



NEWSLETTER

Informal meeting of the ER-WCPT

The European Region of the WCPT would like to announce to all its Member Organisations that on 17 June 2011, in the afternoon, an Informal Meeting for ER-WCPT Member Organisations will take place in Amsterdam, the Netherlands, related to the 2011 WCPT General Meeting.

The programme for the meeting, a registration form and further details will be provided in the near future for the Member Organisations.

Please note that Member Organisations may send no more than three delegates to the informal meeting.

Summary of the Executive Committee Meeting

Amsterdam, the Netherlands, on 3 December 2010

The last Executive Committee Meeting of the European Region focused primarily on the revision of the WG's proposals to develop the future activities 2010 – 2012 approved at the 7th General Meeting of the European Region. Each chairman presented specific actions for each of the activities as suggested by the WGs. The Executive Committee reviewed and agreed them.

Regarding the activities of the WGs, it was also agreed to have a joint meeting of the three ER-WCPT WGs as follows:

- A joint meeting of the three ER-WCPT WGs will take place in Malta on 10 September 2011.
- There will be a separate meeting for each of the WGs on 9 September 2011.

Hungarian Presidency of the EU - Health Priorities

The Hungarian Presidency of the EU started on 1 January for a period of six months until 31 July 2011.

The Hungarian Minister of State for Health, Dr. Miklós Szócska, spoke about his country's health policy priorities for their upcoming EU presidency at the opening plenary of the 2010 European Health Forum in Gastein. The key phrase for this presidency's health policy is "Patient and

2nd Conference on Clinical Guidelines

35 Delegates from 15 Member Organisations were presented at the 2nd Conference on Clinical Guidelines held on 2 December 2010, in Amsterdam, the Netherlands. The Executive Committee thanked the Professional Issues WG and its Chairman and the Dutch Association, who hosted the event, for the success of the Conference. The presentations and a report of the Conference will be posted on the ER-WCPT website.

- The EC will have a meeting on 8 September 2011 and will review the facilities of the venue to host the 2012 GM.
 - The topics for discussion at the joint meeting will be
 1. The "Keep Active, Keep healthy" document – PIWG
 2. The ER-WCPT Research Policy – Education WG
 3. The ER-WCPT Road Map – EUWG.
- The ER-WCPT Glossary of terms will be also discussed if there are topics that need a consensus.

The EC meeting also focused on the participation of the Region at the 2011 WCPT and GM, the developments for the 3rd Education Congress and 2nd the Clinical Guidelines conference.

professional pathways in Europe" which emphasizes the need to focus policy on both individuals and processes, and in particular on the needs of those communities to which the health system is most important - those who use it, and those who make it possible.

This initiative addresses two crucial issues: investing in future health systems that are relevant to the changes in the European population and

their health challenges; and addressing the trade-off between equity and the freedom of mobility that is at the crux of the human resources for healthcare crisis. The presidency intends to kick-off discussions on how to make progress on the policies which are already in play on these issues, as well as what changes are necessary to ensure the right investments are made in health system efficiency and preventative care.

While new investments are needed, Minister Szócska also spoke about the financial crisis and global recession, in which Hungary was particularly hard hit. The lasting impact of these global events will be felt for years to come and to varied extent between countries. At such a time it is crucial to understand how this is impacting solidarity across the EU. The financial crisis cannot

be an excuse for a waning in solidarity in European health systems, and for this reason the Hungarian presidency will continue the initiative on solidarity and innovation started under the Belgian presidency.

Minister Szócska ended his speech by referencing two emerging issues that merit much more attention from in policy discussions. The first is the use of structural funds for health system infrastructure - a practice where Hungary has experiences to inform other EU member states. And second, the issue of migration and vaccine standardization - with increasingly mobile populations it is becoming more and more important to ensure that EU Member State childhood vaccine policies are aligned.

2011 - European Year of Volunteering

The EU has designated 2011 as the "European Year of Volunteering". In the European Union, almost 100 million citizens of all ages invest their time, talents and money to make a positive contribution to their community by volunteering in civil society organisations, youth clubs, hospitals, schools, in sport clubs, etc. For the Commission, volunteering is an active expression of civic participation which strengthens common European values such as solidarity and social cohesion. Volunteering also provides important learning opportunities, because involvement in voluntary activities can provide people with new

skills and competences that can even improve their employability. This is especially important at this time of economic crisis. Volunteering plays an important role in sectors as varied and diverse as education, youth, culture, sport, environment, health, social care, consumer protection, humanitarian aid, development policy, research, equal opportunities and external relations.

