



# «CAMCrossEurope» regulation Impact on patient safety – with focus on supervision

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## Scientific background

• **CAMbrella**- A pan-European research network for Complementary and Alternative Medicine (CAM) *(FP7-HEALTH-2009, GA No. 241951).* 

Deliverable 9 - WP 2 - Legal status and regulation of CAM in Europe (December 2012). (cambrella Pan-European Research Network for Complementary and Alternative Medicine (CAM)

• Master thesis, Solveig Wiesener:

Disharmonized regulation of Complementary and Alternative Medicine (CAM) in Europe – Implications for patient safety (January 2013).





# CAMCrossEurope

# Patient safety Patient information





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## **CAM Regulation – objectives**

The objective of giving an overview of the regulation of Complementary and Alternative Medicine (CAM) is primarily

- to enable European citizens to make informed and safe choices when they seek CAM treatments.
- European citizens are seeking CAM, also when offered outside their national health care system.
- Regulation is an important management tool in risk governance of health care services.





### **Regulation of health care in Europe**

- The EU has repeatedly confirmed that it is up to each member state to organize and regulate their health care system.
  (Lisbon Treaty; in TITLE XIV Public Health Article 168 number 7)
- This will, of course, also apply to traditional, complementary, alternative and integrative medicine.







### **Regulation of herbal medicinal products**

- Medicinal products are not defined as a part of health policy, and can therefore be regulated at the EU level.
- The individual state within the EU/EEA area are therefore no longer free to uphold national regulation of medicinal products in violation of EU directives.







## Conclusion

- CAM in Europe is not regulated in accordance with current theory dealing with
- risk governance
- risk regulation
- patient safety
- European CAM regulation is diverse and unclear
- Consequently, the disharmonious landscape of CAM regulation in itself may impact patient safety



## **CAMbrella WP2 Methodology**

### Data were collected from 39 countries by:

- 1. Communicating with the Ministries of Health, Law or Education, governmental representatives, and members of national CAM associations.
- 2. Searches in the national web sites/databases as well as EUROPA and EUR-lex to identify official legal documents.
- 3. Direct dialogue with European CAM associations/coalitions, CAMbrella members and stakeholders.
- 4. Face-to-face meetings with the Ministries of Health and CAM practitioners representing organizations.





### Legislation and regulation of CAM

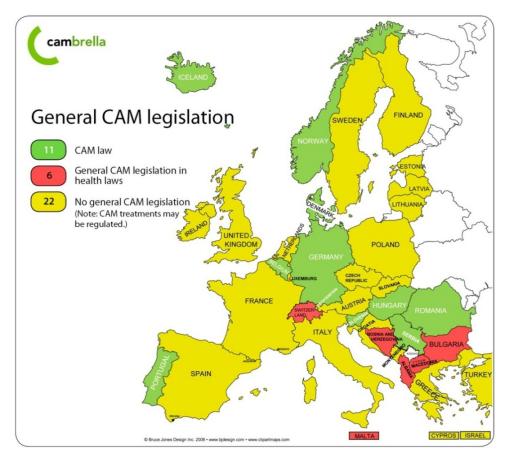
- Legal connection to EU/EFTA/EEA and Council of Europe
- CAM general legislation
- Specific CAM treatment regulation
- **EU professional title** (Directive 2005/36/EC)
- Regulated profession/ protected title
- Statutory/voluntary registers
- Supervision
- Reimbursement

### Who may practise:

- Medical Doctors (MDs)
- Medical Doctors with CAM training
- Regulated health personnel
- Regulated health personnel with CAM training
- Other CAM practitioners
- Others may practise
- Other CAM legislation



### **European CAM legislation**



The only common factor we have found across all 39 nations is the amazing ability they have demonstrated of structuring legislation and regulation differently in every single country, no matter how small the size of the population.



