




CED
COUNCIL
OF EUROPEAN
DENTISTS

ANNUAL REPORT 2014

**CED IN AN
ELECTION YEAR**

■ ABOUT THE CED

The Council of European Dentists (CED) is the representative organisation for the dental profession in the EU, representing over 340,000 practising dentists through 32 national dental associations. Established in 1961 to advise the European Commission on matters relating to the dental profession, the CED promotes high standards of oral healthcare and effective patient safety centred and evidence based professional practice across Europe.

www.eudental.eu

 @CEDentists

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PRESIDENT'S PERSPECTIVE

■ **2014 was an election year in the EU. Could you explain how this affected the work of the CED?**

The CED exists to enable dentists to influence EU policy on issues affecting oral health and dentistry. Elections to the European Parliament which not only determine the composition of the Parliament but also influence the European Commission are very important to us. This was why we joined the European Movement International's 1000 Reasons to Vote for Europe campaign and why in February 2014 I called on all citizens to vote and make the EU a real democracy. In March we presented the CED Manifesto in which we called on the EU decision makers to improve oral health of Europeans, support a strong and independent dentist workforce, oppose standardisation of healthcare and agree on medical devices and data protection legislation that puts patient safety and health first.

■ **The new European Commission under President Juncker took office in November 2014. What are your expectations for its next 5 years?**

The new Commission has garnered a lot of media interest for its new structure with multiple vice-presidents, project teams and shared responsibilities. Our hope would be that the reorganisation leads to greater recognition and implementation of the principle of Health in all Policies, particularly as some areas previously covered by the Commissioner for Health such as health technology and cosmetics have now been delegated to the Commissioner for Industry. Secondly, we will pay particular attention to the Commission's focus on Better Regulation to

ensure that it does not lead to indiscriminate deregulation which in the health sector could have negative effects. And finally, we were pleased to see Dr. Vytenis Andriukaitis, a physician, become the Commissioner for Health for the first time and we look forward to working together cooperatively.

■ **In 2014 the CED promoted oral health and diabetes as the theme of the European Oral Health Day. Could you explain why?**

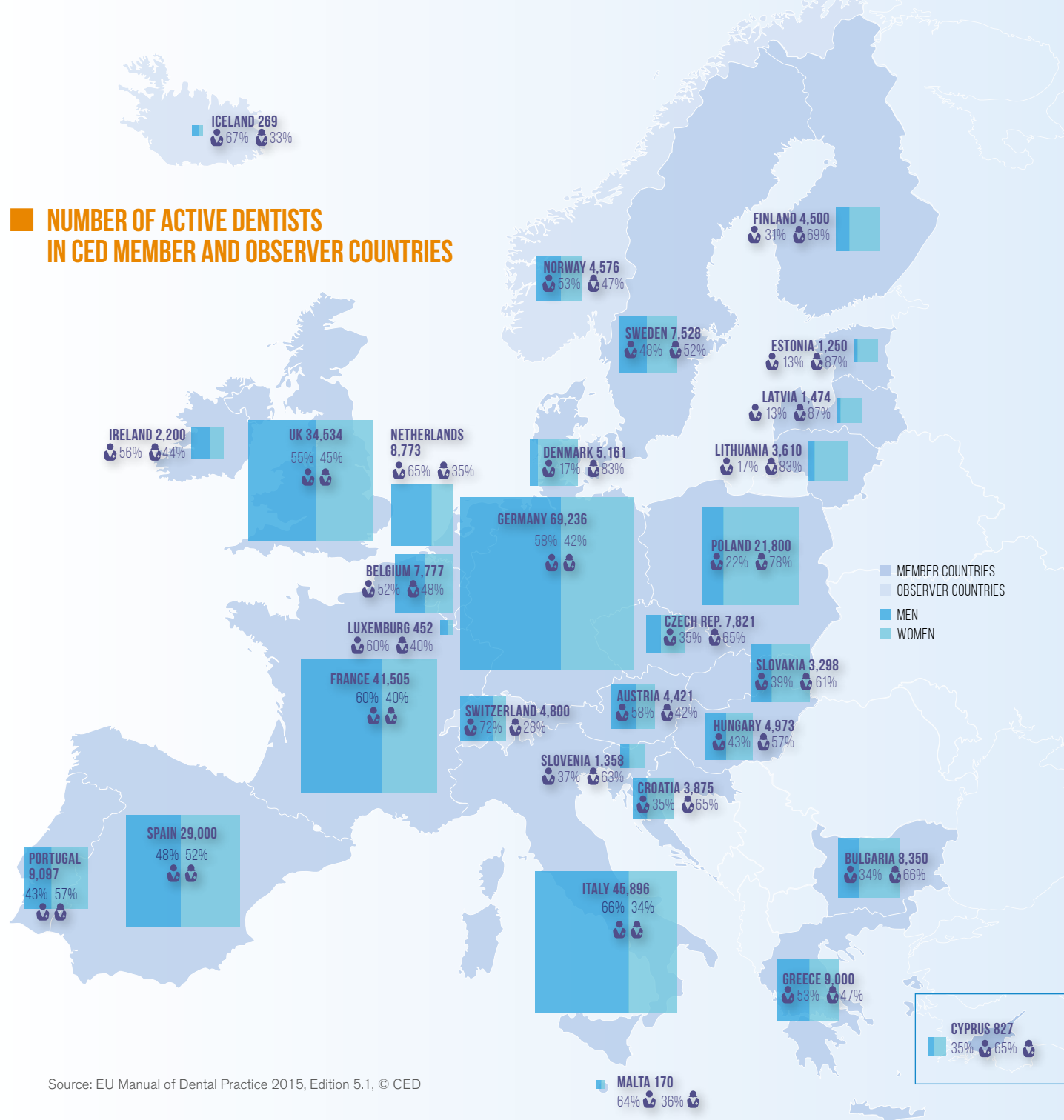
Diabetes is a systemic disease with concomitant oral manifestations that impact dental care. While the number of people suffering from diabetes is set to increase from 56 million in 2013 to 70 million by 2035, public awareness of how to prevent and manage oral disease in diabetes patients is rather poor. We saw the European Oral Health Day as a unique opportunity to point out the links between diabetes and oral health and the role dentists play in early diagnosing, referring and managing patients with diabetes. We were delighted to partner with the International Diabetes Federation Europe to spread the message.

