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Dear colleagues

This edition follows the Board meeting held in Brussels on 12 September, when policies in preparation for the upcoming General Assembly from 7–9 in November were discussed. This month's Bulletin includes a special feature on the Commissioners-designate of the next European Commission, who were announced by Ursula von der Leyen on 17 September (see image above). We are in close contact with MEPs who will ask questions during the confirmation hearing of Commissioner-designate for Health and Animal Welfare, Olivér Várhelyi of Hungary.

We invite you to read about all this and more in this month's edition.

Dr Christiaan Keijzer

CPME President



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BOARD OF DIRECTORS MEETING – 12 SEPTEMBER 2024

Finances

Draft contribution key 2025

- ▶ The Board reviewed and approved the draft contribution key for the revised draft budget 2025.

The Board agreed to share an overview of recent budget increases as background. It was also agreed to consider project income only once the respective contracts have been signed.

Internal Affairs

Rules of Procedure

- ▶ The Board reviewed the revised draft of the Rules of Procedure and settled outstanding questions.

The text was updated following the previous Board discussion and input from the legal advisers. The final draft text will be presented to the Board and General Assembly for decision in November.

Contact with extremist MEPs

- ▶ The Board agreed to continue with the existing CPME policy of contacting all relevant MEPs and political groups. The Board will be informed of any divergence from this policy.

BOARD OF DIRECTORS MEETING – 12 SEPTEMBER 2024

CPME application to the EMA Management Board

- ▶ The Board approved the Secretariat recommendation to put forward Dr Christiaan Keijzer's application to the EMA Management Board.

CPME application to the ECDC Advisory Forum

- ▶ The Board took note that Prof. Dr Frank Ulrich Montgomery's application to the Advisory Forum of the European Centre for Disease Prevention and Control (ECDC) was not selected but he was placed on a reserve list representing non-governmental health professionals' organisations.

The reserve list will be used for the purpose of replacing a member where that member resigns or is unable to complete the mandate.

General Assembly, 7–9 November, Amsterdam

- ▶ The Board reviewed the draft agenda and the time schedule proposed.

Health workforce video campaign

- ▶ The Board was provided with an update on the ongoing video campaign which is collecting testimonials directly from doctors to underline the policy messages developed previously.

The Board was invited to contribute videos of their own. Further steps will be discussed, i.a. in the communication network meeting on 18 September. The aim is to present a campaign at the General Assembly in November.

Policies

European Commission Survey on Electronic Instructions For Use (eIFUs) for medical devices

- ▶ The Board approved the draft response to this survey and took note of the parallel discussions on electronic information provided on medical devices and pharmaceuticals.

EMA Survey on the prevention of shortages of medicines

- ▶ The Board approved a draft response to a survey on the implementation of 'Good practice guidance for patient and healthcare professional organisations on the prevention of shortages of medicines for human use'.

Examples from the Royal Dutch Medical Association were included in the response.

Survey on the availability of devices in the context of the medical devices and IVDs regulations

- ▶ The Board agreed to not respond to this survey.

Health Professionals' and Digital Skills Advancement (H-Pass project)

- ▶ The Board agreed that CPME participates in the Advisory Board of the consortium and informs the coordinator of the need to limit input in line with capacities.

BOARD OF DIRECTORS MEETING – 12 SEPTEMBER 2024

European Commission consultation on Professional Qualifications Directive (PQD) implementation report

- ▶ The Board approved the draft response with changes. A copy of the CPME responses to the consultation will be circulated to partners for information.

The Board noted that some NMAs wished to redefine the duration of basic medical training to increase the training period, but advised against this as it would reopen the Directive, which runs counter to CPME policy. It was noted that reopening the Directive may expose the minimum training requirements to further reduction. Thus, it was advised to delete any explicit mention of reopening the Directive in the text. The Board recommended that the CPME response underlines the fact that these are minimum requirements.

