

ISSUE

# 13

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## Message from the CPME President:



Dear colleagues,

Welcome to the 13<sup>th</sup> edition of the CPME quarterly newsletter with latest EU health policy developments and CPME news.

This edition highlights three policy developments: the newly adopted CPME responses to the consultations on mobile health and the extent of their use within healthcare as well as on the European Professional Card and the outcomes of the WHO Surgical Safety Checklist webinar.

A special emphasis is placed on the European elections and the projected outcomes within the European Parliament. European doctors look forward to the first session of the new legislature, the formation of the parliamentary committees and the steps ahead for the nomination of the Commission President as well as College of Commissioners.

Enjoy our latest news and spend a sunny, enjoyable summer.

Yours sincerely,  
Dr Katrín Fjeldsted



## MHEALTH: CPME POSITION HIGHLIGHTS NECESSITIES TO ENSURE PATIENT SAFETY

On 5 June, CPME issued the 'CPME response to the public consultation of the European Commission Green Paper on mHealth – COM(2014)219 final' ([CPME 2014/052 FINAL](#)).

On 10 April, the European Commission published a Green Paper on mobile Health and opened accordingly a public consultation to gather the views of stakeholders on this matter. Overall, the paper acknowledges that mHealth applications can be valuable additional tools to the provision of care, notably in better empowering patients, facilitating contacts between physicians and patients living in remote areas, and improving the quality of the health service delivery, as well as its efficiency. However, for this to be possible and in order to ensure patient safety, mHealth applications should comply with high quality and reliability criteria. As such, approval and certification mechanisms of such applications should be set up and led by healthcare professionals. Other issues addressed in the paper relate to data protection provisions, remaining legal uncertainties, as well as the use of data in electronic health records and in research.

For further information, please contact: [Constance Colin](#).

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## EUROPEAN ELECTIONS: OUTCOMES AND FUTURE OF HEALTHCARE POLICY

### Turnout

**43.09%**

Estimation 25/05/2014 23:58 CEST



Every political group must be made up of 25 MEPs from at least 7 Member States.

Without prejudice to the composition of the EP at the opening session on 1 July 2014

Source: TNS/Scytl in cooperation with the European Parliament

 Source: European Parliament. <http://www.results-elections2014.eu/en/election-results-2014.html>

The election of the President of the European Commission is the result of a shared agreement between the Parliament and the Council. This agreement, according to the new rules established by the Treaty of Lisbon, has to take into account the outcomes of the European elections. Following the new election system, the main European groups nominated their own candidates for the position of President of the Commission. The European People's Party candidate, Jean-Claude Juncker, the former Luxembourg Premier was confirmed on Friday, 27 June as the next Commission President. Only the United Kingdom and Hungary voted against Mr Juncker. Juncker is currently considered as a 'liason man' who favours more, not less, integration between European states.

### HEALTHCARE POLICY

During the past 5 years, the Parliament worked hard to improve and clarify the rights of patients who seek cross border treatment. The items discussed and approved were manifold. MEPs for instance passed legislation on medicines, to improve the level of safety and ensure valuable alert mechanisms ([Directive 2011/62/EU](#) on falsified medicines). Moreover, the Parliament approved an update of cross-border healthcare rules that strengthen the rights of patients to be treated in another EU country ([Directive 2011/24/EU](#) on the application of patients' rights in cross-border healthcare). Clearer rules intended to improve clinical trials of new medicines were also adopted during the past legislature. The [new law](#) will clarify the position and tasks of ethics committees and will provide details of how to obtain informed consent from patients, with the aim of encouraging research while at the same time protecting patients' safety. MEPs also adopted new legislation to control tobacco marketing.