Dr. Wolfgang Doneus, CED President

Dr. Wolfgang Doneus has been a practising dentist in the vicinity of Linz, Upper Austria since 1981 and the President of the Council of European Dentists (CED) since 2009 (and between 2003 and 2006). He is currently the Vice-President of the Austrian Dental Chamber and was awarded the "Obermedizinalrat", the highest honorary title for Physicians and Dentists, for his service to the profession by the President of the Republic of Austria in 2014.

2014 FACTS & FIGURES

NUMBER OF ACTIVE DENTISTS IN CED MEMBER AND OBSERVER COUNTRIES



Source: EU Manual of Dental Practice 2015, Edition 5.1, © CED

EU PROJECTS

Continuous Professional Development for health professionals in the EU



In 2014, the CED was a member of a consortium contracted by the European Commission to produce the **Study concerning the review and mapping of continuous professional development (CPD) and lifelong learning for health professionals in the EU**.

Looking at dentists, doctors, nurses, midwives and pharmacists, the study concluded that while CPD is an ethical obligation for all health professionals, CPD systems across Europe are highly complex and show different approaches across professions and countries.

For dentists, CPD is mandatory in 20 out of 31 countries surveyed with the remaining 11 countries reporting the existence of a voluntary CPD system. Across all countries, professionals report the burden of costs and the lack of time as the main barriers to accessing CPD activities. European cooperation to exchange experience and good practices is largely welcomed as providing an added value to strengthening national CPD systems.

http://ec.europa.eu/health/workforce/docs/cpd_mapping_report_en.pdf

CPD FOR DENTISTS:

- Voluntary CPD ■
- Mandatory CPD ■
- Mandatory and voluntary CPD ■



Funded by
the Health Programme
of the European Union



PaSQ

The CED is an associate partner in the **European Union Network for Patient Safety and Quality of Care**, PaSQ Joint Action which is co-funded and supported by the European Commission within the Health Programme. Through PaSQ, CED Members contributed a number of best clinical and organisational practices used to improve patient safety and quality of care in dentistry and these are now being shared through the PaSQ Interactive Platform.

<http://www.pasq.eu>



JAHWF


The CED is an associate partner in the **Joint Action on Health Workforce Planning and Forecasting** (JAHWF) which is co-funded by the EU Health Programme. In 2014, the CED contributed to work packages on data for health workforce planning, planning methodologies, horizon scanning and sustainability of the Joint Action.

Among other, CED staff conducted 8 interviews with experts on the driving forces which may affect skills and competences of dentists in the future; the results are being compiled in a report which will be finalised in 2015.

