

Medical Council - Malta

Annual Report 2013



Published by the

MEDICAL COUNCIL MALTA

St. Luke's Hospital
Out Patients' Department, Level 1,
St. Luke's Square,
Gwardamangia, PTA 1010
Malta

<https://health.gov.mt>

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1 Foreword by the President of the Medical Council

The principal discussions during the year 2003 centred around the introduction of the compulsory professional indemnity insurance which was incorporated in Maltese Law by means of Legal Notice 84 of 2014, 'Indemnity Insurance for Healthcare Professionals Regulations, 2014'.

During the year 2013 the number of new registrations amounted to 293 (277 doctors and 16 dental surgeons). Twenty doctors were also registered for the first time in the temporary service lists. The total number of doctors and dentists on the Medical Council records in the year 2013 totalled 2,367 (2,133 doctors and 234 dentists). This increase in the number of practitioners on the Medical Council Registers, a greater awareness on patients' rights and a more sophisticated way in the practice of medicine have also resulted in an increase in complaints registered with the Medical Council.

The Council is also periodically faced with queries of a technical and administrative nature made by national and European bodies. This included the Council's advice and action regarding updates of Maltese Laws as per EU directives.

During the year 2013 there were some changes in the composition of the Council. The Council also encountered difficulties of an administrative nature following the resignation of clerical staff that had been subcontracted from non-government entities. This matter has since been resolved. It was however detrimental to the proper functioning of the Council, hence the need to prioritise on its obligations.

Notwithstanding these difficulties, the Council held twenty Council meetings during this year. Besides these plenary sessions, Council members met regularly on various subcommittees. The Council was also represented at various meetings abroad.

I take the opportunity to thank all past and present members, the registrar and the administrative staff for their contribution towards the Council's performance in carrying its duties. May I reiterate that according to the specific law that governs the Council's operations, our final goal is to safeguard patients' safety.

Dr Ilona Debono B.A., LL.D., Adv.Trib.Eccl.Melit.
President of the Medical Council

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2 Composition of the Medical Council:

The composition of the Medical Council of Malta is established by the Article 9 the Health Care Professions Act (HCPA) 2003, Chapter 464 of the Laws of Malta.

2.1 Members of the Medical Council of Malta prior to the Medical Council's Elections held in March-April 2013

President Medical Council appointed by the Prime Minister

(Appointed by the Prime Minister Term of Office from 22nd September 2011 to 21st September 2014)

Dr Ilona Debono B.A. LL.D. Adv. Trib.Eccl.Melit

Members appointed by the Prime Minister

(Appointed by the Prime Minister Term of Office from 22nd September 2011 to 21st September 2014)

Dr John Felice B.Ch.D.

Dr Alex Magri M.D.

Members appointed by the University of Malta

(Appointed by the UoM Term of Office from 15th December 2011 to 14th October 2013)

Dr Daniel Farrugia M.D. (Malta), DEAA, EDIC

Members elected by the Registered Medical Practitioners

(Elected Term of Office from 29th March 2010 to 28th March 2013)

Dr Michael J. Boffa, M.D., M.R.C.P.(UK), F.R.C.P.(Lond), C.C.S.T.(Derm)(UK),

M.Sc.(Derm)(Lond), D.Derm.(Lond), D.G.U.M. (Lond)

Dr Doreen Cassar M.D., Dip W.H.(ICGP), Dip PC & GP(Ulster), M.M.C.F.D

Mr John Cauchi, B Sc., M.D., F.R.C.S. (Ed), F.R.C.S (Paed Surg)

Dr Bryan Flores Martin, M.D., M.M.C.F.D, Cert. Diab (ICGP)

Dr Paul Soler, M.D., M.R.C.P.(UK), M.R.C.P.C.H.

Members elected by the Registered Dental Surgeons

(Elected Term of Office from 16th April 2010 to 15th April 2013)

The Hon Dr Herbert Messina Ferrante H.E., M.O.M., B.Ch.D.(Malta), L.D.S.R.C.S.(Eng), F.I.C.D.(USA), F.P.F.A.(USA), F.R.S.M.(UK), F.R.S.H.

Dr David Muscat, B.D.S.(Lond)

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Members representing the Public – appointed by the Prime Minister

(Appointed by the Prime Minister Term of Office from 22nd September 2011 to 21st September 2014)

Ms Gabriella Abela M.A., MSc.

Member representing the Public to be nominated.¹

Registrar

Ms Svetlana Cachia B.Com.(Hons.)(Melit.), M.A.(Public Policy)(Melit.)

2.2 Members of the Medical Council of Malta after the Medical Council's Elections held in March-April 2013²

President Medical Council

(Appointed by the Prime Minister Term of Office from 22nd September 2011 to 21st September 2014)

Dr Ilona Debono B.A. LL.D. Adv. Trib.Eccl.Melit

Members appointed by the Prime Minister

(Appointed by the Prime Minister Term of Office from 22nd September 2011 to 21st September 2014)

Dr John Felice B.Ch.D.

Dr Silvio John Gixti M.D. (Malta), MRCGP(INT), MMCFD, CCST³

Members appointed by the University of Malta⁴

(Appointed by the UoM Term of Office from 23rd October 2013 to 24th October 2016)

Dr Daniel Farrugia M.D. (Malta), DEAA, EDIC

¹ Mr Charles Messina was appointed as Commissioner for Health in the Office of the Ombudsman on 1st August 2012, and position remained vacant until 3rd September 2013.

² Following the General Elections in March 2013, the Members appointed by the former Prime Minister offered their resignation to the new Executive. The new Prime Minister re-appointed the Members until the termination of the term (21st September 2014) by means of letters of appointment dated 3rd September 2013.

³ Dr Silvio John Gixti M.D. (Malta), MRCGP(INT), MMCFD, CCST was appointed by the Prime Minister through letter of appointment dated 3rd September 2013.

⁴ Dr Daniel Farrugia M.D. (Malta), DEAA, EDIC was re-appointed by the University of Malta from 15th October 2013 till 14th October 2016, through letter of appointment dated 23rd October 2013

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Members elected by the Registered Medical Practitioners

(Elected Term of Office from 30th April 2013 to 29th April 2016)

Dr Michael J. Boffa, M.D., M.R.C.P.(UK), F.R.C.P.(Lond), C.C.S.T.(Derm)(UK),

M.Sc.(Derm)(Lond), D.Derm.(Lond), D.G.U.M. (Lond)

Dr Doreen Cassar M.D., Dip W.H.(ICGP), Dip PC & GP(Ulster), M.M.C.F.D

Dr Bryan Flores Martin, M.D., M.M.C.F.D, Cert. Diab (ICGP)

Dr Alex Magri M.D.

Dr Paul Soler, M.D., M.R.C.P.(UK), M.R.C.P.C.H.

Members elected by the Registered Dental Surgeons

(Elected Term of Office from 3rd May 2013 to 2nd May 2016)

The Hon Dr Herbert Messina Ferrante H.E., M.O.M., B.Ch.D.(Malta), L.D.S.R.C.S.(Eng),

F.I.C.D.(USA), F.P.F.A.(USA), F.R.S.M.(UK), F.R.S.H.

Dr David Muscat, B.D.S.(Lond)

Members representing the Public – appointed by the Prime Minister

(Appointed by the Prime Minister Term of Office from 22nd September 2011 to 21st September 2014)

Ms Gabriella Abela M.A., MSc.

Mr Philip Borg Ph.Lic., S.Th.B., Dip.Soc.Sc.⁵

Registrar

Ms Svetlana Cachia B.Com.(Hons.)(Melit.), M.A.(Public Policy)(Melit.)

⁵ Mr Philip Borg Ph.Lic., S.Th.B., Dip.Soc.Sc was appointed by the Prime Minister through letter of appointment dated 3rd September 2013.

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3 Legal Functions of the Medical Council

The Functions of the Medical Council of Malta are established by Article 10 of the HCPA 2003, Chapter 464, of the Laws of Malta. The Medical Council of Malta is the regulatory body for the registration and regulation of Medical and Dental Practitioners in the Maltese territory. Its mandate is to promote, protect and maintain the health and safety of the general public by ensuring proper standards in the practice of medicine. The Medical Council's statutory functions are defined in the Health Care Professions Act (HCPA) 2003, Chapter 464, of the Laws of Malta, which abides by the EU Directive 2005/36, as:

- Administering the systems for the registration and recommending to H.E. The President of Malta the granting of Licences to both Medical and Dental Practitioners, enabling them to practice their profession in Malta.
- Keeping, maintaining and regularly publishing the Medical Council Registers⁶. These Registers are the single authoritative source of information on the Medical and Dental Practitioners in Malta and therefore being a national resource for various national and international stakeholders.
- To prescribe and maintain professional and ethical standards for the Medical and Dental professions. The Medical Council aims at offering continuous support and assistance to professionals in ethically performing their role in society;
- To levy such fees, from all the registered Medical and Dental Practitioners, in line with the provisions of the Legal Notice 330/2006 of the HCPA 2003, Chapter 464 of the Laws of Malta.

The Medical Council aims at safeguarding the highest professional standards of the Medical and Dental ethics, education and practice, in the interest of the patients, that of the private and public health services, and that of the Professionals themselves.

⁶ The Registers include: the Medical Practitioners Principal, Temporary and Provisional Register; the Dental Surgeons Principal Register; and the Medical and Dental Specialist Register. The Medical Council also holds lists of Medical Practitioner and Dental Surgeons from other EU Members States who practice in Malta on a Temporary Service basis only. The Registers may be accessed from:

<https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Registers.aspx>

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3.1 Main Aims for the year 2013

- Concluding and delivering decisions on Inquiries pending from previous years.
- Investigating complaints received in year 2013.
- Developing and improving the Medical Council database in order to ensure the proper storage and maintenance of the data held about all registered Medical and Dental Practitioners, in line with the provisions of the Data Protection Act.
- Providing a 'real-time' updated list of all the registered Medical/Dental Practitioners, who are authorised to practise in Malta, in line with the 'myHealth' initiative.
- Providing effective and efficient professional regulation so as to ensure and maintain the importance of the Medical Council and its role in society.
- Providing assistance and guidance to both national and international stakeholders requesting statistical information and other data.
- Conducting the Medical Council Malta Statutory Examination (MCMSE) for non-EU Medical and Dental applicants or foreign nationals with non-EU Degrees, as required by Maltese and EU prevailing legislation.
- Collecting payments as stipulated in the HCPA 2003, Chapter 464, L.N. 330/2006.

3.2 Elections held in 2013

- The elections for the new Council's term 2013-2016, as stipulated by the Medical Council (Elections) Regulation 2003, in accordance with the provisions of article 9 (e) and (f) of the Health Care Professions Act, 2003 (Chapter 464 of the Laws of Malta), were held in March/April 2013.⁷

⁷ Medical Council – Elections March/April 2013, Report by the Election Commissioners, 31st May 2013
<https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/councelec.aspx>

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- The elections for a representative of the Medical Council on the Appeals Committee for the term 2013-2016, in line with the provisions of Article 49(1) (e) (i) of the Health Care Professions Act, 2003 (Chapter 464 of the Laws of Malta) were held in July/August 2013.⁸

3.2.1 Appointment of the Election Commissioners for the year 2013

In accordance with the HCPA 2003, Chapter 464 of the Laws of Malta, Subsidiary Legislation, 'Medical Council (Elections) Regulations', Legal Notice 35 of 2004, Article 3, during Council Meeting No. 01/2013, held on 16th January 2013, Dr George Depasquale, M.D., Dr Joseph Farrugia, M.D., and Dr Roy Schembri Wismayer, M.D., D.C.P.(Lond.), Dip.Bact.(Lond.), M.C.A.P. (Aff.), were appointed as the Medical Council Election Commissioners for a period of one year.

3.3 Challenges faced by the Medical Council

The Medical Council of Malta operates in a highly sensitive and dynamic environment which requires constant dedication, responsible actions and proactive measures. This also requires an efficient and effective management of the policies adopted and the actions endeavoured. The Medical Council occupies a unique important role in the health sector where its activities have both direct and indirect implications to the operations of several local and international stakeholders, which are in turn based in diversified environments. This reality exposes the Medical Council with an ever-increasing amount of issues and commitments.