Further information:

http://ec.europa.eu/citizenship/focus/focus840_en.htm

Mutual Recognition of Professional Qualifications

The ER-WCPT participated in the meeting held by the European Commission DG Internal Market, on 29 October 2010, in Brussels, with the Professional Organisations concerned by the mutual recognition of professional qualifications directive (DIR36), where the Commission, who is currently carrying out an evaluation of the Directive, presented an overview of the completion of the first phase of the evaluation (and possible next steps), as well as its first report on the transposition and implementation of the Professional Qualifications Directive, including more than 170 experience reports from the EU Member States' authorities. The report identifies areas of concern such as: Member States' reluctance to allow temporary mobility of professionals; the common platforms appears to be a failure; there is a need for a more proactive system in notifying diplomas by Member States, as well as a need for more flexibility in the

training of doctors and nurses. It also shows that there is an increasing interest in the professional card, and that the Internal Market Information System (IMI) is seen as a good solution for the competent authorities to communicate more effectively. The evaluation process will now go on to a second phase of this evaluation focussing on what professionals, professional associations, employers and citizens think about the Directive. In this regard, the European Commission will launch a public consultation before the end of the year, followed by the launch of a major study on the impact of recent educational reforms - to be finalised by summer 2011, and a comprehensive report by autumn 2011. The next steps would be a Green Paper setting out the major strands for reform, and a Legislative proposal, to amend the Directive, by 2012.

Patients' rights in cross-border health care

After the adoption by the Council, on 13 September 2010, of the first-reading position on the draft directive concerning the application of patients' rights in cross-border healthcare aiming at clarifying and strengthening the rights of patients who have to seek treatment in another Member State, the ENVI Committee of the European Parliament voted, on 27 October 2010, in second-reading in favour of the report, with an overwhelming majority (47 in favour, 2 against, 1 abstention). The second reading by the Council is

expected at the EPSCO meeting on 6 December 2010, and the vote in plenary sitting of the European Parliament should take place on 18 January 2011. Besides, according to policymakers the negotiations on the Cross-border Healthcare Directive could pave the way for a revolution in health technology, and therefore be key for the development of e-health services in Europe. However, incompatible IT systems remain a major obstacle.

European Innovation Partnership Pilot Project on "Active and Healthy Ageing Innovation Partnership"

The European Commission adopted, on 6 October 2010, a Communication on "Innovation Union", one of the "flagship" initiatives of the Europe 2020 Strategy, which sets out a strategic approach to innovation, with the objective of addressing societal challenges with a new approach to EU research and innovation. Reflecting on the importance of ageing of the EU population, the Commission selected the European Innovation Partnership on Active and Healthy Ageing (AHAIP) as a pilot initiative to be launched in the beginning of 2011. The expected outcomes of this project include: new medicines for the elderly, new treatments or diagnostic tools, new institutional or organisational approaches and new solutions allowing for a better life quality for the elderly. The ER-WCPT supports this Commission initiative as it is very concrete, up to the point and very focused with a clear objective and where a crucial challenge of our society is addressed: ageing, and believes

that the key issue for this project is to advance the new EU 2020 strategy, bringing it closer to the citizens, who need to get engaged in order to achieve the objectives. Furthermore, the ER-WCPT participated in the conference on "Active and Healthy Ageing European Innovation Partnership" that took place on 26 November 2010, in Brussels, where the European Commission launched a consultation on the European Innovation Partnership on Active and Healthy Ageing and which provided a short introduction to the Partnership initiative and a discussion to develop a common understanding of the concept of the Partnership, its added-value, and ideas for concrete actions.

Further information

http://ec.europa.eu/information_society/activities/einclusion/deployment/ahaip/consultation/index_en.htm

EU Health Prize for Journalists 2010

On 30 November, Gianluca Ferraris and Ilaria Molinari received the 2nd EU Health Prize for Journalists in the presence of finalists from 27 countries, editors, national and EU jury members and high representatives of the Commission.

Further information:

http://ec.europa.eu/health-eu/journalist_prize/2010/index_en.htm

Information about EC/OECD report "health at a glance: Europe 2010"

On 7 December, the European Commission (DG Health and Consumers) jointly with OECD, issued the report "Health at a Glance: Europe 2010". This report provides useful insight into the current situation of health in the EU. The report compiles data from the OECD, Eurostat and the WHO and presents key trends on health, health systems and health spending in the 27 EU Member States, plus the 3 European Free Trade Association countries (Iceland, Norway and Switzerland) and Turkey.

