



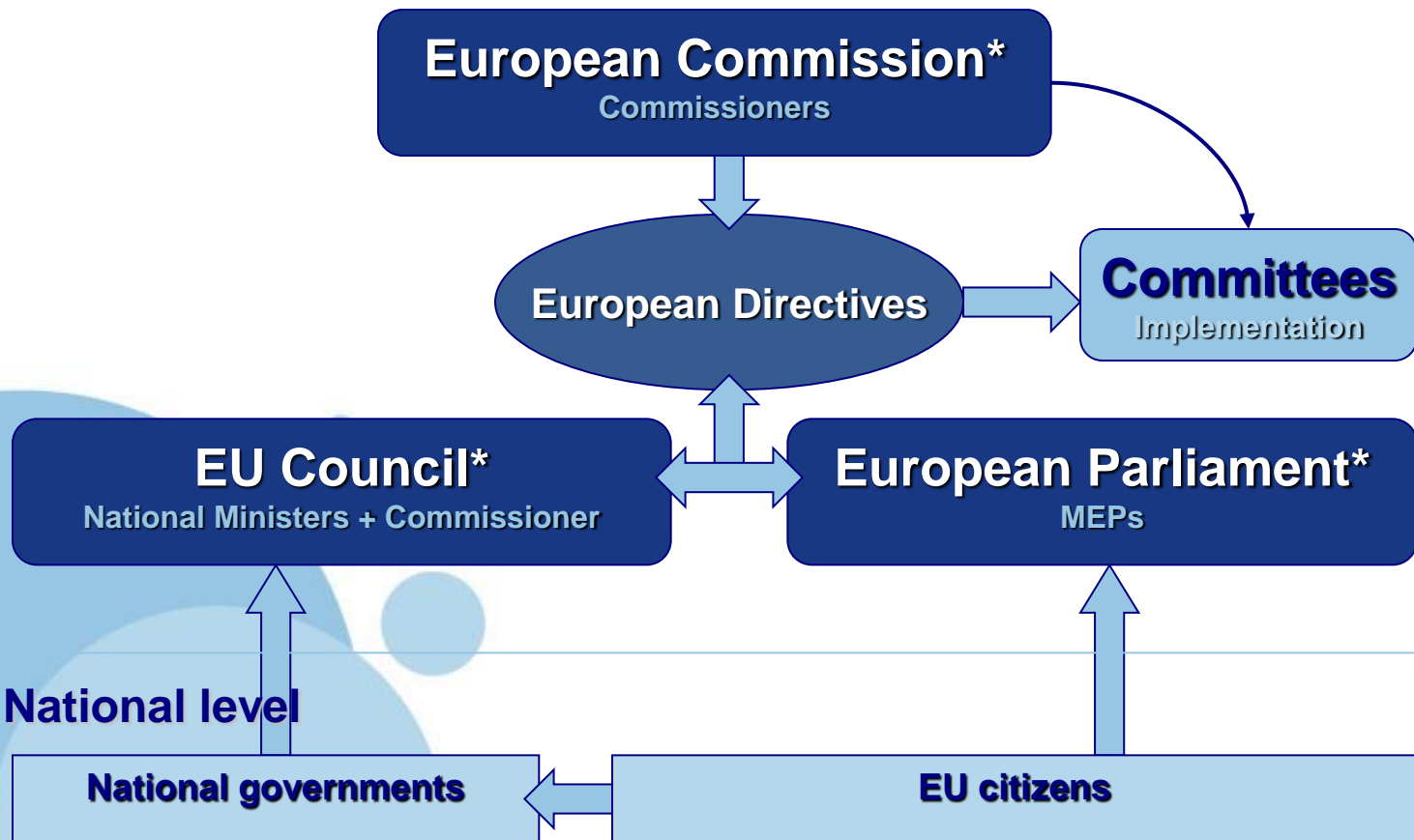
Update of the activities of UEMS - EACCME - ECAMSQ

Dr. Bernard Maillet
Secretary General
UEMS – EACCME - EDAMSQ



EU – How does it work?

