

# Joint Statement of the Thematic network on medical training and professional development for patient safety

EU Health Policy Platform

## Preamble

Education, training and continuous professional development are central to healthcare delivery. Patient safety is in the domain of all healthcare and related professionals and affects all aspects of their education and practice. No policy, technological innovation or financial investment will significantly improve quality of care and patient safety without qualified healthcare professionals and other professionals involved in healthcare delivery who implement policies, use the latest devices or maximise the impact of resources.

The European Society of Radiology (ESR), Europa Uomo, European Association of Urology (EAU), European Cancer Patient Coalition (ECPC), European Coordination Committee of the Radiological, Electromedical and Healthcare IT Industry (COCIR), European Federation of Organisations for Medical Physics (EFOMP), European Federation of Radiographer Societies (EFRS), European Forum for Primary Care (EFPC), European Patients' Forum (EPF), European Respiratory Society (ERS), European Society of Breast Cancer Specialists (EUSOMA), European Union of Medical Specialists-Radiology Section (UEMS Radiology Section), International Network for Health Workforce Education (INHWE), and Pelvic Pain Support Network (PPSN) therefore call on the EU's institutions to recognise the central role of medical and health professional education and training in healthcare (hereafter "medical education") and implement measures for more coordinated, sustainable and targeted action to ensure European patients benefit from the best qualified health workforce possible.

## KEY MESSAGES

- *The European Commission should develop a policy for maximising the educational benefits of IT-based clinical decision support systems, e-learning tools and IT-supported programmes and guarantee integration of technological developments in medical education.*
- *Patient safety and quality of care should be embedded as cross-cutting issues throughout the duration of medical education and continuous professional development (CPD).*
- *Interpersonal, intercultural and communication skills should be embedded, and the principle and practice of patient empowerment integrated in medical education to meet the latest standards for managing patients' medical conditions.*
- *The European Commission should take initiatives to further harmonise medical curricula, establish mandatory standards for CME and CPD systems, and continue to streamline the recognition of qualifications in view of the next revision of the Professional Qualifications Directive.*
- *Issuing recommendations, facilitating the exchange of information and enhancing implementation of policies in cooperation with stakeholders are key to improving education, training and CPD in medicine to the benefit of patient safety and quality of care.*

## Introduction

European policies for education, training and continued professional development have three primary goals:

- creating and sustaining a health workforce adequate for the healthcare needs of the population in Europe
- ensuring that this workforce is highly skilled and qualified to provide the best care to patients
- developing a framework in which highly skilled professionals can best serve the healthcare needs of the European public

Medical education is not only valuable and important in and of itself, it is essential for facilitating and utilising the possibilities offered by new IT technologies, increasingly sophisticated medical devices and treatments, new approaches to patient management, scientific innovations, and ever-increasing mobility across the national borders within the EU through harmonised programmes. These issues are actively shaped by EU policies on eHealth and the digital single market, medical devices, personalised medicine, research and cross-border healthcare. Medical education plays an essential role in each of these policy areas. Even as healthcare remains a competence of member states, the EU plays an important coordinating and leadership role in developing a framework in which national policies are shaped and implemented.

This joint statement is in line with the purpose, aims and content of inter alia

- Art. 165 TFEU
- the [Directive on Cross Border Healthcare](#)
- the [Professional Qualifications Directive](#)
- the [Council conclusions on a strategic framework for European cooperation in education and training](#)
- the [Council conclusions on personalised medicine for patients](#)
- the [Council recommendation on patient safety, including the prevention and control of healthcare associated infections](#)
- the [Future EU Agenda on Quality of Health Care with special emphasis on Patient Safety](#)
- the [Study concerning the review and mapping of continuous professional development and lifelong learning for health professionals in the EU](#)
- the [Key findings and recommendations on Education and training in patient safety across Europe Work of the Education and Training in Patient Safety Subgroup of the Patient Safety and Quality of Care Working Group of the European Commission](#)

and meant as a contribution to the best possible implementation of these policies.

With respect to medical education, we would like to call on the EU's institutions and member states to take the following actions to benefit healthcare outcomes and improve patient safety across the EU.

## **Education, IT and eHealth**

Consistency in healthcare delivery and evidence-based practice are important aspects of ensuring quality of care and patient safety, not least because applying these concepts demonstrably reduces medical errors.

In the view of the endorsing organisations, the role that IT tools can play in continuing medical education has hitherto been underappreciated. As the rate of scientific innovation, increasing (sub-)specialisation across all disciplines, the amount of information and the rate of innovation have grown exponentially in recent years and decades, it has become increasingly difficult for health professionals to stay on top of these developments. The sheer ubiquity of knowledge and sources has made accessing, organising, selecting and absorbing information a challenge.

- We therefore call on the European Commission to develop a policy, following the release of the Communication on Digital Transformation of Health and Care in the DSM due in 2018, for promoting and maximising the educational benefits of IT-based clinical decision support systems, e-learning tools and IT-supported knowledge management programmes and to encourage their uptake in educational practice.
- The European Commission should collect, publish and disseminate best practices to guarantee and coordinate integration of technological developments into medical education.

