



UEMO

UNION EUROPÉENNE DES MÉDECINS OMNIPRATICIENS/MÉDECINS DE FAMILLE  
EUROPEAN UNION OF GENERAL PRACTITIONERS/FAMILY PHYSICIANS

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## UEMO BULLETIN N°2 - 2016

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Dear UEMO Members,

As you will see in this issue, the Zika outbreak in Latin America is continuing to cause concern amongst the international community. The EU has set up a new Medical Corps to better respond to any healthcare and humanitarian emergencies. Its Medicines Agency has set up a task force dedicated to tackling the Zika virus by improving research and providing information and guidance. The World Health Organisation, in a recent press statement, has urged European countries to step up their efforts before the virus reaches Europe. The chances of this happening remain low, but the possibility still exists.

At EU level, interesting development have happened at the CJEU, where the compliance of Greek law to EU legislation on doctors' hours was debated. The Dutch EU Presidency has turned focus on obesity by hosting a Conference on Food Improvement in Amsterdam. The importance of CPD has been discussed at the European Commission at a dedicated workshop, which provided opportunities for finding the best practices and a good way forward. More about this and many other interesting topics in this issue.

Yours sincerely,

*Aldo L'UPO*

UEMO President

### EU NEWS

- ❖ Workshop Held to Gather Best Practices in CPD
- ❖ Roadmap for Action on Food Product Improvement Agreed
- ❖ New Safety Features for Falsified Medicines Introduced
- ❖ EU Sets Up Medical Corps to Improve Response to Emergencies
- ❖ EMA's New Task Force to Help Tackle Zika Virus Outbreak
- ❖ CJEU: Greek Law Infringes EU Legislation on Doctors' Working Hours

### UEMO NEWS

- ❖ Special Newsletter Dedicated to ENS4Care from the Active Citizenship Network
- ❖ Conclusions of the JA-HWF Final Conference

### OTHER NEWS

- ❖ WHO Advises European Countries to Take Action to Prevent Spread of Zika Virus
- ❖ World Cancer Day 2016



## EU NEWS

### WORKSHOP HELD TO GATHER BEST PRACTICES IN CPD

13<sup>TH</sup> FEBRUARY 2016

On 11th February, the European Commission hosted a workshop entitled “Ticking the Boxes or Improving Healthcare and Patient Safety? Optimising Continuous Professional Development of Health Professionals in the EU”. Organised following a request from the Working Group on European Workforce for Health, the workshop explored the role of continuous professional development (CPD) in quality of care and patient safety and how CPD should be promoted.

Throughout the workshop, the many different CPD practices currently existing in EU Member States were highlighted. This is an obstacle, but also presents an opportunity for discussions and debates to find out best practices. Several national practices were presented at the workshop.

The workshop was organised in two sessions. The first session focused on the impact of CPD from the research, educational and clinical perspective, whereas the second session presented and discussed different national approaches to organising CPD of health professionals.



In the concluding remarks of the workshop, the need to increase awareness on competence development and CPD was highlighted, especially in relation to patient safety. CPD can help prevent failures and harm in care, and ensure better clinical performance. Exchange of best practices needs to continue, as it can help achieve an in-depth understanding of the relation between CPD and patient safety and help improve healthcare.

#### **Find out more:**

- ❖ Website of the Working Group on European Workforce for Health:  
<http://bit.ly/1U9DvVY>



## ROADMAP FOR ACTION ON FOOD PRODUCT IMPROVEMENT AGREED

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24<sup>TH</sup> FEBRUARY 2016

The Dutch EU Presidency Conference on Food Product Improvement “Making the Healthy Choice Easy” gathered 22 EU Member States, as well as Norway, Switzerland, international businesses and patient organisations to discuss matters related to healthy eating and obesity. The Conference was also attended by European Commissioner for Health and Food Safety Vytenis Andriukaitis. At the end of the Conference, participants agreed and signed the Roadmap for Action on Food Product Improvement.



The Conference was held in Amsterdam on 22nd February 2016 and took place in advance of informal and formal meetings of the European Health Council, which are scheduled to take place later in 2016 and where political decisions will be made.

