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Training, education, accreditation and professional development in surgery in Europe: the perspective of the European Union of Medical Specialist (UEMS)[☆]



Vassilios Papalois

Cirugía General y de Trasplante, Imperial College Healthcare NHS Trust, Londres, United Kingdom

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A B S T R A C T

The European Union of Medical Specialists, founded in 1958, is the largest and oldest European medical organization. It includes 39 member states (of the European Union and others), and represents a total of 1,600,000 medical specialists. The main objective of the UEMS is to influence European healthcare politics by promoting the interests of the European medical specialists, establishing high standards in practice and training, as well as continuing medical education and professional development, and guaranteeing quality in specialist practice. The UEMS is developing several projects to face current and future challenges related to surgical training, education, accreditation, revalidation and professional development: (i) First, the UEMS is developing homogeneous requisites for European Training (ETRs), (ii) To manage the quality control process of the ETRs and evaluation of the organization, the UEMS has created the Council of European specialized medical evaluations (CESMA), (iii) The UEMS has been greatly involved in the accreditation process of training centres in all of Europe, (iv) in relation to continuing medical education, the European Accreditation Council for Continuing Medical Education (EACCME) is the main project of the UEMS for the accreditation of educational events and (v) the UEMS has established the Network of Accredited Clinical Skills Centres of Europe (UEMS-NASCE), that facilitates the accreditation and cooperation of training centres in Europe. In conclusion, with the great support of National Surgical Societies of the UEMS and the Surgery Section a series of solid projects have been established to support the professional development of the collective in Europe. This process constitutes a continuous effort that is very gratifying, with the aim to set the standards for a brilliant future for surgery students and specialized surgeons.

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Formación, educación, acreditación y desarrollo profesional en cirugía en Europa: perspectiva de la Unión Europea de Médicos Especialistas (UEMS)

R E S U M E N

Palabras clave:

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La Unión Europea de Médicos Especialistas (UEMS), fundada en 1958, es la mayor y más antigua organización médica europea. Está compuesta por 39 Estados Miembros (de la Unión Europea y no solo), y representa a un total de 1.600.000 millones de especialistas médicos. El principal objetivo de la UEMS es influir en la política sanitaria europea mediante la promoción de los intereses de los especialistas médicos europeos, estableciendo unos estándares elevados en cuanto a atención, formación y práctica, así como la educación médica continua y el desarrollo profesional y garantizando la calidad en la práctica especializada. La UEMS está desarrollando numerosos proyectos para abordar los retos actuales y futuros en cuanto a formación quirúrgica, educación, acreditación, revalidación y desarrollo profesional: i.- En primer lugar, la UEMS está desarrollando requisitos homogéneos de Formación Europea (ETRs); ii.- Para gestionar el proceso de control de calidad de los ETRs y la evaluación de la organización, la UEMS ha creado el Consejo de Evaluaciones Médicas Especializadas Europeas (CESMA); iii.- La UEMS se ha implicado enormemente en la acreditación de los centros de formación en toda Europa; iv.- En relación con la formación continuada, el Consejo de Acreditación Europea para Educación Médica Continua (EACCME) es el proyecto insignia de la UEMS en lo que se refiere a acreditación de eventos educativos presenciales y a distancia, y v.- La UEMS ha establecido la Red de Centros Europeos de Técnicas Clínicas Acreditadas (UEMS-NASCE), que facilita la acreditación y cooperación de los centros de formación en Europa. En conclusión, con el gran apoyo de las asociaciones quirúrgicas nacionales la UEMS y la sección de cirugía han establecido una serie de proyectos sólidos para respaldar el desarrollo profesional del colectivo en Europa. Este proceso constituye un esfuerzo continuo y muy gratificante, cuyo objetivo es sentar las bases de un futuro brillante para los alumnos de cirugía y los cirujanos especializados.

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The European Union of Medical Specialists was established in 1958. Nowadays, it is the oldest and major European medical organisation. It has 39 member Countries (from the European Union and beyond) representing a total of 1,600,000 medical specialists. Each member country is represented by its own National Medical Association and ruled by a democratically elected Council and Executive Board. The UEMS gathers 43 Specialist Sections, 15 Multidisciplinary Joint Committees and 2 Thematic Federations which offer a very wide and sound forum of collaboration for medical specialists across Europe.

