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# MEDICAL COUNCIL MALTA

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### Foreword by the President of the Medical Council Malta

Over the years the responsibilities of the MCM have increased not only because of the increasing number of medical and dental practitioners who are registered to practice in Malta but also because of the increasing responsibilities of the MCM according to law. It is manifestly clear that the current set up of the MCM needs to change in order to reflect the dynamic exigencies of the profession and the evolving requirements according to law in the twenty-first century.

The MCM has forwarded its proposals to the competent authorities regarding crucial amendments with regard to the Health Care Professions Act, amendments which in the MCM's opinion are overdue.

One of the remits of the MCM is to ensure that only practitioners who are eligible to practice the profession in Malta are licensed. This is not only laid down in the Health Care Professions Act but also prescribed by EU Directives. A license to practice in a Member State entitles the holder to practice in all the other Member States. Therefore, the Council implements this responsibility scrupulously and punctiliously. This is justified by the knowledge that this responsibility safeguards the public's trust in the profession and is the corner-stone of a beneficial doctor/dentist – patient relationship.

I would like to thank all the members of the Council for their dedication and invaluable contribution to the work of the Council and to surmounting the challenges that the Council faces on a regular basis. Heartfelt thanks are also due to the Registrar, Ms Inez Cassar, and to her staff, Ms Joanne Vella and Ms Lara Sultana, for their commitment and service.

### **Composition of the Medical Council Malta during 2018:**

The composition of the Medical Council of Malta is established by the provisions of Article 9 of the Health Care Professions Act (HCPA) 2003, Chapter 464 of the Laws of Malta. As is the normal practice after the advent of general elections, the Chair/Members of the Council tendered their resignation to the competent authorities.

### **Members of the Medical Council Malta**

**President** (appointed by the Prime Minister after the 2017 general elections; term of office from 21<sup>st</sup> September 2017 to 20<sup>th</sup> September 2020;)

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

### Members appointed by the Prime Minister

Mr Ivan Esposito, M.D. F.R.C.S (appointed in lieu of Dr Silvio Grixti; term of office from 20<sup>th</sup> October 2017 to 19<sup>th</sup> October 2020; resigned with effect from 25<sup>th</sup> July 2018);

Dr Pauline Vassallo, B.Ch.D., D.D.P.H.(R.C.S.), M.Sc., MBA, FFPHDr (was reappointed by the Prime Minister with a term of office up to 20<sup>th</sup> September 2020);

### Members appointed by the University of Malta

Dr Daniel Farrugia, M.D. (Malta), DEAA, EDIC (appointed by the UoM, term of office from 15<sup>th</sup> October 2016 to 14<sup>th</sup> October 2019);

### Members elected by the Registered Medical Practitioners

(term of office from 3<sup>rd</sup> June 2016 to 2<sup>nd</sup> June 2019)

Dr Michael J. Boffa, M.D., F.R.C.P.(Lond.), F.R.C.P.(Edin), M.Sc.(Derm.)(Lond.),

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

Dr Doreen Cassar, M.D., Dip. W.H., Dip. PC & GP, M.M.C.F.D.;

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

Dr Alex Magri, M.D., M.M.C.F.D.;

Dr Tanya Melillo Fenech, M.D., M.Sc., PhD.;

### Members elected by the Registered Dental Surgeons

(term of office from  $3^{rd}$  June 2016 to  $2^{nd}$  June 2019)

Dr Anthony Charles B.Ch.D.;

Dr David Muscat B.D.S.;

### Members representing the Public – appointed by the Prime Minister

(term of office from 20<sup>th</sup> October 2017 to 19<sup>th</sup> October 2020)

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

Mr David Caruana M.Ed., B.A., Dip. in Educ. (Adult), PG Dip. in Educ. (Adm. & Mgt.);

Registrar: Ms Inez Cassar

Appointed Members of the Medical Council Malta Elections Commissioners for 2018.

In accordance with the provisions of Articles 3(1) and (2) of Legal Notice 35/2004, Subsidiary Legislation 464.04 - Medical Council (Elections) Regulations, during Council Meeting No. 02/2018 held on Wednesday 7<sup>th</sup> February 2018, the Medical Council appointed the members of the Medical Council Malta Elections Commission for a period of one calendar year starting from 1<sup>st</sup> January 2018.

The Medical Council Elections Commission is composed of:

Dr George Depasquale M.D.

Dr Joseph Farrugia M.D.

Dr Roy Schembri Wismayer M.D., D.C.P.(Lond.), Dip.Bact.(Lond.), M.C.A.P.(Aff.)