Nevertheless, the Medical Council seeks to maintain its role in society and to exercise its functions, even though with great limitations, making it's the principal aim of the Council to perform its duties and delivering, much more demanding.

- **Lack of Human Resources:**

The Medical Council lacks appropriate human resourcing which highly hinders its ability to meet its goals. The Registrar is employed on a full-time basis with the Council, and she is assisted by a clerk employed through subcontracting. This arrangement, may however fail to offer continuity and reliability.⁹

⁸ Elections for a representative of the Medical Council on the Appeals Committee, July/August, Report by the Election Commissioners, 27th August 2013

<https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/councelec.aspx>

⁹ Ms Kristabelle Buhagiar terminated her employment with the Medical Council end November 2012 and she was replaced by Mr Emanuel-John Falzon from beginning December 2012 until end October 2013. The clerks offered to date did not retain their position with the Council.

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- **Lack of Adequate Offices:**

In February 2012, the Medical Council was relocated to a small office in St. Luke's Hospital, Outpatients' Department, Level 1, St. Luke's Square Gwardamangia, since the premises in Valletta were deemed to be structurally dangerous and had to be evacuated immediately. Due to limited space in these premises, the Council was not allocated an adequate storage space for its archives. This situation is hindering the Registrar from accessing the needed documents.

The Medical Council lacks an appropriate office with adequate storage, privacy, space and other requirements and is therefore waiting for adequate premises and storage facilities.

- **Financial Resources:**

The Medical Council's funds are deposited in a below-the-line account at The Treasury. These funds are controlled by the Directorate of Public Health Regulations and therefore funds may not be utilised prior to approval, even for minimal expenses. This situation hinders the Council's financial flexibility which in turn limits the Council's autonomy and efficiency.

- **IT System:**

The Medical Council operates and maintains the data stored about all registered Medical and Dental practitioners in Malta through a tailor-made database management system developed in the year 2006, which is regularly updated in order to meet the requirements of Council. One of the main purposes of this system is the publishing of the Registers. However, in view of the developments envisaged for the coming years by the national government along with those of the European Union, this system requires either to be extensively modified, or needs to be replaced with a new IT system. The Medical Council is therefore discussing this matter with the relevant bodies so as to design an action plan for the coming years.

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4 Meetings and Attendance

The Medical Council held 21 Meetings from 1st January 2013 and 31st December 2013:

	Present	Excused
Dr Ilona Debono, President	17	4
Ms Gabriella Abela	17	4
Mr Philip Borg ¹⁰	8	-
Dr Michael J. Boffa	17	4
Dr Doreen Cassar	16	5
Mr John Cauchi ¹¹	5	1
Dr Daniel Farrugia	20	1
Dr John Felice	11	10
Dr Silvio John Grixti ¹²	4	4
Dr Alex Magri	20	1
Dr Bryan Flores Martin	20	1
Dr Herbert Messina Ferrante H.E., M.O.M.	9	12
Dr David Muscat	16	5
Dr Paul Soler	12	9

¹⁰ Appointed on 3rd September 2013

¹¹ Term expired on 28th March 2013

¹² Appointed on 3rd September 2013

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5 Sub-Committees of the Medical Council and Representatives of the Medical Council on other Committees

The Sub-Committees are appointed by the Medical Council and entrusted to work on its behalf through the powers delegated.

- **Sub-Committee for the Hearing of Inquiries**

This Sub-committee was composed of Dr Ilona Debono, President of the Medical Council as chairperson; a Medical Practitioner member (by rotation) and a Dental Surgeon member (by rotation) depending on the case; Ms Gabriella Abela and Mr Philip Borg (by rotation).

- **Sub-Committee for Registration of the Medical Practitioners**

This Sub-committee was responsible for the task of vetting all new applications for registration of Medical Professionals in Malta, and for the approval of qualification certificates submitted for recognition. This sub-committee was composed of Dr Doreen Cassar, Dr Alex Magri and Dr Bryan Flores Martin.

- **Sub-Committee for Registration of the Dental Surgeons**

This Sub-committee was responsible for the task of vetting all new applications for registration of Dental Surgeons in Malta, and for the approval of qualification certificates submitted for recognition. This sub-committee was composed of Dr John Felice, Dr David Muscat and Dr Herbert Messina Ferrante H.E., M.O.M.

- **Sub-Committee for the Foundation School Programme**

The Medical Council of Malta is responsible for the quality assurance of the Malta Foundation School Programme. Dr Doreen Cassar and Dr Bryan Flores Martin were appointed to form the Quality Assurance Team of the Malta Foundation Programme for three (3) academic years to ensure continuity from 2009 till 2011¹³. The Medical Council started procedures for a Call for Interest to appoint the Members of the Medical Council Quality Assistance Committee (MCQAC) for three (3) academic years, in line with the Financial Laws regulating the management of the Medical Council's below-the-line account¹⁴.

- **Sub-Committee for the Medical and Dental Examinations**

In accordance to the EU Directive 2005/36/EC, the HCPA 2003, Chapter 464 of the Laws of Malta, and the Medical Council's standard policy, all non-EU applicants/applicants in the possession of a non-EU first medical or dental degree, are requested to sit for and successful

¹³ Council Meeting No. 49/2009, dated Wednesday 1st July 2009.

¹⁴ The remuneration for this post shall be that of € 3494.06 for the specified period of appointment, and shall be in three (3) divided annual instalments of € 1164.69

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pass the Medical Council Malta Statutory Examination (MCMSE), in order to be granted Full-Permanent registration in Malta. The MCMSE for Medical Practitioners and Dental Surgeons are to be conducted twice a year by law. The Council identifies the need to develop standard procedures and guidelines on these examinations.

The Sub-committee appointed by the Medical Council responsible for the design an improved structure for the Medical Practitioners Examination was composed of Dr Doreen Cassar and Dr Alex Magri.

The Sub-committee responsible for the Dental Surgeons Examinations was formed by Dr John Felice, Dr David Muscat and Dr Herbert Messina Ferrante H.E., M.O.M. Several meetings were held with the Faculty of Dental Surgery, University of Malta (UoM), with the aim of reaching a Memorandum of Understanding in order to conduct the MCMSE for dentists.

- **Sub-Committee on Advertising and Financial Conduct by Medical/Dental Practitioners**

This Sub-committee entrusted to review the guidelines of the Medical Council concerning the Financial Conduct by Medical/Dental Practitioners was composed of Mr John Cauchi and Dr John Felice.

- **Representative on the Medical Specialist Accreditation Committee (MSAC)**

Dr Paul Soler and Dr Bryan Flores-Martin (substitute) represented the Medical Council on the Medical SAC until October 2013. During November and December 2013, Dr B. Flores-Martin and Dr Michael J. Boffa (substitute) occupied this position.

- **Representative on the Dental Specialist Accreditation Committee (DSAC)**

Dr Herbert Messina Ferrante H.E., M.O.M, and Dr David Muscat (substitute) represented the Medical Council on the Dental SAC.

- **Representative on the Post Graduate Training Advisory Committee**

Dr Michael J. Boffa represented the Medical Council on the Post Graduate Training Advisory Committee.

- **Sub-Committee to upgrade the Standing Orders and Erasure Procedures**

The Sub-committee was set up with the responsibility to upgrade the Standing Orders and Erasure Procedures in line with the HCPA 2003, Chapter 464 of the Laws of Malta, and the EU Directives. Members present unanimously agreed this sub-committee is composed of Dr Ilona Debono (President Medical Council), Dr Bryan Flores Martin (Medical Practitioner Member), Dr

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David Muscat and Dr Herbert Messina Ferrante H.E., M.O.M, (substitute) (Dental Surgeon Members), and the Registrar.

- **Sub-Committee to the Implementation of the EPC and Revalidation**

Dr Doreen Cassar, Dr Bryan Flores Martin and Dr David Muscat, Members of the Medical Council who regularly attend meetings and conferences dealing with the ongoing developments at EU and an International level, held overseas, were appointed as a Sub-Committee in order to draft a detailed report regarding these matter so as to enable the Medical Council to present its position to the National Contact Point, to the Prime Minister, to the Minister of Health and to the Attorney General.

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6 Participation in Conferences and Training held Overseas

- **Healthcare Professionals Crossing Border (HPCB) 31st October 2013, London**

Dr Bryan Flores Martin represented the Medical Council during this meeting.

Annex 1: report presented to the Council by Dr B. Flores Martin

- **Information and training session on the use of the International Market Information (IMI) under the Directive on Patients' rights in cross-border healthcare, European Commission, Directorate General Internal Market and Services, 21st November 2013, Brussels**

Ms Gabriella Abela, Medical Council Member and the Registrar, Ms Svetlana Cachia attended the training.

Annex 2: report presented to the Council by Ms G Abela and Ms S Cachia

- **Federation of Dental Competent Authorities and Regulators (FEDCAR), Autumn General Assembly, 29th November 2013, Paris**

Dr David Muscat represented the Medical Council during this meeting.

Annex 3: report presented to the Council by Dr D. Muscat

- **Tenth Meeting of the European Network of Medical Competent Authorities (ENMCA), 2nd December 2013, Copenhagen**

Dr Doreen Cassar represented the Medical Council during this meeting.

Annex 4: report presented to the Council by Dr D. Cassar

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7 Medical Council Malta Statutory Examinations (MCMSE)

In accordance to the EU Directive 2005/36/EC, the Health Care Professions Act (HCPA) 2003, Chapter 464 of the Laws of Malta, and the Medical Council's standard policy, all non-EU applicants in the possession of a non-EU first medical/dental degree, are requested to sit for and successful pass the Medical Council Malta Statutory Examination (MCMSE), in order to be granted Full-Permanent registration in Malta. The EU Directive 2005/36/EC stipulates that the Medical Council of Malta has to offer the MCMSE to its applicants to a minimum of twice a year. During this year, the Medical Council dedicated its recourses for the development of a set of standard procedures and guidelines for these examinations. These will be finalised in the coming year.

7.1 MCMSE for Medical Practitioners

The MCMSE for Medical Practitioners was held in April and September, as stipulated by the above-mentioned directive.

Ms Gabriella Abela was entrusted to act as the Examination Coordinator during the MCMSE held in year 2013.¹⁵

7.1.1 MCMSE for Medical Practitioners April 2013¹⁶

The MCMSE was held on Wednesday 3rd April 2013, at the Medical School, Mater Dei Hospital. Eight (8) applicants confirmed their intention to sit for this examination session and paid the stipulated examination fee of €1164.69 (as per Legal Notice 330/2006) by the deadline stipulated. Only seven (7) candidates were able to sit for the examination. One of the applicants asked to sit for the MCMSE September 2013 session.

The examination was conducted in the form of an interview (Viva Voce) in English, during which the candidates were tested in the following subjects with two examiners during each session. All subjects were failing, that is, a pass-mark of fifty *per centum* (50) has to be obtained in all the subjects in order to be successful. Candidates may only sit for the examination twice.

¹⁵ This was unanimously decided during Council Meeting No. 01/2013 held on Wednesday 16th January 2013.

¹⁶ The full report of the MCMSE may be accessed from:

https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Mlt_Stat_Exam.aspx

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The Groupings were as follows:

- Surgery and Medicine
- Paediatrics and Obstetrics & Gynaecology
- Psychiatry and Family Medicine
- Public Health and Pathology

Table 1: Results of the MCMSE dated 3rd April 2013

DATE	NUMBER OF APPLICANTS	RESULTS	
		PASS	FAIL
03.04.2013	7 candidates sat for whole examination	2	5

7.1.2 MCMSE for Medical Practitioners September 2013¹⁷

The MCMSE was held on Wednesday 18th September 2013, at the Medical School, Mater Dei Hospital. Three (3) applicants confirmed their intention to sit for this examination session and paid the fee stipulated in Legal Notice 330/2006, by the deadline stipulated. However, only two (2) candidates were able to attend. One of the applicants asked to sit for the examination in a future session.

The MCMSE was conducted in the form of an interview (Viva Voce) in English, during which the candidates were tested in the following subjects with two examiners during each session. All subjects were failing, that is, a pass-mark of fifty *per centum* (50) has to be obtained all the subjects in order to be successful. Candidates may only sit for the examination twice.

