



EUROPEAN UNION OF GENERAL PRACTITIONERS

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UEMO 2003/005

Meeting between Mr Jonathon Stoodley, Head of Regulated Professions Unit, DG Internal Market, European Commission, Brussels and Dr Christina Fabian, UEMO President, and Dr Peter Mortensen, UEMO Vice-President, on 14 February 2003

After the UEMO General Assembly in October 2002, Mr Stoodley was informed about the UEMO statement on General Practice/Family Medicine as a medical specialty (UEMO 2002/160).

After some exchanges of emails and letters, we decided to meet, as Mr Stoodley is very interested in being informed about the UEMO strategy for a specialty in GP/FM. Also, from the UEMO side we are very interested to have his opinion on how to implement our policy. Mr Pochmarski and Ms Ana Rodriquez-Perez also participated in the meeting, both of them we have met before.

I started by talking about why we need a specialty in GP/FM. Prior to the meeting a letter had been sent to Mr Stoodley, explaining the necessity of a specialty in GP/FM. He knows that our goal to reach a specialty in Title III is a goal on long-term. We do not expect the possibility to become title III specialists in the current proposal for a directive on professional recognition. We have presented our critical points of view in the common CPME/AO Reaction paper.

The current proposal for a directive, has so far got a lot of criticism from different bodies in the EU. Taking into account that criticism and the expected view of the European Parliament, it is today difficult to say what will happen.

The main subjects being discussed at the meeting were: The Specialty, The Content and The Duration.

UEMO – PRESIDENCY

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The Specialty

We have decided in the UEMO to consider all General practitioners as specialists, equal to other specialists. Our goal is to have a title III specialty of at least 5 years duration. Once we have achieved this, Title IV is superfluous. Transitional rules will guarantee that specialists currently with a training period in GP/FM with less than five years will be considered fully qualified specialists in accordance with the new rules.

The Content and the Duration

The content is of course the most important in any specialty. It will be the most important task for the UEMO to present a content that will in the end have a general practitioner/family doctor of highest competence and quality, and clearly show that it will take at least 5 years. We have already experience of this necessity in some countries. The UEMO has to present a detailed document of the content of our specialty, to be presented and implemented nationally, and a not too detailed document to be presented to the Commission, because of their more technical approach in this work. The Commission also considers that there are short term financial reasons to keep the number of years of training at low. On longer term, however, an extended period of training leads to positive health economic effects.

Mr Stoodley discussed a possible change of wording of recital 13. It is possible that the Commission will accept the situation as it stands today with Title IV- GPs and the existing specialists in family medicine. They still, however, need to reflect on this. The free movement of doctors is of course the greatest interest for the Commission. And this is also one reason why we have the UEMO.

But now we are adding a Quality aspect of general practice and that is why we want a specialty, most probably the broadest specialty of all, with a content needing at least 5 years to be accomplished. Mr Stoodley is quite aware of the importance of quality in medicine for patient security etc., and he agrees that this is an important argument especially when arguing for our sake nationally. He also agrees that national lobbying will be most important for reaching our goals for the UEMO. The Quality-aspect is of course also most important concerning the EU-enlargement process.

He told us they are working on how to cooperate with the professional organisations in the future (former ACMT), he had no new information, just mentioned how important it is.

We suggested to have a new Consensus conference on specific Training in General Practice, like the one the UEMO had together with the Commission in Copenhagen 1994. He did not seem too interested in this, but will think about it.

Furthermore Mr Stoodley mentioned that Mr Zappala had suggested a Forum concerning the Proposal of the directive professional recognition, however, the Commission seems to be rather uninterested in this too.

Our meeting lasted 1 ½ hours, and Mr Stoodley and his collaborators are very interested in having a close contact with the UEMO. The next step will be for the UEMO to wait for Mr Stoodley's further comments on our discussion and especially any change in recital 13 to be considered by the UEMO.

Christina Fabian

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