## EUROPEAN ACADEMY OF PAEDIATRICS



U.E.M.S. Section of Paediatrics Formerly: CESP (Confederation of European Specialists in Paediatrics)

> Académie Européenne de Pédiatrie Section de Pédiatrie de l' U.E.M.S.

Avenue de la Couronne, 20 B- 1050 Brussels, Belgium



Provisional Agenda

Tertiary Care Group – Plenary Session

Prague

Saturday, 12<sup>th</sup> of May 2012 - 9:00-11:00

**Chair: Jean-Christophe Mercier** 

- 1. Introduction and welcome (Jean-Christophe Mercier)
- 2. Approval of the final agenda

No comments on the proposed agenda.

3. Approval of the minutes of the meeting in Brussels 2011

Minutes of the TC meeting in Brussels 2011 – approved.

Some points to highlight from previous meeting:

Point #2 (Pat Hamilton) – UEMS insists that competencies are the driving force and not necessarily the time elapsed from training.

Quality of training is paramount, which implies continuous assessment during training.

Current shortage of professionals (Green Paper)

Point #4 – UEMS assessment of CPD (ECMEC)

Point #6 – The importance of TC syllabi following common trunk training and the need to revise ageing syllabi, if possible using a common format. This is a tedious process because the template from UEMS has not been received yet.

Point #7 – Paediatric allergology syllabus and paediatric emergency medicine syllabus – have been updated. There is a need for paediatric intensive care medicine syllabus.

Point #9 – Work of the Alliance of Biomedical Research in Europe. How can we help this as a group? Most of specialist societies are adult societies so it's important to maintain the presence of the paediatric societies.

- 4. Report of TCG Chair (Jean-Christophe Mercier)
  - a. Sent a letter regarding revision of ageing tertiary care syllabi (in progress).
  - b. Was able to convince writing the European syllabus in paediatric intensive care medicine.

5. Overlaps between the Common Trunk Syllabus and Tertiary Care Specialties

The border between the common trunk and the subspecialties is a bit uncertain.

6. Upgrading of Tertiary Care Syllabi (in progress)

Several syllabi already revised and updated recently, but will await the final format from UEMS for Chapter 6.

**ESN** – revised in 2007 but will be reviewed accordingly (Dr. Mats Blennow).

**ESP Rheumatology** – revised in 2008 – no plan to revise at this point but will make the necessary changes to fit the new UEMS template (Dr. Traudel Saurenmann).

**ESP Nephrology** – last update in 1999 – will be revised (Prof. Ayfer Gur Guven, Akdeniz U. Tu)

**SIOPE** – will work on the paediatric oncology syllabus (Prof. Ricardo Riccardi)

ESPNIC - going to be written by Eduardo...

Other specialties did not answer – some of them also revised program but will wait for the Chapter 6 template.

Should we invite all presidents of European paediatric specialties to the TCG meeting in Brussels in December? When you have a room full of presidents – there is a different effect.

A suggestion to contact Genetics department – need to check the difference between the biological part and the clinical part – they have a specialty just recently recognized by the UEMS.

- 7. European Syllabus in Paediatric Intensive Care Medicine (in progress)
- 8. Chapter 6 of the UEMS paediatrics (in progress)

Tenore – chapter 6 is the curriculum, not only the syllabi, including the visitation protocols – everything.

The UEMS is making a motion to the European parliament to try to change some of the professional recognition directives which allows individuals with a diploma to travel across borders and practice in any EU country. The union realized that maybe this is "too free" because training is not the same across Europe. So the UEMS has been invited to an open hearing on April 25 to present its case in seeing how this directive can be changed.

There will be a chapter 6 for every discipline, for every specialty.

The UEMS is pushing to seeing whether the European parliament will consider a certifying examination – as a means to assess the quality of training you had.

The accreditation of training institutions – it will be the basic minimal things that each institution should have to guarantee appropriate training - regulated by the country following the EU guidelines. The trainee should be assessed individually and not the training center. Now the work is to develop the template for chapter 6.

This is probably one of the first times that UEMS is doing something positive at the level of the European Union. Finally it's starting to have a voice at the European parliament.

Chapter 6 includes the Common Trunk.

Each doctor has to go back to their subspecialty society and say that they have a syllabus but it has to be slightly revised in order to fit the template of chapter 6.

There's no need to change the syllabus – it is one of the components of Chapter 6.

9. European Board Examination – discussion of concept and possible rules.

There is an initiative to produce a bank of at least 2000 MCQ's to choose from randomly for the examination.

An examination is definitely an end-point which is critical for the UEMS so we must develop tools to assess the level of the trainees.

General paediatrics is recognized all over Europe so it's not difficult to create an exam that will give some more prestige level. In any case the trainees have to be evaluated in their own country first.

But regarding some specialties – there are some countries which don't have any, some have only few, some subspecialties are taken over by the adult subspecialties – so there are different rules in each countries.

There is a need to acknowledge people who are already working in the field and who are not considered subspecialists because there is no such subspecialty in their country..

The language issue shouldn't really be a problem because English has to be a prerequisite and the exams can be done in English.

10. Recognition of paediatric specialists and subspecialists by EAP – discussion of concept and possible rules

## 11. Any other business

A chairman alone vs. a taskforce in TC? (Mercier asking for some more help)

An idea for the group to create a taskforce with 4-5 key members only – to move the process forward more quickly.

The whole group will still have to endorse any final statement, but once the report is circulated - people need to respond quickly and only if they disagree.

No response = consent.

Desperate need to embark the various European Societies of paed specialties on board.

Maybe it's important to improve the communication and relationship between the TCWG and the European subspecialties societies

The good news of this meeting was the promising alliance between various groups representing paediatrics, and the UEMS commitment to defend paediatrics as a united voice.