The examination was organised in the follows Groupings:

- Family Medicine and Psychiatry
- Surgery and Medicine
- Public Health and Pathology
- Obstetrics & Gynaecology and Paediatrics

¹⁷ The full report of the MCMSE may be accessed from:
https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Mlt_Stat_Exam.aspx

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Table 1: Results of the MCMSE dated 18th September 2013

DATE	NUMBER OF APPLICANTS	RESULTS	
		PASS	FAIL
18.09.2013	2 candidates sat for whole examination	-	2

7.2 MCMSE for Dental Surgeons

Dr John Felice, Dr David Muscat and Dr Herbert Messina Ferrante H.E., M.O.M, were entrusted to organise the MCMSE for Dental Surgeons during year 2013.¹⁸ Several meetings were held with the Faculty of Dental Surgery, University of Malta (UoM) in order to organise these examinations in line with the requirements of EU legislation.

7.2.1 MCMSE for Dental Surgeons September 2013¹⁹

All the prospective candidates were informed that the MCMSE will be held between Monday 2nd September and Saturday 14th September 2013. Candidates were requested to confirm their attendance and pay the stipulated fee of €1164.69 as per attached Legal Notice 330/2006, by 31st July 2013. Basic information about the set-up for this examination was provided. All subjects were failing, that is, one must obtain a pass-mark of 50 *per centum* in all the subjects in order to be successful. Candidates may only sit for the examination twice.

No candidate applied to sit for this session.

¹⁸ This was unanimously decided during Council Meeting No. 07/2013 held on Wednesday 22nd May 2013.

¹⁹ The full report of the MCMSE may be accessed from:

https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Mlt_Stat_Exam.aspx

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8 Registration granted during year 2013

Total Number of registered Medical Practitioners and Dental Surgeons during year 2013²⁰:

Register	Gender		Total
	Female	Male	
Medical Practitioners: Principal Register	50	47	97
Medical Practitioners: Temporary Register ²¹	13	27	40
Medical Practitioners: Provisional Register	93	86	179
Dental Surgeons: Principal Register	10	4	14
Dental Surgeons: Temporary Register	-	4	4²²
Grand Total			334

²⁰ Data retrieved from the Medical Council database.

²¹ Temporary Registration is granted for a period of one year, renewable annually, on the condition that such practice is carried out only under supervision in a Government hospital/clinic or any other branch of the health service provided by the Government. Temporary Registration is not equivalent to Full Registration in terms of the HCPA 2003, Chapter 464 of the Laws of Malta, and the EU Directive 2005/06/EC.

²² Seven Dental Practitioners, who graduated from the University of Malta, held Temporary Registration from for a period of six months, after which they granted Full/Permanent Registration.

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Total Number of registered Medical Practitioners and Dental Surgeons as at 31st December 2013:²³

Register	Gender		Total
	Female	Male	
Medical Practitioners: Principal Register	566	1,102	1,668
Medical Practitioners: Temporary Register ²⁴	13	27	40
Medical Practitioners: Provisional Register	217	208	425
Dental Surgeons: Principal Register	85	145	230
Dental Surgeons: Temporary Register	-	4	4
Grand Total			2,367

²³ Data retrieved from the Medical Council Registers database.

²⁴ Temporary Registration is granted for a period of one year, renewable annually, on the condition that such practice is carried out only under supervision in a Government hospital/clinic or any other branch of the health service provided by the Government. Temporary Registration is not equivalent to Full Registration in terms of the HCPA 2003, Chapter 464 of the Laws of Malta and the EU Directive 2005/06/EC.

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8.1 Provision of Temporary Service Lists

Medical Practitioners and Dental Surgeons included in the Provision of Temporary Service Lists during year 2013²⁵:

List	Gender		Total
	Female	Male	
Medical Council Temporary Service List - Medical Practitioners	3	17	20
Medical Council Temporary Service List – Dental Surgeons	-	-	-
Grand Total			20

Medical Practitioners and Dental Surgeons included in the Provision of Temporary Service Lists as at 31st December 2013:

List	Gender		Total
	Female	Male	
Medical Council Temporary Service List - Medical Practitioners	22	92	114
Medical Council Temporary Service List – Dental Surgeons	-	2	2
Grand Total			116

²⁵ As stipulated in the EU Directive 2005/36 EC, Article 9, Medical Practitioners and Dental Surgeons from other EU Countries are requested to register, providing the relevant documentation, for the Provision of Temporary Service with the Malta Medical Council. The Provision of Temporary Service List may be accessed from:

<https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Registers.aspx>

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9 Laws and Circulars

9.1 Legal Notices

9.1.1 Legal Notice 388 of 2013

Legal Notice No. 388 of 2013, entitled 'Indemnity Insurance for Healthcare Professionals Regulations, 2013' of the Health Act, 2013 (ACT XI of 2013) was published on Government Gazette No. 19,164, dated Tuesday 12th November 2013.²⁶

This publication was brought to the attention of all Medical and Dental Practitioners registered in Malta through the Council's website. Article 3 of Legal Notice No. 388 of 2013 stipulates that:

'All health care professionals providing a health care service in Malta must be in possession of an appropriate professional indemnity insurance cover or equivalent.'

In a number of Member States, indemnity is directly linked to Registration, while in others it is linked to the Licence to Practice. This is to date not applicable in Malta, and it may only occur through a change in the National Law.

The Medical Council has discussed this matter with the Department of Health and other relevant stakeholders and is presently awaiting further guidance. The Council will circulate notification about this new legal requirement to all registered Medical and Dental Practitioners in the beginning of year 2014, together with the Requests for Payment for year 2014.

9.2 Standing Orders of the Medical Council (LN 375 of 2009)

9.2.1 Addendum No. 01/2013

In February 2013, the Medical Council published Addendum No. 01/2013, entitled 'The status of Temporary Service Providers Specialists'.²⁷

²⁶ This may be accessed from:

<http://justiceservices.gov.mt/DownloadDocument.aspx?app=lp&itemid=25788&l=1>

²⁷ This may be accessed from the Medical Council website, in the section 'Law & Circulars':

https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Laws_Circulars.aspx

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10 Complaints, Inquires, Criminal Proceedings and Court Cases²⁸

The actions endeavoured by the Medical Council are established in the Subsidiary Legislation 458.08, entitled '*Medical Council (Erasure of Names Procedure) Rules, 24.12.1959*'. The Medical Council is bound by the provisions of the HCPA 2003, Chapter 464 of the Laws of Malta, Article 32(1)(b) to initiate any inquiry it deems necessary, independently from any other measure taken by other entities with respect to all registered Medical and Dental Professionals.²⁹

In line with its mission statement, the Medical Council 'strives at safeguarding patients' rights and safety... by protecting, promoting and maintaining the health of the general public... by ensuring proper standards in the practice of Medicine... as well as by safeguarding the values and integrity of the Medical and Dental professions....' during legal actions, where transparency and accountability are at core.

10.1 Complaints

10.1.1 Errata Corrige Annual Report year 2012

Correction in the Annual Report for year 2012, on page 28:

From: 'MC/92/2012' to 'MC/95/2012'

And on page 29:

From: 'MC/95/2012' to 'MC/92/2012'

10.1.2 Complaints pending from year 2012:

- **MC/15/2011**

In February 2011, the Council was notified by the General Medical Council UK (GMCUK) about the suspension of a Medical Practitioner registered in Malta. The GMC had temporarily revoked the Licence to Practice of the named Medical Practitioner for a period of eighteen (18) months

²⁸ During year 2013, the Medical Council was legally assisted by Dr Ian Spiteri Bailey LL.D. LL.M. EU and Dr Victoria Cuschieri LL.D., EU.

²⁹ All prevailing legislation may be accessed from the Medical Council's website:
https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Laws_Circulars.aspx

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subject to further investigation in the UK. The Medical Council requested further information about this case from both the GMC and the named Practitioner.

In March 2011, in line with the provisions of mutual agreement to the EU Directive 2005/36/EU, which stipulates that all decisions taken by an EU Regulatory Body are applicable through all the EU Member States, the Licence to Practice held by the named Medical Practitioner in Malta was revoked from a period of eighteen (18) months, pending further evidence. The Medical Council made its recommendation to H.E. The President of Malta. The Hon Minister for Health, the Elderly and Community Care and the Director General Health Care Services were also notified about this case.

The Medical Practitioner informed the Council about his/her psychiatric problem at the time of the investigations held by the GMCUK.

In June 2011, the Practitioner filed a complaint with the Office of the Ombudsman against the Medical Council. The Office of the Ombudsman investigated the proceedings of the Medical Council. Dr Ian Spiteri Bailey, Legal Adviser, assisted the Medical Council in this case.

In July 2011, the Medical Practitioner submitted his position about the case in the UK to the Medical Council.

In September 2011, the Council held a sitting in the presence of the with the Practitioner, and in December 2011 a Fitness to Practice Board, composed from three (3) independent Psychiatrists, was appointed to investigate this case and present its recommendations to the Council. The Board presented its report in mid-February 2012.

After having evaluated and discussed the conclusions and recommendations submitted by the Board, the Council decided that suspension for a period of eighteen (18) months be lifted, provided that for a period of one (1) year, which conditions will come into effect from the date the Practitioner resumes his/her duties, he/she is to work under supervision; submit a certificate every four (4) months from a named senior colleague, who is a Specialist in Family Medicine, confirming whether the practitioner is coping with his/her daily activities; and submit a certificate every four (4) months from his/her psychiatrist, indicating whether he/she is coping with the daily activities. The Medical Council has communicated its positions to all parties concerned.

Throughout this year, the Practitioner has regularly provided the Council with the documentation stipulated in the decision.

Case Status: Pending

- **MC/63/2011**

An advert on a local parish publication was brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. The Dental Surgeon was asked to clarify his/her position.

This case has been put on hold pending developments from the Sub-committee on Advertising

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and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

- **MC/85/2011**

The Council received a letter of complaint from a Medical Practitioner against the senior Medical Officer on duty on the same day of the incident, in respect of the disciplinary proceedings which had been initiated against him/her and approved by the Department of Health.

After conducting its preliminary discussions and evaluation of this case, the Council informed the complainant that it upholds the principle of the autonomy of every Medical Practitioner and that the Public Health Service administrative and disciplinary procedures are beyond the remit of the Medical Council, and advised him/her to forward the case to the appropriate body. The complainant was also notified that the Council will only be able to proceed with the case upon the receipt of a formal complaint as per the HCPA 2003, Chapter 464, of the Laws of Malta S.L.458.08, '*Medical Council (Erasure of Names Procedure) Rules*', Article 4.

The Practitioner did not file a formal letter of complaint with the Council as advised as at end year 2013.

Case status: Sine Die

- **MC/88/2011**

The Medical Council received a letter of complaint against a Medical Practitioner for alleged professional misbehaviour and breach of ethics. The Practitioner was asked to clarify his/her position on this case.

After having preliminarily discussed and evaluated this case, the Council decided that this case merited an Inquiry in plenary sessions. The Council aims to initiate proceedings early next year.

Case status: Pending

- **MC/92/2011**

An article concerning a Medical Practitioner published on a local magazine was brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. The Medical Practitioner was asked to clarify his/her position.

This case has been put on hold pending developments from the Sub-committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

- **MC/13/2012**

In January 2012, the Superintendent Public Health brought to the attention of the Council that the Minister for Health had received a complaint about alleged irregularities in the processing of

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the application for specialist recognition of a Dental Surgeon registered in Malta.

The Medical Council was asked to postpone the inclusion of the Dental Surgeon in the specialist register for oral surgery until the said allegations are investigated.

The Dental Surgeon was forwarded a copy of the report and asked to clarify his/her position. A reply was received end year 2013.

The Medical Council is investigating this case.

Case Status: Pending

- **MC/39/2012**

The Medical Council received a letter of complaint against a Medical Practitioner regarding the outcome of the cosmetic procedures carried out in a local hospital. The complainant outlined that the Practitioner was not included in the Specialist Register held by Medical Council, though the hospital listed him/her as an aesthetic physician. The Practitioner was asked to clarify his/her position on this case.