Participants of the Conference on Food Product Improvement agreed on the need to make food products healthier by

reducing salt, saturated fat and sugar content. Due to the significant number of overweight and obese people in Europe, action needs to be taken rapidly. Cross-border cooperation between all actors involved in the food chain is vital to achieving good results, especially due to the open nature of the EU Single Market, which allows for goods to be traded easily across Member State borders.

Better food products can also contribute to improving the health level of Europeans. Obesity is one of the key causes for the increasing number of people with various cardiovascular diseases and diabetes. Addressing challenges related to food products can help alleviate the discrepancies in health inequalities.

### **Find out more:**

- ❖ Press release from the Dutch Presidency:  
<http://bit.ly/1TwUZLg>
- ❖ Roadmap for Action on Food Product Improvement:  
<http://bit.ly/1QnIBjf>



## NEW SAFETY FEATURES FOR FALSIFIED MEDICINES INTRODUCED

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9<sup>TH</sup> FEBRUARY 2016

Regulation (EU) 2016/161, which outlines rules for the safety features appearing on the packaging of medicinal products for human use, was published in the EU Official Journal on 9th February 2016. Now marketing authorisation holders have three years (until 9th February 2019) to comply with the provisions included in the Regulation and place the safety features on the packaging of medicines.

The Regulation applies to most prescription medicines and certain non-prescription medicines, which are detailed in the Annexes of the Regulation. The Regulation supplements the Directive 2011/62/EU on Falsified Medicines, which was published in 2011 and entered into force in 2013.



Two new safety features are introduced in the Regulation – a unique identifier, which takes the form of a two-dimensional barcode, and an anti-tampering device, which must be placed on the packaging of medicines. The

Regulation contains information regarding the characteristics of the safety features, how medicine authenticity should be verified and by whom. The safety features are intended to protect European citizens from falsified medicines, and, if necessary, help identify falsified medicines from real medicines.

Falsified medicines contain ingredients which are of low quality or in the wrong dosage and could therefore endanger the health of the patient.

### **Find out more:**

- ❖ Press release from EMA:  
<http://bit.ly/1Q8Ggal>
- ❖ Regulation (EU) 2016/161:  
<http://bit.ly/1TMeb9o>



## EU SETS UP MEDICAL CORPS TO IMPROVE RESPONSE TO EMERGENCIES

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17<sup>TH</sup> FEBRUARY 2016

In order to ensure that health personnel teams are ready and can be quickly mobilised to respond to major health emergencies in the future, the European Union has established the European Medical Corps. It was officially unveiled at a high-level event at the European Commission on 15th February 2016. Participation to the event was by invitation only, but included the European Commission for Humanitarian Aid and Crisis Management Christos Stylianides, as well as representatives from EU Member State emergency management authorities, the World Health Organisation, the European Commission, and the European Parliament.

The European Medical Corps will provide a framework for mobilising medical and public health experts and teams for response and preparedness operations inside or outside the EU. It will be composed of emergency medical teams, public health teams, mobile biosafety laboratories, medical evacuation capacities, public health and medical assessment and coordination experts, as well as technical assessment and support teams and logistics support for medical operations. The success of the European Medical Corps will require a more in-depth cross-sectoral cooperation between civil protection, health, humanitarian aid,

development, and research actors at EU, national and regional level.



As of the launch of the European Medical Corps, nine EU Member States (Belgium, Luxembourg, Spain, Germany, Czech Republic, France, the Netherlands, Finland, and Sweden) have offered teams and equipment to the Corps. However, any country participating in the EU Civil Protection Mechanism can make medical teams and assets available to the European Medical Corps.

### **Find out more:**

- ❖ Press release from the European Commission (1): <http://bit.ly/1ofTOnO>
- ❖ Press release from the European Commission (2): <http://bit.ly/2453Ed3>



## EMA'S NEW TASK FORCE TO HELP TACKLE ZIKA VIRUS OUTBREAK

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10<sup>TH</sup> FEBRUARY 2016

As reported in the last UEMO Bulletin, the World Health Organisation (WHO) has pronounced the Zika virus outbreak in Latin America a public health emergency of international concern. In response, the European Medicine's Agency (EMA) has set up a new task force to facilitate information exchange, research and development of medicines or vaccines against the virus, and, more generally, contribute to the global response to the threat of the Zika virus.