⇒ *The new Parliament will now follow the national implementation of the [Tobacco Directive](#), with the aim of deterring young people from becoming smokers. The new Parliament will also continue to ensure the safety of medical devices and implants. This important task follows the scandals concerning defective breast implants and "metal on metal" hip devices.*

The Standing Committee of European Doctors was active in the past legislature on the main health policy dossiers and will keep working to always ensure the best possible quality of health and access to healthcare for everyone. With the occasion of the European elections, the CPME launched a [Manifesto](#) reporting main recommendations on the right to quality of care and patient safety, access to health, healthcare budget and professional autonomy of physicians. It was disseminated to MEP candidates, key stakeholders and policy-makers in the health sector. The CPME expressly asked to support the document and to have it included in the next European working agenda. In particular MEP Dr Gianni Pittella (S&D, Italy), Acting President of the European Parliament, signed the Manifesto and declared that he will support the CPME action points within his future political and EU institutional activities. Moreover, he already expressed his strong willingness for further meetings with the CPME to continue his commitment and concretely support public health goals.

For further information, please contact:

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## IMPLEMENTING THE PROFESSIONAL QUALIFICATIONS DIRECTIVE – FOCUS ON THE EUROPEAN PROFESSIONAL CARD

The implementation of the Professional Qualifications Directive 2005/36/EC as amended by Directive 2013/55/EU is underway. One of the focus points of current activity is the implementation of the 'European Professional Card' (EPC). Following a preliminary consultation and meetings of an expert focus group, where CPME participated, the European Commission launched a second consultation in April 2014. This consultation seeks to establish national practices and experiences with the processing of applications for recognition of qualifications. Building on the [CPME position on the EPC](#), CPME submitted a [response to the EPC consultation](#) in June 2014. The response reaffirms the need to ensure that the operational details of the EPC process are robust and appropriate in order not to endanger patient safety. It also calls for a close collaboration with the medical profession and its competent authorities during the implementation process.

The European Commission is evaluating the consultation responses and will identify which professions are to be included in the first phase of the roll-out of the EPC. This would be taken forward in an implementing act, a draft of which is expected to be published in September 2014.

*For further information, please contact:*

[Sarada Das](#).

## EMA AMENDS POLICY ON PUBLICATION OF CLINICAL DATA FOR MEDICINAL PRODUCTS



On 12 June the Management Board of the European Medicines Agency (EMA) agreed on the policy on the publication of clinical trial data, together with additional amendments. The amendments will give the possibility to download, save and print the trial data for academic and non-commercial research purposes. This is a direct response to critics that had been raised prior to the meeting.

Indeed, several stakeholders had expressed concerns about the direction taken by the EMA, notably with regard to a restriction of access to clinical trial data through a view-on-screen-only mechanism that would not have allowed researchers to download, save or print the data. CPME had addressed a letter to the EMA supporting these concerns and highlighting the importance for medical research to benefit from a real proactive publication of clinical trial data. It is crucial that clinical trial data are indeed made available to the public and to researchers in particular, in order to foster medical research, for further information please consult: <http://www.cpme.eu/policies/>.

The final adoption by the EMA Management Board of the policy should be done through written procedure by mid-July 2014, with an entry into force of the policy on 1st October 2014. The EMA press release is available [here](#).

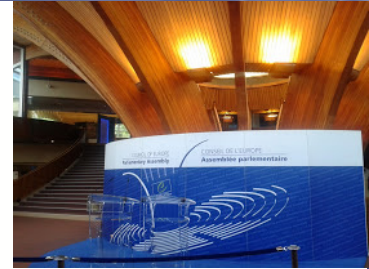
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## Council of Europe:

### ELECTIONS AND HEALTH POLICY DIRECTIONS DURING THE INGO ASSEMBLY MEETINGS, 24-26 JUNE 2014



On Thursday, 25 June the Council of Europe Assembly of INGOs convened in Strasbourg to elect the Chairs and Vice-Chairs of the main committees: 'Democracy, Social Cohesion and Global Challenges', 'Education and Culture', 'Human Rights'.

The election outcomes are favorable for health as a horizontal, health in all policy approach is envisaged in the future work of the committees. Dr Thierry Mathieu (France), Secretary General of the International Association for Research in Hospital Hygiene (IARHH) was elected Vice-Chair of the Committee for Democracy, Social Cohesion and Global Challenges and he aims to put health and human rights at the forefront of the existing discussions and initiatives. Ms Anne-Marie Chavanon (France), Managing Director of the International Federation for Housing and Planning (IFHP) was re-elected as Chair of the 'Democracy, Social Cohesion and Global Challenges' Committee and Mr Karl Donert (UK), President of the European Association of Geographers as Vice-Chair.