Directive on combating sexual abuse and sexual exploitation of children and child sexual abuse material

- ▶ The Board agreed to send a draft letter to MEPs. The letter raises the need to accommodate different national rules without supporting a specific position on reporting regulations concerning suspected cases of sexual abuse.

The Board noted the state of play of the legislative file. It was noted that considering the letter, and because CPME was not proposing a specific amendment, there should be no expectations of a different outcome – the political momentum was in favour of mandatory reporting by healthcare professionals. An MEP from Renew has raised the issue of disproportionate mass surveillance of electronic communications.

WHO Strategic Partners' Initiative for Data and Digital Health

- ▶ The Board agreed to participate in the WHO/Europe initiative, bearing in mind the possibility of withdrawing if with time the initiative did not produce relevant outputs, or it was too time-consuming. CPME should prioritise online meetings or exchanges of information electronically and only attend in-person meetings if reimbursed by WHO/Europe.

BOARD OF DIRECTORS MEETING – 12 SEPTEMBER 2024

WHO–Europe Mental health of doctors and nurses survey

- ▶ The Board decided that CPME will disseminate the WHO/Europe survey addressing doctors' mental health challenges among its membership within the scope of the survey, that is the European Union countries, Norway and Iceland.

It was reported that CPME has expressed its disappointment of this limited geographic scope which is due to contractual arrangements between WHO/Europe and the European Commission which is financing the activity. The dissemination will be coordinated with other EMOs.

Call for evidence protection of minors online

- ▶ The Board agreed with the draft response to the call for evidence.

The scientific references in the CPME draft response were based on the IMO's final submission to the Oireachtas Committee on Children, Equality, Disability, Integration and Youth – Protection of Children in the Use of Artificial Intelligence. The response indicates new scientific studies that address the health and well-being risks, support the development of the Commission guidelines and limit to the symptoms mentioned in the CPME Feedback on the Commission's Proposal for a Decision establishing the 2030 Policy Programme 'Path to the Digital Decade.

i2x project

- ▶ The Board took note that the consortium passed the initial phase of approval by the European Commission, and it has been invited to prepare the grant agreement. The latter is expected to be signed in November 2024 or February 2025. The project aims to trial the practical implementation of Electronic Health Records in real life.

Commercial Determinants of Health

- ▶ The Board took note of the draft of a new policy on commercial determinants of health.

After the previous meeting of the WG on Healthy Living, new WG chair Dr Ina Kelly proposed the policy due to the impact of commercial entities on peoples' lives and health. CPME members have already had a chance to send comments, and an online meeting to was to be held on 24 September. The revised draft will be presented for decision to the General Assembly in November.

BOARD OF DIRECTORS MEETING – 12 SEPTEMBER 2024

Guidelines on the transparency of relationships between physicians and the healthcare industry

- ▶ The Board took note of the draft policy which has been discussed by the WG Pharmaceuticals and will be further consolidated with a view to presenting for decision to the General Assembly in November.

Deployment of AI

- ▶ The Board commented on the draft policy, which addresses how to easily and safely deploy AI in healthcare.

The draft had been sent to the rapporteur on AI for comments before the summer break and a meeting of the WG Digital Health was foreseen for 2 October to discuss the draft. The revised draft will be presented for decision to the General Assembly in November.

Quality of basic medical education

- ▶ The Board discussed amendments to the draft policy, developed in the context of increasing pressure from national governments to reduce the training time of basic medical education.

The WG Professional Practice discussed the draft on the 5 September. The revised draft will be presented for decision to the General Assembly in November.

Report from the Polish Medical Chamber

- ▶ The Board discussed a report from the Polish Medical Chamber concerning government action to extend previously temporary and limited licences granted to doctors from Ukraine.

This will follow a new procedure governed by the Ministry of Health without the usual oversight by the Polish Medical Chamber. The licences could potentially enable practice across the EU. It was agreed to collect more information and offer support.