## Appointment of the Medical Council Elections Commission for the Appeals Committee Elections

In accordance with the provisions of Articles 3(1) and (2) of Legal Notice 316/2004, as amended by Legal Notice 346/2007, Subsidiary Legislation 464.05 - Appeals Committee (Elections) Regulations, during Council Meeting No. 02/2018 held on Wednesday 7<sup>th</sup> February 2018, the Medical Council appointed the members of the Medical Council Elections Commission for a period of three calendar years starting from 1<sup>st</sup> January 2018.

The Medical Council Election Commission is composed of:

Dr George Depasquale M.D.

Dr Joseph Farrugia M.D.

Dr Vincent Carmel Moran M.D.

Dr Roy Schembri Wismayer M.D., D.C.P.(Lond.), Dip.Bact.(Lond.), M.C.A.P.(Aff.)

### **Meetings and Attendance**

The Medical Council Malta held 21 meetings during 2018:

	Present	Excused
Dr Ilona Debono, President	18	3
Mr Philip Borg	21	-
Dr Michael J. Boffa	13	8
Dr Doreen Cassar	15	6
Dr Anthony Charles	20	1
Dr Daniel Farrugia	18	3
Dr Bryan Flores Martin	19	2
Mr Ivan Esposito (up to 25 <sup>th</sup> July 2018)	7	5
Dr Alex Magri	13	8
Dr Tanya Melillo Fenech	13	8
Dr David Muscat	13	8
Dr Pauline Vassallo	13	8
Mr David Caruana	20	1

## **Sub-Committees of the Medical Council Malta and Representatives of the Medical Council Malta on other Committees**

In line with the provisions of law, the Sub-Committees appointed by the Medical Council are entrusted with delegated powers to work on its behalf.

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

This Sub-Committee was responsible for vetting all new applications for registration as a medical professional in Malta, including the validation of the qualifications' certificates submitted by the applicants. This Sub-Committee was composed of Dr Doreen Cassar, Dr Alex Magri, Dr Bryan Flores Martin and Dr Tanya Melillo Fenech. Dr Doreen Cassar tendered her resignation from the Sub-Committee on the 17<sup>th</sup> October because she considered that her position on the Sub-Committee was no longer tenable after some applicants, who had been refused registration by the Sub-Committee on the basis of the provisions of the applicable legislation, made recourse to the Health Care Professions Appeals Committee which subsequently decided that the aforementioned applicants could be registered.

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

This Sub-Committee was responsible for vetting all new applications for registration as a dental surgeon in Malta, including the validation of the qualifications' certificates submitted by the applicants. This Sub-Committee was composed of Dr Anthony Charles, Dr David Muscat and Dr Pauline Vassallo.

### **Sub-Committee for the Analyses of Complaints (SCAC)**

The Sub-Committee responsible for the analyses of complaints was composed of Dr Ilona Debono, President of the MCM, Dr Daniel Farrugia and Mr Philip Borg.

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

This Sub-Committee was composed of Dr Ilona Debono, President of the MCM as chairperson, two members namely a medical practitioner member (by rotation) and a dental surgeon member (by rotation) depending on the case; and a member representing the public (by rotation).

### **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, Dr Bryan Flores Martin and Dr Tanya

Melillo Fenech were appointed to sit on the Medical Council Quality Assurance Sub-Committee (MCQAC) for the Foundation School Programme for a period of three (3) academic years starting from 1<sup>st</sup> February 2018..

#### **Sub-Committees for Medical and Dental Examinations**

In accordance with EU Directive 2005/36/EC; the HCPA 2003, Chapter 464 of the Laws of Malta; and the MCM's standard policy, all non-EU applicants in the possession of a non-EU first medical or dental degree, are required to sit for and successfully pass the Medical Council Malta Statutory Examination (MCMSE) in order to be eligible for Full-Permanent Registration in Malta. These MCMSEs are conducted twice a year as prescribed by law.

The MCM has recognized the need to develop standard procedures and guidelines with regard to these examinations in order to enhance transparency and ensure consistency. During 2018, three Sub-Committees were entrusted with these tasks:

**The Sub-Committee (Observers and Quality Assurers)** for the Dental Surgeons' MCMSE was composed of Mr Philip Borg, Dr Daniel Farrugia, Dr David Muscat, Dr Anthony Charles, and Mr David Caruana.

# MCM Representative on the Medical Specialist Accreditation Committee (MSAC)

Dr Bryan Flores-Martin represented the Medical Council on the MSAC.

