




# Czech EU Presidency Expert Conference on Vaccination

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# The Standing Committee of European Doctors (CPME)

- Represents national medical associations across Europe
- Is committed to contributing the medical profession's point of view to EU institutions and European policy-making
- Vaccination is one of the key policy areas for CPME



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS  
STANDING COMMITTEE OF EUROPEAN DOCTORS

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On 21 January 2021, the CPME Executive Committee adopted the 'CPME Policy on Vaccination' (CPME 2020/055 FINAL).

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**CPME Policy on Vaccination**

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**CPME affirms that vaccination is a safe and efficient way of protecting individuals and populations from vaccine-preventable communicable diseases.**

Prevention of communicable diseases through vaccination is safe and effective.

Vaccination is overwhelmingly beneficial to individuals and populations and is essential to avoid vaccine preventable diseases and outbreaks.

Population health could be better protected if vaccination coverage was improved.

Vaccine hesitancy is the growing reluctance of individuals to get vaccinated or to vaccinate their children and threatens to reverse the progress made in vaccine preventable disease.

# Coalition for Vaccination

- CPME co-chairs the Coalition for Vaccination which brings together European associations of healthcare professionals and healthcare students
- The Coalition was convened by the European Commission in 2019 based on the 2018 Council recommendation on strengthened cooperation against vaccine-preventable diseases
- It organises online advocacy campaigns to promote vaccination among healthcare professionals but also the general public
- This year, it has published statements on the vaccination of the Ukrainian refugees and the importance of routine immunisation



# Vaccination in Digital Age

- In 2018, CPME responded to the European Commission consultation on strengthened cooperation against vaccine-preventable diseases
- CPME considered that EU citizens should have a record of their vaccination history available electronically
- In 2021, CPME issued a statement on the Digital COVID-19 Certificate
  - highlighting that it could encourage citizens to take their responsibility of getting vaccinated
  - but noting that it should only include a minimum of information that is strictly necessary



# Position on the European Health Data Space

- High impact on primary use of health data and on patient-doctor relationship
- Exclude doctors (as data holders) from making data available in secondary use
  - core activity is to provide care
  - must only provide data for primary use
  - apply once only principle (OOP)
- Vaccines or boosters – ‘medical alert’ field
- CPME worries about the implementation costs of the Proposal, whether it can maintain a high level of protection of fundamental rights, including personal data, with sound procedures that respect human dignity, autonomy, and privacy of individuals; strong obligations for software manufacturers for interoperability and usability must be made mandatory.

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## Position on the European Health Data Space

### Main Messages:

1. European doctors believe that the European Health Data Space (EHDS) can contribute to the provision of improved quality of healthcare to patients for primary use. The EHDS can also contribute to the enhancement of the provision of healthcare by stimulating the availability of health data for scientific research.
2. A high degree of trust and acceptance by patients and healthcare professionals will be a cornerstone of a successful EHDS. These main users must be at the centre of the EHDS concept. The usability for primary users of the system is a must and the EHDS should not diminish patient consultation time and experience.
3. CPME worries that the implementation costs of the Proposal will exacerbate already strained healthcare systems.
4. CPME is concerned whether the EHDS Proposal can maintain a high level of protection of fundamental rights, including personal data, with sound procedures that respect human dignity, autonomy, and privacy of individuals.
5. The quality of data is of paramount importance to the provision of safe, effective, and quality healthcare.
6. The role, competencies and practice of doctors and healthcare professionals will undergo a profound change with digitalisation and the EHDS. These changes and consequent obligations, as well as the impact on the delivery of healthcare, are not sufficiently addressed in the Proposal.
7. A high degree of semantic, legal, and technical interoperability will be key for a successful EHDS. Strong obligations for software manufacturers for interoperability and usability are mandatory.
8. In order to respect existing traditions and contexts in Member States, there should be national discretion with regards to the implementation of ethical safeguards. This includes ethical requirements in relation to the secondary use of health data, such as the duty to obtain patient's consent or to involve ethics committees.

# Many thanks for your attention!

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