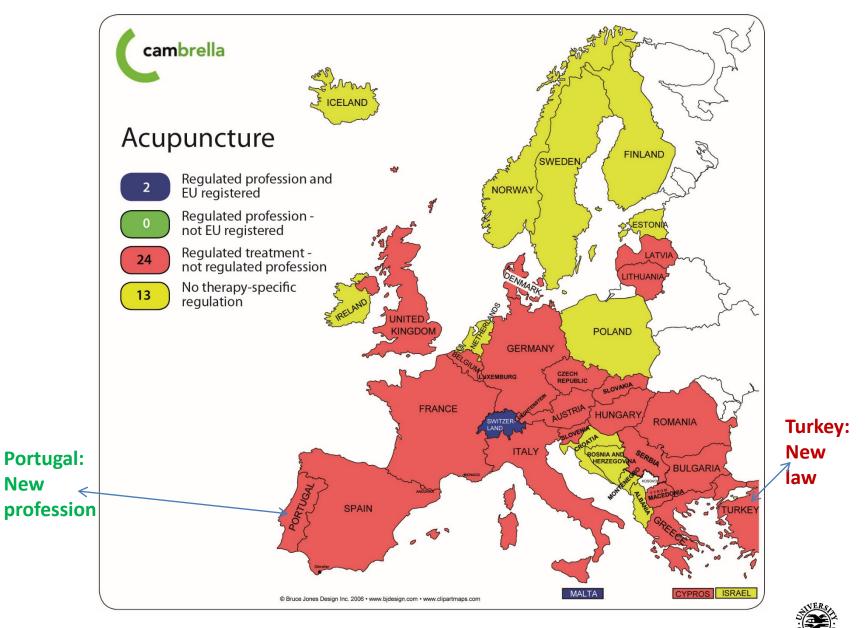


### Treatments included in the CAMbrella CAM regulation study

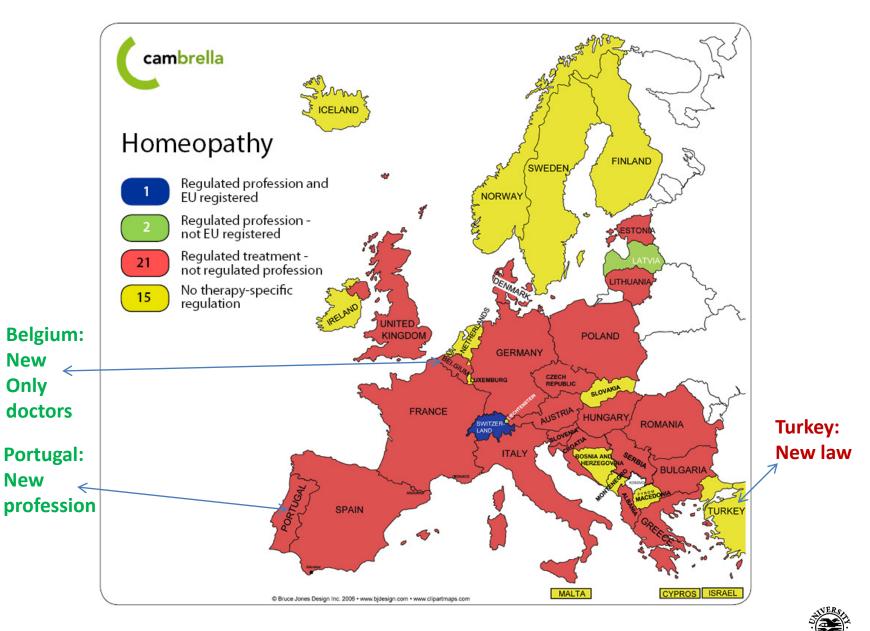
- 1. Acupuncture
- 2. Anthroposophic medicine
- 3. Ayurveda
- 4. Chiropractic
- 5. Herbal medicine/Phytotherapy
- 6. Homeopathy
- 7. Massage
- 8. Naprapathy
- 9. Naturopathy
- 10. Neural therapy
- 11. Osteopathy
- 12. Traditional Chinese Medicine (TCM)
- 13. Others- of special interest for each country
- 14. Physiotherapy for comparison