CPME supports access to health for undocumented people

CPME joined a [press release](#) with PICUM, an organisation for social justice and human rights for undocumented migrants, on a new Finnish draft law which bans undocumented people from necessary healthcare. The proposed law would limit access to public health care, allowing only emergency services and a few exceptions like care for pregnant women, children, and certain infectious diseases. The law has since been delayed in the Finnish Parliament until after Christmas.

CPME President, Dr Christiaan Keijzer, said "A discriminatory healthcare policy can only further endanger public health. We stand by the position of the Finnish Medical Association that adoption of this law would contradict fundamental medical ethical principles and would only serve to increase the overall cost to health services by limiting access to necessary care."

CPME welcomes Dimitri Eerens as Junior Policy Officer

We are delighted to welcome Dimitri Eerens as Junior EU Policy Advisor. He takes over from Anniina Hentinen and will work on Professional Practice and Health Systems. Dimitri studied European public health and public health governance at Maastricht University and conducted research on evaluations of European countries strategies to retain and recruit physicians in medical deserts as part of his Master thesis. In addition to his previous internships at CPME, he has also worked at DG SANTE as a trainee in the Directorate on Digital, EU4Health and Health Systems Modernisation.

EU Healthy Air Coalition call to strengthen EU clean air measures to sustain quality of life

The EU Healthy Air Coalition, representing doctors and other healthcare professionals, patient organisations and health insurers, has written letters calling on the European Commission president [Ursula von der Leyen](#) and the [Environment Council of the EU](#), to prevent health impacts from air pollution.

CPME contributes to webinar on convergence of Electronic Health Records on 16 October

Dr Iztok Štrotl will represent CPME in a webinar entitled "Doctors, FHIR, OpenEHR and the European EHR Exchange Format: Can They Converge for Better Electronic Health Records?" on Wednesday 16 October 2024 – 15:00 CEST.

More info and registration here: <https://xpandh-project.iscte-iul.pt/xpandh-webinar-16-october/>

High-level policy dialogue on mental health and the triple planetary crisis

On 7 October, CPME attended a high-level policy dialogue to mark World Mental Health Day, organised by the Hungarian Presidency of the Council of the EU and the WHO Regional Office for Europe. The event exchanged evidence and insights regarding the mental health impacts of climate change and other environmental crises and explored evidence-based policies and actions to lessen these effects. Please find a meeting report on our members website [here](#).

Latest from World Medical Association

Antimicrobial resistance

Alongside the UN High-Level Meeting on Antimicrobial Resistance, WMA hosted a joint side event with ICARS (International Centre for Antimicrobial Resistance Solutions) on 24 September, in New York.

World leaders committed to reducing the number of deaths globally associated with bacterial AMR by 10% by 2030 against the 2019 baseline of 4.95 million deaths. 9 other key commitments were made in the [political declaration](#) such as ensuring equitable and timely access to antimicrobials, vaccines and diagnostics, as well as strengthening national infection prevention and control programmes in health-care facilities.

World Rabies Day

WMA issued a [media release](#) for World Rabies Day, 28 September, in conjunction with the World Veterinary Association.

Declaration of Helsinki

2024 marks 60 years since the adoption of the [WMA Declaration of Helsinki](#) – Ethical Principles for Medical Research Involving Human Subjects. In October, during the WMA General Assembly in Helsinki a final, updated draft of the Declaration of Helsinki is being considered.

COP29

A small WMA delegation will be attending the UN Climate Change Conference (COP29), in Baku, Azerbaijan, from 11–22 November 2024, with their focus being climate change and health.

FEATURE

Health in the next European Commission

Commissioner–Designate for Health and Animal Welfare, Olivér Várhelyi

On 17 September, Ursula von der Leyen (President of the European Commission) addressed the European Parliament and presented the Commissioners–designate and their respective portfolios.

Despite various rumours around who would be designated as Health Commissioner, von der Leyen unexpectedly chose Olivér Várhelyi. The Hungarian lawyer and diplomat is the current Commissioner for Neighbourhood and Enlargement (2019–2024). He is affiliated to Victor Órban's Fidesz party, though he is not a party member. There is no documented link to health in his past work.