# MCM Representative on the Dental Specialist Accreditation Committee (DSAC)

The Medical Council was represented by Dr Anthony Charles, and Dr Pauline Vassallo (substitute), on the DSAC.

### Participation in Conferences and Training held Overseas

- Meeting of the European Network of Medical Competent Authorities (ENMCA) held on 22<sup>nd</sup> June 2018 in Paris, France. The MCM was represented byDr Bryan Flores Martin. (Report: Annex 1)
- Conference of the Federation of Dental Competent Authorities (FEDCAR) held on 20<sup>th</sup> April 2018 in Dublin, Ireland. The MCM was represented by Dr David Muscat. (Report: Annex 2)
- European Network of Medical Competent Authorities (ENMCA) held on 26<sup>th</sup> November 2018 held in Vienna, Austria. The MCM was represented by Dr Bryan Flores Martin. (Report: Annex 3)
- Conference of the Federation of Dental Competent Authorities (FEDCAR) held on 30<sup>th</sup> November 2018 in Paris – France. The MCM was represented by Dr David Muscat. (Report: Annex 4)

### **Medical Council Malta Statutory Examination (MCMSE)**

EU Directive 2005/36/EC stipulates that the MCMSEs for applications with regard to Medical/Dental Practitioners are to be offered at least twice a year.

### **MCMSE for Medical Practitioners**

In line with the provisions of the aforementioned legislation, the MCMSE for Medical Practitioners was held on 5<sup>th</sup> April 2018. Eligible candidates may only sit twice for the MCMSE.

#### **Examination Coordinators**

Mr Philip Borg and Dr Tanya Melillo Fenech were appointed the 2018 MCMSEs Coordinators during Council Meeting No. 02/2018 held on Wednesday 7<sup>th</sup> February 2018.

### MCMSE for Medical Practitioners held on April 2018

On 5<sup>th</sup> April 2018, the statutory MCMSE was conducted in the form of an interview (viva voce in English) by two examiners at the Medical School, Mater Dei Hospital. During each examination session, the two (2) eligible applicants were tested in the subjects listed below and had to attain at least a pass-mark of fifty per centum (50%) in all the subjects in order to be successful. Candidates may only sit for the MCMSE twice.

The examination sessions were conducted in the following subject groupings:

Surgery & General Medicine

Paediatrics & Gynaecology

Family Medicine & Psychiatry

Public Health & Pathology

Table 1: Results of the MCMSE dated 5<sup>th</sup> April 2018:

DATE	NUMBER OF APPLICANTS	RESULTS		NTS RESULTS	
		PASSED	FAILED		
05.04.2018	2 candidates sat for whole MCMSE	-	2		

The results were communicated to the candidates on 5<sup>th</sup> April 2018.

### **MCMSE** for Medical Practitioners, September 2018

The MCMSE was held on 18<sup>th</sup> September 2018, in the form of an interview (viva voce in English) by two examiners held at the Medical School, Mater Dei Hospital. During each examination session, the four (4) eligible applicants were tested in the subjects listed below and had to attain at least a pass-mark of fifty per centum (50%) in all the subjects in order to be successful.

The examination sessions were conducted in the following subject groupings:

Surgery & General Medicine

Paediatrics & Gynaecology

Family Medicine & Psychiatry

Public Health & Pathology

Table 2: Results of the MCMSE dated 18<sup>th</sup> September 2018.

DATE	NUMBER OF APPLICANTS	RESULTS	
		PASSED	FAILED
18/09/2018	4 candidates sat for whole examination	1	3

The results were communicated to the candidates on 19<sup>th</sup> September, 2018.

### **MCMSE for Dental Surgeons**

The MCMSE was held on between 29th October and 7<sup>th</sup> November 2018: the written and oral examinations were held at the Medical School (Mater Dei Hospital) and at the Phantom Head Room (in the Biomedical Building, University of Malta) and four (4) applicants underwent written and oral exams in the following:

- Restorative written paper
- Restorative Practical oral
- Oral Medicine Surgery, Pathology and Radiology written paper
- OMSP Oral Medicine Surgery, Pathology and Radiology oral
- Child Dental Health and Orthodontics written paper
- Child Dental Health and Orthodontics oral
- Preventive and Community Dentistry written paper
- Preventive and Community Dentistry oral

Table 1: Results of the MCMSE held in between 29<sup>th</sup> October and 7<sup>th</sup> November 2018.

DATE	NUMBER OF APPLICANTS	RESULTS	
		PASSED	FAILED
29 <sup>th</sup> October to 7th November 2018	4 candidates sat for whole MCMSE	0	4

The results were communicated to the candidates on 4<sup>th</sup> December, 2018.