<http://euhwforce.weebly.com>

CED YEAR IN NUMBERS

 **1** NEW WEBSITE
WWW.EUDENTAL.EU


6,840 VISITORS IN FIRST 6 MONTHS,
9,923 SESSIONS,
3.12 PAGES PER SESSION,
02:45 AVERAGE SESSION DURATION



 **5**
TASK FORCES,
24 MEMBERS

 **29**
MEMBER
ASSOCIATIONS

 **3**
OBSERVER
ASSOCIATIONS

 **8**
WORKING GROUPS,
73 MEMBERS



 **60**
MAILINGS TO
MEMBERS

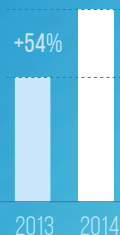
 **486**
TWITTER FOLLOWERS
ON 31/12/2014
@CEDENTISTS

 **4**
RESOLUTIONS

 **8**
NEWSLETTERS,
5 PRESS RELEASES,
3 ARTICLES

 **10**
MEMBER SURVEYS




+54%
2013 2014

 **10**
REPLIES TO PUBLIC
CONSULTATIONS

Photos:

- 1 CED Policy Officer Sara Roda speaking at the Portuguese Dental Congress
- 2 CED Board meeting in Athens
- 3 CED President speaking in Seimas (parliament) on the occasion of the 10th anniversary of the Lithuanian Dental Chamber
- 4 Visit of CED Communications Officers to the European Parliament

CED MEETINGS IN 2014



2
GENERAL MEETINGS,
182 PARTICIPANTS



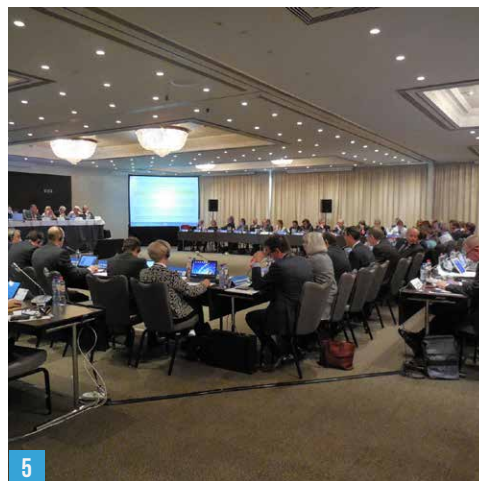
4
BOARD MEETINGS



14
WORKING GROUP
MEETINGS



7
TASK FORCE
MEETINGS



5

43 MEETINGS WITH CED MEMBERS AND OBSERVERS *

24 MEETINGS WITH OTHER STAKEHOLDERS

22 CONFERENCES AND PUBLIC EVENTS

15 MEETINGS CONNECTED TO CONTINUOUS PROFESSIONAL DEVELOPMENT STUDY

11 MEETINGS OF COMMISSION WORKING GROUPS OR CONSULTATIVE BODIES

11 MEETINGS OF JOINT ACTIONS

11 OTHER MEETINGS WITH EUROPEAN INSTITUTIONS

* other than CED General, Board, Working Group or Task Force meetings

CED MEMBERSHIPS

The CED is an Associate Member of the **European Movement International** and a member of the **Federation of European and International Associations established in Belgium (FAIB)**.



The CED is a Liaison Organisation with **CEN/TC 55 Dentistry of the European Committee for Standardization**



The CED is a member of the **EU Health Policy Forum**, the **eHealth Stakeholder Group** and the **European Skills, Competences and Occupations taxonomy (ESCO) Reference Group for Human health and social services activities**



The CED participates in Commission-led **Patient Safety and Quality of Care Working Group**, the **High Level Working Group on EU Workforce for Health** and the **Medical Devices Expert Group**



6

Photos:

5 CED General Meeting in Brussels

6 CED Vice-President at JAHWF meeting in Lisbon

2014 AT A GLANCE

26: Parliament formally approves Tobacco Products Directive

14: Council adopts revised Tobacco Products Directive

14: Commission publishes final opinion on mercury from dental amalgam, with a reference to CED position

25: EESC adopts opinion on The role and the future of liberal professions in the European civil society 2020, with a reference to the CED Charter for liberal professions

1000 reasons to vote for Europe

« Vote to make the European Union a real democracy **representing all citizens.** Your voice counts! »

Dr. Wolfgang Dones, President of CED



 COUNCIL OF EUROPEAN DENTISTS

 European Movement International
www.europeanmovement.eu

European elections **May 22-25**

2

2: Parliament adopts first reading position on Medical Devices Regulation

8: Commission publishes European map of regulated professions

19: Tobacco Products Directive enters into force

22-25: European Parliament elections in all EU Member States

5-6: Council adopts partial general approach on General Data Protection Regulation