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### Homeopathy - Who may practice

Country	Specific homeopathy treatment regulation	Medical Doctors (MDs)	Medical Doctors with CAM training	Conventional practitioners (CPs) PS3 <sup>1</sup>	Conventional health personnel with CAM training	CAM practitioner <sup>2</sup>	Others may practise	Other CAM legislation	Notes
Albania	Yes	?	?	?	?	?	?	Yes	
Austria	Yes	Yes	Yes	?	?	?	No	Yes	L
Belgium	Yes	Yes	Yes	Yes	Yes	?	No	Yes	
Bosnia and Herz.	No	Yes	Yes	?	?	?	No	No	
Bulgaria	Yes	Yes	Yes	No	No	No	No	Yes	
Croatia	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	
Cyprus	No	Yes	Yes	No	No	No	No	Yes	
Czech Republic	Yes	No	Yes	No	No	No	No	Yes	
Denmark	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Estonia	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	
Finland	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
France	Yes	Yes	Yes	Yes	Yes	No	No	Yes	
Germany	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Heilpraktike
Greece	Yes	Yes	Yes	Yes	Yes	Yes	?	Yes	
Hungary	Yes	No	Yes	No	No	No	No	Yes	· · · · · ·
Iceland	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Healer
Ireland	No	Yes	Yes	Yes	Yes	Yes	Yes	No	
Israel	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Italy	Yes	Yes	Yes	No	No	No	No	Yes	
Latvia	Yes	Yes	Yes	No	No	No	No	Yes	
Liechtenstein	Yes	Yes	Yes	Yes	Yes	No	No	Yes	
Lithuania	Yes	No	Yes	No	No	No	No	Yes	
Luxembourg	No	Yes	Yes	?	?	No	No	Yes	
Macedonia	No	Yes	Yes	?	?	?	?	Yes	
Malta	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Montenegro	No	Yes	Yes	?	?	?	?	No	
Netherlands	No	Yes	Yes	Yes	Yes	Yes	?	Yes	
Norway	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Poland	Yes	Yes	Yes	Yes	Yes	Yes	?	Yes	
Portugal	Yes	Yes	Yes	Yes	Yes	Yes	?	Yes	
Romania	Yes	No	Yes	No	No	No	No	Yes	
Serbia	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	
Slovakia	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Slovenia	Yes	Yes	Yes	?	?	?	No	Yes	
Spain	Yes	Yes	Yes	?	?	?	No	Yes	
Sweden	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Switzerland	Yes *	Yes	Yes	?	?	?	?	Yes	*Naturopath homeopath
Turkey	No	Yes	Yes	?	?	?	?	Yes	
United Kingdom	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	

1) Conventional practitioners (CPs) (PS3 post-secondary level 3-4 years)

2) CAM practitioner (CAM trained personnel, medical trained, DSE diploma post- secundary education level)





## **CAM regulation in EU and Council of Europe**

### **Two resolutions. Little happened!**

### The status of "non-conventional medicine". Resolution A4-0075/97

The European Parliament Resolution on how nonconventional medicine should be included more formally as a special field in the European legislation.

### A European Approach to non-conventional medicines. Resolution 1206(1999)

The Parliamentary Assembly of the Council of Europe Resolution on non-conventional medicine.