### Registration granted during year 2018

Total number of Medical Practitioners and Dental Surgeons registered during the year 2018:

Register	Gender		Total
	Female	Male	
Medical Practitioners: Principal Register	49	41	90
Medical Practitioners: Temporary Register	0	1	1
Medical Practitioners: Provisional Register	41	45	86
Dental Surgeons: Principal Register	13	6	19
Dental Surgeons: Temporary Register	1	2	3
Grand Total			199

Total number of Medical Practitioners and Dental Surgeons registered in Malta as at 31<sup>st</sup> December 2018:<sup>1</sup>

Register	Gender		Total
	Female	Male	
Medical Practitioners: Principal Register	833	1,386	2,219
Medical Practitioners: Temporary Register	17	36	53
Medical Practitioners: Provisional Register	501	436	937
Dental Surgeons: Principal Register	127	195	322
Dental Surgeons: Temporary Register	1	- 6	7
Grand Total			3,538

### Award Ceremony for the presentation of the Licence to Practice

The Medical Council offered its administrative assistance to the Ministry for Health with regard to the organisation of the Award Ceremony during which the Licence to Practice was presented by the Hon. Chris Fearne (Deputy Prime Minister and Minister for Health) to all the Medical and Dental Practitioners who had successfully completed their studies in Malta in 2017.

The Award Ceremony was held on 31<sup>st</sup> August 2018 at the Ministry for Health and Dr Ilona Debono, President of the MCM, delivered the welcoming speech. The MCM Registrar was also in attendance.

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<sup>&</sup>lt;sup>1</sup> Data retrieved from the MCM Registers database.

### **Provision of Temporary Service Lists**

Medical Practitioners and Dental Surgeons who have been included in the Lists for the Provision of Temporary Service during the year 2018<sup>2</sup>:

List	Gender		Total
	Female	Male	
MCM Temporary Service List – Medical Practitioners	5	2	7
MCM Temporary Service List – Dental Surgeons	-	-	-
Grand Total			7

Medical Practitioners and Dental Surgeons included in the Provision of Temporary Service Lists by the end of 2018:

List	Gender		Total
	Female	Male	
Medical Council Temporary Service List - Medical Practitioners	47	173	220
Medical Council Temporary Service List – Dental Surgeons	-	4	4
Grand Total			224

<sup>&</sup>lt;sup>2</sup> As stipulated in EU Directive 2005/36/EC, Article 9, Medical Practitioners and Dental Surgeons from other EU Countries are requested to register with the Medical Council Malta and provide all relevant documentation for the Provision of Temporary Service. The Provision of Temporary Service Lists may be accessed at: <a href="https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Registers.aspx">https://healthcms.gov.mt/en/regcounc/medicalcouncil/Pages/Registers.aspx</a>

Laws, Circulars and other Publications

During 2018, there were no amendments to the Laws regulating the Medical Council Malta,

and the MCM did not issue any Circulars or other Publications.

The Laws, Circulars and Publications of the MCM may be assessed at:

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

**Complaints, Inquiries, Criminal Proceedings and Court Cases** 

The actions undertaken by the Medical Council Malta are provided for in Subsidiary

Legislation 458.08, entitled 'Medical Council (Erasure of Names Procedure) Rules,

24.12.1959'. Moreover, in accordance with the Health Care Professions Act 2003, Chapter

464 of the Laws of Malta, the Medical Council Malta may initiate any inquiry it deems

necessary, independent of any other measure taken by other entities, with respect to all

registered Medical and Dental Practitioners.<sup>3</sup>

MC/132/2012

All Medical and Dental Practitioners who had failed to pay the Annual Retention Fee (in line

with LN/330/2006) by the end of 2017 were reminded about their outstanding dues along

with a request for the payment of the 2018 Annual Retention Fee. Practitioners were

contacted both by electronic mail and by phone, and by December 2018, a substantial number

of the Practitioners had regulated their position.

The MCM repeats this process on a yearly basis in order to ensure that the position of all

registered Medical and Dental Practitioner is in line with the provisions of the Law. The

Council can, on the basis of the powers conferred upon it by HCPA 2003, Chapter 464,

initiate Inquiry procedures against those Practitioners who persist in failing to pay the

regulatory Annual Retention Fee.

Case status: Ongoing

<sup>3</sup> All prevailing legislation may be accessed from the Medical Council's website:

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

### • CC/04/2015 (previously numbered as MC/98/2012) – Main file No. CC/04/2016

In June 2012, a local magazine featuring an advert published by a Dentist was brought to the attention of the MCM for an alleged breach of the Medical Council's Code of Ethics (L.N./303/2008) as well as the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners.

