from recent crises such as the H1N1 pandemic in 2009 and on existing structures, the measures covered by this proposal include extending the assessment of risks and the existing co-ordination mechanism for communicable diseases to all types of health threats, and to reinforce the mandate of the Health Security Committee to better co-ordinate national measures to fight a health crisis.

The initiative foresees that every Member State coordinates its efforts to develop, strengthen and maintain its national preparedness and response plan, in consultation with other Member States. It provides a basis for joint voluntary purchasing of vaccines and other medical countermeasures. In addition, the initiative establishes the mechanism to recognise a European "health emergency situation" for the purpose of making medicines available more rapidly, and enables the Commission to adopt, in very specific emergency situations, emergency cross border measures to supplement those taken at national level. For more information please consult the European Commission <u>website</u>.

For further information, please contact: <u>Tim Sauler</u> DG SANCO Health Threats Unit

European Commission



Commission

# EU Institutions News

# 29 February - 31 May 2012

The European Commission invites on a first round all interested stakeholders to express commitments to the specific healthy and active ageing priorities by 31 May 2012. More information <u>here</u>.

14-15 March 2012 <u>Conference on combat-</u> ing antimicrobial re-<u>sistance</u>, Copenhagen.

#### 3 April 2012

The conference on European Innovation Partnership on Active and Healthy Ageing: from plan to action, Brussels.

#### 9 May 2012

<u>eHealth High Level Conference 2012</u>, Copenhagen.

#### 23-25 May 2012

The 6<sup>th</sup> European conference on rare diseases and orphan products, Brussels.

# CPME Meetings

MAY 2012 Friday Saturday



#### SAVE THE DATE 4-5 May 2012

CPME Board and General Assembly, Brussels.

#### 4 May 2012

CPME—ECDC conference: Prevention through Childhood Vaccination— Defining Doctors' Roles in the Stakeholder Debate www.cpme.eu

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## **Editorial Board**

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#### Guest commentary:

CPME values your feedback! Feel free to leave us a message by <u>clicking here</u> or by simply <u>contacting us</u>.

The Standing Committee European Doctors of (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 hiahest 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.

# Professional Qualifications – CPME Working Group discusses Commission proposal

Following the publication of the <u>Commission</u> proposal for a Directive amending Directive 2005/36/EC, the CPME Working Group on



Professional Qualifications has been discussing the changes suggested by the Commission. The introduction of an electronic certificate functioning as a Euro-

pean Professional Card, which is to serve as an alternative procedure for applying for the recognition of professional qualifications is one of the main innovations proposed. Furthermore the new approach to the regulation of medical training and its duration is focus of intensive debates, especially with regard to the Commission's proposal to amend the current requirement of at least six years or 5500 hours of training to at least five years and 5500 hours at minimum. The WG is also elaborating a position on the provisions which focus on healthcare professionals in particular as regards the verification professionals' language knowledge and the new proactive alert mechanism for cases in which professionals lose their licence to practice. The WG looks forward to consolidating discussions in the coming weeks together with the CPME membership.

Meanwhile, the European Parliament has also taken up work on the draft Directive. Under the guidance of Rapporteur MEP Bernadette Vergnaud (S&D, FR) and her shadows including Constance Le Grip (EPP, FR), Cristian Silviu Buşoi (ALDE, RO), Emilie Turunen (GREENS/EFA, DK), a first draft report is expected for July 2012. A hearing is scheduled to take place on 25 April 2012.

*For further information, please contact:* <u>Sarada Das</u>

Chain of TRUST Understanding patients' and health professionals' perspective on Telehealth and building confidence and acceptance

### CPME focus group on telehealth services

On 6 February 2012 CPME organised a focus group for physicians within the framework of the <u>Chain of Trust project</u>. The project is co-funded by the EU Public Health Programme and CPME is one of the core partners. The aim of the project is to assess the perspective of the main end users of telehealth services (doctors, patients, nurses and pharmacists) across the EU to see whether and how views have evolved since the initial deployment of telehealth and what

barriers there still are to building confidence in and acceptance of this innovative type of services. The focus group



for physicians was one of the key activities in order to gather knowledge and evidence of doctors' views, perception and barriers in relation to telehealth. The focus group served to complement and validate the information collected through the previous activities of the project, by trying, at the same time, to translate the findings from a national perspective to a European one.

The focus group agreed on a comprehensive package of recommendations on issues such as data protection, privacy, confidentiality, and liability, among other issues of interest for doctors dealing with telehealth services.

The first public deliverable with the preliminary findings of the project is expected to be released by May 2012. The final findings and recommendations will be discussed with EU decision makers before the end of 2012.

For further information, please contact: Oscar Arias



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS STANDING COMMITTEE OF EUROPEAN DOCTORS