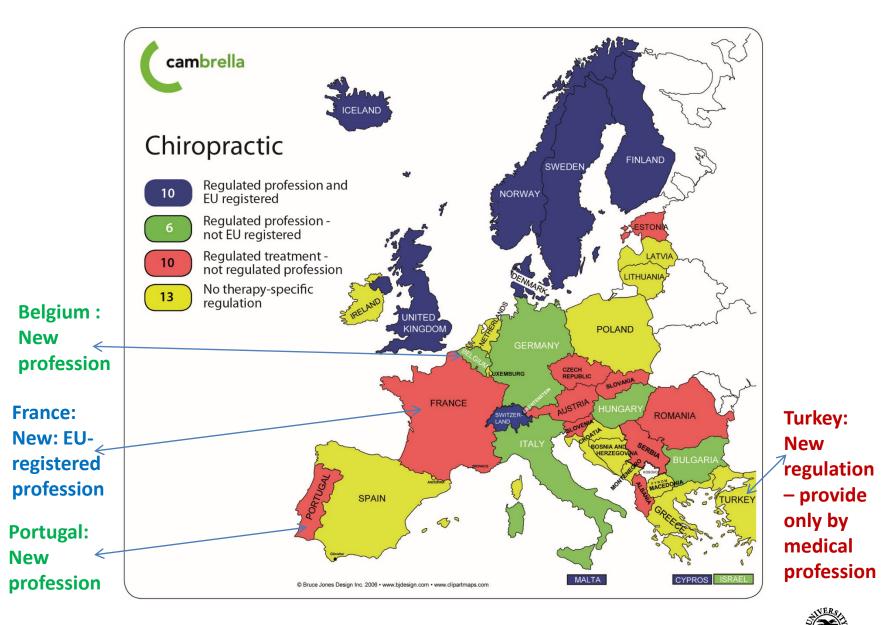
### **EU Directives**

- 1. Directive 2011/24/EU Patients' rights in Cross-border healthcare.
- 2. Directive 2005/36/EC Professional Qualifications.
  - With the EC database of regulated professions.
- 3. Directive 2004/38/EC The right to move and reside freely.
- 4. Directive 2001/83/EC (amended by 2004/24/EC and 2004/27/EC) on the Community code relating to medicinal products for human use.















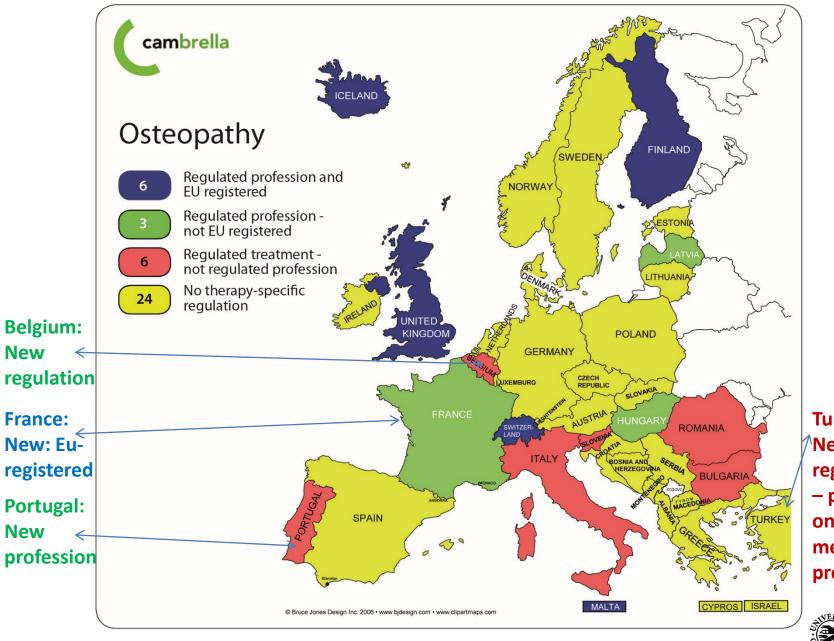
Regulated treatment	Chiropractic treatment regulations
Not reg. profession (10)	
Albania	A therapeutic system
Austria	Specialise physicians in chiropractic manipulation.
Czech Republic	Public health care, may only be performed as a part of treatment in health
	facilities by health care professionals like doctors or physiotherapists
Estonia	Estonian Chiropractic Physicians have full medical diagnostic skills and are trained
	to provide physiotherapeutic modalities as well as prescriptive therapeutics and
	rehabilitative exercises
France	allows medical doctors, midwives, physiotherapists, nurse practitioners and
	other practitioners to practise chiropractic (diagnosis only by medical doctor).
	NEW: March 24, 2014 training chiropractors
Portugal	regulated by the Portuguese Law No 45/2003 on the provision of non-
	conventional therapies . NEW: Amendment Sept 2013-training, protected title
Romania	CAM therapy in the group "manual therapies" in the law on CAM 118/2007
Serbia	CAM bylaw lists chiropractic as a method of treatment suitable for practise
Slovakia	is legal pursuant to general law- classification "any other medical worker"
Slovenia	"other CAM systems", a method within "manipulative and body-based methods"
	A diploma from a medical faculty, knowledge of chiropractic and a valid licence