European level



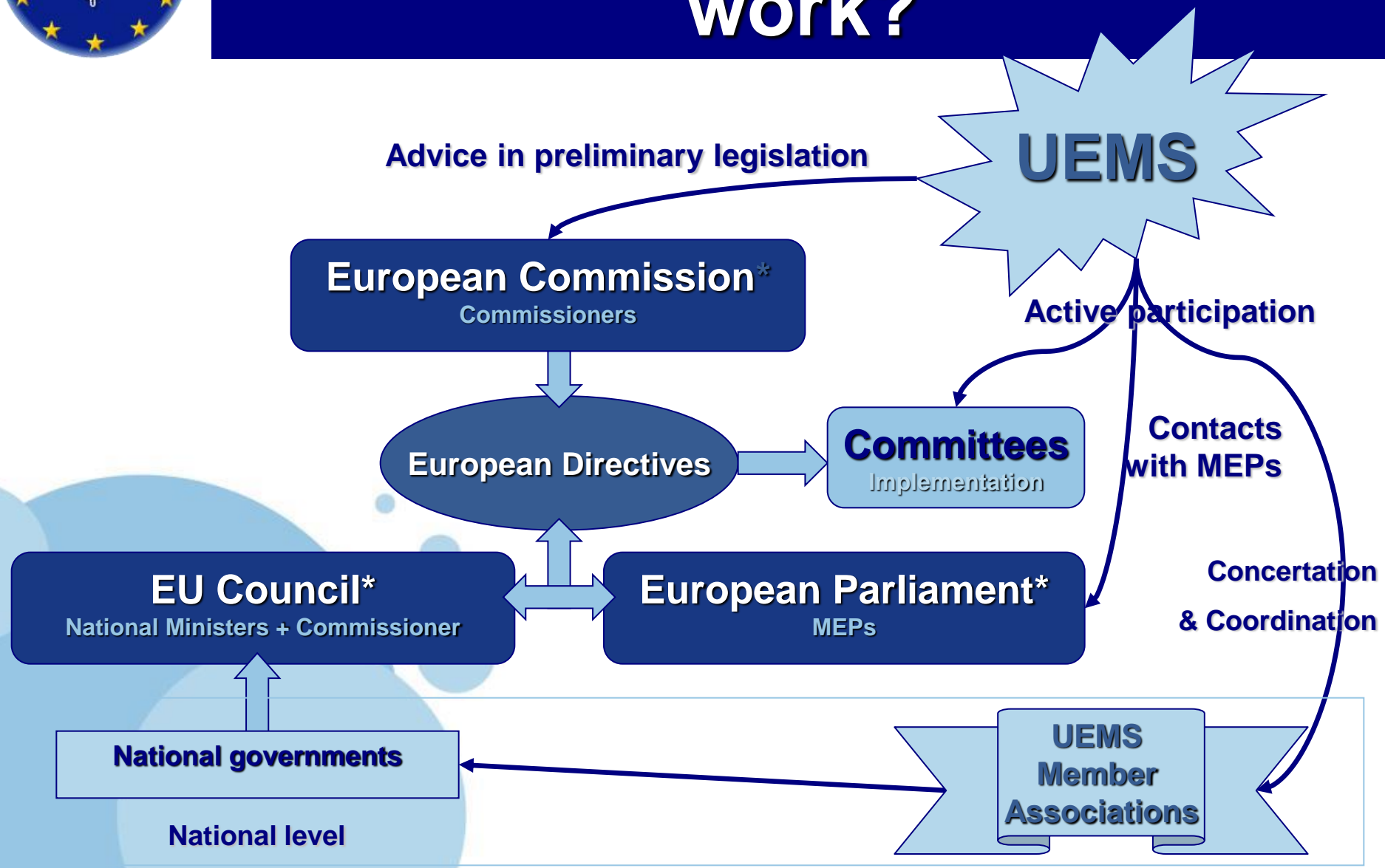
National level

National governments

EU citizens



UEMS Lobbying – How does it work?





UEMS Council Meeting

Copenhagen, 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 on Cross Border Healthcare**
 - UEMS Resolution**



Executive

1st January 2009

President :	Dr. Zlatko Fras (Slovenia)
Tresurer :	Dr. Giorgio Berchicci (Italy)
Liaison Officer :	Dr. Gerd Hofmann (Germany)
Secretary General :	Dr. Bernard Maillet (Belgium)
Vice-President :	Dr. Ricard Gutiérrez (Spain)
	Dr. Romuald Krajewski (Poland)
	Dr. Zoltán Magyar (Hungary)
	Dr. Kari Pylkkänen (Finland)



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**
 - **Requests for the creation of a Division of « Interventional Radiology » adopted and of « Head and Neck Oncology » rejected by the Council**
- **Report on the EACCME**
- **European Issues**



Council Meeting

Istanbul, October 2009

- **Creation of the ECAMSQ**
- **Agreement for a pilot project for an e-platform on Certification (Orzone)**
- **Issues concerning some Sections**
 - **Policy Paper on Emergency Medicine**
 - **Curriculum for Pediatric Surgery**
- **European Issues**
- **New constituency of the UEMS Council : delegates from all Sections as Observers**