After having primarily discussed this case, the Council decided that this case merited an Inquiry and the Board of Inquiry was appointed end year 2013.

Case status: Inquiry to start beginning year 2014.

- **MC/40/2012**

The Council received a complaint against a Dental Surgeon for alleged unprofessional and unethical behaviour, through the outcome of the work performed, and a significantly lower gold content in alloy composition to that agreed prior to the treatment. The Practitioner was asked to clarify his/her position on this case.

After having preliminarily discussed and evaluated this case, the Council decided that this case merited an Inquiry and the Board of Inquiry was appointed end year 2013.

Case status: Inquiry to start beginning year 2014.

- **MC/41/2012**

The Council received a letter of complaint against a Dental Surgeon for alleged unethical and unprofessional behaviour, through the outcome of the work performed, and a significantly lower gold content in alloy composition to that agreed before the treatment was performed. The Practitioner was asked to clarify his/her position on this case.

After having preliminarily discussed and evaluated this case, the Council decided that this case merited an Inquiry and the Board of Inquiry was appointed end year 2013.

Case status: Inquiry to start beginning year 2014.

- **MC/43/2012**

The Medical Council received a letter of complaint against a Dental Surgeon for allegedly

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unethical and unprofessional behaviour. The Practitioner was asked to clarify his/her position on this case.

After having preliminarily discussed and evaluated this case, the Council decided that this case merited an Inquiry and the Board of Inquiry was appointed end year 2013.

Case status: Inquiry to start beginning year 2014.

- **MC/89/2012**

A letter of complaint was filed against a Dental Surgeon for alleged unethical and unprofessional behaviour. The Practitioner was asked to clarify his/her position on this case.

The Medical Council is preliminarily discussing and evaluating this case, in the light of the position submitted by the Practitioner.

Case status: Pending

- **MC/92/2012**

The Medical Council received a complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour in which the letter-head allegedly used by the Practitioner, was also brought to the attention of the Council in line with the HCPA 2003, Chapter 464, Article 29, 'Specialists'. The Practitioner was asked to clarify his/her position on this case.

The Medical Council is preliminarily discussing and evaluating this case, in view of the position submitted by the Practitioner.

Case status: Pending

- **MC/95/2012**

The Medical Council received a letter of complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour. The Practitioner was asked to clarify his/her position on this case.

The Council is preliminarily discussing and evaluating this case, taking into consideration the version of facts submitted by the Practitioner.

Case status: Pending

- **MC/98/2012**

An advert by a Dental Surgeon published on a local magazine was brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. The Practitioner was asked to clarify his/her position.

This case has been put on hold pending developments from the Sub-committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

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- **MC/99/2012**

An advert about a Medical Practitioner published on a local magazine was brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. The Medical Practitioner was asked to clarify his/her position.

This case has been put on hold pending developments from the Sub-committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

- **MC/100/2012**

An advert about a Medical Practitioner published on a local magazine was brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. The Practitioner was asked to clarify his/her position.

This case has been put on hold pending developments from the Sub-committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

- **MC/101/2012**

An advert by a Dental Surgeon published on a local newspaper was brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. The Practitioner was asked to clarify his/her position.

This case has been put on hold pending developments from the Sub-committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

- **MC/102/2012**

The photo of a Dental Practitioner on a poster attached to a carnival float during the year 2012's carnival parade was brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. The Practitioner was asked to clarify his/her position.

This case has been put on hold pending developments from the Sub-committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

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- **MC/103/2012**

An advert by a Medical Practitioner published on a local magazine was brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. The Practitioner was asked to clarify his/her position.

This case has been put on hold pending developments from the Sub-committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

- **MC/104/2012**

In August 2012, the Medical Council received a report about a Turkish Medical Practitioner who was allergy treating Maltese nationals in Turkey, after having assisted them in Malta, without holding registration in Malta.

The Council informed the concerned party that it was a criminal offence to work as a Medical or a Dental Practitioner in the Republic of Malta, without registration with the Council. However, the Council has only jurisdiction over Practitioners registered with the Medical Council. This case was forwarded to the Commissioner of Police for investigation in August 2012.

The Council assisted the Police by furnishing all the documentation. A meeting with the investigating police officer was held in March 2013.

In June 2013, the Commissioner of Police updated the Medical Council about its preliminary investigation. The Medical Council was informed that the evidence obtained by the Police was not enough to secure a conviction in Court, since this was solely hear-say evidence without having an identifiable patient who may be interviewed as a witness in the proceedings. The Police will be pursuing this investigation further in case fresh evidence is obtained.

Case Status: Sine Die

- **MC/114/2012**

The Medical Council was referred to past correspondence which had brought to its attention the allegations that Dental Surgeons were forwarding work which fell under the remit of a Dental Technologist, to individuals who were not registered in the respective Register.

The Medical Council was forwarded with several reference letters issued by Maltese Dental Surgeons for these individuals, for any action deemed necessary. The Dental Surgeons were asked to clarify their position on this matter.

The Council is preliminarily discussing and evaluating this case, in view of the clarifications submitted by the Practitioners.

Case status: Pending

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- **MC/132/2012**

Several Medical and Dental Practitioners failed to pay the Annual Retention Fee (in line with LN/330/2006) as at end year 2012, even though a final notice was sent to regularise their position. These Practitioners were reminded about their dues for past years, along with the requests for payments for year 2013.

The Council will initiate Inquiry procedures against these Practitioners, by the powers conferred on it by the HCPA 2003, Chapter 464 of the Laws of Malta, if necessary.

Case status: Pending

10.1.3 Complaints received during year 2013:

- **MC/15/2013**

In February 2013, the parents of a two-year-old girl who died in February 2011, filed a Judicial Protest against the Medical Council, the Director General of the Health Department, and the Chief Government Medical Officer. Seven (7) doctors were being investigated in Court for being allegedly responsible for the death of their daughter when admitted at Mater Dei Hospital. A Magisterial Inquiry had been appointed. The Medical Council filed its counter protest in March 2013.

In June 2013, the parents filed a formal letter of complaint with the Medical Council against the named seven (7) Medical Practitioners for alleged unethical and unprofessional behaviour, which allegedly led to the death of their daughter. The Medical Practitioners were notified about this complaint and asked to submit their position to the Council in August 2013.

The Practitioners replied in July 2013 and subsequently filed a Judicial Protest against the Council in order to suspend its investigation until the Court's decision is taken. The Medical Council filed a counter protest in September 2013.

Case status: Pending

- **MC/41/2013**

In May 2013, a Journalist of a local newspaper brought to the attention of the Medical Council a newspaper article regarding a current case in Court, alleging the Medical Practitioner being interviewed for alleged unethical and unprofessional behaviour. The Practitioner, who was provided with a copy of the complaint and asked for his/her position during the first week of June 2013, replied in mid-June 2013.

In July 2013, after having preliminarily discussed and evaluated this case, the Council decided that this case merited an Inquiry. The Council aims to proceed with an Inquiry during the first quarter of year 2014.

Case status: Inquiry to be appointed during the first quarter of year 2014.

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- **MC/43/2013**

The Medical Director of Mater Dei Hospital forwarded to the Medical Council a complaint by a patient against a Medical Practitioner who was doing his first year of the Foundation Programme in Malta, for alleged unethical and unprofessional behaviour, in March 2013. The patient had primarily filed this complaint with the Administration of Mater Dei Hospital.

The Medical Practitioner was asked for his/her version in June 2013.

After having preliminarily discussed and evaluated this case, the Council decided that this case merited an Inquiry and the Board of Inquiry was appointed (refer to page 37 below).

Case status: Inquiry started in October 2013.

- **MC/45/2013**

A set of adverts by a Dental Surgeon published on a regular basis on a local magazine were brought to the attention of the Medical Council for alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners.

This case has been put on hold pending developments from the Sub-committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

Case status: Pending

- **MC/51/2013**

The Medical Council received an anonymous letter of complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour. The Practitioner was asked to clarify his/her position in June 2013.

The Medical Council is preliminarily discussing and evaluating this case, in view of the position submitted by the Practitioner.

Case status: Pending

- **MC/80/2013**

A Medical Practitioner filed a complaint against three Medical Practitioners for alleged unethical and unprofessional behaviour. The doctors were asked to submit their position on this case in mid-year 2013.

The Medical Council is preliminarily discussing and evaluating this case, in the light of the position submitted by the Practitioner.

Case status: Pending

- **MC/81/2013**

The Medical Council received a letter of complaint, from the relative of a patient, against a Medical Practitioner employed at Mater dei Hospital, for alleged unethical and unprofessional

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behaviour, in November 2012. This complaint was filed also with the administration of Mater Dei Hospital.

The Practitioner was provided with a copy of this complaint and asked to clarify his/her position in mid-July 2013. A reply was received end July 2013.

In mid-July 2013, the complainant asked the Council to treat his/her details in confidence during its investigations. In August 2013, the complainant was however informed that in accordance with the provision of the HCPA 2003, Chapter 464 of the Laws of Malta, and the Medical Council's Standing Orders, this request could not be adhered to.

The Medical Council aims to review this case during year 2014, in order to determine whether it merits further investigation.

Case status: Pending

- **MC/85/2013**

The Medical Council received a complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour in September 2012. The Practitioner was provided with a copy of the complaint and asked for clarifications his/her position in July 2013.

The Medical Council is preliminarily discussing and evaluating this case, in view of the position submitted by the Practitioner.

Case status: Pending

- **MC/86/2013**

The Medical Council received a letter of complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour. The doctor was asked to clarify his/her position on this case in mid-year 2013.

The Council is preliminarily discussing and evaluating this complaint, taking into account the clarifications provided by the Practitioner.

Case status: Pending

- **MC/87/2013**

In February 2013, the Council received a letter of complaint against a Medical Practitioner from a mother, for alleged unethical and unprofessional behaviour during the treatment given to her daughter. However, the Council noted that the Practitioner being referred to was not listed on its Registers. The complainant was therefore asked to confirm the name of the Practitioner in September 2013. The Superintendent of Public Health was notified about this case.

The Medical Council is waiting for further clarifications from the complainant.

Case status: Pending

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- **MC/101/2013**

A patient filed a letter of complaint against her Medical Practitioner for alleged unethical and unprofessional behaviour in mid-year 2013.

The Council is preliminarily discussing and evaluating this complaint so as to determine the way forward.

Case status: Pending

- **MC/106/2013**

In February 2013, the Council received a letter of complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour. The Doctor was asked to clarify his position in mid-year 2013.

The Medical Council is preliminarily reviewing this complaint, in view of the position submitted by the Practitioner.

Case status: Pending

- **MC/146/2013**

The Medical Council received a letter of complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour in mid-May 2013.

The Council has reviewed this complaint by end year 2013, and aims to proceed further with its investigation during the first quarter of year 2014.

Case status: Pending

10.2 Inquiries

10.2.1 Inquires Pending from year 2012

- **MC/D/290(a)**

The Medical Council investigated a Medical Practitioner for having allegedly supported a false application, submitted by another Medical Practitioner, to sit for a post-graduate examination abroad. The Medical Practitioner filed a complaint with the Office of the Ombudsman against the Medical Council in November 2013. The Council aims to conclude this Inquiry and deliver its decision during the first quarter of year 2014.

Case status: Pending

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- **MC/D/295/2006**

The Medical Council is presently holding an Inquiry against a Medical Practitioner who claimed to be a specialist without holding any specialisation certificate.

Case status: Pending

- **MC/66/2009**

At the end year 2009, it was brought to the attention of the Council that a Medical Practitioner was claiming the title 'Obstetrics & Gynaecology Ultrasound Specialist' in a local private hospital information booklet. The Medical Practitioner was requested to clarify his/her position on this matter and the doctors' version was received in October 2009.

After having discussed this case, the Council decided that in line with the provisions of the Health Care Professions Act, Chapter 464 of the Laws of Malta, Part VI, Article 31, it could not accede to the request filed by the Practitioner. The Medical Council notified the SPH and the Director General Health Care Services about this matter with regards of employment parameters.

