MODERNISATION OF MINIMUM TRAINING REQUIREMENTS & COMMON TRAINING PRINCIPLES

GROWTH & MOBILITY – MODERNISING THE PROFESSIONAL QUALIFICATIONS DIRECTIVE

EP IMCO COMMITTEE HEARING

BRUSSELS, 25TH APRIL 2012
The UEMS created in 1958
35 European countries
50 medical specialities
• **Subsidiarity** - the organisation & delivery of health care is the responsibility of each Member State

• **Co-ordination** of health issues is challenging at the European level

• **Subsidiarity and medical specialist training:**
  - national rules and regulations prevail
  - not as in education where the EU can have effects
  - directives can be introduced
  - difficulties to implement at the national level
THE PROFESSIONAL QUALIFICATIONS DIRECTIVE

Directive 2005/36/EC

Freedom of establishment
- Automatic Recognition
- General System

Temporary service provision
- Prior declaration

Minimum Training Requirements
Case-by-case basis
Case-by-case basis
MODERNISING TRAINING REQUIREMENTS

GENERAL SURGERY
Minimum length of training course: 5 years

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<th>Country</th>
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<td>Ελλάς</td>
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Ref. Annex 5.1.3 of Directive 2005/36/EC
CONTINUUM OF MEDICAL EDUCATION
LIFELONG LEARNING

Medical Studies
5-6 years

Postgraduate Training
4-6 years

CME-CPD

Certification and Licensing
MODERNISING TRAINING REQUIREMENTS

NEED TO SHIFT OUR APPROACH...

Medical training should be **DURATION**-based but also **COMPETENCE**-based

Introduce the concept of competences

Specialty training ≥ 5 years

In line with ECTS (or other comparable system)

Revise denomination of medical specialties

Facilitate emergence of new specialties (e.g. “particular competences”)

The 7 core competences

1. Communication
2. Problem solving
3. Applying knowledge and science
4. Patient examination
5. Patient management / treatment
6. Using the social and community contexts of health care
7. (Self)-Reflection

* Ref: UEMS, 2011
ALT #1 – A EUROPEAN TRAINING FRAMEWORK FOR DOCTORS? (ART.49A)

- **Knowledge Assessment**
  - MCQs on EACCME/S&B accredited
  - Textbook chapters
  - Guidelines
  - Articles
  - CME Products

- **Practical Skills Assessment**
  - E-logbook
  - E-portfolio
  - DOPS (direct observation of practical skills)

- **Assessment of Professionalism**
  - CPD activities
  - 360° Appraisal

Upon satisfactory completion

Diploma
ALT #1 – A EUROPEAN TRAINING FRAMEWORK FOR DOCTORS? (ART.49A)

Towards a voluntary 29th Regime?

To complement -but not supersede- the existing national regimes
Structured curriculum

Formative and summative assessments

Tools
ASSESSMENT & CERTIFICATION

Structured curriculum including building blocks of theoretical knowledge, i.e. anatomy, physiology. Trainee can gain and demonstrate knowledge through regular formative and summative assessments.

Tools: curriculum, educational content, MCQs.

Structured approach to become proficient

Real life training and assessment

Simulation

Tools
ASSESSMENT & CERTIFICATION

Structured curriculum including building blocks of theoretical knowledge, i.e. anatomy, physiology. Trainee can gain and demonstrate knowledge through regular formative and summative assessments. Tools: curriculum, educational content, MCQs.

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.

Decision making, communication and leadership, etc.

Continuing Medical Education and Professional Development (CME-CPD)

Team training – Peer Review – Reflection

Behaviour & Attitudes

Tools
HOW TO HARMONISE MEDICAL SPECIALISTS QUALIFICATIONS?

• to adopt UEMS harmonised curricula in each specialty

• to ensure that all Member States «translate» them into their national systems

• to ensure that all European Medical Specialists have the same main core competences
ALT #2 – COMMON TRAINING FOR DOCTORS? (ART.49B)

Towards harmonised Aptitude Tests?

25th Anniversary of the European Diploma in Anaesthesiology
Milan, 6-9 June 2009
QUALITY IN MOBILITY

The view of patients’ and citizens’ groups...

JOINT STATEMENT

HEALTH PROFESSIONALS’ EDUCATION MUST NOT BE COMPROMISED IN NAME OF THE SINGLE MARKET
A NEW PROFESSIONAL QUALIFICATIONS DIRECTIVE

Directive 2012/xyz/EC

- Freedom of establishment
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  - Prior declaration

- Case-by-case basis

COMMON TRAINING FRAMEWORKS & TESTS

UPDATED Training Requirements
A NEW PROFESSIONAL QUALIFICATIONS DIRECTIVE

Directive 2012/xyz/EC

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COMMON TRAINING FRAMEWORKS & TESTS
THANK YOU FOR YOUR ATTENTION

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