The main objective of the UEMS is to influence European health policy, by promoting the interests of medical specialists all over Europe, establishing high standards of care, training and practice, continuing medical education and professional development and assuring quality in specialized practice.

The Surgery Section is one of the largest of the UEMS, with 12 Sub-Specialty Divisions supported by the National Surgical Associations of the 39 member Countries. It is in charge of developing sound projects in surgical training and accreditation, sustained by more than 1000 specialized surgeons across Europe.

Considering the fact that the majority of European Countries have well developed training and accreditation systems, there is a relevant question to answer: are the European projects in surgical training, education, accreditation and professional development really necessary?

In my opinion, the categorical answer to this question is YES (which is a doubtless reflection of the view of the UEMS and its Section of Surgery), because of several reasons. Beyond

any political debate, the fact of the matter is that healthcare systems across Europe are inter-dependent, due to the inevitable movement of healthcare professionals and patients. This fact is coupled with a clear need for quality assurance regarding the qualifications of healthcare professionals who move across Europe (and of course, inside Europe, from other countries) as well as assuring quality of services provided in different European Countries. Furthermore, there is a great need across the Board for assessing and updating the selection process for the training, the structure and efficiency of training centres, the training programmes of instructors, programmes offering career options for already specialized professionals and -last but not least- the process of revalidation and re-accreditation. We must highlight the fact that, when it comes to the level of development of the above projects, there are huge discrepancies across European Countries.

It is estimated that by the year 2020, we will be lacking about 1,000,000 healthcare professionals across Europe (Hofmann-Greifswald EU Commission report). The most pressing issue is that, we will be in lack of professionals who can offer general (surgical or medical) emergency care and not of specialists. One very characteristic example when it comes to workforce planning is the field of emergency surgery; in Europe, we are clearly behind and totally unprepared to face what is coming our way.

Healthcare systems across Europe face enormous financial pressure and budget cuts, while – at the same time – they are asked to look after more patients with more complex

problems. In addition, patients have very high expectations not only for the clinical outcome of their care but for their quality of life as well. The challenge is even greater when played on the context of an ever aging population with important and complex health needs and the demand for services closer to home, especially for the two extremes of the spectrum: children and the elderly.

The challenges mentioned above do not exclusively belong to one country and, therefore, the solutions can only be achieved through common effort and collaboration.

The philosophy of such European project is to build on existing experience and expertise across Europe and to reach a consensus not only for the lowest common denominator but for the highest commonly accepted standards.

UEMS is developing many projects to address the current and future challenges in surgical training, education, accreditation, revalidation and professional development.

First of all, UEMS is developing homogeneous European Training Requirements (ETRs). The process to establish ETRs for a certain specialty or area is initiated and coordinated by the specific UEMS Section. A very wide consultation process takes place across Europe, involving the 39 national specialists associations represented in the Section, the relevant national and European scientific societies, colleges, universities, national professional bodies and accreditation authorities. This is a thorough and robust process that takes almost 2 years to complete before the final product of the widest possible consensus for the highest commonly accepted standards is presented for a final discussion at the UEMS Council meeting where the 39 National Medical Associations will vote to accept it, or ask for minor or substantial revisions. It is clearly a very sound process that represents pan-European experience, expertise and approval as it covers the whole spectrum of training-education-assessment-accreditation-professional development clinically, academically and professionally.

From the moment the ETRs for a certain specialty are approved, the UEMS offers them across Europe, since its view regarding the way to proceed is entirely up to individual Countries. These will decide whether to use them only as quality control markers or using them partly or totally as national requirements.

The UEMS has established the Council of European Specialist Medical Assessments (CESMA) that is responsible for the quality control process of the UEMS ETRs and assessments of the organization. Every 2-3 years, CESMA appraises each of those ETRs/assessments through a thorough process that is governed by an appraisal committee which has members from a variety of UEMS Sections as well as external appraisals from colleges, universities or national accreditation authorities. The appraisal process consists of an initial detailed report by the UEMS ETRs/assessment Board, followed by a detailed inspection of all relevant documentation and an onsite visit of the assessment events. The appraisal committee produces an analytical report for all aspects of the ETRs/assessment process which is then discussed at the UEMS Council, resulting in approval or request for improvements.