The EMA task force will gather experts with specialised knowledge in vaccines, infectious diseases and other relevant expertise. The group will be available to provide guidance and information on any issue related to the spread of the Zika virus, including scientific and regulatory matters.



The establishment of the task force is an important step in tackling the virus. Research on the disease is crucial, as there are currently no vaccines or medicines to protect from or treat the Zika virus infection.

The EMA will continue to work closely with European bodies, including the European Commission and the European Centre for Disease Prevention and Control (ECDC), and with international partners, such as the World Health Organisation, to tackle the Zika virus outbreak. This cooperation model between EMA and other organisations is commonly used during health emergencies.

### **Find out more:**

- ❖ Press release from EMA:  
<http://bit.ly/1Qb8Pnx>



## CJEU: GREEK LAW INFRINGES EU LEGISLATION ON DOCTORS' WORKING HOURS

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5<sup>TH</sup> FEBRUARY 2016

Working hours for doctors and other professions are regulated at EU level by Directive 2003/88/EC, which came into force in 2004. The Directive sets out that: (1) average weekly working time cannot exceed 48 hours, (2) in the course of each 24 hour period, all workers are entitled to a minimum rest period of 11 consecutive hours, (3) in the course of each 7 day period, all workers are entitled to a minimum uninterrupted rest period of 24 hours, in addition to 11 hours' daily rest.

The Court of Justice of the European Union (CJEU) recently received a complaint from the European Commission over the legislation on working hours that is in effect in Greece. The European Commission claims that the Greek legislation does not comply with EU legislation and should be adapted to EU standards.

The European Commission's complaint comes from the request it received from several Greek medical associations, which informed it of the unfair legislation existing in Greece. According to the medical associations, Greek law obliges doctors (qualified doctors or trainees) to work on average 60 to 93 hours per week. Doctors in Greece are obliged to work regularly for up to 32 consecutive hours at their workplace without being entitled to

either the minimum daily or weekly rest periods.



The CJEU, in its judgment, has found that Greek law does not comply with the maximum limit of average weekly working hours, since EU legislation puts the limit at 48 hours. Additionally, since doctors are required to be on-call a number of times a month, this also extends the time spent at their place of work, when they are called in to provide medical service.

### **Find out more:**

- ❖ Press release from the CJEU: <http://bit.ly/1OKUUoX>



## UEMO NEWS

### SPECIAL NEWSLETTER DEDICATED TO ENS4CARE FROM THE ACTIVE CITIZENSHIP NETWORK

29<sup>TH</sup> FEBRUARY 2016

The Active Citizenship Network (ACN), first launched in 2001, is an Italian organisation, aimed at encouraging active participation of citizens in European policy-making. It follows a series of EU policies, in particular, including health, corporate responsibility, education and training at the global level. Just like the UEMO, ACN is also a member of the ENS4Care project.

ACN regularly issues newsletters about recent organisational and policy developments. The newsletter issued at the end of January has been entirely dedicated to the ENS4Care project, presenting the project itself and its main results – the ENS4Care guidelines.

The ENS4Care project culminated in a final event in December 2015. The main aim of the project was to harness the potential of eHealth systems to make effective guidance available in accessible formats to health professionals and social workers. ENS4Care has produced guidelines in five core areas:

prevention, clinical practice, advanced roles, integrated care, and nurse ePrescribing. The guidelines have been spread across Europe and have already been taken on board by various stakeholders for further implementation in their countries.



#### **Find out more:**

- ❖ ACN Newsletter dedicated to ENS4Care:  
<http://bit.ly/1LSEweg>
- ❖ ENS4Care Guidelines:  
<http://www.ens4care.eu/guidelines/>
- ❖ ENS4Care website:  
<http://www.ens4care.eu/>





## CONCLUSION OF THE JA-HWF FINAL CONFERENCE

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22<sup>ND</sup> FEBRUARY 2016

The final conference of the Joint Action on Health Workforce Planning and Forecasting (JA-HWF) took place on 18th and 19th February in Varna, Bulgaria. The main aim of the JA-HWF has been to create a platform for collaboration and exchange between European Member States to better prepare for the future of the health workforce. As such, also discussions during the final conference focused on topics related to the challenges facing the European health workforce and how they could be best addressed.