MC/66/2009A

An article from The Sunday Times of Malta published on 2nd May 2010, concerning the named Medical Practitioner, was brought to the attention of the Council for alleged breach of the Code of Ethics of the Medical Council concerning Advertisement. In February 2011, the Practitioner was requested to clarify his/her position on this matter. After having preliminary discussed the merits of this case, and since the Medical Practitioner failed to comply in submitting his/her version to the Council, it was decided to proceed with an Inquiry.

The Medical Council aimed to initiate proceedings against the Practitioner during year 2013, however, a number of limitations restricted the Council from initiating proceedings within the two (2) year timeframe stipulated by the Law.

MC/66/2009/B

An article from The Sunday Times of Malta published on 1st April 2012, concerning the named Practitioner, was brought to the attention of the Council for alleged breach of the Code of Ethics of the Medical Council concerning Advertisement. The Medical Practitioner was requested to clarify his/her position on this matter in June 2012. After having preliminary discussed the merits of this case, and in view of the fact that the Medical Practitioner failed to comply in submitting his/her version to the Council, it was decided to proceed with an Inquiry.

The Medical Council aimed to proceed with an Inquiry during year 2013, however, due a tread of limitations faced during this year, this Inquiry was not held.

Case status: Inquiry to be initiated during the first quarter of year 2014.

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- **MC/39/2010**

In 2010, the Medical Council received a complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour during. Having conducted preliminary investigations, it was decided that this case merited an Inquiry. The Medical Council proceeded with the Inquiry during years 2010, 2011 and 2012. The last sitting was held on 20th March 2012.

The Sub-committee finalised its report end year 2012, and the Council aimed to deliver its decision during the first quarter of year 2013.

In January 2013, the named Medical Practitioner submitted a voluntary request to be erased from the Medical Council Registers, in line with the provisions stipulated in the Health Care Professions Act 2003, Chapter 464, Legal Notice 375 of 2009 entitled, 'Medical Council (Standing Orders) Regulations 2009, Article 49(1)(a)(b)(c).

The Medical Council has acceded to the request of the Practitioner and decided not to proceed further with this case. This was communicated in March 2013.

Case status: Case adjourned *sine die*

10.2.2 Inquires appointed during year 2013

- **MC/42/2012**

In April 2012, the Medical Council received a letter of complaint against a gynaecologist for alleged unethical and unprofessional behaviour towards the patient. The President of the Council and a Member registered a conflict of interest on this case in the first instance.

The Practitioner was asked for his/her version of facts, and these were submitted in May 2012.

During Council Meeting No. 09/2012, held on 16th May 2012, after having preliminary the merits of this case, the Council decided to proceed with an Inquiry and that this is to be heard in front of the whole Council (plenary sessions). A retired Judge was appointed to precede this Inquiry.

This Inquiry was conducted during the first quarter of year 2013 and the decision of the Council was delivered on 26th March 2013 (refer to page 38 below).

Case status: Closed

- **MC/43/2013**

Please refer to 'Complaints received during year 2013', on page 33 above.

Case status: Inquiry initiated in October 2013 where 3 sitting where held as at end year 2013.

The Council aims to finalise this urgent case mid-year 2013.

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10.2.3 Inquiries Decisions Delivered in 2013

The Council delivered the following decisions on the cases pending from the last report:

- **MC/42/2012**

In April 2012, late Ms Nirvana Azzopardi, filed a complaint against Dr Astrid Camilleri (MC1827), Specialist in Obstetrics and Gynaecology for alleged unethical and unprofessional behaviour. The President of the Council and a Member registered a conflict of interest on this case in the first instance.

Dr A. Camilleri was asked to submit her clarifications about the allegations of this case in April 2012. Her position was submitted in May 2012. During Council Meeting held on 16th May 2012, after having preliminary the merits of this case, the Council decided to proceed with an Inquiry and that this is to be heard in front of the whole Council (plenary sessions). Retired Judge Geoffrey Valencia was appointed to preside over this Inquiry.

The Notice of Inquiry was issued 12th December 2012. The Council held four (4) sittings for the hearing of this case, during which both parties and their witnesses were summoned.

Dr A. Camilleri was investigated for having allegedly acted in an unethical and unprofessional way towards the patient, therefore for being in breach of Article 5 of the Ethics for Medical Practitioners which provide that '*A doctor shall by his conduct and in all matters set a high standard*', and for performing '*gross or prolonged neglect of duties and disregard of personal responsibilities to patients, clients and the public*', which offence is stipulated in Article 4(e) of the Ethics of the Medical Profession Regulations (2008). Dr Astrid Camilleri was alleged of having breached the professional standards stipulated in Article 32 (1)(b) u (1)(c) of the HCPA 2003, Chapter 464 of the Laws of Malta.

Decision by the Medical Council: Dr Astrid Camilleri was not found guilty of '*gross or prolonged neglect of duties and disregard of personal responsibilities to patients, clients and the public*'; and was found guilty of having acted in an unethical and unprofessional conduct towards the patient, therefore in breach of Article 5 of the Ethic for Medical Practitioners, which stipulate that '*A doctor shall by his conduct and in all matters set a high standard*'.

A warning was issued against Dr Astrid Camilleri in term of the provisions of Article 32 (1)(b)(c) of the Health Care Professions Act 2003, Chapter 464, of the Laws of Malta.

Current Status of the case: Decision delivered; Case closed.

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10.3 Court Cases

- **MC/D/262**

Dr Frank Portelli (MC 0642) was investigated by the Medical Council for alleged unethical and unprofessional behaviour in respect of another Medical Practitioner (the complainant) leading to a series of conflicts. Dr F. Portelli was found guilty of professional misconduct.

The Medical Council delivered its decision open to the public on 1st July 2009. Dr F. Portelli was not present for the delivery of the decision of the and personally collected the decision from the Council's office at a later date. A number of articles were published in the local newspapers regarding the decision taken by the Council.

Decision by the Medical Council: Dr F. Portelli was fined 10,000 Euros, and if failing to pay within three (3) months, he was to be struck off the Registers.

Current Status of the case: Dr F. Portelli filed an appeal against the decision of the Medical Council delivered on 1st July 2009 by means of an application filed in the Court of Appeal in the names *Dr. Frank Portelli vs. Kunsill Mediku* (Civil Appeal No. 18/2009). The Court of Appeal did not entertain Dr F. Portelli's request by means of a judgement dated 22nd April 2010.

The same allegations, together with other allegations, were also raised in a writ of summons filed by Dr F. Portelli in the First Hall of the Civil Court in a case in the names *Dr Frank Portelli vs. Av. Josella Farrugia* (Citation Number 1100/2009AE). The Medical Council objected to and contested all allegations made by plaintiff.

This case is still sub-judice and was put off for decision aimed to be delivering in the being of year 2014.

- **MC/79/2007**

The Medical Council received a letter of complaint by a patient against Dr Franco Mercieca (MC 0224). The Medical Council investigated this case through an Inquiry for alleged unethical and unprofessional conduct on the part of Dr F. Mercieca during year 2009

The Medical Council decided that Dr F. Mercieca's behaviour was in breach of Article 5 of the *Ethics for the Medical Profession*, that is, that, "a doctor must by his conduct in all matters set a high standard". This case exposed a situation where Dr F. Mercieca failed to:

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- Take past Medical history prior to start treatment.
- To take Radiographs.
- To inform the patient beforehand of the costs involved.
- Abide by the patient's consent regarding local anaesthetic.

The Medical Council found Dr F. Mercieca guilty of professional and ethical misconduct in terms of Article 32(1) (b) and (c) of Chapter 464 of the Laws of Malta. The Council delivered its decision on Wednesday 19th May 2010.

Decision by the Medical Council: The Council imposed a suspension of two (2) months, which will come into effect one (1) month from the date of the delivery of this judgement. Upon the delivery of the decision, Dr F Mercieca accused the Council of failing to analyse facts professionally, and stated that he would file an appeal in Court. Judge J. Farrugia, former President of the Medical Council, informed Dr F. Mercieca's solicitor that he could not appeal, but had instead to institute a law suit.

Current Status of the case: Dr F. Mercieca is contesting the Medical Council's decision in the Civil Courts of Malta, by means of Court Case 1196/2010JRM and Court Case 140/2010JRM. Court Case 1196/2010JRM was scheduled for hearing on 24th October 2013, but this case is awaiting the determination of an appeal filed by Dr F. Mercieca in other procedures. Appeal no. 146/2010 has not been determinate and is yet awaited the date of the first sitting.

- **MC/77/2008**

A patient was to undergo an operation by two Surgeons, one of them being Dr Johanna Van't Verlaat (MC 2456), however the latter failed to attend the operating theatre while the patient was already under anaesthesia. The Medical Council investigated this case and after due Inquiry it was decided that Dr J. Van't Verlaat's behaviour was ethically and professionally unacceptable. The Medical Council delivered its decision on 9th September 2009.

Decision by the Medical Council: The Medical Council decided that Dr J. Van't Verlaat was guilty of unprofessional conduct and that she was to be suspended from the Medical Council Register for a period of three (3) months and fined the amount of €10,000. The suspension came into effect within one month from the delivery of the judgement held on 9th September 2009.

Current Status of the case: Dr J. Van't Verlaat had instituted Court Case 948/09RCP before the First Hall of the Civil Court to nullify the decision of the Medical Council. Her request was dismissed by the First Hall of the Civil Court by means of an independent delivery held on 29th

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May 2012. The Court rejected and dismissed the demands of the plaintiff as filed and contained in her sworn application dated 30th September 2009.

Dr J. Van't Verlaat has filed an appeal at the end of year 2012, which case has to date not been appointed by the Court of Appeal.

- **MC/27/2009 (MC/78/2008 – Case considered closed)**

In 2009, the complainant family who had filed a complaint in 2008 (Case No. MC/78/2008) submitted new evidence against Dr Louis Charles Buhagiar (MC 1289). After evaluating these allegations, the Council decided that this case merited an Inquiry for alleged unethical and unprofessional behaviour. The Medical Council proceeded with the Inquiry during years 2009, 2010, and 2011. The last sitting was held on 22nd March 2011.

The decision of the Medical Council was delivered on 27th June 2012. The complainants were present. Dr L. C. Buhagiar did not attend and he was sent a true copy of the decision by registered mail.

Decision by the Medical Council: The Medical Council found Dr L. C. Buhagiar guilty of professional misconduct. Dr L. C. Buhagiar was to be suspended from the Register for a period of one (1) month and fined the sum of five thousand Euros (€ 5000). The suspension was to come into effect after five (5) months from the delivery of the judgment. The Council was to publish the decision about this case by a press release.

Current Status of the case: On 26th September 2012, Dr L. Buhagiar filed a judicial letter in the Civil Courts of Malta, which was received by the Council on 2nd October 2012. The legal adviser of the Council submitted the Council's reply in Courts of Malta on 5th October 2012. Dr. L. C. Buhagiar is presently contesting the Medical Council's decision in the Civil Courts of Malta. Court Case No. 1043/12JRM was adjourned for year 2014.

- **MC/138/2010**

Dr Isabella Zananian Desira M.D. (Georgia) 2000 submitted application for registration in Malta on 2nd December 2010. The Medical Council asked for evidence of her training as a Medical Practitioner, requesting the relevant curriculum and her achievements from the issuing University Medical School. During a Council Meeting held on 3rd February 2011, the Council accepted her course curriculum as equivalent to a Doctorate in Medicine. However, in line with the provisions of the Law and standard procedures, since Dr I. Zananian Desira is a third

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country national and has a non-EU first degree, she was requested to sit for and successfully pass the Medical Council Malta Statutory Examination for Medical Practitioners in order to be granted registration in Malta. Dr I. Zananian Desira was informed that in accordance with the HCPA 2003, Chapter 464 of the Laws of Malta, she may file an appeal with the Health Care Professions Appeal Committee.

On 1st March 2011, the Council was informed that the applicant had filed an appeal with the Health Care Professions Appeals Committee. A sitting was held on 31st May 2011. Dr I. Zananian Desira alleged that the Council's decision ran counter to Section 45(2) of the Constitution of Malta and to Article 3(2) of Legal Notice 280(2006), and that the said decision was '*ultra vires*'.