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Turkey: New regulation – provide only by medical profession



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Regulated profession and EU registered (6)	Osteopathy treatment regulations
Finland FORE	Finland require a qualification level PS3 – diploma of post- secondary level (3-4 years)
Iceland FORE	Iceland require a qualification level PS3 – diploma of post- secondary level (3-4 years)
Liechtenstein	Liechtenstein require a qualification level PS3 – diploma of post-secondary level (3-4 years)
Malta FORE	Malta require a qualification level PS3 – diploma of post- secondary level (3-4 years)
Switzerland Eur Ost DO	In Switzerland the qualification level is 5 years plus 2 years of internship
UK FORE Eur Ost DO	In UK "osteopath" is registered with a qualification level PS4- diploma of post-secondary level (exactly 4 years).





# **Consequences for European patients**

- For similarly labeled treatments; an unpredictable level of professional competence and treatment standards.
- Different systems of authority regulation of quality of services provided.
- Unpredictable system of reimbursement for services provided.
- Inadequate safeguard systems if the treatment they undergo results in unwanted adverse or side effects.
- Limited and complex opportunities for complaints.

Every aspect of the current situation can be a threat to patient safety



# Consequences for European CAM practitioners

- Serious concerns with regard to the predictability, quality and safety of health care delivery to European citizens.
- The establishment of collegial common ground is very challenging.
- Substantial differences in the professional background of apparently identical CAM providers.

# The current situation can be a threat to patient safety



# Consequences for European CAM researchers

- 1. Practices and practitioners are **not comparable** across national boundaries
- 2. Any observational or experimental study will therefore be generalizable only within a narrow national or cultural context.

# This can be a threat to patient safety





### **Patient safety**

### **Risk governance** giving preference to **patient safety** includes **regulation** as an **important management tool.**

# Regulations of importance for patient safety can cover requirements on

- Provider education and training
- Provision of standardized and safe treatments
- Mandatory or voluntary professionals' registers
- Supervision (given authority through legislation)
- Professional title protection

### Patients' rights can cover:

- Correct information
- Safe treatment and provider choice
- Right to submit treatment claims
- Reimbursement of treatment costs





# **Supervision of CAM**

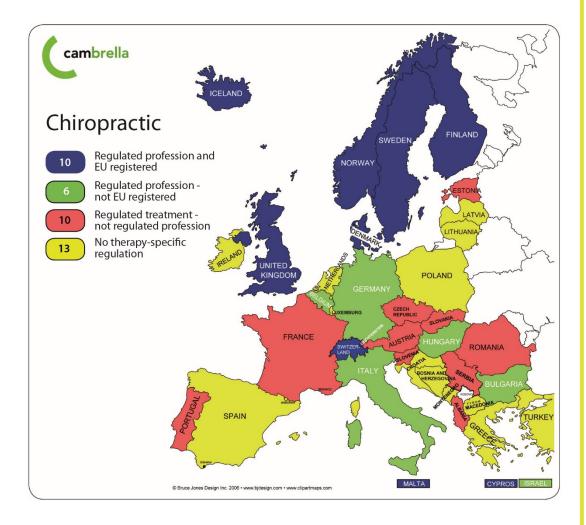
CAMbrella- overview of 39 European countries

- EPSO European Partnership for Supervisory Organisations in Health Services and Social Care
- Risk Governance with risk understanding and indicators.
- Directive 2011/24/EU of the European parliament and of the council of 9 March 2011 on the application of patients' rights in crossborder healthcare