On Wednesday, 26 June the same committee adopted a position concerning climate change. CPME tabled several amendments in line with the CPME policy on 'Global Warming and Health' ([CPME 2009/021 FINAL](#)). Mr Serge Peltier, Former Minister of the Environment of France was invited as guest speaker.

The exposition area in front of the Council of Europe Parliamentary Assembly featured the European Pharmacopoeia, show-casing the 37 European countries and the European Union that have signed the [Convention on the Elaboration of a European Pharmacopoeia](#). The exposition celebrated the 50 year anniversary of the Convention since the adoption by the Council of Europe in 1964.

The European Directorate for the Quality of Medicines and Healthcare (EDQM) traces its origins and statutes to the Convention and aims to achieve harmonisation of the quality of medicines.

EDQM focuses on the following healthcare activities: blood transfusion, organ transplantation, pharmaceuticals and pharmaceutical care, counterfeit medicines, consumer health protection.

*For further information, please contact:*

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## MEDICAL STUDENTS' COUNCIL ADDRESSES POLICIES CONCERNING DOCTORS' MOBILITY

The 9<sup>th</sup> edition of the European Medical Students' Council (EMSCouncil) organised by the European Medical Students' Association (EMSA) was held in Samsun, Turkey over a 4-day period starting March 5<sup>th</sup> 2014.

Medical student representatives from over 7 European countries, discussed questions such as these: 'Should a doctor who has been funded through medical education by the national system be restricted from transferring the skills and knowledge gained to another country?', 'How does this impact the public healthcare system of different countries in Europe?' An additional need to debate and consider the healthcare delivery and professional implications of the political differences between EU vs. non-EU countries in Europe, was identified.

The intensive program included putting together a policy making toolbox- highlighting the role of medical students in this crucial nonclinical aspect of healthcare delivery; case studies; expert training on health policy and advocacy, as well as drafting a policy paper.

In the country presentations, participants shared a general overview of the current concerns with regards to the healthcare system in their country.

The event rounded off with the election of a new council president- Shashitu Hitzerd, from The Netherlands.

The overall feedback was positive and full of anticipation for what is in store come 2015!

\*\*\*EMSA has an updated website- <http://www.emsa-europe.eu/> \*\*\*Save the Dates- The EMSA General Assembly will take place between 9 and 13 September 2014 in Plovdiv, Bulgaria.



[Ibukun Adepoju](#)

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## WHO SURGICAL SAFETY CHECKLIST

27 June 2014

*Webinar of the Patient Safety and Quality of Care Joint Action*

On Friday, 27 June, CPME organised a webinar on the WHO Surgical Safety Checklist in the framework of the Joint Action for Patient Safety and Quality of Care.

The webinar session provided a comprehensive and dynamic discussion about the implementation of the surgical safety checklist in order to increase safe clinical practice and ensure overall patient safety during surgery.

Please find below a link to all the speakers' contributions and presentations:

⇒ [Presentations](#)

A recording of the webinar is available here:

⇒ [Part 1](#)

⇒ [Part 2](#)

The webinar was moderated by CPME President, Dr Katrín Fjeldsted and it was opened by CPME Secretary General, Ms Birgit Beger. The webinar featured the following speakers: Dr Iain Yardley, WHO Consultant on Surgical Safety, Prof. Dr Habil. Juozas Pundzius, Chief Specialist of the Republic of Lithuania and Ministerial Advisor in the Area of Surgery, Mrs Josefa González Pastrana, Castilla y León Regional Health Services, Coordinator of the Implementation of the Surgical Checklist at Regional Level, Prof. Dr Barthold Vonen, Chief Medical Officer and Assistant CEO Nordlandssykehuset Trust Bodø, Mrs Kristina Mickeviciute, European Medical Students' Association (EMSA) Permanent Officer to CPME and Mr Pascal Garel, Chief Executive, European Hospital and Healthcare Federation. The webinar included 33 participants from 6 EU member states, Spain, Croatia, Lithuania, France, Italy, Belgium and the European Medical Students' Association.