After investigating the case, the Appeals Committee delivered its decision on 22nd June 2011. It was decided that the Council acted in conformity with the proviso in Section 11(1)(c) on which its 'standard policy' is based; and that it was competent to decide so and did not act '*ultra vires*'. The decision also stated that the Council is duty bound to assess qualifications within the Law. On the contrary, the Malta Qualifications Council recognises qualifications but not the right to practise a profession, and this right fell under the remit of the Medical Council.

The decision emphasised that both the Medical Council and the Appeals Committee had to abide by the HPCA 2003, Chapter 464 of the Laws of Malta, and they have no competence to decide whether the Act is in conformity or not with the Constitution of Malta. In view of these arguments the appeal filed by the Medical Practitioner was rejected and the decision of the Medical Council was confirmed.

Decision by the Medical Council: Dr I. Zananian Desira was asked to sit for the Medical Council Malta Statutory Examination for Medical Practitioners and if successful, she would be granted registration in Malta.

Current Status of the case: On 18th August 2011, Dr I. Zananian Desira filed this case in front of the First Hall Civil Court against the Medical Council. Case 740/2011JRM is being reviewed by the Judicial Assistant.

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10.4 Appeals against the Medical Council regarding Registrations

In accordance to the Health Care Professions Act (HCPA) 2003, Chapter 464 of the Laws of Malta, applicants whose registration with the Medical Council has been declined, may file an appeal with the Health Care Professions Appeals Committee³⁰ within 20 calendar days from the receipt of the decision delivered by the Council.

During year 2013, the Health Care Professions Appeals Committee (HCPAC) delivered its decision with respect to two Appeals filed during year 2012. No new cases were filed.

File No.	MC/93/2012	MC/143/2013
Degree	Doctor of Osteopathic Medicine (D.O.), Touro Univ. College, California, USA	Degree of Medical Doctor Speciality Dentistry, Ovidius Univ. of Constanta, Romania
Nationality	EU National	EU National
Date of Appeal	September 2012	December 2012
Registration in other EU countries	N/A	N/A
Appeal against the decision of the MC	The degree of D.O. is not equivalent to that of EU/Maltese basic degree in Medicine and therefore it cannot be accepted for registration purposes.	The application was asked to sit for the MCMSE Dental Surgeons prior to registration, since his/her degree was obtained from Romania prior to accession to the EU, and since he was not registered in any other EU country.
Decision of the HCPAC	In January 2013, the Appeal Committee decided that the applicant was to be allowed to sit for the MCMSE.	In March 2013, the Appeals Committee decided that the applicant was to sit for the MCMSE prior registration.

³⁰ The Health Care Professions Appeals Committee:

<https://www.gov.mt/en/Government/Government%20of%20Malta/Ministries%20and%20Entities/Officially%20Appointed%20Bodies/Pages/Committees/Health-Care-Professions-Appeals-Committee.aspx>

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Case Status	The applicant sat for the MCMSE in April 2013 and was successful. He/she was included on the Medical Practitioners Principal Register in April 2014. Case closed.	The applicant did not sit for the MCMSE. Case closed.
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11 Important Events, Achievements and Contributions of the Council

11.1 Quality Assurance for the Malta Foundation School Programme

The Medical Council of Malta has been entrusted by the UK Foundation Programme to conduct the Quality Assurance of the Foundation School Malta (FSM). Dr Doreen Cassar and Dr Bryan Flores Martin, who have attended separate Quality Assurance visits of Foundation Programmes held by the GMC and PMETB in the UK as observers, were appointed as the Quality Assurance Team in order to conduct this process in Malta, in October 2009. During this year, the Council initiated procedures for a Call for Interest to appoint the Members of the Medical Council Quality Assistance Committee (MCQAC) for three (3) academic years, in line with the Financial Laws regulating the management of the Medical Council's below-the-line account³¹.

The Foundation Programme of Malta is an affiliate of the UK Foundation School and in principle it follows the same aims, methodologies and assessment processes. However, since the Maltese health service and context is different from that in the UK, the nomenclature and the structure of the Malta Foundation School tends to deviate. In essence the Malta Foundation School is quality managed by the Clinical Post-graduate Training Co-ordinating Committee (CPTCC) also known as the Foundation Board.

In 2010, the Medical Council of Malta adopted the United Kingdom Foundation Programme (UKFP) guidelines, 'The New Doctor', for the F1 and F2 doctors, as the standard competences required for Full Registration. The GMC UK granted its permission provided that the Medical Council ensured that the regulations on the Foundation Programme held in Malta fell under its jurisdiction, and that there was clear segregation from the GMC's regulations of the Foundation Programme held in the United Kingdom.

Since 2009, the Quality Assurance exercise was carried out for two consecutive academic years with notable success³². In 2011, the UK Foundation School Programme was highly satisfied with the first Quality Assurance report, and decided to extend the Agreement with the Malta Foundation School until year 2016. The Malta Foundation School had been granted re-affiliation by the UK Foundation School Programme.³³

³¹ The remuneration for this post shall be that of € 3494.06 for the specified period of appointment, and shall be in three (3) divided annual instalments of € 1164.69

³² The Quality Assurance reports of the Foundation School Malta, February 2011 and July 2012 may be downloaded from:

https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Reports_Publications.aspx

³³ More information may be accessed from Malta Foundation School website: <http://fpmalta.com/>

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In line with its mission statement, the aim of the Medical Council is to quality assure the Malta Foundation School Programme with the aim of ensuring that its Foundation Doctors fully qualify for Full Registration in Malta, and most importantly, that these Medical Practitioners are well trained to assist the public in a high standard of ethical and professional behaviour. The Council further seeks to ensure that the Malta Foundation Programme retains its affiliation to the UK Foundation Programme. The Medical Council, through its Quality Assurers, was committed to achieve these successful outcomes throughout the years to come.

11.1.1 Quality Assurance Exercise 2013

The frequency of the Quality Assurance for UK Foundation Schools occurs every two to three years, or as deemed necessary. Within the first three year since 2009, during which the Malta Foundation School has been operating, the Council undertook two substantial and extensive quality assurance exercises, which were concluded successfully. Since then, the Foundation School Malta dedicated its resources in the implementation of the recommendations made by the Council.

The Quality Assurance Programme was not repeated during year 2013 so as to allow ample time for the Malta Foundation School to focus on the recommendations made in the Quality Assurance report for year 2012 and to be enabled to undertake the necessary changes. The Medical Council acceded to the request made by the Malta Foundation School after having analysed the studies the responses of the Malta Foundation School to its report.

11.1.2 Future Quality Assurance Exercises

The Medical Council is entrusted to analyse the response of the Malta Foundation School in order to determine the need to hold a third exercise in 2014.

12 The Way Forward

12.1 Guidelines of Penalties

In 2010, the Medical Council unanimously decided to document a set of guidelines on the penalties which may be imposed during Inquiries. The Medical Council asked its legal advisers to provide it with an advisory report providing the pros and cons of adopting a sentencing policy, or better still, sentencing guidelines.

During this year, after having held a number of consultative meetings with its legal advisers about this issue, which enabled it to critically analyse and evaluate both options with the aim better performing its regulatory role within the Maltese society, the Medical Council unanimously decided not to adopt a set of guidelines on penalties. The Council performs its role on a case by case basis and therefore, penalties when applicable need to be determined after having responsibly weighed infringements for which the Medical/Dental Practitioner was found guilty of.

12.2 Code of Ethics

Throughout this year, the Medical Council has continuously sought to identify issues for which its Code of Ethics might need to be updated so as to enable the Council to better meet the challenges its stakeholders encounter in today's dynamic environment. The Council aims at issued an updated Code of Ethics in the coming years.

12.3 Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners

During year 2012, the Medical Council appointed a Sub-Committee to review its position with respect to advertising and financial conduct by Medical and Dental Practitioners in today's dynamic environment. During this year, the Sub-committee reviewed the present guidelines, in the light of the related complaints received by the Council with the aim to ensure patients' safety and high professional standards while better addressing the exigencies of the national and international dynamic environments in which the Professionals strive to perform their duties.

The Medical Council aims to finalise this document in year 2014, and to actively address all the pending queries and complaints regarding this issue.

12.4 Medical Council Malta Statutory Examinations (MCMSE) for Medical Practitioners and Dental Surgeons

The number of non-EU Doctors and Dentists in the possession of a non-EU first degree, who are requested to sit for and successful pass the Medical Council Malta Statutory Examination (MCMSE), in order to be granted Full-Permanent registration in Malta, is in constant increase.

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The Medical Council is presently developing a set of standard procedures and guidelines for the conduct of the MCMSE for Doctors and Dentists, with the primary aim of ensuring transparency and accountability to all its candidates, and most importantly to the national and international stakeholders.

12.5 European Professional Card (EPC)

This year marked an extensive debate on the adopting and the implementation of the European Professional Card (EPC) throughout the European Union (EU). The aim behind the EPC, which is to be implemented by all Member States in January 2016, is to further facilitate the free movement of professionals through the EU. It aims towards the simplification for the recognition of the professional qualifications, which in turn will enhance transparency for EU citizens and increase trust among authorities across the EU.

Throughout this year, the Medical Council sought to keep abreast with ongoing developments regarding this new system, by attending Conferences and Meetings overseas with other EU Medical and Dental Competent authorities. It was very important for the Medical Council to be present during these meetings, since the participants shared and discussed the benefits vis à vis the difficulties being envisaged in order to design an achievable goal.

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13 Concluding Remarks and Acknowledgments

This report seeks to provide a comprehensive, far from exhaustive, record of the work carried out by the Medical Council of Malta throughout the past year. The statistics and information provided in this report clearly indicate that the Medical Council had yet another exhaustive year. Moreover, this past year has witnessed several changes to the composition of the Medical Council itself, which requested more effort in order to ensure consistency.

The report starts with providing an outline of the changes faced by the Council in its composition and proceeds with providing statistics about registrations granted during this year. A summary of a number of disciplinary cases and related decision delivered by the Council, as well as information on going Court Cases is also provided in this report. Finally, a brief overview of matters experienced by the Council throughout the dynamic environment it operates in is provided, with basis information about the future planes of the Council in order to continuously better regulate, guide and assist the Medical and Dental professionals in ensuring the well-being of the Maltese citizens.

I feel it is my duty to welcome the new Members on board and to congratulate all the Members who have been re-appointed or re-elected for a further three-year term. I would like to thank our President, Dr Ilona Debono, and all the past and present Members of the Council, for their continuous dedication and commitment towards the Medical Council and its mission statement.

Finally, I would like to thank Mr Emanuel-John Falzon, who quit his secretarial duties within the office in the Medical Council in October 2013, for his diligence and dedicated input, even though only performed during a very short period, and to wish him prosperity for his future.

Svetlana Cachia B.Com.(Hons.)(Melit.), M.A.(Public Policy)(Melit.)
Registrar

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Annex 1: Report submitted by Dr Bryan Flores Martin regarding the Healthcare Professionals Crossing Border (HPCB), held in London on 31st October 2013

Healthcare Professional Mobility and Patient Safety: Looking to the future

On behalf of the Medical Council, Malta, I attended the London 2013 Meeting of the Healthcare Professionals Crossing Borders. HPCB represents an informal network of professional healthcare regulators that focuses on improving patient safety in Europe. The meeting was hosted by the Health and Care Professions Council (UK). HPCB works to ensure that health professionals can effectively take up their rights of free movement while enabling regulators to establish that these healthcare professionals are fit and safe to practice.

The meeting was attended by over 80 representatives from most EU and EEA states together with Andras Zsigmond from the Directorate-General Internal Market and Caroline Hager from the European Health and Consumers Directorate-General Healthcare Systems Unit. Representatives from the European University Association, International Alliance of Patients' Organization and The Standing Committee of European Doctors (CPME) also contributed.

The meeting was an important opportunity to discuss the revised Directive adopted by the European Parliament following the agreement made with national governments and the European Commission.