Collaboration on implementation







13	
No regulation	Supervision?
Bosnia and	Yes - Law on health care
Herzegovina	No - Law not passed yet in
	federation
Croatia	No
Greece	No
Ireland	No or Yes, if regulated
	medical personnel
Latvia	No
Lithuania	No/Yes - Not allowed for
	non-medical professionals
Luxembourg	No
	Not recognized profession
Macedonia	No or Yes, if permission to
	practice - included in the
	public health law
Montenegro	No
Netherlands	No - Not included in the
	individual health care
	professions act
Poland	No
Spain	No
Turkey	Yes- provide by medical
NEV	doctor or supervised by a
	medical doctor



### The European Committee for standardization (CEN)



European standardization body for the development of standards in all areas

CAM technical committees–
Homeopathy for medical doctors
Osteopathy

Chiropractic









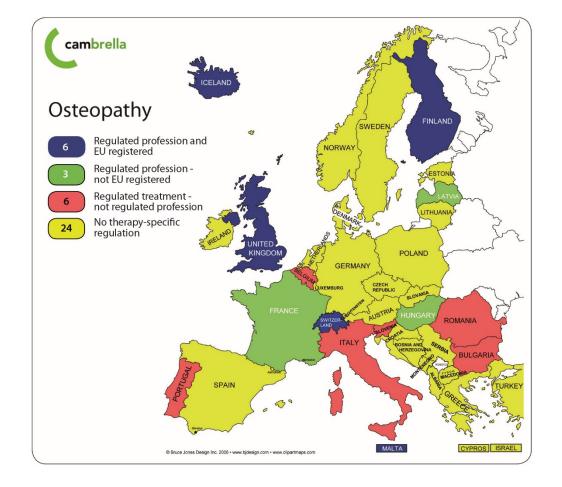
Ref: Dr.Thomas Peinbauer, ECH President

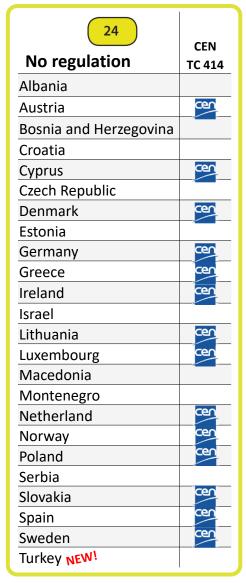




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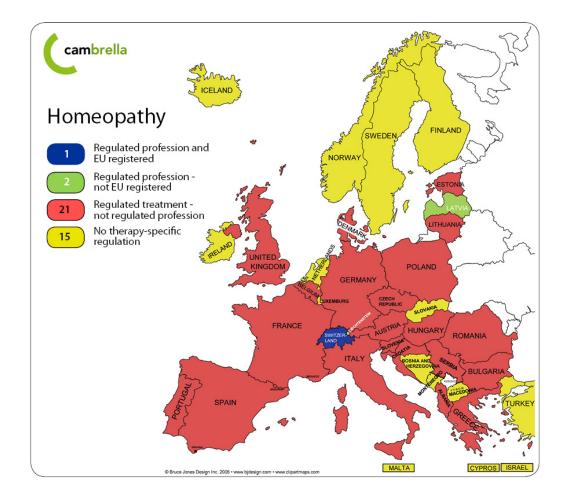






