

Minutes from the Primary and Secondary Care Working Groups (PSWG)

EAP Winter Meeting in Brussels, January 29th, 2016

Chairs: Jernej Zavrsnik, Björn Wettergren

1. The agenda was approved.
2. New country delegates were welcomed, representing Greece and Luxembourg
3. The minutes from the spring meeting in Bratislava 2015 was approved.
4. *The MOCHA project* was presented by Stefano del Torso. In each country an agent is appointed responsible to gather specific data. The EAP national delegates were asked to contact and if needed support the appointed country agent in his/her mission.
5. *A shared vision (between EAP- European academy of Pediatrics, EPA- European Pediatric Association and ECPCP- European confederation of primary care pediatricians) for improving community and primary care services for children, adolescents and their families in Europe.* This project was initiated by the three organizations at the EAPS congress in Barcelona, Oct 2014. A working group of Simon Lenton (EPA), Gottfried Huss (ECPCP) and Björn Wettergren (EAP) has worked with a draft to be assigned by the presidents of the three organizations. The working group is now close to finalizing the vision. However a key questions still remains to be solved where ECPCP and EAP is in favor of having the document written in line with the statement of the EC of EAP published in Lancet 2015, which means mentioning paediatricians as those doctors who should preferably take care of children. EPA has not been in favor of this. It was pointed out that the EAP statement corresponds to the statement of the American Academy of Pediatrics published in the American Journal of Paediatrics already in 1992.
6. *Key problems of the paediatric primary care at the European level and in various European countries.*

We discussed the problems faced by fellow pediatricians at national level, and are common to most EAP member states. The following problems were exposed:

- Increasing wishes and interests of various professional groups concerning treatment of children and adolescents. The situation in France

was described, where midwives claim that they are able to take over the responsibility for examining newborns and children up to the age of one year and for advising on vaccinations and on adolescent contraception. It was suggested that EAP should work out minimal standards of training in paediatrics for any professional group participating in the health care of children and adolescents.

- Problem of movements against vaccination.
- Incorrect information that parents receive on the Internet.
- Migration of doctors for economic reasons.
- The problem of dealing with migrant children - colleagues want to learn more about the particular method and approach to children from different cultural backgrounds.

Common problems in pediatrics - prepare a statement on this matter, which would be discussed at the next meeting in Dublin.

7. *Future forms of the Primary and Secondary care Working Groups within EAP.* It has been suggested to merge the two groups under the heading “community paediatrics” or “general paediatrics”. In the following discussion it was concluded to continue with the current organization and instead focus on redefining the identity of primary and secondary care. Jernej and Björn were asked to work on new definitions and present their results at the PSWG in Dublin 2016 for further dialogue.
8. *Primary/community paediatric care as a subspecialty?* Pros and Cons were discussed. A working group was chosen to work further with this issue and present their results at the PSWG in Dublin 2016. The appointed group members were Karin Geitmann, Angel Carrasco Sanz, Manuel Katz, Jernej Zavrsnik, Björn Wettergren and it was suggested to also contact Gabriela Kobatova .
9. *A statement concerning passive smoking.* A draft has been written by Jonas F Ludvigsson current president of the Swedish Paediatric Society. It was concluded that PSWG support the draft and that it should be passed to the EC of EAP for completion.
10. *Can we identify a common set of data monitoring the health of children and adolescents and can such data be coded in a way that they can be identified in different information systems?* This problem was exposed when we tried to collect data on rare diseases, where we encounter

different registers, which were not comparable with each other. This is a question primarily for a variety of computer companies selling EHR programs. The issue will be further discussed by the working group of rare diseases.