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ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

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Report from the UEMS Conference on CME-CPD in Europe February 28th 2014 and meetings regarding to the new tender on continues professional development

CPD, particularly its regulation, is a major issue for the AEMH. It is important for us to follow what happens on the European level to inform and support our member organizations on the national level. In the revised and adopted new directive on the recognition of professional qualifications and regulation, 2013/55/EU, there are downs regarding continues professional development for healthcare personal to improve patients safety.

CPME is chosen by the European commission to lead the tender regarding CPD and steer the consortium composed of;

Council of European Dentists

European Federation of Nurses

European Public Health Association (EPHA)

Pharmaceutical Group of the European Union

On the 27th I met Sascha Marschang from EPHA which is a nonprofit organization where AEMH is one of the members. He was happy that EPHA was chosen as one of the stakeholders for the tender regarding CPD and thought this might be because the organization has very little conflict of interest and can be regarded as neutral. Their work had started with a survey regarding what is published on CPD in the different EU countries. He was well aware of the booklet; Continuing Professional Development (CPD), A summary of the state of knowledge about physician training published by the Swedish Medical Association and the Swedish Society of Medicine from 2011. He informed about an upcoming workshop for experts on the topic at the 20th of June. AEMH is considered as one of the potential stakeholders.

Later on the same day I met Paul de Raeve from the European Federation of Nurses. Regarding the new directive he was very happy with the defined length of training for nurses as well as the professional card. Regarding CPD the official view is that this will be a part of the Bologna Process. They also have an official document on the topic from 2012. We also agree upon that all costs for CPD must be the responsibility of the employer and not the employee.

Finally on the 27th I met Brigit Beger and Sarada Das from the Standing Committee of European Doctors. Once again I was informed on the interest of having AEMH participating in the workshop on the 20th of June. We further discussed the possibility to arrange a consensus meeting regarding quality control of CPD as this seems not to be the focus for the ongoing tender by the European Commission. Brigit Berger thought that this was a good idea and suggested that it should be presented at the next presidents committee meeting. An official proposal has to be presented from the AEMH office.

The UEMS, CME-CPD conference had attracted more than 300 participants. The conference presented CPD from different perspectives beginning with the political. Andrzej Rys from DG Sanco gave the perspective of the Commission on the new directive. He announced the deadline of the ongoing tender regarding CPD which shall be finished and reported in October this year. Professor Nigel DS Bax from Sheffield asked if the commission will suggest CPD as mandatory for health personal. The answer was that the commission wanted to await the result of the tender.

From the United States Alejandro Aparicio, Director of the Division of Continuing Physicians Professional Development, American Medical Association (AMA) and Dr Murray Kopelow, President and Chief Executive Officer, accreditation Council for Continuing Medical Education (ACCME) and they presented the North-American perspective on CME-CPD which is a very expensive system with year by year growing heavy bureaucracy.

Secretary-General Rolf Kirschner from the European Board and College of Obstetrics and Gynecology, claimed that mandatory accreditation of small CPD events might reduce the number of small important CPD events in the different European countries. During a coffee break he also submitted to me a document with suggestions for EBCOG on Mandatory CPD.

Regarding accreditation of CME events Edwin Borman reported that 94 % of the applications were approved. There has been a reduction of applications lately and 2013 the number was 1451. EACCME will not approve educational events provided by the industry which was questioned. To control and validate given numbers of CME-credit points to providers the UEMS will send "secret shoppers" to conferences to review the program.

Professor Nigel D S Bax finally questioned the collection of CPD credit points on an individual level. He argued that it is better to focus on outcome of care instead of creating heavy bureaucracy with the CME credit point system.

AEMH will follow and influence the process and suggest a consensus meeting regarding quality control of CPD to the presidents committee.

Thomas Zilling 2/3 2014