



PRIMARY CARE COUNCIL MINUTES
SPRING MEETING 2021
LARNACA, CYPRUS / VIRTUAL JULY 2, 2021
14.00 – 15.00 CY / 13.00 - 14.00 CET

(Please see the list of attendees attached)

Chair: Zachi Grossman

1. **Welcome and opening of the EAP Spring Meeting 2021** – Adamos Hadjipanayis
2. **Welcome by the chair of the Primary Care Council** – Zachi Grossman
3. **Approval of Agenda and Minutes of the Winter Meeting 2020** – the agenda and minutes were approved.
4. **EAP ECPCP collaboration**
 - a. The aligned goals of the European Academy of Paediatrics (EAP) and European Academy of Paediatrics and European Confederation of Primary Care Paediatricians (ECPCP) was elaborated by the chair of the Primary Care Council. He expressed his excitement about discussing future collaborations.
 - b. The EC members from the two associations plan to work together closely.
 - c. The first common goal is the publication of joint statements together with Artur Mazur and Rzesow University Ph Students.
 - d. The first statement on "Risks for Children's Health During the COVID-19 Pandemic and a Call for Maintenance of Essential Pediatric Services" (published in Frontiers was in May 2021)
 - e. The second statement about SARS-CoV-2 vaccination in minors (children and adolescents) – a joint statement of the European Academy of Paediatrics and the European Confederation for Primary Care Paediatricians" is in preparation for minors is underway.
5. **Discussion on Further Collaboration Initiatives**
 - a. Zachi invited Shimon Barak (President of ECPCP) to address the attendees of the PCC meeting.
 - b. He elaborated that the ECPCP represent the countries in which primary care paediatricians are actively doing the work, whereas EAP has the difficult task of working with a broader group of professionals (like General Practitioners or other medical professionals) that do the work in the Primary Care Council setting.
 - c. He expressed his excitement about the collaboration to improve the health of children and adolescents in Europe.
 - d. ECPCP's webpage <https://www.ecpcp.eu/> & the Curriculum (https://www.ecpcp.eu/fileadmin/pdf_doc_ppt/Curriculum_in_Primary_Care_Paediatrics_4.12.2014.pdf) was shared.
 - e. The ECPCP already published their ETR's and are willing to cooperate with the EAP in any area of Primary care. The publications are seen as the first step in the right direction.
 - f. Artur Mazur addressed the audience regarding the Ph students and expressed his gratitude for the work done so far.

- g. There are several ideas for new statement, including a paper on risk factors in child obesity with the European Academy of Paediatrics (EAP) and European Confederation of Primary Care Paediatricians (ECPCP).
- h. The Ph students are very enthusiastic about the joint ventures and international cooperation.
- i. The president of the EAP is planning to visit the Primary Care Council chair for a face-to-face meeting to plan the future of paediatrics and establish the benefit of children's health and general advocating for the paediatrics profession in general.
- j. The Secretary general explained the hybrid situation currently in Belgium, where parents can choose between paediatricians and general practitioners in Primary Care. She requested that the Council also focus on competencies in Primary Care and the fact that a child should rather be seen by a paediatrician, as opposed to a general practitioner. In addition, the perspective of primary care should be investigated in different countries and settings.
- k. Primary care is seen as the first contact with a child.
- l. It is clear that there will not be sufficient paediatricians to serve children in the primary care setting. S
- m. Several papers, including what the qualities of primary care should be (not exclusively for children but for patients in general) have been published.
- n. The decline in primary care paediatricians, is a great concern.
- o. In some settings, like in France, other professionals, like the nurses (undergo 40 hours specialists training), midwives (undergo only 2 hours of specialist training), general practitioners (who can attend the optional, 3 months-training).
- p. The most important would be to have minimum standards, potentially a curriculum with the minimum, international standards for primary care professionals (nurses, midwives, and general practitioners).
- q. The EAP will be the umbrella association for Europe, and it would be the work of the EAP to publish the minimum standards of primary care for countries where there are no paediatricians in the primary care setting.
- r. The EAP thus serves as a very important support to European medical professionals in general to assist children in the primary care setting.
- s. The chair thanked everyone for the comments. The currently published papers will surely inspire new collaboration and this discussion is seen as the beginning of a fruitful partnership.

