

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

EAP Spring Meeting in Dublin, June 3thn, 2016

Number of members attending the meeting: 20

Chairs: Jernej Zavrsnik, Björn Wettergren

1. The agenda was approved.
2. The minutes from the winter meeting in Brussel , Jan 29th, 2016 was approved.
3. New country delegates. No new delegates were attending the meeting.
4. *The Cosy project.* Gottfried Huss, president of ECPCP, reported from the Cosy project dealing with quality indicators applicable bale for monitoring paediatric primary care. The project is now in a final phase where a feasability study in about 10 European countries is planned to be launched.
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 draft had been sent to all delegates prior to the PSWG-meeting in Brussles Jan 29th 2016. When the draft was discussed at the winter meeting it was suggested that the text should be change to be more 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. This has resulted in changing of two paragraphs in the draft and these changes were now presented at the spring meeting. After all participants had read the changes a voting procedure followed and the new draft was approved by the PSWG and the draft was then brought further to the General Assembly of EAP for approval.
6. *Changing on the EAP web-site concerning the current definitions of primary paeditric care and secondary paediatric care was discussed.* In the text nothing concerning first contact care or referrals is mentioned neither concerning the term community paediatrics. It was decided not to

do any changes in the text at this stage, but to bring the question further to the working group dealing with primary/community paediatric care as a subspecialty for consideration.

7. *Primary/community paediatric care as a subspecialty?* At the winter meeting in Brussels a working group was appointed to deal with this question. The members of the group are Angel Carrasco Sanz, Gabriela Kobatova, Jernej Završnik, Karin Geitmann, Manuel Katz and Björn Wettergren. After the winter meeting the group has had mail contact and Jernej and Björn has also sent out a questionnaire to the group, which has been answered by the members. The group is in an analyzing phase and plan to present a conclusion at the winter meeting in Brussels in Dec 2016.
8. *A statement concerning passive smoking.* A draft has been written by Jonas F Ludvigsson, now passed president of the Swedish Paediatric Society. The draft was presented at the PSWG winter meeting in Brussels, January 2016. At the winter meeting it was concluded that PSWG support the draft and that delegates could mail comments concerning the text to Jernej Završnik and that the draft then should be passed to the EC of EAP for completion. Jernej reported that the incoming comments has led to minor changes in the draft and that the presentation in the EC of EAP in June 3th 2016 resulted in that Jernej, Björn Wettergren and Jonas Ludvigsson shall shorten the text to fit a statement from EAP and also consider ways of publication of the document in a journal.
9. *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:

- there is an ongoing process in several EU-countries about the limited availability of pediatricians on primary healthcare level which results in an increasing demand for pediatric care on secondary and tertiary healthcare level. In many countries registered primary care pediatricians are mainly in pre-retirement age, which means that without intervention in a very near future the primary care of children will be entrusted to GPs who do not have sufficient training in pediatric field. We received a letter from the Latvian pediatric Association asking for any kind of support. The Moldovan Paediatric Association has also informed EAP about the

Minister of Health of the Republic of Moldova efforts in increasing access to paediatric services at the primary care level in Moldova, by suggested legislation changes. The changes will ensure access to vital primary care services delivered by pediatricians together with family doctors for children, including the most vulnerable groups as children with chronic and disabled diseases. We wrote a letter of support stating that the changes in legislation are in line with the EAP statement concerning primary care services for children published in Lancet 2015.

-At the PSWG-meeting in Bruxelles we decided on Francis Rubel's suggestion that EAP should elaborate minimal standards of training for any professional group engaged in child and adolescent healthcare. As this is a comprehensive task, we wrote to Francis Rubel that we would really appreciate to work together with him on this issue. We think it is not possible to give an overall description covering different profession. Instead we have to focus on minimal standards for each profession; nurses, midwives, GPs etc, and why not start with nurses and midwives? In Sweden nurses are running child health centers and midwives running maternity health centers or youth clinics, of course backed up by family physicians or paediatricians, gynecologists or obstetricians. The nurses' and the midwives' responsibilities are defined and also their basic training, both in terms of what shall be included in their training and the length of the training. If midwives wish to also include child health care in their responsibilities they must study an extra year to become a district nurse or a child nurse, both of the last professions are qualified to carry out child health care. We asked Francis Rubel about the situation in France and how he thinks we shall proceed with this issue? Not receiving an answer prior to the Dublin meeting the issue is postponed to the next coming winter meeting in Brussels.

- The problem of dealing with migrant children - colleagues want to learn more about the particular method and approach to children from different cultural backgrounds. Our aim is to include this topic in the Ljubljana Meeting 2017.

10. Elections at the upcoming winter meeting in Brussels, Dec, 2016. The second term for Björn Wettergren as chair of Secondary Care ends and a new person must be appointed. Concerning chair of Primary Care the first

term for Jernej Završnik ends and he attends to apply for a second term but it is also open for others to apply for the chair.