6: Commission adopts EU Strategic Framework for Health and Safety at Work 2014-2020

19-20: Council adopts conclusions on economic crisis and healthcare

25: European Commission adopts Action Plan on Antimicrobial Resistance

JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE

15: CED President meets Head of Unit Free Movement of Professionals in European Commission's DG Markt

28-29: CED attends first joint conference of the Joint Action on Health Workforce Planning and Forecasting (JAHWF) in Bratislava, Slovakia

12: CED Vice-President attends Commission's Conference on Modernisation of Professional Qualifications Directive: Safe Mobility in Brussels

CED replies to consultation on patient safety and quality of care

3: CED President calls on Europeans to vote in 2014 European Parliament elections as part of the 1000 reasons to vote for Europe European Movement International campaign (2)

13-14: CED Board meeting in Brussels

24: CED publishes its Manifesto for 2014 European elections

CED replies to consultation on safety of use of bisphenol A in medical devices

9: CED Vice-President attends Commission Conference on Bolstering Liberal Professions in Brussels

CED replies to consultation on VAT

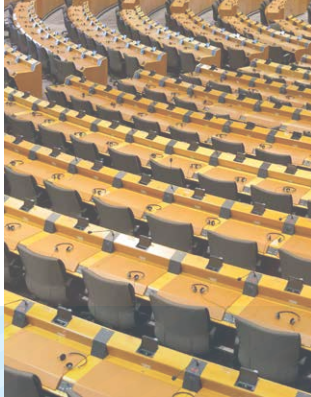
22: CED Board meeting in Athens, Greece
23-24: CED General Meeting in Athens, Greece

2: CED Head of Office presents the study on Continuous Professional Development of health professionals in the EU to representatives of health ministries at meeting of the High Level Working Group on EU Health Workforce

20: CED President and Vice-President attend workshop on Continuous Professional Development in Brussels

30: CED launches new website and logo (3)





1: New European Parliament takes office, Martin Schulz is re-elected as President

1: Italy takes over Council Presidency

15: Jean-Claude Juncker is confirmed as the next Commission President

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER

1: CED publishes 5th update of EU Manual of Dental Practice

7: Chair WG Amalgam attends workshop on transposition of Minamata Convention on mercury in Brussels

CED and Association for Dental Education in Europe (ADEE) publish joint position on competences of dental practitioners

CED replies to consultation on mHealth

25: CED Head of Office speaks at general meeting of European Dental Students Association (EDSA) in Riga, Latvia

27-30: Chair of Working Group Education attends ADEE annual meeting in Riga, Latvia

CED publishes report on undesirable effects of tooth whitening 2012-2013

CED replies to consultation on transparency measures on nanomaterials

12: CED celebrates European Oral Health Day with a joint press release with International Diabetes Foundation (IDF) Europe on oral health and diabetes (4)

16: CED and health stakeholders send a letter to Commission President-elect on division of competences within the new Commission

18: CED Board meeting in Brussels

17: MEP Glenis Willmott is appointed new rapporteur on Medical Devices Regulation

29-30 October: Hearings of European Commissioners-designate in the Parliament

14: 4th edition of European Code against Cancer is launched

1: CED Vice-President attends Commission Working Group Liberal Professions meeting in Naples, Italy

1-3: CED Policy Officer Sara Roda speaks at European Health Forum Gastein, Austria

17: CED Head of Office attends Single Market Forum in Warsaw, Poland

CED replies to consultation on nanomaterials in medical devices

1: New European Commission under President Jean-Claude Juncker takes office. Dr. Vytenis Andriukaitis from Lithuania becomes Commissioner responsible for health. (5)

1: New rules on Council voting enter into force

18: European Antibiotic Awareness Day (6)

14: CED publishes joint leaflet and press release on antimicrobial resistance aimed at health professionals with CPME and FVE (7)

20: CED Board meeting, Brussels

21: CED General Meeting, Brussels

CED replies to consultations on EU ratification of the Minamata convention on mercury and on safety of dental amalgam

1: Council adopts Conclusions on patient safety and quality of care, including the prevention and control of healthcare associated infections and antimicrobial resistance

4: Council agrees to partial general approach to the General Data Protection Regulation

2: CED Vice-President attends meeting of the SME-Intergroup of the European Parliament on Liberal professions in Brussels

5: CED Vice-President attends conference of Joint Action on Health Workforce Planning and Forecasting in Rome, Italy

11: CED and health stakeholders send a letter to Commission President, asking him to keep responsibility for medical devices under Commissioner for health

RESOLUTIONS



VOCATIONAL TRAINING OF DENTISTS

Undergraduate education and training of dentists in the EU are generally provided in accordance with the requirements established by the Professional Qualifications Directive and graduates holding a diploma are entitled to practise dentistry. However, an increasing number of EU countries are implementing different systems of vocational training for new dental graduates to improve their competence and self-confidence, help them to implement their theoretical knowledge and equip them with further clinical and managerial experience required for independent (private or public) general dental practice.