Some of the key findings of the report include:

- Life expectancy at birth in the EU increased from 72 years in 1980 to 78 years in 2007.
- There are fewer deaths from heart disease, but it is still the biggest cause of deaths in the EU, accounting for 40% of all deaths in Europe in

2008.

- There is a strong link between the prevalence of dementia and the ageing of the population as the number of people aged over 65 is expected to double between 1995 and 2050.
- The shortage of doctors is a cause for concern in many European countries.
- Health spending has risen in all EU Member States, often increasing at a faster rate than economic growth. In 2008, EU Member States spent, on average, 8.3% of their GDP on health, up from 7.3% in 1998.

Full report:

http://ec.europa.eu/health/reports/docs/health_glance_en.pdf

2011 WCPT - How congress delegates will be able to weigh the evidence

The importance of both quantitative and qualitative research evidence to physical therapists will be examined at next year's International WCPT Congress. Simon Crompton talks to some of the main contributors on evidence based practice.

A new international collaboration to produce evidence based recommendations for daily physical therapy practice will be announced at next year's WCPT congress, as part of a range of sessions and activities based around evidence based practice.

Philip van der Wees from the Netherlands, along with Chris Maher from Australia, Christopher Powers from the United States, Aimee Stewart from South Africa and Ann Moore from the UK, will all take part in a focused symposium where they will discuss a new international network of researchers, clinical guideline developers and practitioners that will collaborate in producing evidence-based recommendations.

"At an international level, we believe it is important to produce evidence based recommendations, as well as guidelines," says Philip van der Wees, physical therapist and human movement scientist from Amsterdam, who has just been elected Chair of the Guidelines International Network (G-I-N) – the international not-for-profit association of organisations and individuals involved in the development and use of clinical practice guidelines. He was appointed to its board last October, the first non-medical doctor to become a

board member.

"We think it's important to address the issue of how you apply evidence to local situations. With short recommendations, of two to three pages, we can say there is good evidence in these areas and then leave it to individual countries to develop full guidelines from these recommendations so that they are adapted to local situations."

The evidence-based recommendations will be derived from current high quality clinical guidelines and systematic reviews. They should help physical therapists in making decisions in diagnosis and treatment.

According to van der Wees, there is still resistance to the idea of evidence based practice (EBP), partly because of misunderstandings about what it means. "People think it means that you should only do something if there is 100% evidence behind it," he says, "but it's actually a combination of evidence from the literature combined with clinical expertise and evidence from the patient. There's lots of room for individual decision-making and patient feedback." In the Guidelines International Network, he said, there is increasing awareness that evidence based guidelines needed to take

account of daily function, and not just medical diagnosis and treatment.

Chris Carpenter from the United Kingdom also wants to emphasise that EBP isn't always what physical therapists expect, in the focused symposium she is chairing entitled "Qualitative Research Evidence: how does it contribute to evidence based practice?"

"I don't think EBP has been as embedded in the practice of many countries as it should have been," says Chris Carpenter, who is a Reader in Physiotherapy at Coventry University. "Many of the barriers have stemmed from a very narrow definition of EBP, and as physical therapists I think we've hung too much on to the medical based model without questioning whether it is appropriate to our practice."

Physical therapists have to think beyond randomised controlled trials, and towards the use of extended case and qualitative studies. "In the focused symposium I'm hoping to introduce people to what qualitative research is, and what it isn't and its contribution to EBP," she says.

Another speaker at the symposium will be Patty Solomon from Canada. "My message would be that qualitative research has become increasingly relevant as PTs have become more aware of the need for patient centered practice," she says. "Through a greater understanding of the lived

experiences of those with whom we interact, we are able to adapt our assessment and management strategies to best meet their needs."

Delegates to the congress will be able to follow other discussions and sessions on EBP. In the focused symposia, there will be discussions on:

- web-based resources to support evidence based physiotherapy
- Cochrane systematic reviews – enabling evidence based physiotherapy after stroke
- development of evidence based recommendations for physical therapy diagnosis and treatment.

There will also be education sessions on:

- physical therapy in Parkinson's disease: towards evidence based practice
- evidence based evaluation and treatment for back and knee pain in older persons
- evidence based physiotherapy and assessment of quality of the systematic reviews and clinical trials.

A discussion panel on "Research in the 21st century", led by Ann Moore, Chair of the congress International Scientific Committee, is another session that will engage delegates in debate. Journal editors and a range of researchers will also be available to talk to delegates about getting going in research and writing for publication.