The Mission Letter

In von der Leyen's [mission letter](#) to Várhelyi, which sets out the Commissioner–designate's mandate, she highlights the need to "step-up our work" on preventive health, including focusing on mental health and tobacco control, and to prepare a European action plan on the cybersecurity of hospitals and healthcare providers.

It is also confirmed that the Commission should propose a Critical Medicines Act, as well as a proposal for a European Biotech Act, which has not been previously discussed. The continuation of the work on the Europe's Beating Cancer Plan, as well as European Health Data Space (EHDS) and the pharmaceutical legislation is also listed.

However, there is no mention of tackling the health workforce crisis. We provided a comment on this to Politico who highlighted in their morning briefing that "the lack of mention for the health workforce has frustrated doctors' representative CPME who called it a 'glaring omission'". [Euronews](#) similarly reported on CPME's comments.

FEATURE

Health files in the missions of many Commissioners–designate

For this new mandate, we observe an important overlap between the health dossier and multiple other portfolios. The designated Executive Vice–President for People, Skills and Preparedness, Roxana Mînzatu, will [oversee](#) tasks relating to long–term care workforce challenges, but also digitalisation in the workplace. In addition to these responsibilities, Mînzatu and the designated Commissioner for Intergenerational Fairness, Youth, Culture and Sport, Glenn Micallef, will address issues relating to mental health.

Furthermore, Hadja Lahbib, Commissioner–designate for Preparedness and Crisis Management, and Commissioner for Equality [will have a role](#) in areas such as medical counter measures and medicine stockpiling, previously dealt with by DG HERA. Another dossier of interest to the pharma industry is the European life sciences strategy, [given](#) to the Commissioner–designate for the new portfolio for Startups, Research and Innovation, Ekaterina Zaharieva. This strategy has been eagerly awaited by the pharmaceutical industry due to its potential impact on the sector’s future.

Moreover, Stéphane Séjourné, designated Executive Vice–President for Industrial Strategy [will work](#) with Olivér Várhelyi to help shape the upcoming European Biotech Act and lead negotiations on new EU pharmaceutical regulations. Stéphane Séjourné will also work on developing a Clean Industrial Deal focusing on decarbonization and clean technology, as will Teresa Ribera Rodríguez, designated Executive Vice–President for Clean, Just and Competitive Transition. She will [also focus](#) on the European Green Deal, tackling air quality, climate change and health.

The fragmentation of the health portfolio among different commissioners is reported to be highly controversial among MEPs. Some, such as former Health Commissioner and current MEP Vytenis Andriukaitis, are not in favour of this scattering. Others, like Green MEP Tilly Metz, see it as an opportunity for health issues to be addressed across different sectors, embracing the health in all policies approach.

Time will tell the impact of this fragmentation. Does it really enhance health in all policies? Will the fragmentation not weaken health’s importance on the EU political agenda? Will the limited coordination and cooperation between different DGs not hinder efforts made towards realising the health–related missions?

FEATURE

What happens next?

The Commissioners-designate will now be invited by the European Parliament to a hearing in the respective committees. In these hearings, all MEPs can ask questions to the Commissioner-designates on their dossier and plans for action, to evaluate technical expertise and vision. Based on this exchange, the European Parliament approves the Commission in a formal vote. However, if any Commissioners-designate are rejected by the Parliament, new nominations and further hearings are required. In the past hearings, there has always been at least one candidate who was rejected and replaced. In fact, Várhelyi was the replacement of a rejected candidate.

Several MEPs have already offered to CPME to ask about the Commission's plans for the health workforce and we are following up with them.

The hearings have been confirmed from 4 to 12 November 2024. The European Parliament plenary could then vote on the entire Commission on 25 November 2024. If confirmed, the Commission could begin its work in early December. In case of rejections, the starting date may be delayed.