In a resolution, useful particularly for those countries that might be considering development of a vocational training programme for dentists or changes to an existing programme, CED members set out aims and objectives of vocational training, knowledge, skills and competences to be achieved at the end of vocational training, structure of vocational training programmes and political recommendations. Vocational training is considered to be a particularly important tool for deepening the understanding of professional ethics in dental practice setting and for strengthening practical skills of graduates.

The CED calls on national governments to acknowledge the paramount importance of structured vocational training programmes in dentistry and recommends that the decision to introduce or remove vocational training should not be taken on purely economic considerations.

CED resolutions are prepared by experts participating in CED Working Groups and Task Forces and adopted by CED Member associations during the bi-annual CED General Meetings. In 2014, resolutions on vocational training, antimicrobial resistance and online evaluations of dentists were adopted during the May General Meeting in Athens and a resolution on infection control and waste management was agreed during the November General Meeting in Brussels.



ANTIMICROBIAL RESISTANCE AND DENTISTS

Relatively little attention has been paid to the use of antibiotics in dentistry, although antibiotics account for the vast majority of medicine prescribed in dentistry. The lack of effectiveness of existing antibiotics resulting from antimicrobial resistance and lack of new antibiotics have the potential to cause a significant crisis in dentistry and in healthcare more broadly in the treatment of human infection. The CED supports responsible prescribing across all disciplines of healthcare and joins with doctors and veterinarians in spreading the message among health professionals and the public.

CED members recognise that it is essential in terms of both public and oral health that dentists only prescribe antibiotics when they are necessary and appropriate. Dentists can make a genuine difference to the emergence and growth of resistant bacterial strains. Where antibiotic prescribing is indicated, the choice of antibiotics and dosing regimens must be optimised for targeted and efficient therapy to assist in the avoidance of the development of further resistant strains. Dentists should make every possible effort to prevent cross-transmission of resistant bacteria in dental care.

Achieving low prescribing rates will be a challenge to dentists because of pressure from patients; it is important that the public is helped to understand the importance of restricting the use of antibiotics to those cases that require them. Antibiotics should not be available for purchase by unregulated persons via the internet.



ONLINE EVALUATIONS OF DENTISTS

Websites allowing patients to rate dentists are becoming common across Europe. While the CED supports patient feedback to help dentists maintain high standards and improve patient experience, we are concerned about the lack of control over websites that would ensure that the information provided is fair and accurate. The CED recommended a number of quality criteria for online evaluations of dentists and encouraged national dental associations to develop tools to ensure websites' compliance.

Website content should comply with national and EU legislation on personal data protection. Dentists named on a website should be informed of the right to access and rectify data concerning them. Dentists should be given an opportunity to reply to comments and there should be protection against misleading claims and offensive comments. All contributions should be monitored and, where necessary, edited or removed.

To prevent the abuse of online evaluations as a means of unfair competition or advertising, website owners and financial supporters should be identified and a clear distinction should be made between content and advertising.

Websites should include a declaration that all posts are based on personal opinions and patients should be required to confirm that they have personally received treatment on which they are commenting. While online evaluations may stay anonymous, contributors should be identifiable to the website owner through registration or other means of electronic identification.



INFECTION CONTROL AND WASTE MANAGEMENT IN DENTISTRY

Recognising that all dental care should be provided so as to minimise the risk of healthcare-associated infections and ensure the protection of the environment, CED members adopted a resolution on infection control and waste management in dentistry which sets out principles and policy priorities for European dentists.

Dentists have the obligation to protect their patients and the members of the dental team from the risk of health-associated infections; they should regularly update their knowledge as part of continuous professional development. Dental practices are reminded of the importance of compliance with relevant guidance related to management of infectious and hazardous waste, as laid down by existing national laws, administrative acts and recommendations of dental chambers and associations.