The key features introduced include:

1. A pro-active fitness to practise alert mechanism;
2. The ability for competent authorities to assess the language competence of professionals after recognition but before access to the profession. This was taken to mean either leaving language testing in the hands of the employer or else follow the British example and introduce a separate licence after registration.
3. A requirement for Member States to introduce a European standardised continuing professional education and training;
4. The introduction of a European Professional Card (initially) for sectoral professions. This is actually a misnomer as it is really an electronic certificate.
5. There will be no partial access to their profession for health professionals who benefit from automatic recognition, or for other professionals if there are public health or patient safety implications;
6. Revised minimum training requirements for some of the healthcare professions with
 - a. new definition of basic medical training of 5 years and 5,500 hours;

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- b. an increase in dental training to 5 years and 5,000 hours;

Member states will now have till the end of 2015 (two years) to implement into the national legislation, the provisions introduced by the revised Directive.

The introductory talks were by Andras Zsigmond DG Internal Market on the Modernisation of Professional Qualification Directive 2005/36/EC where changes to the said directive were highlighted, and by Caroline Hager from the Health and Consumers Directorate-General dealing on an Action Plan for the EU Health Workforce where the question of Continuous Professional Development in Europe was laid out.

A constructive discussion ensued. The inclusion by the DG of professional associations such as the CPME at the expense of regulatory bodies was heavily criticised but there was reassurance by Mr Zsigmond that regulatory bodies would be next in the consultation process for both the European Professional Card and all issues dealing with sectoral professions and that ultimately it is the latter that will be responsible for its implementation. The Directive solution to the language problem was deemed inadequate by all. On the question of mutual trust between regulatory bodies, Malta questioned how this could be so when in countries like Italy, auto-certification by a professional meant that the regulatory body (the Health Ministry) did not check qualifications or status but took the applicants sworn statement as true.

The meeting then divided into two workshops. The British licensing system; post-registration with Continuous Professional Development/Revalidation attached to its retention was discussed as a way forward to allow language testing and maintaining high professionalism thus ensuring adequate patient safety.

During informal discussions, the position of doctors working in the maritime service was also brought up.

Venues for the next meeting, including Malta, were discussed but no decision was taken.

Short summaries of presentations may be accessed from <http://www.hpcb.eu/news/events.asp>

(sgd) Dr Bryan Flores Martin, M.D., M.M.C.F.D, Cert. Diab (ICGP)
Member, Medical Council of Malta

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Annex 2: Report presented by Ms Gabriella Abela and Ms Svetlana Cachia, regarding the information and training session on the use of the International Market Information (IMI) under the Directive on Patients' rights in cross-border healthcare, European Commission, Directorate General Internal Market and Services, held in Brussels, on 21st November 2013

The Medical Council was invited to attend an information and training session on the Patients' Rights Directive of the Internal Market Information System (IMI) held in Brussels on 21 November 2013. The Medical Council was represented by Ms Svetlana Cachia, Registrar, and Ms Gabriella Abela, Member.

From end October 2013, IMI is being used in order to support administrative cooperation under the Directive on Patients' Rights in cross-border healthcare (Directive 2011/24/EU).

IMI was created to facilitate cooperation between member states. The system allows a member state to communicate with its counterparts in other member states by sending and answering information requests.

To this end, a training and information session for the competent authorities responsible for handling information requests through IMI was organised. The event thus gave participants the opportunity to familiarise themselves with the system, as well as to get to know personally colleagues in other member states with whom they will be communicating through the system.

The training event was attended by participants from 24 Member States.

The first part of the meeting was dedicated to an exposition of the background to IMI, its features and the legal framework informing its implementation, including the data protection guidelines. The various obligations and expectations of the different players making use of the system were explained. For example, the role of the National Contact Point is to liaise with outgoing patients about their rights, entitlements, reimbursement and appeal processes, while informing incoming patients about quality and safety standards and systems, dealing with their complaints and any redress procedures. Health care providers are obliged to provide information on treatment options, quality and safety, prices, insurance cover and so on.

Challenges in implementation of the system were also considered, such as

- transparency for patients vis-à-vis pricing and reimbursement;
- the management of patient flows;
- political pressure within member states, as evidently some are for the system while others are more sceptical.

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Participants were given the opportunity to experiment with IMI in a hands-on session where each participant accessed the system and was guided through the procedure of sending an information request to another Member State, followed by replying to this request.

In the group discussion, which ensued during the afternoon session, participants focused on:

- sharing information regarding who sends/answers requests and which authorities are registered within their national IMI set-ups
- the management of IMI within the individual national authorities
- personal experience with using IMI
- the level of satisfaction with IMI

In conclusion, participants were urged to reflect on aspects of registration, such as authorities that still need to be registered and keeping the list of IMI users up-to-date. Requests should be handled as efficiently as possible and deadlines adhered to. Finally, the organisers appealed for feedback from users regarding the system.

(sgd) Ms Gabriella Abela M.A., MSc.
Member, Medical Council of Malta

(sgd) Ms Svetlana Cachia B.Com.(Hons.)(Melit.), M.A.(Public Policy)(Melit.)
Registrar, Medical Council of Malta

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Annex 3: Report by Dr David Muscat regarding the Federation of Dental Competent Authorities and Regulators (FEDCAR), Autumn General Assembly, held in Paris on 29th November 2013

The meeting was held at The Ordre National des Chirurgiens-Dentistes at 22 rue Emile Meunier Paris and was attended by 22 delegates from several European countries including Belgium, Bosnia Herzegovina, Croatia, Estonia, France, Hungary, Ireland, Italy, Malta, Monaco, Slovenia, Spain and the United Kingdom.

There were several items on the agenda.

REVISION OF DIRECTIVE 2005/36-WHAT IS NEW IN THE RECOGNITION PROCESS FOR THE PROFESSIONALS AND FOR THE COMPETENT AUTHORITIES

There are to be two years of preparation prior to the entry into force of the new rules on the IMI and Code of Conduct, the Professional Card, the Alert Mechanism, and Recognition of professional traineeship are on the agenda. Implementation will take place in 2015/2016.

The European Professional Card shall be subject to all the following conditions:

- a. Significant mobility or potential for significant mobility in the profession concerned
- b. Sufficient interest expressed by the relevant stakeholders
- c. The profession or the education and training geared to the pursuit of the profession regulated in a significant number of Member States.

The most mobile professions moving abroad permanently are Nurses, secondary school teachers and doctors, followed by Physiotherapists, Second level nurses, primary school teachers electricians, dentists, vets and lawyer all in that order.

THE ALERT MECHANISM

The commission shall adopt implementing acts for the application of the alert mechanism.

Under the Advisory examination procedure

- a. regarding the national sanctions to list
- b. regarding the Competence (who is the authority entitled to send or receive alerts)
- c. regarding the management (on the withdrawal and closure of alerts)
- d. regarding the security of processing.

CONTINUING PROFESSIONAL EDUCATION

This is encouraged but there is no obligation. It is a free internal organisation. CPD aims to update their knowledge, skills and competences in order to maintain a safe and effective

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practice and keep abreast of professional developments.

'Lifelong Learning'-all general education, vocational education and training, non-formal education and informal learning undertaken throughout life, resulting in an improvement in knowledge, skills and competences which may include professional ethics which has been added.

There will be a 'study mapping on Continuous Professional Development in Europe' by DG SANCO in 2014. Input from Competent Authorities is expected. There will be a workshop in June and a final report in October. This will apply to doctors, dentists and pharmacists.

MEDICAL DEVICES

Implants are exempt from this.

Laboratory Dental appliances are exempt from this unless they are pre-manufactured, in which case they will have to go through all the importation regulations.

DENTAL SPECIALITIES

A COMMON Training Framework - common set on minimum knowledge, skills and competences necessary for the pursuit of a profession- a parallel regime of recognition of qualifications. This needs to be agreed by a minimum of 9 member states. Representative professional organisations at Union level, as well as national professional organisations or competent authorities from at least one third of the Member States, may submit to the Commission suggestions for common training frameworks.

Common training frameworks can also be introduced to general systems where one third of members States express interest.

NOTIFICATION OF QUALIFICATIONS (ART. 21A)

The member states have to notify the commission the internal provisions relating to the issuance of the qualifications through IMI. This should include information about the duration and content of the training programme. The Commission may reject the notification if not in conformity with the directive.

CENTRAL ONLINE ACCESS TO INFORMATION

This is executed by A Single point of Contact

- a. A list of all regulated professions with contact details of the competent authorities' procedure for the recognition and appeal proceedings
- b. List of the professions for which the European professional card is available

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- c. Make information available in other EU official languages.

THE CO-ORDINATOR

This shall be designated by each member state to

- a. promote uniform application of this directive
- b. collect information relevant to this directive
- c. examine suggestions for common training frameworks
- d. exchange information to optimise CPD in member states
- e. exchange information and best practices on application of compensation measures.

THE ELECTRONIC PROCEDURE

All matters must be easily completed remotely and by electronic means through the relevant point of single contact or the relevant competent authorities. The competent authorities may however request certified copies at a later stage if doubts exist.

THE REGIMES OF RECOGNITION

These may be normal, accelerated (card) or partial.

There is no obligation by CAs to issue it.

Service-Home CA 4 weeks –validity 18 months

Home and host CAs -1 month preparation and 1 month issuance

‘Stop the clock’ provision of 2 additional weeks for requesting additional information from the home Competent Authority.

ALERT MECHANISM

THE INFORMATION HAS TO BE SENT WITHIN 3 DAYS. This shall be limited to

- a. Identity of professional
- b. Profession concerned
- c. National authority or court adopting the decision
- d. Scope of restriction and period applicable
- e. Indication if subject to appeal proceedings

LANGUAGE TESTING

THIS MUST BE CARRIED OUT AFTER THE RECOGNITION BUT BEFORE ACCESS TO THE PROFESSION.

Patient safety implications are sufficient to impose control.

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THE ASSISTANCE CENTRE

A centre set up to provide citizens help with recognition of professional qualifications. The Competent authority must co-operate fully. The commission will liaise with the Assistance Centres.

DENTAL TRAINING AND QUALIFICATIONS

Minimum 5 years and 5000 hours.

There is a proposal by France, Austria, Netherlands, Italy for 5500 hours.

Facultative ECTS credits. Full time theoretical and practical training.

Minimum training for specialised dentists -3 years and no equivalent ECTS credits.

NEW UPDATE ON ACQUIRED RIGHTS

'Each Member state shall recognise evidence of formal qualifications as a doctor issued in Spain who began university medical training between 1 January 1986 and 31 December 1997, accompanied by a certificate issued by the Spanish competent authorities.'

DEROGATION TO PARTIAL ACCESS

Dentist NOT covered by Partial Access

VERY IMPORTANT: FREE PROVISION OF SERVICES

No definition of time limit. With safety implications concerned- A DECLARATION of knowledge of the language necessary for practising the profession to the host member state. There ARE OPPORTUNITIES FOR THE Competent authority to participate in the EU implementation of the A professional card

- a. Alert Mechanism
- b. application for a new Dental speciality in Annex V
- c. revision of the Code of Conduct
- d. study mapping CPD in Europe
- e. common training frameworks in general systems professions.

NEW ARTICLE 59

MEMBER STATES shall examine whether requirements restricting the access to a profession or its pursuit to the holders of a specific professional qualification are compatible with

- a. requirements must be neither directly or indirectly discriminatory on the basis of nationality or residence
- b. requirements must be justified by overriding reasons of general interest

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REVIEW OF SERVICES DIRECTIVE

'The EU invites the Commission to provide additional guidance to member States on the concept of proportionality and invites them to take full account of best practices.' (Conclusions of European council 24-25 October 2013).

EUROPEAN PLATFORM FOR ORAL HEALTH

A presentation on prevalence and trends of oral diseases and an assessment of the economic impact of oral diseases by Dr Paul Boom – Ministry of health, Welfare Sport Chief Dental Officer Netherlands

There was an identification of best practices and key policy recommendations.

Access to oral healthcare remains a problem among low income groups.

There is a lack of policy emphasis on oral disease prevention, partly due to lack of available and comparable epidemiological and economic data.

Good practice examples were water fluoridation programmes, fluoridated salt programmes, promoting sugar- free products, and fluoridated milk programmes. In Hungary oral cancer-screening in high risk groups and in Sweden oral health promotion targeting immigrants.