6. Telemedicine in COVID-19 and Beyond

- a. The most dramatic change in Primary Care in the past year with Covid-19, is telemedicine.
- b. The chair shared a study that was carried out in the EAPRAS Network with the idea of sparking a discussion.
- c. Tele-medicine technologies include phone calls, text messages, pictures or video clips transmitted b smartphones or real-time videoconferencing.
- d. The initial reaction of Telemedicine during Covid-19 was the closure of clinics and the postponement of all non-critical medical services.
- e. Telemedicine affords continued medical care while adhering to strict social distancing.
- f. Patients at risk may benefit from staying at home, reducing social contact.
- g. In the current situation, health systems resorted to telemedicine, resulting in an exponential increase in its use, in contrast to the previously slow adoption of the new practice.
- h. Guidelines supporting the use of tele-practice in ambulatory care settings for children have been issued by professional societies.
- i. The question is whether virtual healthcare will be the new normal after Covid-19?
- j. The aims of the shared study were to assess the use of telemedicine by paediatricians during the pandemic; to elucidate how they perceive telemedicine as a method of care post-pandemic and to characterize the virtualists: those who frequently tend to use telemedicine to deliver medical care.
- k. To conduct the research, a web-based survey was distributed among EAPRASnet participants.
- l. The survey assessed the frequency of telemedicine use & the influence of telemedicine on clinical decision making.
- m. Assessment related periods included pre-COVID-19, during COVID-19 and post-COVID19.

- n. It included scenarios where clinicians had to describe what they would do and a report of their daily use of technologies to treat patients with telemedicine techniques (phone calls vs. videos/imagery from mobile devices).
- o. Both clinicians and patients found pictures to be a very successful method of diagnosing conditions (mainly skin lesions).
- p. In all technologies and scenarios (except photos/clips), after the pandemic is over there will be a decreasing use compared to the pandemic use.
- q. In all technologies and scenarios there is a small but significant rise in post-pandemic use, compared to the pre-pandemic use.
- r. In pictures and videos, the post pandemic use will be exactly as the pandemic use.
- s. The study was done in Israel where the vaccine rollout was rapid and successful (60% fully vaccinated at the time of this presentation).
- t. Israel went into a "post-pandemic" phase.
- u. Although cases in Israel decrease, there is an uprise in cases again due to the delta variant.
- v. As Israel is exiting the pandemic and reach a level of 50-60% of the population vaccinated, the number of frontal visits is slowly increasing, where phone visits are slowly declining, but not to the same level as before the pandemic. As the issue of social distancing is coming back to normal,
- w. The future of telemedicine visits – topics to be revisit and discuss
 - Visit type: administrative/ urgent/ not urgent
 - Quality
 - Age of Patients
 - Eligible pediatric domains
 - Parental education
 - Training of providers & technical conditions
 - Privacy