European dentists encourage national dental chambers and associations to develop practical guidance documents, in cooperation with Member States and health competent authorities. Member States and health competent authorities should collaborate with dental chambers and associations and inform dentists about national policies aimed at prevention and control of health-associated infections. To allow dental practices to follow specific protocols for management of contaminated medical devices, CED members support the development of unambiguous rules on reprocessing of single-use devices in the framework of the future EU Regulation on medical devices.

WORKING GROUPS

CED Working Groups are established by the CED General Meeting and bring together dentists and other experts in different areas. The General Meeting adopts Working Group mandates and appoints the chairpersons. Each CED Member and Observer association has the right to appoint one member to each of the CED Working Groups.

■ AMALGAM & OTHER RESTORATIVE MATERIALS

In 2014 the CED continued to stress the importance of maintaining dental amalgam as a safe and viable restorative material, encouraging the reduction of its environmental impact and acknowledging differences between Member States. We were pleased to see our position reflected in the SCHER final opinion on mercury from dental amalgam. We contributed to consultations by SCENIHR on the safety of dental amalgam and by the ICF International report on the implementation of the Minamata Convention. We continued our investigations into the safety of alternative restorative materials and replied to the public consultations on SCENIHR preliminary opinion on BPA in medical devices and on transparency measures and on potential health effects of nanomaterials.

In 2015 we will continue to focus on EU initiatives impacting on dental materials and expect to increase our involvement on regulation of endocrine disruptors.



Dr. Susie Sanderson (UK),
Chair of the Working Group

■ EDUCATION & PROFESSIONAL QUALIFICATIONS

In 2014 we prepared a resolution on vocational training for adoption by the General Meeting in Athens where we also bid goodbye to the Group's long-standing chairman Prof. Dr. Oulis. We agreed on a joint position on dentists' competences with the Association of Dental Educators in Europe and renewed cooperation with the European Dental Students' Association. Together with other European associations of health professionals the CED carried out a study of continuous professional development for sectoral health professions in the EU for the European Commission. We contributed to the descriptions of dental professions in the ESCO project and to the consultation on a European area of skills and qualifications.

In 2015 we will continue to follow the implementation of Professional Qualifications Directive, especially developments connected to the European Professional Card and the possible update of the annex of study subjects for dentists. We will also prepare CED resolutions on the dental team and on dental specialisations.



Prof. Dr. Paulo Melo (PT),
Chair of the Working Group

“ MEMBERS OF WORKING GROUP EHEALTH CONTRIBUTED TO THE WORK OF EHEALTH STAKEHOLDERS GROUP, PARTICULARLY TO THE REPORT ON SEMANTIC AND TECHNICAL INTEROPERABILITY OF EHEALTH SERVICES IN THE EU”

■ EHEALTH

In 2014 we finalised a CED resolution on online evaluations of dentists which was successfully adopted by the General Meeting in May. We established ties with our counterparts from the Standing Committee of European Doctors and discussed possible collaboration on eHealth with the chair of their working group. We contributed to the work of eHealth Stakeholders Group, particularly to the report on semantic and technical interoperability of eHealth services in the EU and replied to the consultation on the Green Paper on mHealth. We also monitored the development of SNOMED codes for dentistry within IHTSDO.

Our plans for 2015 include ensuring continued stakeholders' and dentists' involvement in EU eHealth initiatives such as the eHealth Stakeholders Group and the Joint Action, analysis of national laws on electronic health records, organisation of possible workshops for CED members on SNOMED/IHTSDO and mHealth applications, and input into CED policy on data protection and ethics.



Dr. Piret Väli (EE),
Chair of the Working Group

■ INFECTION CONTROL & WASTE MANAGEMENT

In 2014 our Working Group prepared an update of the CED policy on infection control and waste management. We continued to monitor national legislation; during the meeting in Vilnius, we shared information and positions on national practices relating on single-use items, sharps protection protocols, quality of dental practices water and management of waste disposal as well as the proposals for the introduction of ozone equipped sterilisation units, submitted to the Commission by private manufacturers. We also discussed existence of infection control and waste management modules in the curricula of European dental schools.

Activities planned for 2015 include meeting with the representatives of the European Centre for Disease Prevention and Control to discuss possible collaboration on developing online resources on infection control in dentistry, a questionnaire on national legislation with regard to dental practices' accessibility for patients with disabilities, and monitoring the Commission's decisions on a future proposal to amend the Waste Directive.



