



Avenue de la Couronne, 20  
B- 1050 Brussels, Belgium

**EUROPEAN ACADEMY OF PAEDIATRICS**  
U.E.M.S. Section of Paediatrics  
Formerly: CESP (Confederation of European Specialists in Paediatrics)  
Académie Européenne de Pédiatrie  
Section de Pédiatrie de l' U.E.M.S.



contact@EAPaediatrics.eu  
www.EAPaediatrics.eu

**Minutes of the Tertiary Care Group (TCG),  
Brussels December 5<sup>th</sup> 2009**

**Members Present:**

- |                                  |                                   |
|----------------------------------|-----------------------------------|
| 1. Azevedo Inês PT               | 19. Nelson Nina SE                |
| 2. Bibi Haim IL                  | 20. Neves Ana Margarida PT        |
| 3. Boerch Klaus DK               | 21. Neubauer David SI             |
| 4. Branski David UNEPSA/ESPGHAN  | 22. Palm Lars EPNS                |
| 5. Carvalho Marques Ana PT       | 23. Ramet José BE                 |
| 6. Chybicka Alicja PL            | 24. Riedl Stefan ESPE             |
| 7. Craiu Dana EPNS               | 25. Ross Russell Rob ERS          |
| 8. De Beaufort Carine LU         | 26. Saurenmann Traudel PReS       |
| 9. Del Vecchio Antonio ESPHI     | 27. Siderius Liesbeth NL          |
| 10. Fetter Willem NL             | 28. Stefanidis Constantinos Chair |
| 11. Hoyer Peter DE               | 29. Valayannopoulos Vassili SSIEM |
| 12. Hrdlicka Rene CZ             | 30. Xanthou Maria ESPHI           |
| 13. Jääskeläinen Jarmo FI        | 31. Zach Maximilian AT            |
| 14. Lopes dos Santos José ESPACI | 32. Rudzeviciene Odilija LT       |
| 15. Marlow Neil ESPR             | 33. Hansen Thor NO                |
| 16. Mc Graw Mary UK              | 34. Bikis Enok LV                 |
| 17. Mercier Jean-Christophe FR   | 35. Vergison Anne ESPID           |
| 18. Meszner Zsofia HU            | 36. Polanco Isabel ES             |

**1. Welcome**

All members welcomed by the Chair Constantinos Stefanidis. The Chair introduced the 13 new members to the meeting. The agenda of the Meeting was presented.

**2. Approval of minutes**

Minutes from the previous Meeting in Porto, April 25 2009 were approved.

### **3. Report of the Chair**

The Chair gave a summary of the main activities since the last meeting which had included:

- Developing the document on epidemiology of tertiary care in Europe
- Addressing a problem in Spain where there was a proposal to allow entry into paediatric specialist training from internal medicine. The intervention of the EAP was well received and the misunderstanding resolved so that entry to specialist training in paediatrics continues to require completion of core paediatric training
- Organising the Congress in Copenhagen.

### **4. Proposal to develop a Working Group for children with rare diseases**

Dr Siderius presented a proposal for the EAP to develop a Working Group on rare diseases. This would draw its membership from primary, secondary and tertiary care working groups. It was agreed that this was an opportune time to consider developing such a group as there had been a request for countries to present their national plans for rare diseases and some countries are beginning to develop registries. It agreed that the purpose of the group would be to foster co-operation and discourage competition. She tabled a mission statement that outlined 10 potential roles. It was noted that it would need to be clarified how this group would relate to Orphan.net. It was agreed that the Chair would take a proposal to the EAP Executive Committee to consider the formation of a Working Group for children with rare diseases.

### **5. Approval of the revised respiratory syllabus HERMES task force and ESPGHAN training syllabus**

It was agreed that the both syllabi should be approved and that the Chair would take this proposal to the Meeting of the General Assembly of EAP

### **6. European Visitation Programme**

Prof Lopes dos Santos updated the Group on the progress with visiting in paediatric allergology. Three more countries have been visited and a further three have expressed an interest in being visited. Certification for centres is for 5 years. There has also been certification of 230 specialists in 13 countries. It was acknowledged that the certification has no legal value and is not a licence to practice as that can only be given by the regulating authority in the individual countries. It was however agreed that such accreditation could be a useful prestigious credential.

It was announced that a visiting process was being introduced for diabetology.

The rheumatology criteria for approval of training centres were commended.

### **7. The 3<sup>rd</sup> EAP Societies Congress in Copenhagen 2010**

Prof Neil Marlow the Chair the Scientific Program Committee of the congress updated the group on the content and structure of the meeting.

### **8. Discussion on the memorandum of UEMS/CAP and EAP on immigration.**

It was agreed that this document should be included at the web page of EAP. It's limitation to adolescents was also queried. It was suggested that this should be shared with the adolescent working group.

### **9. Paediatric training in nephrology in Europe**

These data were not presented as the member responsible for presenting the information was unable to be present but it was agreed the information would be prepared for the next meeting. The Chair did report that only one third of countries in Europe recognise paediatric nephrology as a specialty.

### **10. Discussion on the TCG project National Differences in Paediatric tertiary Care in Europe**

A proposal for the study prepared by the project group was presented by the Chair and was well received. There was a wide ranging discussion on the depth and breadth of information that could and should be collected. It was recognised that collecting data on all the approved training units in each specialty in all countries may not be feasible. It was however agreed that as a first step it would be helpful to collect information on which specialties are legally recognised in each of the European countries and which have a system for recognising training programmes. This should be available from the national delegates. The Chair agreed to circulate a questionnaire to obtain this information

### **11. Discussion of the procedure for the election of the Chair of the TCG in 2011**

According to the EAP Statutes all members of the tertiary care group can vote for the Chair. The definition of 'members' would be all those attending the meeting on the date of the vote and would include presidents of the specialist societies, and those national delegates and individual members who chose to attend the meeting. A view strongly held amongst some of the presidents of specialist societies was that they had been elected to represent the whole specialty and if their vote was diluted by individuals having an equal vote the process would cease to be representative. There was also discussion about the criteria for eligibility to stand for the Chair.

It was noted that this could be written into Bye-Laws and it was agreed that this would be a high priority agenda item for the Luxembourg meeting.

## **12. Discussion of the election of the EBP Chair**

The Tertiary Working Group has one vote in the election of the EBP chair which would be held by the Chair of the TCG. A vote was held to inform the Chair of the preferred candidate by the TCG.

*Minutes were taken by Prof. Mary McGraw*