The process has been so successful that now the organizations offering exams outside the UEMS have requested to go through the UEMS-CESMA appraisal in order to ensure quality control of their work.

The UEMS is tremendously involved with the accreditation of training centres across Europe. In very simplifying terms, important as it is to accredit the “product” (trainee) it is equally -or even more important- to accredit the system producing this “product” (training centre). The process is similar to the one for appraisal of the UEMS ETRs/assessments, with an accreditation committee with most experienced members from and beyond the UEMS. An initial report and review of the documents is followed by an onsite visit and inspection of all the activities of the applying center, along with interviews of all members. The most important criterion for this appraisal, which result or not in accreditation, is the activity of the applying centre (clinical and academic) per trainee and how this translates finally into professional development. For centers that have been UEMS accredited, the UEMS serves as a springboard of collaboration to allow them to develop and offer European training fellowships. This offers excellent opportunities for trainees across Europe for top class training, mentoring and professional development.

The organization of preparatory courses (always overbooked and highly rated) for UEMS assessments was created in response to the request of trainees across Europe. The UEMS assessments have become increasingly popular and trainees have requested the creation of a forum to help them prepare such assessments. The courses do not aim to offer “tips and tricks” to be successful at this, but to allow trainees well-prepared and familiar with their national assessments, to bench mark their knowledge and skills against European standards and be equally well prepared for the content and format of a European assessment.

Regarding the Continuing Medical Education, the European Accreditation Council for Continuing Medical Education (EACCME) is the UEMS flagship project when it comes to accreditation of international live and e-learning educational events. EACCME reviews approximately 1,800 applications a year, from all over the world. The review is based on very robust criteria which are established by the EACCME Advisory Council which has many renowned members from the UEMS as well as from other relevant fields: scientific societies, professional organisations, national accreditation authorities, colleges, universities. The review and accreditation process is being done from three different angles: administrative (UEMS EACCME Office), compliance with national standards and guidelines (relevant National Accreditation Authority) and specialist (UEMS Section in collaboration with the relevant European Scientific Society). The EACCME European CME Credits (ECMECs) are recognised by 21 countries in Europe. In addition, the UEMS has an agreement for a mutual credit validation of between EACCME and the American Medical Association as well as the Royal College Physicians and Surgeons of Canada. The UEMS EACCME has recently launched the EACCME 2.0 project that highlights the need for a much more efficient and faster process, an enlarged EACCME accreditation portfolio by including accreditation of modern/state of the art educational material, to enhance the role of trusted providers, to introduce the concept of recognition of professional qualifications, to advance the onsite quality control mechanisms for the accredited events and to collaborate with a broader spectrum of healthcare professionals. It is

expected that all the elements of the EACCME 2.0 project will be operational by 2017.

The UEMS has recently established the Network of Accredited Clinical Skills Centers of Europe (UEMS-NASCE), which simplifies the accreditation and collaboration of clinical skills centers in Europe and beyond. In addition, two working groups are focusing on the establishment of a UEMS School of Assessors as well as on the future format and content of the UEMS assessments.

The next UEMS challenge is to establish an e-portfolio for all medical specialists in Europe that will help them, at any given time, to benchmark their qualifications according to European standards (their level of experience and seniority), to guide them on how to update their knowledge and to offer them the opportunity for a meaningful and productive self-revalidation.

Finally, the European Medical Domus, is the new UEMS headquarter in Brussels. This is a fully refurbished, state of the

art business and conference center offered for professional networking to the Colleagues across Europe and beyond. This place aims to establish networks for the collaboration and innovation in the field of training-education-accreditation and professional development.

In conclusion, with the great support of the National Surgical Associations (*the Spanish Association of Surgeons being one of the most active and productive in Europe*) the UEMS and its Section of Surgery have established a variety of robust projects in support of the professional development of Colleagues across Europe and beyond. It is a continuous and much rewarding effort that aims to lead the way for a bright future for surgical trainees and surgical specialists.

Conflict of Interest

Professor Papalois is secretary general of UEMS.