Prof. Dr. Ioannis Tzoutzas (EL),
Chair of the Working Group

“ WORKING GROUP ORAL HEALTH CONCENTRATED ON DEVELOPING COMMON MESSAGES FOR USE BY CED MEMBERS IN COMMUNICATING WITH THEIR NATIONAL AUDIENCES ON THE LINKS BETWEEN ORAL HEALTH AND DIABETES”

MEDICAL DEVICES

In 2014 there was limited progress on the proposed Medical Devices Regulation with the European Parliament adopting its report in April and national governments not able to reach a common position. CED members were encouraged to contact their government representatives on issues of importance to dentists: single use devices, Unique Device Identification, implant cards and classification of nanomaterials. We continued to participate in the Commission's Medical Devices Expert Group and the CEN technical committee. Together with Working Group Amalgam, we prepared CED replies to consultations on BPA and nanomaterials.

In line with the updated mandate for our Working Group which was adopted in November 2014, we will continue to focus on the revision of the EU regulatory framework for medical devices and will follow developments in European standardisation of both medical devices and health services.



Dr. Edoardo Cavallè (IT),
Chair of the Working Group

ORAL HEALTH

In 2014 Working Group Oral Health concentrated on developing common messages for use by CED members in communicating with their national audiences on the links between oral health and diabetes. We took the occasion of the European Oral Health Day on 12 September to issue a joint press release with the International Diabetes Federation – Europe and encouraged CED members to organise events with national diabetes stakeholders to raise awareness across the EU.

In 2015 our main task will be to prepare a public event in the European Parliament and common messages on oral cancer. We will follow further developments in connection to the new Tobacco Products Directive which came into force in mid-2014 and continue our work on common risk factors for oral and other systemic diseases.



Dr. Hendrike van Drie (NL),
Chair of the Working Group



■ PATIENT SAFETY

In January 2014, a number of best organisational and clinical practices aimed at ensuring patient safety submitted by CED members were published on the website of the Joint Action on Patient Safety and Quality of Care (PaSQ), an initiative to which the CED has been contributing since its start in 2012. Throughout 2014 we participated in the Commission's Patient Safety and Quality of Care Working Group (now Expert Group) and its subgroup in preparing a report on education and training in patient safety. We replied to the consultation on future EU Agenda on safety and quality.

In 2015 we will continue to represent dentists' views on patient safety in whichever new structures the Commission decides to engage stakeholders; we will also remain involved in PaSQ which has now been extended until March 2016.



Prof. Dr. Wolfgang Sprekels (DE),
Chair of the Working Group

■ TOOTH WHITENING

To support the ongoing availability of tooth whitening products in the EU and ensure they are used in a way that safeguards patient safety, the CED agreed with the European Commission in 2010 to report on undesirable effects of tooth whitening; first such report was published in August 2014. The Working Group continued to explore the safety of tooth whitening products containing between 0,1 and 6% of hydrogen peroxide for persons under 18 years of age and concluded that the current EU prohibition is not in the patients' best interest.

In 2015 we will discuss with the Commission the issue of under 18s and prepare positions on products containing over 6% hydrogen peroxide and on the use of whitening lamps. Finally, a press release clarifying the illegality of borates in tooth whitening is planned.



Dr. Stefaan Hanson (BE),
Chair of the Working Group

“ THE CED AGREED IN 2010 TO REPORT ON UNDESIRABLE EFFECTS OF TOOTH WHITENING; FIRST SUCH REPORT WAS PUBLISHED IN AUGUST 2014”

TASK FORCES

CED Task Forces are established by and accountable to the CED Board of Directors. Composed of CED Directors and invited experts, they are active for a limited period of time and on specific and urgent issues.

■ ANTIBIOTICS IN DENTISTRY

Antibiotics account for a broad majority of medicines prescribed in dentistry. The CED recognises that antimicrobial resistance is creating a significant public health crisis and seeks to ensure that antibiotics are prescribed by dentists only when they are necessary and appropriate. This position was affirmed in our 2014 resolution on antimicrobial resistance.

Antimicrobial resistance cannot be tackled by dentists in isolation. On the occasion of the European Antibiotic Awareness Day (EAAD) on 18 October 2014, the CED partnered with European doctors and veterinarians to produce the second in a series of leaflets on antibiotics, listing recommendations to health professionals for responsible prescribing. The CED also attended the EAAD event in Stockholm through our Swedish member.

Antimicrobial resistance is one of the priorities of the European Commission and new initiatives are expected in 2015 to which the CED will be glad to contribute.