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## MOMENTUM PROJECT: 18 CRITICAL FACTORS FOR THE SUCCESSFUL DEPLOYMENT OF TELEMEDICINE INTO ROUTINE CARE

On 14 May 2014, the Momentum project published a list of 18 factors that are critical to deploying telemedicine successfully into routine health care. Distilled from an analysis of telemedicine practices by experts from across Europe, these factors cover overall context (ie, cultural readiness, financing), management aspects (the need for leadership, for a business plan, for change management), legal and security issues (including liability or the regulatory environment for data management), and technology considerations (including interoperability). They are collected in a short document with annotations available at <http://telemedicine-momentum.eu/18-factors>.

The Momentum project convenes telemedicine experts and European stakeholder organisations, among which CPME. The final outcome of the project will be a blueprint for telemedicine deployment which will be published in December 2014. For more information, please go to [www.telemedicine-momentum.eu](http://www.telemedicine-momentum.eu).

*For further information, please contact:*

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Federation  
of Veterinarians  
of Europe



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## CONCLUSIONS FROM THE FVE- CPME 'ONE HEALTH' CONFERENCE ENSURING HEALTH & SUSTAINABILITY IN EUROPE: DOCTORS AND VETERINARIANS EMPHASIZE “PREVENTION IS BETTER THAN CURE”



On the occasion of 2014 World Health Day European doctors and veterinarians met in Brussels on 7th April for an open public dialogue on 'One Health'.

The concept of ONE HEALTH recognizes that the health of humans and animals are strongly interconnected. It aims to address risks that occur at the human-animal-ecosystem interface through a holistic approach. The success of One Health depends on the good collaboration between the different professions and stakeholders.

“The slogan “Prevention is better than cure” can be equally applied to both the medical and veterinary sector. Prevention has comparable positive effects, both in terms of health and welfare of people and animals” was the main conclusion and important take-home message from the conference. Doctors and veterinarians agreed that a more holistic One Health approach is a key factor for the financial sustainability of health care systems and animal health management.

The event was supported by the Greek Presidency of the Council of the European Union and the European Commission. Several speakers (photo) presented different aspects of One Health. More than 120 participants from all over the EU actively engaged in the discussion.

The One Health conference conclusions are available on-line along with all the [presentations](#) from the event.

*For further information, please contact:*

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## PROMOTING FAIR AND ETHICAL MEDICAL TRADE ACROSS EUROPE - A TALE OF THE UK NATIONAL HEALTH SERVICE

Every year trillions of dollars are spent on medical supplies globally.

More often than not, little consideration is given to the conditions in which they are made, nor to the impact on the people who make them. Research conducted by the British Medical Association (BMA) Medical Fair and Ethical Trade Group has revealed unethical working conditions in the manufacture of a number of medical products bound for the NHS and across Europe more largely. This is not an anomaly. Abuses of labour standards have been uncovered in the manufacture of many medical supplies routinely used in hospitals including latex gloves from Malaysia, surgical masks from Mexico, and surgical instruments from Pakistan. With a growing body of evidence to support our findings, hotspots within global supply chains have been exposed where basic employment rights of people are being denied.

### **The tale of the UK National Health Service**

The UK NHS is supplied each year with an estimated 10 million surgical instruments manufactured in Sialkot – a major exporting hub in northern Pakistan. Harrowing figures show some 50,000 manual labourers, within this industry, are paid less than USD 1 per day having worked 12 hours within hazardous conditions, coupled with little job security. Poor remuneration in these settings give rise to proliferation of child labour, and figures estimate several thousand children- as young as seven – are employed full-time within the industry. The BMA has been campaigning for ethical purchasing in healthcare since 2007. This has successfully led to the UK Government support for ethical procurement in the public sector and the publication of a number of guidance and training resources for procurement staff. Similar policies are in place in other European countries, including Sweden, Norway, and Denmark. But there is still some way to go.

