Why is CME-CPD important to European medical specialists?

Thank you colleagues!

It is a great honour to introduce the UEMS Compendium. It will certainly be a valuable resource for individual specialists, sections and boards, national UEMS member associations as well as the wider audience including the decision makers in the European Union. At the same time I thank for the opportunity to have served as the President of UEMS since October 2002. It has been a privilege to work with many fine colleagues from all parts of Europe.

I also extend my special thanks to Dr. Len Harvey, Editor-in-Chief of this Compendium, Honorary Member of the UEMS and former Liaison Officer and President as well as Mr. Frédéric Destrebecq, UEMS Director on European Affairs for their hard work in putting together this publication. My sincere thanks to all those who have contributed to this edition. I am sure that this will be an important reference journal on the important subject of CME/CPD within Europe.

Since those times UEMS has grown to be pan-European organisation with 29 full member countries and 5 associated members. Currently UEMS is representing 1.4 million European specialists.

The backbone of UEMS is its European specialist sections and their European Boards. There are 37 sections and boards representing the majority of European specialties. This is the feature that makes UEMS distinct within the European medical organisations.

The objectives of UEMS includes the promotion of quality patient care through the harmonisation and improvement of quality of specialists medical care of the European Union and the encouragement and facilitation of CME for European specialists. UEMS has been very active in the field of CME/CPD. Among the corner stones in this field are Charter on CME of Medical Specialists in the European Union from 1994, Criteria for International Accreditation of CME from 1999, Charter on CPD from 2001 (Basel Declaration) and most recently UEMS document on Promoting Good Medical Care from 2004.

The key message of all these documents is that CME/CPD is a moral and ethical obligation to doctors. The costs are part of normal health care costs and should not be born by the doctors. UEMS strongly opposes mandatory systems of recertification. There is no proof of usefulness of such obligatory measures in doctors’ fitness to practice medicine.
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Medical directives on CME
The first of the medical directives was established in 1975 in order to make possible the exchange of doctors within EU. These directives have laid down the system of mutual recognition and free exchange of medical diplomas. Medical directives have mainly been concerned with basic medical education and postgraduate training. The EU has not demanded any mandatory system of CME/CPD at European level in spite of the fact that many individual member states have created obligatory systems.

The sectoral directives, including the doctors’ directive, are being replaced by general system of recognition. The new directive on professional recognition was accepted by the Council of Ministers on June 6. The UEMS was very active in lobbying for medical specialists during the last 3 years after the Commission gave its first proposal to this directive.

We can be quite satisfied with the end result. All the existing 52 specialties in the directive will remain and new specialties can be created if there are represented in at least 2/5 of member states. In the future the Commission will have to consult the medical profession when developing the directive and training requirements. When it comes to specialized medicine, there is no other organisation better suited for this purpose than UEMS and its sections and boards. In fact UEMS has already offered its help to the European Commission for this purpose.

The new directive does not create any new requirements for CME/CPD. Doctors, like other professionals, have to keep up with the progress of science but there will, at least for the time being, be no recertification system at European level. Therefore it cannot either be a requirement for mobility of doctors within EU.

CME clearing house
In January 2000 UEMS formally established the European Accreditation Council for CME (EACCME). European medical specialists can through this system obtain recognition and credit for attending a duly recognized CME activity anywhere in the EU. During the first five years of existence EACCME has become well-known and has made contacts with several national authorities responsible for CME. EACCME also has a system of mutual recognition with the American Medical Association. This makes it easier for European congresses to attract American participants. Over 400 CME events were accredited through EACCME in 2004 and the number is increasing.

Going back to ancient Greece and thinking of the costs of CME/CPD the truth on this matter was also set already by the great Greek philosopher Aristotle when he stated: "If you think that education is expensive, you should consider ignorance.”

The European Union of Medical Specialists (UEMS) is the oldest medical organisation in Europe and will celebrate its 50th anniversary in 2008. With a current membership of 34 countries, it is the representative organisation of the National Associations of Medical Specialists in the European Union and beyond.

Its structure consists of a Council responsible for and working through, 37 Specialist Sections, each with its own European Board, addressing training in the Specialty and incorporating representatives from academia (Societies, Colleges and Universities). An Executive comprising the President, the Secretary-General, the Liaison Officer, and the Treasurer, is responsible for the routine functioning of the organisation.

UEMS is representative of over 1.6 million specialists in all the different specialties. It also has strong links and relations with European Institutions (Commission and Parliament), the other independent European Medical Organisations (e.g. CPME, PWG, UEMO) and the European Medical & Scientific Societies.

By its agreed documents, UEMS sets standards for high quality healthcare practice that are transmitted to the Authorities and Institutions of the EU and the National Medical Associations stimulating and encouraging them to implement its recommendations.

The UEMS established the extremely important European Accreditation Council for CME (EACCME®) in 2000, which facilitates the exchange of CME credits within the European Union, its associated countries and the United States. These are achieved by virtue of common memoranda of agreement on mutual recognition reached between UEMS, the National Accreditation Authorities and the American Medical Association.