Dr. Susie Sanderson (UK), Chair of the Task Force

■ COMMUNICATIONS

In 2014 the Task Force led the development of a new CED website which was launched at the end of June and was accompanied by the introduction of a new format of CED newsletters; both changes were meant to better communicate the CED's varied in extensive involvement in CED policy and legislation to our members, partners and the general public. We took this opportunity to update and refresh our logo. In 2014 the CED also published another update of the EU Manual of Dental Practice, our flagship publication detailing EU and national frameworks for dentistry in Europe and providing a host of important statistics on our sector.

Plans for 2015 include producing this Annual Report as a way to present our work in an accessible and attractive way, as well as developing new content for our website to support our members in getting involved in the EU legislative process and strengthening our social media presence, primarily on Twitter.

Mrs. Nina Brandelet-Bernot (CED Office), Chair of the Task Force

■ ETHICS

In the CED Code of Ethics, CED members have agreed to a set of guiding principles for professional conduct and ethics throughout Europe. First adopted in 1965 and subsequently amended in 1982, 1998, 2002 and 2007, the code also includes a section on ethics for electronic commerce.

In view of the technological changes and the rate of uptake of electronic communications over the last years, as well as the possible implications of the future General Data Protection Regulation, the CED Board decided in 2014 to revive Task Force Ethics and charge it with preparing the next update of the CED Code of Ethics. In 2014 this resulted in a survey addressed to CED members on changes to national codes of ethics since 2014. In 2015 work will continue on analysing the results of the survey and monitoring developments on the General Data Protection Regulation to ensure that the CED Code will be in line with EU legislation.

Dr. Marco Landi (IT), Chair of the Task Force

■ INTERNAL MARKET

Task Force Internal Market, mainly composed of legal experts, is charged with monitoring the plethora of issues relating to internal market, including competition and professional regulation matters.

In 2014 the main focus of the Task Force was on the so-called transparency and mutual evaluation exercise led by the Commission and under which Member States are required to report on and justify national regulations and restrictions on access to professions. Another regular topic on our agenda was the General Data Protection Regulation. We also led CED contributions to the Joint Action on EU Health Workforce Planning and Forecasting (JAHWF) and discussed problems caused by unfair advertising in dentistry in some Member States.

In 2015 we will continue our engagement on the above issues as well as other items arising from the implementation of the Professional Qualifications Directive and the Directive on the Implementation of Patients' Rights in Cross-Border Healthcare. International trade agreements such as TTIP and TiSA and their potential impact on health will also be of increasing importance.

Dr. Alexander Tolmeijer (NL), Chair of the Task Force

■ LIBERAL PROFESSIONS

To ensure that the contributions of liberal professions to the society are safeguarded at EU level, the CED initiated the development of the EU Charter of Liberal Professions which was adopted together with other liberal professions and directs our work in this area.

In March 2014 the CED Charter was mentioned in the EESC report on liberal professions; we later met with the rapporteur Arno Metzler. In April we attended a conference on liberal professions in Brussels, followed by a meeting of the Commission Working Group Liberal Professions in Naples in October and the SME Intergroup breakfast on liberal professions in the European Parliament in December. We also prepared amendments for the Commission's Action Lines resulting from the Naples meeting and met with European organisations of doctors (CPME) and pharmacists (PGEU).

In 2015 we expect to contribute to work on liberal professions in the European Parliament, formalise our participation in the Commission-led forum and strengthen our collaboration with our colleague liberal professions.

Asst. Prof. Dr. Nikolai Sharkov (BG), Chair of the Task Force

“ TO ENSURE THAT THE CONTRIBUTIONS OF LIBERAL PROFESSIONS TO THE SOCIETY ARE SAFEGUARDED AT EU LEVEL, THE CED INITIATED THE DEVELOPMENT OF THE EU CHARTER OF LIBERAL PROFESSIONS WHICH WAS ADOPTED TOGETHER WITH OTHER LIBERAL PROFESSIONS AND DIRECTS OUR WORK IN THIS AREA”

Asst. Prof. Dr. Nikolai Sharkov

CED BOARD OF DIRECTORS

The Board of Directors is composed of eight members, elected by the General Meeting every three years. The Board carries out political leadership and secures proper and efficient administration of the CED.



Dr. Wolfgang Doneus
President



Dr. Marco Landi
Vice-President



Dr. Susie Sanderson
Treasurer



Dr. Peter Engel
Director



Dr. Pirkko Grönroos
Director



Dr. Roland L'Herron
Director



Asst. Prof. Dr. Nikolai Sharkov
Director



Dr. Alexander Tolmeijer
Director

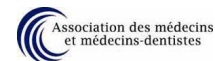


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