### **'Force in numbers'- learning from other European organisations**

National organisations from Europe who are involved in ethical procurement are coming together, forming a pan European Working Group on Ethical Public Procurement. This group, of which the BMA are founding members, are committed to developing collaborative tools to aide ethical procurement activities throughout Europe. These resources are relevant to all healthcare procurement systems and accessible anywhere in the world.

### **Changing tides**

Member states welcomed the 2014 EU Procurement Directive which came into force in April. The new Directive broadens the parameters for public sector bodies to buy socially responsible goods, giving confidence to those who want to make procurement choices that benefit producers in developing countries. With the EU process now complete, member states have two years to implement them in national legislation.

### **Practicing fair medical trade**

The global healthcare community should not condone unethical trade practices that are detrimental to global health. The voice of healthcare professionals is a very powerful tool in integrating considerations of labour standards into purchasing decisions within healthcare organisations. We urge doctors to encourage the uptake of ethical consumerism when making purchasing decisions at regional and national levels, so to become positive examples of ethical procurement.

Developing sustainable solutions, in partnership with manufacturers, is key. A clear signal must be sent that is it not business as usual- that healthcare organisations around the world want the goods it uses to not be at the expense of the health of workers in the global community.

You can learn more about the BMA Fair Medical Trade campaign, and download our free guidance and resources at [www.bma.org.uk/fairmedtrade](http://www.bma.org.uk/fairmedtrade).

Arthy Santhakumar, MSc, BSc (Hons) – Senior Research Officer, British Medical Association

On 29 – 30 April 2014, Dr Rikard Lövström (Sweden) attended the Momentum PSC meeting.

On 9 – 10 May 2014, CPME President Dr Katrín Fjeldsted and Secretary General Mrs Birgit Beger attended E.A.N.A. meeting in Luxembourg.

On 15 May 2014, Dr Bernard Maillet attended the Momentum workshop in Athens.

On 18 May 2014 CPME President Dr Katrín Fjeldsted chaired the session “Contrasting regulatory models to promote best practices in regulatory governance and performance” at the World Health professions regulation conference 2014, in Geneva. For further details on the meeting, please go [here](#) .

On 19 May 2014 CPME President Dr Katrín Fjeldsted attended a luncheon on “healthcare in danger” organised by the World Health Professions Alliance (WHPA), in Geneva, to which the Vice-President of the International Committee of the Red Cross participated as a keynote speaker.

On 27 May 2014, Dr Jacques de Haller attended the EUnetHTA Stakeholder Forum teleconference meeting.

On 3 June 2014, Dr Erszébet Podmaniczky participated in the European Medicines Agency Patients’ and Consumers’ Working Party and Healthcare Professionals Working Party joint meeting, in London. For further details on the meeting, please click [here](#).

On 12 June 2014, Prof. Dr Wolf-Dieter Ludwig attended the EMA Management Board meeting, in London. For further details on the meeting, please click [here](#).

On 12 – 14 June 2014, Dr Konstany Radziwiłł attended the eHealth Week in Athens. For further details on the eHealth week, please click [here](#).

On 12 – 13 June 2014, CPME attended the European Council of Medical Orders – CEOM Plenary meeting which took place in Bari (Italy).

On 16 – 18 June 2014, CPME Secretary General Birgit Beger attended the meeting of the Joint Action on Health Workforce Planning and Forecasting in Lisbon.

On 17 June 2014, Dr Konstany Radziwiłł attended the eHealth Stakeholder Group meeting in Brussels.

On 17 June 2014, CPME attended the meeting “Promoting public health priorities with the new MEP: planned actions by the different groups and possible coordination” which took place at the WHO office in Brussels.

On 18 June 2014, CPME attended the Conference “Frailty in old age identifying priorities for an EU policy” organised by the European Commission. For the conference programme, please go [here](#).