In mid-June 2012, the Dental Practitioner in question was invited to clarify his/her position about this matter and a reply was received by the end of June. The Dentist stated that his/her action should not to be considered as being advertisements. This case was put on hold pending the report from the Sub-Committee on Advertising and Financial Conduct by Medical/Dental Practitioners.

The Subcommittee for the Analysis of Complaints (SCAC) reviewed this case during its meeting held at the end of November 2015 and presented its recommendations to the MCM which subsequently discussed these recommendations during the first Council Meeting held in 2016. The MCM decided that all the complaints for alleged breach of the Code of Ethics on Advertising and Financial Conduct raised against this Dental Surgeon would be addressed as a single case and that he/she would be asked to further clarify his/her position.

Case status: Board of Inquiry initiated on 15<sup>th</sup> October 2018. (Refer also to CC/10/2015, CC/01/2016 and to the main file CC/04/2016)

### • CC/10/2015 (previously numbered a MC/45/2013) - Main File No. CC/04/2016

During 2013, a series of 'adverts' published by a Dental Surgeon on a regular basis in a local magazine were brought to the attention of the MCM. These 'adverts' were alleged to be in breach of the MCM's Code of Ethics (L.N./303/2008) as well as the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners.

During its meeting held at the end of January 2016, the SCAC reviewed this case and presented its recommendations to the Council in the first week of February 2016. The MCM decided that all the complaints regarding the alleged breaches of the Code of Ethics on Advertising and Financial Conduct against this Dental Surgeon would be addressed as one case and that he/she is to be asked to clarify his/her position.

Case status: Board of Inquiry initiated on 15<sup>th</sup> October 2018. (Refer also to CC/04/2015, CC/01/2016 and to the main file CC/04/2016)

### • CC/11/2015 (previously numbered as MC/80/2013)

In November 2012, a Medical Practitioner filed a complaint against three Medical Practitioners for alleged unethical and unprofessional behaviour. The SCAC discussed this case and presented its recommendations in the Council Meeting held at the end of January 2016. This case was discussed again by the MCM at end of June 2016 and also at the end of November 2016, wherein it was decided that a formal Inquiry would be held to investigate the allegations raised against two of the named Practitioners.

Case status: Inquiry still to be initiated.

### • CC/15/2015 (previously numbered as MC/87/2013)

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

In January 2014, the complainant provided the correct details about the practitioner against whom he/she was filing the complaint. This MCM discussed he complaint and decided to proceed with an Inquiry by appointing a Board of Inquiry.

Case status: Inquiry still to be initiated.

### • CC/20/2015 (previously numbered as MC57/2014)

In mid-January 2014, two Medical Practitioners filed a complaint against a Medical Practitioner complaining of unethical and unprofessional conduct (alleged slander).

The MCM discussed the case and decided that an Inquiry would be held in plenary. This decision was reconfirmed during a meeting held in end-October 2016.

Case status: Inquiry is still to be initiated.

#### • CC/21/2015 (previously numbered as MC/60/2014)

In mid-October 2013, the Medical Council Malta received a formal letter of complaint against a Dental Surgeon from a patient who alleged that the Dentist had acted unethically and unprofessionally.

The SCAC discussed this case and decided that expert opinion had to be sought.

Case Status: Still pending.

#### • CC/22/2015 (previously numbered as MC/114/2014)

At the end of December 2013, a patient filed a Judicial Protest against a Medical Practitioner and the Hon. Minister for Health for alleged unethical and unprofessional conduct in his/her regard at the Gozo General Hospital. In mid-September 2014, the MCM asked the Practitioner to clarify the circumstances of this incident. Subsequently, in mid-October 2014, the Legal Office of Mater Dei Hospital submitted a reply on behalf of the Practitioner.

The SCAC discussed this case during the first week of May 2016 and presented its report at the end of October 2016. The Medical Council decided that this case merited an Inquiry and a Board of Inquiry was appointed.

Case status: Board of Inquiry still to be initiated.

#### • CC/26/2015

In November 2011, a Medical Practitioner filed a complaint against another Medical Practitioner for alleged unethical and unprofessional behaviour in his/her regard.

This case was discussed by the SCAC.

The SCAC discussed this case further and presented its recommendations during a Council Meeting held during the first week of February 2016, wherein it was decided that this case was to be referred to the Clinical Chairperson of the respective Department at MDH.