7. Discussion

- a. The chair opened the floor to discussion to understand the situation in continental Europe. He posed two questions: 1. How is the pandemic affecting patient behaviour? 2. The attendees' opinion on the study that was shared.
- b. It was mentioned that the regulation around telemedicine is not yet as developed as they should be in many European countries.
- c. There is currently a big undertaking where interesting parties are documenting the changes that are necessary in the telemedicine setting.
- d. Israel is seen as an oasis, but there are many ways in which we cannot extrapolate the results to other countries.
- e. In Sweden the tendency is still for in-person visits, but telemedicine has definitely increased. There is a user-friendly system that parents log into to monitor / safeguard telemedicine in Sweden. The regulation in Sweden strictly prohibits prescription of antibiotics with telemedicine consulting.
- f. The issue of funding is different among European countries: telemedicine is not funded like in-person visits in all countries.
- g. Marina Mamenko explained that devices like TITO can help doctors to retrieve more information. These devices are used increasingly in Israel and is very popular, but there is no real evidence about the clinical effectiveness, or the quality of the information transmitted by TITO devices. Patient/Doctor impressions seem to be good, but scientific evidence is still lacking.
- h. In countries, like France, telemedicine companies (providers to paediatricians) manage the medical software used during consultations. When a patient looks up a "paediatrician" they also see a list of general practitioners, for example. The company includes general practitioners in the patient search, since the company's client base has more general practitioners than paediatricians. The software furthermore company monitors the prescriptions and patient lists, and they have access to very sensitive information. This should be considered as a real risk and there should be a guidelines / limitations published to mitigate it.
- i. The chair invited everyone interested in this topic to reach out to him with further ideas/comments.

8. Other business

- a. Peter Altorjai and Zachi Grossman plan to arrange a follow-up call to discuss Childnomics to potentially create a good statement or paper or any other initiative.
- b. The hip dysplasia survey: an update will follow in future.

9. Closing of the Primary Care Council Session

List of Attendees:

Timestamp	Name	Surname	Primary Care Council Session on 2 July 2021 from 13.00 - 14.00 CET
7/2/2021 13:02	Iuliia	Zaharova	I confirm my attendance
7/2/2021 13:03	Joana	Rios	I confirm my attendance
7/2/2021 13:04	Shimon	Barak	I confirm my attendance
7/2/2021 13:10	Miqueas Augusto	Fontana	I confirm my attendance
7/2/2021 13:20	Süleyman	YILDIZ	I confirm my attendance
7/2/2021 13:23	Mohamed	Ghazi	I confirm my attendance
7/2/2021 13:40	Risto	Lapatto	I confirm my attendance
7/2/2021 14:28	Lars	Gelander	I confirm my attendance
7/2/2021 14:32	Pavelescu	Carmen	I confirm my attendance
7/2/2021 14:32	Geitmann	Karin	I did not attend this session
7/2/2021 14:54	Daniela	Kohlfürst	I confirm my attendance
7/2/2021 15:12	Chris	Pruunsild	I confirm my attendance
7/2/2021 15:21	Marta	Petryshyn	I confirm my attendance
7/2/2021 15:21	Alexiu	Sandra Adalgiza	I did not attend this session
7/2/2021 15:22	Maria	Gutu	I confirm my attendance
7/2/2021 15:22	Stephanie	Antoun	
7/2/2021 16:16	Lia	Syridou	I confirm my attendance
7/2/2021 16:32	Koray	Boduroglu	I confirm my attendance
7/2/2021 16:36	RUBEL	Francis	I confirm my attendance
7/2/2021 17:13	Stanislava	Hadzhieva	I confirm my attendance
7/2/2021 17:14	Martin J	White	I did not attend this session
7/2/2021 17:16	Barbara	RATH	
7/2/2021 17:18	Sofia	Hernandez	I confirm my attendance
7/5/2021 11:56	Mohamed	Mohamed	I confirm my attendance
In person	Adamos	Hadjipanayis	Attendance confirmed
In person	Marina	Mamenko	Attendance confirmed
In person	Bert	Koletzko	Attendance confirmed
In person	Ivan	Bambir	Attendance confirmed
In person	Yevgenii	Grechukha	Attendance confirmed

In person	Ann	De Guchtenaere	Attendance confirmed
In person	Miguel	Martins	Attendance confirmed
In person	Artur	Mazur	Attendance confirmed
In person	Aida	Mujkic	Attendance confirmed
In person	Liesbeth	Siderius	Attendance confirmed
In person	Arunas	Valiulis	Attendance confirmed
In person	Karoly	Illy	Attendance confirmed
In person	Ivanna	Romankevych	Attendance confirmed