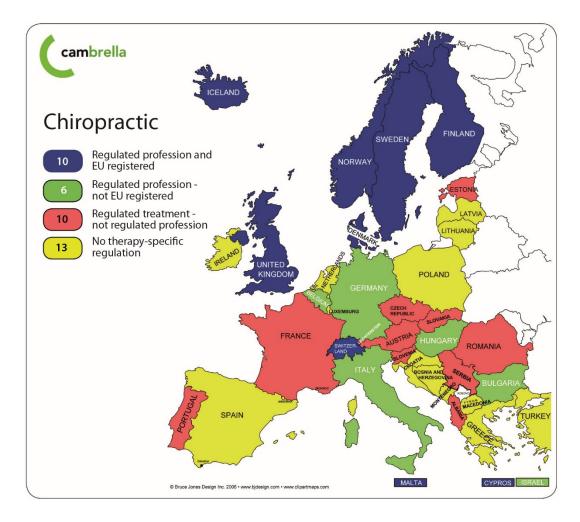






15 No regulation	CEN TC 427
Bosnia and Herzegovina	
Cyprus	cen
Finland	cen
Iceland	
Ireland	cen
Israel	
Luxembourg	
Macedonia	
Malta	
Montenegro	
Netherlands	cen
Norway	Cen
Sweden	
Slovakia	
Turkey NEW!	cen

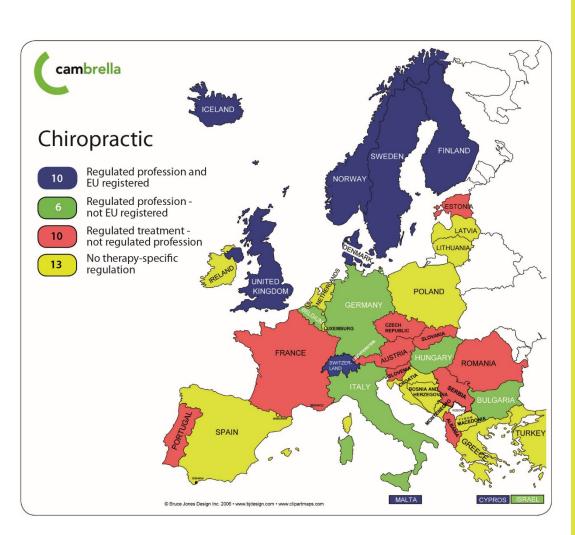




13 No regulation	CEN TC 394
Bosnia and Herzegovina	
Croatia	
Greece	
Ireland	cen
Latvia	
Lithuania	
Luxembourg	
Macedonia	
Montenegro	
Netherlands	cen
Poland	
Spain	cen
Turkey NEW!	







13		
No regulation	Supervision?	
Bosnia &	Yes - Law on health care	
Herzegovina	No - Law not passed yet in	
	federation	
Croatia	No	
Greece	No	
Ireland	No or Yes, if regulated	
Cen	medical personell	
Latvia	No	
Lithuania	No/Yes - Not allowed for	
	non-medical professionals	
Luxembourg	No	
	Not recognized profession	
Macedonia	No or Yes, if permission to	
	practice - included in the	
	public health law	
Montenegro	No	
Netherlands	No - Not included in the	
cen	individual health care	
	professions act	
Poland	No	
Spain	No	
Turkey	Yes - provide by medical	
NEW	doctor or supervised by a	
	medical doctor	

## **Questions to ask for health authorities**

- To supervise CAM providers which regulation is requested?
- A medical doctor provides CAM Supervision!
- A medical doctor provides homeopathy private?
- A regulated chiropractor Supervision!
- A physiotherapeut provides chiropractic ?
- General CAM regulation- it is allowed to practise homeopathy!- what about the homeopath (non-medical provider) following a CEN standard??