Case Status: Still pending.

#### • CC/29/2015

In mid-March 2015, the MCM received a detailed report about a series of events that a patient was alleged to have experienced at Mater Dei Hospital before dying. This report was filed by a friend of the late patient.

This case was discussed by the SCAC during its meeting held in mid-October 2015. Since this report failed to clearly and specifically outline against whom it was being filed, the complainant was sent a letter in end-October 2015 asking for further clarifications in order to regulate his/her complaint. The complainant was also informed that this case also dealt with an element of mismanagement which did not fall within the remit of the Council. A reminder was sent during the first week of May 2016, but to date, the Council has not received further communication from the complainant.

Case Status: Case still pending.

CC/33/2015

In May 2015, a patient filed a complaint with the MCM against a Psychiatrist.

The SCAC analysed this case and would present its recommendations to the Medical Council

in due course.

Case Status: Pending still being discussed at Sub-Committee level.

CC/34/2015

A newspaper article in the Sunday Times of Malta dated 24th May 2015 was brought to the attention of the Medical Council for alleged unethical and unprofessional behavior on the part

of the Medical Practitioner mentioned in the complaint.

Case Status: This case is still pending.

CC/35/2015

In mid-June 2015, a patient filed a formal letter of complaint against a Medical Practitioner

for alleged unethical and unprofessional behaviour.

Case Status: This case is still pending.

CC/39/2015

In September 2015, a patient filed a complaint against a Dentist for alleged unethical and

unprofessional behaviour but the name of the Dental Practitioner was not provided. The

complainant was therefore provided with the guidelines on how to file a complaint but, to

date, no other correspondence has been received in this regard.

Case Status: Case is still pending.

CC/40/2015

At the end of February 2014, a report was forwarded by the Ministry for Health against a

Doctor for alleged unethical and unprofessional behavior requesting the Medical Council

Malta to investigate further and present its findings.

Case Status: Case is still pending further investigations.

CC/41/2015

In mid-May 2014, the Council received a letter of a complaint from the parent of a three year

old child, against a Medical Practitioner serving at the Emergency Department at Mater Dei

Hospital, outlining alleged unethical and unprofessional behaviour. The complainant was

asked whether he/she was still interested in proceeding with the case.

Case Status: Case still pending.

CC/43/2015 (previously numbered as MC15/2013)

In February 2013, the parents of a two-year-old who passed away 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 accused in Court of

allegedly being responsible for the death of their child after he/she had been admitted at

Mater Dei Hospital. A Magisterial Inquiry was appointed and the MCM submitted its counter

protest in Court 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 behavior

which allegedly led to the death of their daughter. In August 2013, the named Medical

Practitioners were notified about this complaint and were asked to present their submissions

to the Council.

The Practitioners presented their submissions in July 2013 and subsequently filed a Judicial

Protest against the Medical Council requesting the Court to order the MCM to suspend its

investigation until the Court's decision had been given regarding the other Judicial Protest

previously filed by the parents. The Medical Council filed a counter protest in September

2013.

The President of the Council abstained from this case.

Case status: This case has been deferred pending the Court's Decision.

**CC/44/2015** (previously numbered as MC/139/2015)

In mid-January 2015, a patient filed a complaint with the MCM against three Medical

Practitioners for alleged unethical and unprofessional behaviour.

The Council discussed this complaint and considered the Doctors' version of events during a

Council Meeting held in the first week of October 2015, wherein it was decided that this case

merited an Inquiry which is to be conducted in plenary.

Case Status: Case is still pending.

### • CC/45/2015

In mid-October 2015, the Medical Council Malta received a letter of complaint against a Medical Practitioner and his/her team at St. James Hospital for alleged unethical and unprofessional behaviour during the delivery of their child.

Case Status: This case is still pending.

#### • CC/46/2015

At the end of October 2015, a Pharmacy filed a complaint against another Pharmacy, the latter being administered by a Medical Practitioner, for an alleged breach of Ethics with respect to advertising.

Case Status: This case is still pending.

### • CC/53/2015

At the end of December 2015, a patient filed a letter of complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour.

Case Status: Pending – as investigations are still ongoing.

### • CC/01/2016 - Main file CC/04/2016

During the second week of January 2016, the Medical Council received an anonymous complaint against a Dental Surgeon regarding articles, allegedly appearing in the printed media, that were allegedly in breach of the MCM's Code of Ethics (L.N./303/2008) and the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners.