Sections and Boards

Brussels, March 2010

- **First steps of the ECAMSQ**
- **New constituency of the UEMS Council with delegates from the Sections**
- **Issues concerning some Sections**
 - *Proposal to create an MJC in Oncology*
- **Report on the EACCME**
 - *Report on the e-learning*
 - *New application website*
- **European Issues**



Council Meeting

Brussels, April 2010

- **Cancelled due to the Ash Clouds...**
- **Formal agenda was moved to the next Council meeting held in Prague on October 8th and 9th 2010**



Last Council Meeting

Prague, October 2010

- **First edition of the new structure of the Council meeting**
- **Length of all elected mandates**
 - 4 years renewable once
- **Organization :**
 - Standing Committees
 - Working Groups
- **Update on EACCME and ECAMSQ**
- **Issues from Sections and Boards**



Next Council Meeting

Brussels, April 2011

- **Renewing Health project**
- **Specialist practice**
- **Progress on CME-CPD**
- **EU Affairs**
 - **Qualification Directive**
 - **European Working Time Directive**
 - **Cross Border Health Care**
- **Specialist Issues**
 - **Manual Medicine**
 - **Sexual Medicine**
 - **Change of the name of the Section of Medical Biopathology**



New Premises Domus Medica



Rue de l'Industrie 24



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 Safety 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 Qualification”**
 - *Oncology*
 - *Intensive Care*
 - *Emergency Medicine*
 - *Hand Surgery*



Recognition of Qualifications

New Concept

Particular Qualification :

Following a basic specialty

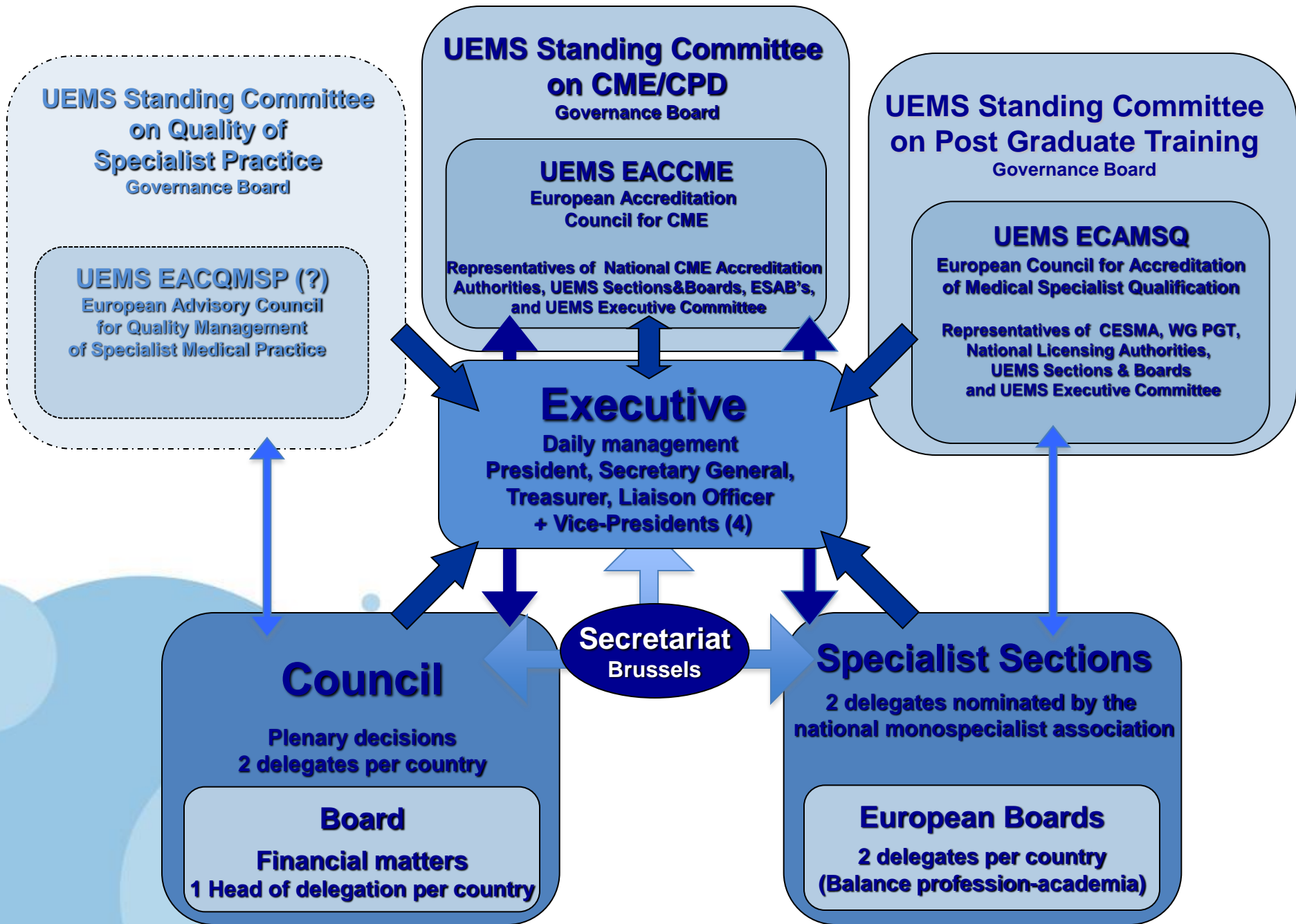
Can be started from different basic specialties