The current oral health workforce in Europe is 1 million.

All member states should develop a national oral health prevention strategy based on EU guidelines and should address OH inequalities, with all population groups having access to oral care based on needs.

THE NUMERUS CLAUSUS IN EUROPE

Containment of the dentists' workforce in a country is either by

- a. de jure by an annual decision –numerus clausus from the member state.
- b. de facto by the capacities of the university for the intake of students.

The Italian delegate Dr Sandro Sanvenero secretary of the Italian Federation of Dental and Medical Chambers said that in Italy there is no numerous clausus . He expressed concern about an Italian University that has set up a satellite university in Albania but produces certificates from the Italian University as well as the Albanian University.

In Italy there are 106 local principalities which all issue warrants. They in turn form part of the Central Federation which is in turn answerable to the Health ministry but each area of Italy is responsible for issuing the warrant on behalf of the Ministry of Health. Only recently was the system computerised with all the principalities providing information to one central office.

To get round numerous clausus the Portuguese have opened a branch of their University in France with teaching in the French language but training in Portugal- Fernando Pessoa.- This was deemed to be lawful.

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Austria and Belgium have quota restrictions on the number of non nationals permitted to enrol degree courses in medicine, dentistry, physiotherapy and veterinary medicine.

There is currently legal action by EU.

Report of 1st International Conference of dental regulators, by Dr David O' Flynn

Dental Councils round the World agreed to co-operate with one another and to meet yearly.

MERCURY USE IN DENTAL AMALGAM By Dr Alain Moutarde, General Secretary of ONCD of France

The Minamata Convention was adopted on 20 January and signed by the EU on 11 October 2013.

There was no obligation to achieve a phasing out-there was no deadline as was originally proposed and no limit of use.

The only measure was to

- a. phase down the use with each country taking into account its domestic circumstances
- b. restrict the use to its encapsulated form
- c. to research and develop quality mercury- free materials for dental restorations
- d. improve dental caries prevention and health promotion.

Draft SCHER report 22 November

1. Not enough information available to make comprehensive risk assessment for environment
2. no risk to surface water
3. for soil and air-insufficient data
4. other sources of mercury via food, water and air
5. ecotoxicological information on effects on human health absent.

National Developments: a tax on mercury was proposed at a rate of 32euro per gram of mercury on the dentist placing the amalgam- this was opposed by the government.

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French Health Ministry Letter 7 November

1. enforce health authorities' recommendations and to place amalgam only where there is no alternative
2. give information to patient on alternatives and display publicly in clinic
3. phase down use dental amalgam for primary teeth
4. comply decree of 30 March 1998 on disposal of amalgam wastes where
 - a. bags of amalgam wastes must have standards for packaging and labelling
 - b. waste amalgam separators
 - c. monitoring of the waste recovery chain during 3 years

Local councils carry out verification visits. 100 % of offices have amalgam separators .the French position now is to develop prevention, strengthen research and development on alternative materials and continue the existing policy of amalgam waste treatment. The next FEDCAR meeting will be held in Rome in May 2014.

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Annex 4: Report by Dr Doreen Cassar, concerning the Tenth Meeting of the European Network of Medical Competent Authorities (ENMCA), held in Copenhagen on 2nd December 2013

Dr Doreen Cassar was entrusted with representing Medical Council Malta at this meeting. 43 international delegates attended this meeting.

These were from:

Austria – 1	Cyprus -2
Denmark – 8	Estonia -2
Finland – 2	France – 3
Germany – 1	Hungary – 1
Ireland -2	Italy – 1
Latvia -2	Luxembourg – 1
Malta – 1	Netherlands – 3
Norway – 2	Poland -2
Romania – 2	Slovenia – 1
Sweden – 2	UK - 3

The meeting was addressed by the European Commission DG MARKT, Andras Zsigmond; DG SANCO, Caroline Hager and Elisa Smith from the Danish Health and Medicine Agency amongst others. The meeting focused on:

Session 1 - Recognition of Professional Qualifications Directive:

Presentation 1

A representative from DG MARKT, Andras Zsigmond presented the **New Directive on the Recognition of Professional Qualifications and its implementation.**

Outcome points of relevance:

European Professional Card

- The European Professional Card (EPC) stops at recognition and thus allows language to be assessed prior to licensing
- Temporary mobility is to be extended to 18 months were before it was 12 months
- As there is no e application of the EPC the issuing authority will have to upload the EPC document itself

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- In the case of permanent establishment, validation of the EPC by the Host member state remains but there is tacit recognition to guarantee the Professional movement. However, the Host Competent Authority (CA) can still issue a negative decision.
- In the case of Temporary mobility, the EPC replaces declaration for 18 months and is valid in all member states territory.
- A Professional can ask an EPC from all member states.
- A condition for implementing the EPC was 'sufficient interest' from stakeholders – this is to be discussed by the EU Commission after an impact assessment.
- Competent Authorities (CA) have to issue EPC but professionals may choose to have a EPC or to go for the traditional evidence of registration and certificate of good practice.
- Implementation Acts for the EPC are to be finalised by the end of 2014
- The EPC is to be finalised by early 2016.
- CA needs to start preparing for transposition of the Directive to meet these dates.

Alert Mechanism

- Health Professions Crossing Borders (HPCB) had a Memorandum of Understanding to develop the alert system
- Currently CA respond to each other and ask about Professionals status
- The Alert Mechanism now sets this to be a Proactive Procedure. Information must go to all member states when a professional status changes
- There is a 3 day deadline from the final decision, for information to go to all Member States (MS)

The information has to include

- the name of the professional
- the prohibition period

Due to the Data Protection Act the professional

- has to be informed of this
- has the right of appeal
- has the right to ask for damages

Annex V Notifications

1. The CA has to inform the IMI for qualification to be accepted
2. The National Coordinator of each MS has to be informed if new qualifications are to be added. It is important that CA communicate with the National Coordinator about any qualification that needs to be amended or added
3. Annex V will be updated by Delegated Acts
4. The Commission may adopt implementing acts to reject requested amendments of Annex V
5. The Group of Coordinators (GoC) may change best practices of member states.

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6. As some specialities have common trunks of knowledge with other specialities there may be partial exemptions when one speciality changes to another, thus making it possible to be included in Annex V
7. Doctors and dentists are now to have 5 years AND 5,500 hours of schooling/training.
8. It is the GoC that exchange information on Continuous Professional Development

Partial Access

This is a principle developed by the Courts. It is to be decided by individual MS on a case by case basis. On a general principle if a professional is fully qualified in the Home MS and the host MS has more training to be covered, compensation measures cannot be implemented.

Common Training Principles

1. EU now trying to regularise training
2. GoC will be discussing Common Training Tests and will be developing Delegating Acts (not Implementing Acts)
3. 1/3 of GoC need to support change at GoC level for new speciality to be introduced into Annex V

Language Knowledge

1. Professionals shall have the necessary knowledge of the language of the MS
2. Only 1 language of the MS can be assessed, but 2nd language can be encouraged by the employer
3. The EPC must be given prior to language check prior to access to the profession
4. The possibility of appeal must be in place with language check.

E Governance

1. All CA must have a single point of contact, where all information must be found.

Presentation 2

Professional Mobility and competency

Prof Robert Nicodème from the Conseil National de l'Ordre des Médecins presented this session.

Outcome points of relevance

- There is an urgent need to identify and compare training in Europe not only for better recognition but also for
 - the quality of care,

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- the patient safety and
- public health
- We have to take into account the scientific progress in each speciality.
- The training of physicians cannot be performed without precautionary guaranties, allowing that the medical training reaches a sufficient level under national public health requirements.

Curricula

- Problems are faced as although there is automatic registration of those qualifications listed in Annex V, the fields of activity of the specialities are very different across MS.
- There is a need for a repository in Annex V which will include all areas of competency of the different specialities.
A repository of curricula is needed. ENMCA should create links for MS to look into the different curricula.
- Automatic recognition has to be preceded by checking these competencies before opting for automatic recognition
- The Common Training Framework should be in force within 2 years and MS have to prepare for this - (Note: SAC Malta has to be informed to prepare for this)

Language

- Level B2 European Framework of Language Skills (EFLS) is required for Professionals to be able to communicate effectively with patients
- Most MS CA have language testing, some have an interview for language testing, others have the need of certificate of proficiency in the language, while others have official written tests of the language or both oral and written.
- Professional language is different from general language skills
- Is it essential to provide intensive course for professional language to be taught prior to licensing.
- National law has to reflect this need.

Presentation 3

Language Controls – findings from the questionnaire and debate on possible requirements under the new Directive

Alexander Jakel from the German Medical association reported findings from a study among ENMCA participants.

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Outcome points of relevance

1. In Germany there is a Federal Structure and each federal state may have different language assessments.
2. The German Ministry has the requirement of a minimum of B2 Level of EFLS
3. Since the law changed in 2012 to facilitate recognition of third country qualifications language requirements and controls have been increasingly called into action.
4. In some EU MS language controls is required while in others it is not
5. Applicants are required to demonstrate language skills if professional qualification is from abroad in France, Germany, Czech Republic and Slovenia
In Sweden demonstration of language skill is needed if the professional qualification is from outside of the EU
In the UK, Finland, Latvia, Poland and Switzerland it is only required if from a thord country.
6. Those responsible for language control vary from employer to professional representative bodies of physicians or public bodies/ authorities.
7. Different forms of language testing exist – formal tests, evidence of certification, test or CV input.
8. Submission of language skill certificate is not possible in all MS

Session 2 – EU Action Plan for the Health Workforce

Presentation 1

Joint Action on Health Workforce Planning and Forecasting – update

Giovanni Leonardi from the Italian Ministry of Health – WP5 Leader, presented this session.

The objective of this group is to enhance collaboration and exchange among Member States to support them in their health workforce planning and to increase Member States' and Europe's capacity to take effective and sustainable measures. The group started its work in April 2013 and has 3 years to finalise positions.

A website www.euhwforce.eu has been set up with information for all MS. The main partners come from mainly Ministries of Health, Universities and professional organisations. Malta is involved and is part of the Evaluation group WP3.

WP4 objectives are:

- Report on terminology

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- mapping
- Report on mobility data
- Report on Home Work Force planning data

A pilot study on quantitative health workforce planning and forecasting will be started in 2014 by Italy and Portugal so that programming will start in 2015

The UK will be using qualitative methods to gather information and issue

- User guidelines on estimating future needs
- Report on future skills and competencies
- Web portal
- Report on pilot project experiences

WP7 Bulgaria and Belgium will be dealing with Sustainability strategy and disseminating

- List of experts
- Technical recommendations
- Recommendations towards policy making

Presentation 2

EU mapping study on continuous professional development

Caroline Hager, Directorate General for Health and Consumers, Healthcare Systems Unit, European Commission presented.

Outcome points of relevance

1. In the European Union there are
 - a. a wide range of CPD systems/approaches
 - b. lack of common accepted definitions
 - c. lack of country specific data
2. the increase in mobility forces CPD conformity
3. The present text of the Directive (Art 22) puts CPD as a professional obligation. The EU Council (Revised Directive 2005/36/EC and CPD Revised Directive 2005/36/EC and CPD) now states that Member States shall ensure,
 - *by encouraging CPD, that professionals are able to update their knowledge and skill and competences to maintain safe and effective practice and keep abreast of professional developments;*
 - *Communicate measures to the Commission;*
 - *Exchange information and best practice to optimise CPD development in MS*

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4. Patient safety report by the EU Council in 2009 stated that patient safety is inadequately addressed in CPD
 5. A mapping study to assess CPD in Europe has been initiated. The tasks are to review
 - a. informal and regulatory systems
 - b. accreditation, validation and revalidation processes
 - c. responsible bodies for CPD of health professionals
 - d. common features grouped by country
 - e. what are the emerging trends in Europe
 - f. CPD in care quality and patient safety guidelines
 - g. European initiatives with regard to CPD and lifelong learning
 - h. benefits of European cooperation in the field of CPD

The final report is due in October 2014.

The meeting ended with a round table discussion (points included above), and with planning for the next meeting. Malta offered to host the next meeting.

Full copies of the said presentation can be found on the ENMCA website www.enmca.eu/

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