The SCAC reviewed this case during a meeting held at the end of January 2016 and presented its recommendations to the Council in the first week of February 2016. The Medical Council decided that all the complaints regarding the alleged breach of the Code of Ethics on Advertising and Financial Conduct filed against the Dental Surgeon are to be considered as one case and that Dental Surgeon is to be asked to explain his/her position.

Case status: The Board of Inquiry was initiated on 15/10/2018.(Refer also to CC/04/2015, CC/10/2015, CC/01/2016 and to the main file CC/04/2016)

### • CC/03/2016

At the end of February 2016, a Foundation Doctor filed a Judicial Protect against the Medical Council Malta concerning his/her eligibility for Full Registration and the License to Practice.

The Foundation Doctor failed to be successfully signed off with regard to his/her two-year Foundation Programme in Malta as stipulated by the Law. The MCM submitted its reply in

Court in mid-March 2016.

The Foundation Doctor subsequently submitted an application for Registration in October

2016 and this was discussed in December 2016.

Case Status: On 27<sup>th</sup> July 2018, the Appeals Committee revoked the MCM's decision of the 19<sup>th</sup> January 2017 and ordered that the appellant be permanently registered on the Medical Council Register, backdated to 30<sup>th</sup> September 2016, being the date of applicant's

application.

**CC/04/2016 (Main File)** 

The Medical Council is presently investigating a series of repeated advertisements by a Dental Surgeon, in various local magazines, for alleged breach of the Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners. In mid-April 2016, the Dental Surgeon was asked to submit his/her position about this matter and a reply was

received during the first week of May 2016.

After discussing this case the MCM decided that a Board of Inquiry was to be set up to investigate further.

Case Status: Board of Inquiry was initiated on 15/10/2018.

(Refer also to CC/04/2015, CC/10/2015, CC/01/2016)

CC/07/2016

In mid-March 2016, a patient filed a letter of complaint against a Medical Practitioner for alleged unethical and unprofessional behavior.

Case Status: In the light of the medical records produced by the complainant, the MCM decided that this case should be closed.

CC/10/2016

In mid-April 2016, the Medical Council received a letter of complaint against three Medical Practitioners concerning advertising thereby alleging a breach of the Code of Ethics on Advertising and Financial Conduct.

Case Status: Case is still pending as it is still being investigated.

CC/12/2016

At the end of April 2016, a patient who currently resides overseas, filed a letter of complaint

with the MCM against a Medical Practitioner alleging unethical and unprofessional

behaviour shown in his regard when the complainant was on a visit to Malta.

Case Status: Since complainant did not lodge a formal complaint, the MCM decided that the

case should be closed.

CC/15/2016

At the end of June 2016, the Medical Specialist Accreditation Committee (MSAC) filed a

letter of complaint against a Medical Practitioner for alleged unethical, unprofessional and

offensive behavior in their regard. In mid-July 2016, the Doctor was provided with a copy of

the complaint and asked to clarify his/her position but the Practitioner failed to comply.

Case Status: Pending

CC/18/2016

At the end of October 2016, the Dental Association of Malta filed a letter concerning

advertising against a number of Dental Surgeons for an alleged breach of the Code of Ethics

on Advertising and Financial Conduct.

Case Status: Since the letter from Dental Association of Malta was not a complaint, the

MCM decided that the case should be closed.

CC/19/2016

In mid-October 2016, the Medical Council received a complaint against a Medical

Practitioner for alleged unethical and unprofessional behaviour.

Case Status: Case is at the investigation stage.

CC/20/2016

In mid-September 2016, the Medical Council Malta received a complaint against a Medical

Practitioner for alleged unethical and unprofessional behaviour.

Case Status: Pending

#### • CC/22/2016

The MCM received a number of anonymous complaints against a number of Medical Practitioners which alleged that they were practicing as Family Doctors/General Practitioners even though not being included in the respective Specialist Registers.

Case Status: Since not enough information was provided in the anonymous complaint, it was decided that case should be archived.

#### • CC/23/2016

In mid-January 2016, a patient notified the MCM of her complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour but without identifying the Medical Practitioner. The complainant was asked to regulate his/her complaint in line with the guidelines of how to file a complaint with the MCM but to date no further correspondence has been received.

Case Status: Case is still pending.

### • CC/24/2016

At the end of September 2016, the sponsorship of a football club by a Dental Surgeon was brought to the attention of the Medical Council for an alleged breach of ethics.

Case Status: Since remedial action has been taken by the Dental Practitioner, it has been decided that case should be closed.

#### • CC/25/2016

An advert by a Dental Clinic in a September 2014 issue of the Times of Malta was brought to the attention of the Medical Council at the end of September 2016 alleging a breach of the Code of Ethics on Advertising and Financial Conduct,.