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...





Sections and Boards

Are a fundamental and specific structure

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

9 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



Multidisciplinary Joint Committee

Emergency Medicine

Genetics

Hand Surgery

Immune Mediated Diseases

Intensive Care Medicine

Oncology

Pain Medicine

Paediatric Urology

Sport Medicine



Tasks of Sections and Boards and MJC's

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



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**



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)**



How to assess Medical Specialists qualifications?

- **Develop harmonised curricula in each specialty**
- **Ensure that all Medical Specialists have the same main core competencies in their specialty across Europe**
- **Ensure that all member states adopt the curricula and translate them into their national system**



How can we assess PGT

- **Examinations**
- **In training evaluation**
- **Visitations**
- **360° appraisal**



Relevant UEMS Policies

- **Charter on Training of Medical Specialists (1993)**
- **Charter on Continuing Medical Education (1994)**
- **The European Training Charter (1995)**
- **Charter on Quality Assurance in Specialist Practice in the EU (1996)**
- **Charter on Visitation of Training Centres (1997)**
- **Charter on Continuing Professional Development - Basel Declaration (2001)**
- **Policy Statement on Assessments during Postgraduate Medical Training (2006)**



History and backgrounds

UEMS – established 1958

UEMS Specialist Sections – first created in 1962

**Doctors Directives – 75/362/EEC and 75/363/EEC
(mutual recognition of diplomas)**

ACMT and CSOPH – created in 1975

**Consolidation of Doctors Directives – Directive
93/16/EC**

Launch of EACCME

**Recognition of Professional Qualifications Directive –
Directive 2005/36/EC + 2006/100/EC**

Launch of ECAMSQ



UEMS ECAMSQ - Scope

To

- **survey**
- **monitor, and**
- **assess**

specialist medical education and training for the purpose of accreditation of medical practitioners across Europe.

Ensure

- **sufficient experience**
- **education, training**
- **supervision**
- **assessment**
- **evaluation**
- **support**
- **safe working environment**

to enable doctors in training to meet the objectives of their training programmes.



UEMS ECAMSQ - Aims

- to invite the NMAs, UEMS S&Bs, and national authorities responsible for accreditation of medical education and training in each of the 27 member states to reach consensus on the core essentials that inform high quality medical specialist education & training programmes,
- to convey the agreed outcome of these deliberations to the European authorities with a view to having these agreed principles formally incorporated into EU legislation,
- to offer and ensure the appropriate tools in order to implement the comprehensive process of individual/organisational/institutional PGMST accreditation at the European level.



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 28 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 Carachi, Alfred Tenore,** (*Zlatko Fras, Bernard Maillet*)
- **Next meeting : April 1st and 2nd 2011 in Malta**
- **Exams have no legal value but can help in portfolio**



Council for European Specialist Assessment (*CESMA*)

**Negotiations have been started with
American Board of Medical Specialties to
have a kind of mutual recognition over
the Atlantic Ocean**



UEMS Working Group on Post Graduate Training

- **Chairman : Dr. Hans Helmqvist**
- **Rapporteur : Dr. Umut Akyol**
- **Dr. Zlatko Fras is very much involved as past Chairman**
- **Wide representation**



UEMS Working Group on Postgraduate (Medical Specialist) Training

HARMONIZATION of various aspects of Medical Specialist Training in Europe

- Access to training
- Curricula - Chapter 6 (UEMS Charter PGT)
- Quality of training – provisions on trainees & trainers, quality indicators, monitoring and visitations
- Certification
- Recognition of qualifications



