

MINUTES OF THE PRIMARY/SECONDARY GROUP MEETING

Brussels 2006

The meeting was co-chaired by Adamos Hadjipanayis and Diego Van Esso who warmly welcomed delegates to the meeting

(1) Presentation of models of paediatric care in the EU:

- a. **Sweden** – Jeanette Martinell presented a resume of paediatric care in Sweden which offers a system of free health care to all children. There are 1.8 million children under 18 years in Sweden with 90,000 births per annum. There are 6 university departments and 36 children's units. Paediatricians undertake 5 years specialist training before accreditation and there are currently over 1300 paediatricians in Sweden. Child health centres are an integral part of primary care for children in Sweden with frequent visits planned in the first 3 months, vaccination visits and a 9 month visit with an emphasis on accident prevention. In urban areas, primary care for children is undertaken principally by paediatricians and in rural areas primary care is delivered in the main by family doctors (who have 3 months training in paediatrics). Jeanette highlighted that stress-induced symptoms and psychiatric disorders are increasing in Sweden. The major issue of weakness relates to access to services by those who are disadvantaged, in particular immigrants. Issues of GP training (Francis Rubel) and nurse training (Elke Jäger) were raised by delegates
- b. **Cyprus** – Maria Solomou highlighted issues re provision of paediatric care in Cyprus. There are 230 paediatricians in Cyprus with just 42 working in the public sector. In the private sector, paediatricians attend all deliveries, conduct check ups, offer vaccinations, undertake emergency visits and also secondary and tertiary paediatrics in hospitals. A national screening program was founded in 1988 and is responsible for newborn hearing screening and screening for inborn errors (PKU , hypothyroidism). Other screening tests include hip ultrasound dental checks and assessment of visual acuity. Pneumococcal , varicella and meningococcal c vaccines are available in the private sector only. MMR coverage is still low at 88%. All children have access to emergency care with tertiary paediatrics being located in Nicosia. Private care is paid for largely by insurance
- c. **Czech Republic** – Gabriela Kubatova, as chairperson of the primary care group presented a resume of care in the Czech Republic . There are over 2 million children under 18 and the birth rate is increasing and 98% of children are registered with a paediatric practice. Training (as in Sweden) is for 5 years with 2 years common trunk. There is a strong female preponderance of paediatricians with a 4:1 ratio. Vaccination coverage is over 95%. Effective primary care is evidenced by decreased use of antibiotics , decreased numbers of hospitalizations , high rates of breast feeding beyond 6 months and increased involvement in supplemental iron therapy and allergy prevention. This excellent presentation

raised issues of out of hours access to emergency care , group practices the need for robust outcome measures

(2) **Demography of European Paediatrics – Francis Rubel**

Francis Rubel gave a detailed presentation re the demography of specialists across the EU. He highlighted that ambulatory and primary care paediatricians are declining in France as a result of political decisions by the French government. There is a 1:6 ratio of paediatricians to GP's across the EU. There is also an increased feminization of paediatrics across all countries. In the 0-6 years age group , most children are looked after by paediatricians. Francis urged that we undertake a prospective inquiry re paediatric manpower across the EU and urged all countries to be involved.

Action – a working group is to be established to look at Demography issues. Delegates who volunteered to participate in this group chaired by Francis Rubel are: Wilhelm Sedlak, Karel Holub, Imants Lanka, Natalia Szitanyi.

(3) **Proposal of a collaborative work on Paediatric Services across Europe- Diego van Esso**

This project aimed to try to make a picture of which services are delivered in the different countries to know what the present situation looks like. Some delegates felt that the information to be gathered had already been collected in other projects and considered that there was a need to look at indicators of outcome and quality of care for EU children

Action – a working group is to be established to look at child health quality indicators with the full participation of all delegates. Delegates who volunteered to participate in this group chaired by Bjorn Wettergren are: Elisabeth Siebke, Armand Biver, Maria Solomou, Elke Jaeger, Alf Nicholson, Stefano del Torso, Diego van Esso.

(4) **Adolescent Health**

In Cyprus 2007 , there will be a seminar in adolescent health , coordinated by Elke Jäger .

(5) **Nice 2008 European Academy of Paediatrics meeting** will focus also on primary and secondary care paediatrics and proposals for topics should be forwarded to Diego Van Esso by 10th January 2007.