On 20 June 2014, CPME, as leader of a consortium comprising the Council of European Dentists (CED), the European Federation of Nurses Associations (EFN), the European Midwives Association (EMA), the European Public Health Alliance (EPHA), and the Pharmaceutical Group of the European Union (PGEU), co-hosted a technical workshop on continuous professional development and lifelong-learning for health professionals in Europe. The workshop took place in the context of a study on the same topic.

On 22 - 25 June 2014, CPME President Dr Katrín Fjeldsted attended the British Medical Association Annual Representative Meeting which took place in Harrogate (UK).

On 28 – 30 June 2014, CPME President Dr Katrín Fjeldsted addressed the German Medical Assembly in



## CPME Meetings 2014-2015 SAVE THE DATES!

Budapest  
14-15 November

Reykjavik  
22-23 May 2015

Brussels  
30-31 October 2015





## EU Institutional News

5 June 2014

The Justice and Home Affairs Council reached a partial general approach on specific issues of the draft regulation setting out a general EU framework for data protection. Further information is available [here](#).

17-18 June 2014

The Committee on National Alcohol Policy and Action organised the 14th meeting in Luxembourg. The meeting has been chaired by the Head of the Health Determinants Unit, Directorate General for Health and Consumers. Indicative date of the next CNAPA meeting is 7-8 October 2014. For more information, please click [here](#).

20 June 2014

During the EPSCO Council, the Council took note of a presidency progress report on two draft Regulations concerning medical devices and in vitro medical devices, and provided guidance for future work on these files. Ministers adopted conclusions on economic crisis and healthcare; and nutrition and physical activity. The press release is available [here](#).

20 June 2014

A Commission Staff Working Document on the Implementation of the Joint Plan for Immediate Actions under the existing Medical Devices legislation was discussed in the EPSCO Council. It contains a detailed analysis of the implementation of the plan such as a Commission Recommendation on the use of a specific traceability system for medical devices, ongoing discussions on improving product registers or discussions on incident reporting from medical practitioners and patients. The document is accessible [here](#).

23 June 2014

First conference on European Reference Networks, representing highly specialised healthcare providers, was organised by the European Commission. The main aims of the meeting were to provide affordable, high-quality and cost-effective healthcare to patients with conditions requiring a particular concentration of resources or expertise, and to improve these patients' access to the best possible expertise and care available in the EU for their condition. For further details, please click [here](#).

1-3 July 2014

First Plenary in Strasbourg for the newly-elected European parliament. On this occasion, the President of the Parliament will be elected, together with the leaders of each political group and any other organisational functions of the Assembly. During this first session, the EU Presidency, headed by Italy for the second half of 2014, will showcase its work program. To conclude the work of the plenary, the plenary will form also the 20 parliamentary committees.

14-17 July 2014

During the Second Plenary, the European Parliament will vote the candidate for the Presidency of the European Commission, already indicated from the European Council on 26 – 27 June.



## Editorial Board

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*For feedback, further information, questions or to express an interest to contribute to future editions, please contact:*

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## CPME Mission Statement

*The Standing Committee of European Doctors (CPME) represents national medical associations across Europe. We are committed to contributing the medical profession's point of view to EU and European policy-making through pro-active cooperation on a wide range of health and healthcare related issues.*

- We believe the best possible quality of health and access to healthcare should be a reality for everyone. To achieve this, CPME promotes the highest level of medical training and practice, the safe mobility of physicians and patients, lawful and supportive working conditions for physicians and the provision of evidence-based, ethical and equitable healthcare services. We offer support to those working towards these objectives whenever needed.*
- We see the patient-doctor relationship as fundamental in achieving these objectives and are committed to ensuring its trust and confidentiality are protected while the relationship evolves with healthcare systems. Patient safety and quality of care are central to our policies.*
- We strongly advocate a 'health in all policies' approach to encourage cross-sectoral awareness for and action on the determinants of health, to prevent disease and promote good health across society.*

*CPME's policies are shaped through the expertise provided by our membership of national medical associations, representing physicians across all medical specialties all over Europe and creating a dialogue between the national and European dimensions of health and healthcare.*



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