## **Education and patient safety**

Healthcare processes have become very complex and technologically advanced, increasing the risks of error and the potential severity of their impact. While the legal framework at both the European and national levels are an essential part of patient safety, they only represent one side of the coin, too often viewed in isolation. The traditional approach to patient safety education should be complemented with a greater emphasis on patient safety culture and its contribution to quality of care beyond the simple avoidance of error. Taking the issue of radiation protection within healthcare as an example, there is a mandatory radiation safety element in the medical curriculum, and an EU legal framework for radiation protection in healthcare practice. However, surveys show that the knowledge of national or European regulations defining patient safety standards is limited, highlighting the need to establish patient safety as a central issue affecting the entire care cycle.

- We therefore call on the EU institutions to develop recommendations for embedding patient safety and quality of care as a cross-cutting issue throughout the duration of medical education, and indeed continued professional development, and could be further enhanced by directly involving patients in medical education. These recommendations should be developed in coordination with professional societies and patient organisations.
- Efforts should be enhanced and intensified to establish education about regulatory and practical aspects of patient safety as an essential contributing factor to patient-centred care and health outcomes.

- We also encourage the EU institutions to take into account the patients' perspective at the earliest stage possible in the definition of patient safety and quality of care aspects in medical education and CPD to give effect to patient-centred and targeted health and care approaches.

### **Education and the health professional-patient relationship**

The necessary focus of medical education on scientific knowledge, medical skills and the competent use of technology and devices often comes at the expense of developing health professionals' social skills; training in patient communication needs to be enhanced in current medical education programmes. While the former are the irreplaceable basis of quality healthcare, there is evidence that the personal relationships and interactions between healthcare staff and patients have a significant impact on health outcomes, particularly as patients' health literacy, control of their data and involvement in care and treatment decision-making is increasing.

We therefore call on the EU institutions to recognise that management of medical conditions goes beyond the process of diagnosis, treatment and evaluation and includes the entirety of the patient experience; to better embed interpersonal, intercultural, and communication skills in medical education; and establish the principle and practice of patient empowerment in medical education programmes.

### **Harmonisation and cross-border mobility**

Common European regulatory frameworks and programmes for safety standards, data, professional qualifications, research, or cross-border care; a single market for medical devices and other technologies, the digital single market strategy and ever-increasing mobility of patients and professionals make it necessary for medical education to adapt. Diseases know no national boundaries, an MRI scanner works the same way in every country, and biomarkers are universal indicators. Taking into account the cross-border aspects of healthcare and regulatory and policy developments, it only makes sense for quality of education and level of qualification to be equivalent across the EU. This is particularly the case for continuous professional development, which is vital for ensuring that health professionals' knowledge is up to date and their skills improve throughout their careers. Given that CPD is only mandatory in around two thirds of European countries, the European Commission should further coordinate the establishment and implementation of CPD standards across member states, while mandatory CPD should be explored to lay the ground for future initiatives. This will not only result in more consistent standards and improved quality of care, but also facilitate the mobility of students and professionals, and better fulfil patients' rights to cross-border healthcare. It is widely acknowledged that health professions are crucial in the organisation of CPD, and systems across the EU should therefore embed and even increase the professions' role in the formulation of CPD to maintain and improve standards and levels of education.

- We call on the European Commission to take steps to further harmonise medical curricula, establish standards for CME and CPD systems, and continue to streamline

the recognition of qualifications. This should take place in the context of the next review and update of the Professional Qualifications Directive.

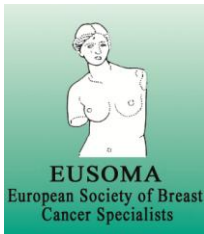
- The EU should nevertheless recognise the differences among member states in terms of their educational systems, culture and needs by focusing on competencies, patient-focused curricula, interprofessional education, and the overall structure and duration of medical education.

### **Guidance, coordination and exchange of information**

Recognising that a one-size-fits-all approach to medical education is neither desirable nor effective or efficient, we finally want to suggest a few principles to guide the actions called for in this statement. We call on EU institutions to work on improving education, training and continued professional development in medicine and the healthcare professionals involved in prevention, diagnosis, treatment, preparation and delivery and follow-up, with a focus on the value they provide towards quality of care, patient safety and health outcomes. In all areas, the EU institutions should work to improve coordination within and among themselves, as well as with member states. Rather than proposing specific legislation or top-down measures, we call on the EU institutions to develop recommendations, facilitate the exchange of information, and enhance and broaden the implementation of existing policies in a more holistic manner. We further call on the EU institutions to facilitate the collection and sharing of data and information on medical education. The Health Policy Platform is the ideal forum to do so. To this end, we call for a more extensive involvement of both stakeholders and the European Commission in the activities of the Health Policy Platform, to build a hands-on and targeted policy framework to facilitate discussion and guide health policy across the EU. In all respects, a collaborative approach involving stakeholder organisations is encouraged.

Joint statement of the 2017 HPP thematic network on medical training and professional development for patient safety

This joint statement is endorsed by:



SECTION OF RADIOLOGY