MONITORING

Pharmaceuticals and Healthcare

Draghi report on the future of European competitiveness

On 9 September, the [Draghi Report](#) on competitiveness was published. It identifies three main areas for action to reignite sustainable growth: 1) closing the innovation gap with the US and China; 2) joint plan for decarbonisation and competitiveness; and 3) increasing security and reducing dependencies.

- Chapter 9 in the second part of the report was dedicated to pharmaceuticals. The report calls for strengthening research and development in pharma and enhancing innovation in this sector. In addition, Draghi develops 9 proposals which overlap with the sector of digital health. The report recommends maximising the impact of the European Health Data Space, expand its use to develop drugs and enhance patient access, to streamline the set-up and management of multi-country trials in the EU, and to increase investments in AI-driven healthcare innovation. Further proposals can be found on page 199 of the report.
- The report also addresses the issue of workforce shortages in general. The EU must invest in upskilling, reskilling and retention of workers. Furthermore, the report highlights the need for workers to be better trained to work with emerging technology like AI and digital tools.
- The report however lacks analyses and recommendations on disease prevention.

Professional Practice and Health Systems

Commission supports action across Europe to attract and retain nurses

The Commission has signed a contribution agreement with WHO/Europe which aims to support member states in 'retaining nurses in their health systems' and 'making the profession more attractive to nurses'. Funded by the [EU4Health programme](#), the activities will be tailored to specific needs at national and sub-national levels. They will include creating recruitment action plans, mentoring programmes, drafting nurse workforce impact assessments, and implementing training opportunities especially to gain digital skills.

MONITORING

Digital Health

AI Act enters into force

On 1 August, the [European Artificial Intelligence Act](#) entered into force. It is intended to ensure that AI developed and deployed within the EU is trustworthy, with measures in place to safeguard fundamental rights. The act seeks to create a unified internal market for AI across the EU, fostering its adoption which promoting innovation and investment in a supportive environment. Member states have until 2 August 2025 to designate national competent authorities who will oversee the application of the rules for AI systems and carry out market surveillance activities. The Commission's [AI Office](#) will be the principle implementation body for the AI Act at EU-level.

Public Health and Disease Prevention

EU action on the current Mpox outbreak

In light of the current mpox outbreak, the EU Health Emergency Response Authority (HERA) established a joint procurement agreement (JPA) with Bavarian Nordic under which 2 million doses of the Modified Vaccinia Ankara–Bavarian Nordic (MVA–BN) were purchased. This is the same vaccine used to respond to the 2022 outbreak. The participating countries include EU member states, European Economic Area countries and Western Balkans to get the vaccine. As the contract will expire in November 2024, JPA members were asked to indicate whether they are interested in participating in a renewed joint procurement for the same vaccine and such decision is awaited. This renewed contract would also be open to countries not currently participating.

MONITORING

Commission recommends measures on smoke-free environments

On 17 September, the European Commission recommended to better protect people from the effects of second-hand smoke and aerosols through the revision of the Council Recommendation on smoke-free environments.

It recommends that Member States extend smoke-free environment policies to key outdoor areas such as public playgrounds, amusement parks and swimming pools; outdoor areas connected to healthcare and education premises; public buildings; service establishments; and transport stops and stations. It also recommends that Member States extend smoke-free environment policies to emerging products such as heated tobacco products and electronic cigarettes, which increasingly reach very young users.

Parliament reacts to recent extreme weather events in Europe

The European Parliament has [expressed concern](#) over the growing intensity and frequency of extreme weather events, such as floods, heatwaves, and wildfires, both in Europe and globally. In a resolution passed on 19 September 2024, MEPs criticised recent budget cuts to the EU's Civil Protection Mechanism and called for increased funding to better prepare for and respond to such disasters. They emphasised the need for more resources in the next EU budget and requested that the EU Solidarity Fund match the rising number of natural disasters. They also urged the European Commission to quickly provide financial and technical support to affected countries, including the use of cohesion policy instruments. The Copernicus Climate Change Service (C³S) presented in a report a preliminary analysis of the conditions observed during summer 2024 in Europe. Please find the report [here](#).

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