The conference had set out three objectives – providing food for thought for policy makers; contributing to the integration of policies; and providing networking opportunities for the conference participants. At the closure of the event, it was agreed that the conference excelled on all these points.



The main conclusions of the two-day conference were that, due to the changing demography in Europe, there is a clear need for age-centred healthcare and integrated care. Moreover, the links between EU policies relevant for the European demographic and the health workforce should be strengthened and interlinked to achieve better results.

This was the last conference held under the auspices of the JA-HWF. The Joint Action will be formally closed by a Closure Event, Plenary Assembly and Stakeholder Forum on 3rd and 4th May 2016 in Belgium. A more precise location will be announced closer to the time of the event.

### **Find out more:**

- ❖ Press release from the JA-HWF: <http://bit.ly/1oLXT3i>
- ❖ JA-HWF website: <http://healthworkforce.eu/>



## OTHER NEWS

### WHO ADVISES EUROPEAN COUNTRIES TO TAKE ACTION TO PREVENT SPREAD OF ZIKA VIRUS

11<sup>TH</sup> FEBRUARY 2015

In a recent press release, the World Health Organisation (WHO) urges European countries to take preventive measures, in order to better respond to the Zika vaccine. The Zika virus is extremely dangerous, as there are currently no vaccines or treatments for the disease. Since the mosquito species that can transmit the virus are geographically widespread, there have been well-grounded concerns that the Zika virus could easily spread further than Latin America, where the first cases were reported. The onset of spring and summer, when mosquitos spreading the Zika virus become active, further raise concerns about the spread of the Zika virus.

According to the WHO, European countries cannot wait and must act now, taking precautionary measures and preparing themselves in order to reduce the risk to their populations. The Zika virus needs to be tackled at the source and countries cannot wait to see whether or not it will reach Europe.

In particular, the WHO recommends that European countries enact measures to improve control of the mosquitoes, better inform people, especially people at risk,

as well as to enhance surveillance and ensure laboratory detection of the Zika virus. Research to understand the Zika virus and develop diagnostic tests and vaccines also needs to be improved.



The WHO resources will remain at the disposal of European countries, especially in terms of providing guidance on control strategies, facilitating shipment of samples for testing, and advising on risk communication.

#### **Find out more:**

- ❖ Press release from the WHO: <http://bit.ly/1SN6LSZ>



## WORLD CANCER DAY 2016

4<sup>TH</sup> FEBRUARY 2016

World Cancer Day is marked annually on 4th February. It is a day that highlights the burden that cancer puts on the worldwide population and, by drawing attention, encourages health organisations and stakeholders at national and international level to draw up action maps that focus on cancer prevention. World Cancer Day was founded by the Union for International Cancer Control (UICC).



The 2016 edition of World Cancer Day took place under the tagline “We can. I can.” and explored how everyone, either collectively or individually, can participate in reducing the global burden of cancer. For example, individuals can make better and healthier lifestyle choices, ask and offer support, and speak out about cancer. Communities and collectives can jointly take action to prevent cancer, challenge perceptions about cancer, and contribute to improving access to cancer care.

World Cancer Day is also marked by the EU. Over the years, the EU has

undertaken a series of actions to raise awareness and help prevent cancer. A series of factsheets on different types of cancer and their prevalence in EU Member States has been published. The European Commission offers support for Member States to develop screening programmes for breast cancer and evidence-based quality requirements. It has also launched the Initiative on Breast Cancer, the aim of which is to develop breast cancer guidelines and a European quality assurance scheme. These are examples of only some of the actions taken at EU level to address cancer, improve prevention, and achieve the EU target of reducing new cancer cases by 15% by 2020.

Currently, nearly 1.3 million deaths annually across the EU are attributed to cancer.

### **Find out more:**

- ❖ World Cancer Day website: <http://www.worldcancerday.org/>
- ❖ Information about EU efforts on cancer prevention: <http://bit.ly/1oVOFC8>

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