Glasgow Declaration

- 1. European Board Examinations does not give the right to practice in any European Country**
- 2. European Board Examinations is complimentary to National Examinations**
- 3. Promotion of the European Examinations**
- 4. To be considered as a Label of Excellence**
- 5. Clear Curriculum and Reference Book**
- 6. Clear Eligibility criteria**
- 7. Certificates for successful application**



European Examinations

Allergology

Anaesthesiology

Cardiology

Dermatology

Ear, Nose and Throat

Hand Surgery

Internal Medicine

Neurology

Neurosurgery

Nuclear Medicine

Ophthalmology

Oral & Maxillofacial Surgery



European Examinations

Orthopaedics and Traumatology

Paediatric Surgery

Pathology

Pediatric Surgery

Physical Medicine and Rehabilitation

Plastic, Reconstructive and Aesthetic Surgery

Radiology

Surgery

Urology

Vascular Surgery



Doctor...

*Competence based
education/training...*



knowledge

skill

attitude

= COMPETENCE



What competences to assess?

- **Knowledge:**
 - test the knowledge of the trainee mainly through MCQs developed by UEMS Section members according to the highest standards of medical education
- **Skills:**
 - assess the practice of medical specialists focusing on technical and non technical skills through real life training, and assessment, risk-free training...
- **Professionalism:**
 - Assess the “non technical” attitudes of trainees such as decision making, communication, leadership....



European (Re-)Certification : How Should it Work ?

Professionalism

Skills

Knowledge



European (Re-)Certification : How Should it Work ?

Professionalism

Skills

Knowledge

Structured curriculum including building blocks of theoretical knowledge, i.e anatomy, physiology and pathology.

Trainee can gain and demonstrate knowledge through regular formative and summative assessments.

Tools: curriculum, educational content, MCQ's



European (Re-)Certification : How Should it Work ?

Professionalism

Skills

Structured approach to become proficient. Focus on technical and non-technical skills.

Instructions for real life training and assessment.

Simulation may provide risk-free training and objective assessment.

Tools: curriculum planner, e-logbook, assessment (DOPS), simulations



European (Re-)Certification : How Should it Work ?

Professionalism

Decision making, communication and leadership are core competencies for Medical Specialists.

Continuing Medical Education (CME) and Continuing Professional Development (CPD) are generally accepted performance metrics for professionalism.

Multidisciplinary team training in realistic environment allows Medical Specialists to train and be assessed by colleagues. Reflection upon outcome, the trainee is likely to improve behaviour and attitudes.

Tools: log of CME/CPD, assessment using multi-source feedback (360° Appraisal), scenario based simulation training and assessment



Project of e- platform

ORIZONE

Pilot project for 2 years

Involving 3 UEMS Sections

Anesthesiology

Cardiology

Radiology

After the pilot project :

Evaluation of the outcomes

**Extension to ALL UEMS Sections and
Boards and MJC's**



Structure for the project

OR4ZONE

Management Board

Equal representation of UEMS and Orzone

Project Teams

One for each specialty

With appointed representatives of the relevant UEMS Section and members of the Management Board sitting “ex officio”

e-Platform Steering Committee

All Project Teams together with UEMS and Orzone



Milestones for the project

ORIZONE

April 2010

Finalization of the Framework for the Curriculum

July 2010

Finalization of the Question Bank for the MCQ's

February 4th 2011

First European e-platform based assessment in Intensive Care Medicine

12 candidates, 4 locations

Anesthesiology : May 2011

Cardiology : June 2011

Radiology



Conclusion

The added value of ECAMSQ

- **Tackling medical specialist qualification by ensuring the highest standards of quality of care through harmonised medical competences**
- **European assessment and certification of medical specialists**
- **Ensuring the free movement of healthcare professional**



**“Vision without action is a daydream.
Action without vision is a nightmare.”**

Anonymous

**“Point n’est besoin d’espérer pour
entreprendre
Ni de réussir pour persévérer”**

Guillaume d’Orange



Go raibh maith agaibh **Vielen Dank**

Благодаря **Muito obrigado**

Merci

Dekuji **Gracies**

Dank U

сбасиво

Paldies **Tänas**

Teşekkürler

Hvala

Thank you

Grazzi

Tack

Dakujem **Muchas gracias**

Multamesc

Takk **תודה רבה** **Grazie mille**

ευχαριστώ

Faleminderit

Kiitos

Köszönöm

Ginkuje

Dèkoju



U.E.M.S.

**Union Européenne des Médecins
Spécialistes**

European Union of Medical Specialists

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