### **Possible ways forward**

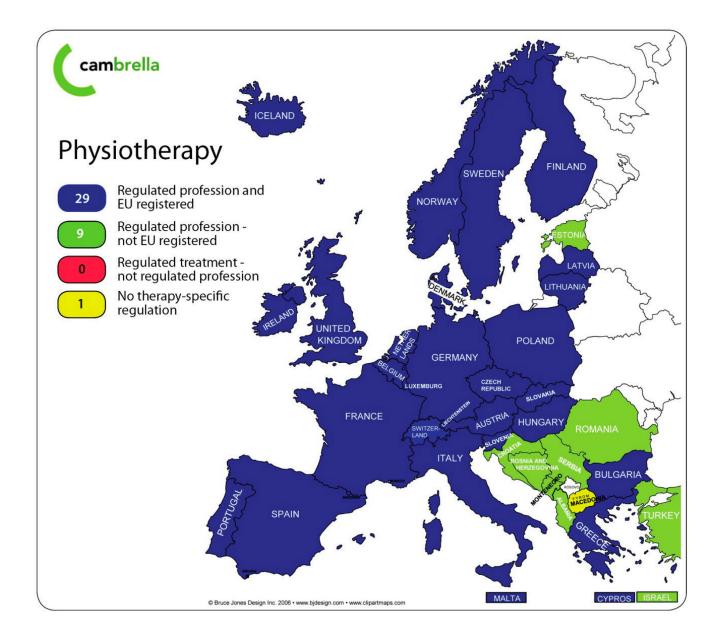
- 1. Legislation and regulation at the EU/EEA level
- 2. National/regional collaboration on regulation
- 3. Self-regulation (CEN)
- 4. Voluntary harmonization.

# Voluntary harmonization can be done













# Recommendations

- Regulation of CAM could be embodied within a risk governance system covering conventional, alternative and complementary health care services.
- Development towards European harmonized regulation of CAM would probably give patients, health care providers, researchers and governmental authorities a similar standardized, informed and safe decision platform.



## **CAMbrella WP2 reports**

All 3 reports are publicly available at:

www.nafkam.no

or

Die Universität Wien - Phaidra. Please use the following links:

http://phaidra.univie.ac.at/o:291583

http://phaidra.univie.ac.at/o:291682

http://phaidra.univie.ac.at/o:291585



Pan-European Research Network for Complementary and Alternative Medicine (CAM)

### Master thesis:

http://brage.bibsys.no/uis/retrieve/5713/Wiesener.Solveig.pdf







### References

 Wiesener S. Disharmonized regulation of CAM in Europe - implications for patient safety. Master Thesis, Stavanger: University of Stavanger; 2013. Available from:

http://www.nb.no/idtjeneste/URN:NBN:no-bibsys\_brage\_38403

 Wiesener S, Fønnebø V. Deliverable 9 - Reports No. 1, 2 and 3; CAMbrella project, FP7-HEALTH-2009 GA No.241951; Work Package 2; Deliverable 9 - Legal status and regulation of CAM in Europe; S.Wiesener, Falkenberg, T, Hegyi, G., Hök, J., Roberti di Sarsina, P., Fønnebø, V. Brussels: CAMbrella; 2012; Available from <u>http://phaidra.univie.ac.at/o:291583</u> <u>http://phaidra.univie.ac.at/o:291682</u> http://phaidra.univie.ac.at/o:291585







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CAM Regulation



Traditional, Complementary & Alternative Medicine: Legal and regulatory status - Governmental supervision - Reimbursement status

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### Home

Welcome to NAFKAM's website on the regulation of Traditional, Complementary and Alternative Medicine (CAM) in 39 European/EU countries.

This website contains hard copies of the findings in <u>work package (WP) 2</u> in the EUfunded CAMbrella project, which were delivered on December 31, 2012. New regulation that has come to our attention after 2012 is included as <u>News</u>.

The database gives information from 39 countries regarding both CAM regulation in general as well as specific regulatory issues with regard to 12 selected CAM treatments on the following subjects:

- Legal and regulatory status
- Governmental supervision
- Reimbursement status

### Objective

European citizens are seeking Complementary and Alternative Medicine, also when offered outside their national health care system. Regulation is an important management tool in risk governance of health care services. The objective of giving an overview of the regulation of Complementary and Alternative Medicine (CAM) in the European/EU countries is primarily to enable European citizens to make informed and safe choices when they seek CAM treatments. <u>Read more</u>

Filter options	
Country	
All	~
Therapy/Summary/	News
All	~
Show results	

Norway's National Research Center in Complementary and Alternative Medicine (NAFKAM) is organized as a center at the Faculty of Medicine, at UIT The Arctic University of Norway.

Search



Complementary and Alternative Medicine



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# Good luck with your supervision!!

### Takk! Thank you! Danke schön!