This file was attached to CC/04/2016.

Case Status: A Board of Inquiry was initiated on 15th October 2018.

#### • CC/26/2016

An advert by a Dental Clinic in a September 2016 issue of the Times of Malta was brought to the attention of the MCM alleging a breach of the Code of Ethics on Advertising and Financial Conduct.

This file was attached to CC/04/2016.

Case Status: A Board of Inquiry was initiated on 15<sup>th</sup> October 2018.

### • CC/27/2016

A complaint dated 3<sup>rd</sup> November 2016 against a Medical Practitioner for an alleged breach of professional standards.

Case Status: Still Pending.

### **Complaints received during 2017**

#### • CC/01/2017

Anonymous complaint regarding advertising by a Dental Clinic.

This file was attached to CC/04/2016.

Case Status: Still pending.

Related Files: CC/22/2017; CC/23/2017

### • CC/02/2017

Anonymous complaint dated 25<sup>th</sup> January 2017 regarding Medical Practitioners at the Gozo General Hospital.

Case Status: Since anonymous complaint did not provide sufficient information, the MCM decided that the case should be archived.

#### • CC/03/2017

CIBG report dated 16<sup>th</sup> August 2017 against a Medical Practitioner regarding a disciplinary report (in a foreign language).

Case Status: Case is still being investigated by SCAC.

#### • CC/04/2017

Complaint against a Dental Surgeon for an alleged breach of professional standards.

Case Status: Case is still being investigated by SCAC.

#### • CC/05/2017

Complaint regarding alleged abuses and irregularities committed at a pharmacy in the Cottonera area.

Case Status: Complaint was referred to the Superintendent of Public Health.

CC/06/2017

Complaint against a Psychiatric Medical Practitioner for an alleged breach of ethical and

professional standards.

Case Status: Case is still being investigated by SCAC.

CC/07/2017

Complaint by Medical Practitioner against several other Medical Practitioners including the

Minister for Health for an alleged breach of professional standards.

Case Status: This case is still pending.

CC/08/2017

Complaint against a Medical Practitioner for an alleged breach of professional standards

whilst treating the complainant's mother.

Case Status: In the light of the medical records provided by the complainant, the MCM

concluded that there was no breach of professional standards, therefore it was decided that

the case can be archived.

CC/9/2017

Anonymous complaint against a Medical Practitioner for allegedly breaching professional

standards.

Case Status: Case is still pending as it is still under investigation.

CC/10/2017

Complaint by a Medical Practitioner against another Medical Practitioner regarding an

alleged breach of ethical and professional standards.

Case Status: Case is still under investigation by SCAC.

CC/11/2017

Complaint against a Medical Practitioner for an alleged breach of ethics

Case Status: The case was discussed and since the matter did not merit further investigations

as there was no breach of ethics the MCM decided that the case should be archived.

CC/13/2017

Complaint by a Medical Practitioner against a blogger's statements vis-a-vis mental health

issues and the leakage of information.

Case Status: Pending

CC/14/2017

Anonymous complaint regarding a repeated advert on social media promoting free services

by a Dental Practitioner in a particular pharmacy.

Case Status: Pending

CC/16/2017

Complaint by a Medical Practitioner requesting an investigation regarding an incident

experienced by his mother whilst being an inpatient at St James Hospital under the care of an

Orthopaedic Surgeon and a Physician.

Case Status: Case is still being investigated by SCAC.

CC/17/2017

Court Case: Parents of an 18 month old baby sued the Medical Practitioners for alleged

medical negligence after first being informed that their child was not seriously ill but then in

fact their baby died after five consecutive visits to St Luke's Hospital.

Case Status: Still pending awaiting Court outcome.

CC/18/2017

Complaint by a patient against a Medical Practitioner who examined patients at a clinic in

Mosta. Complainant had asked for an appointment with a Consultant Specialist. The doctor

assigned to him/her at the clinic wrote a medical prescription which was refused by POYC as

the doctor was not amongst the specific Consultant Physicians who could prescribe the said

medication.

Case Status: Still pending.

CC/19/2017

Complaint against a Medical Practitioner regarding alleged professional misconduct and a

breach of ethics including sexual misconduct.

Case Status: Case has been discussed and a Board of Inquiry should be initiated.

CC/20/2017

Complaint by a patient's spouse against a Psychiatrist regarding an alleged breach of ethical

and professional conduct including malpractice.

Case Status: Still pending.

CC/21/2017

Report received by the MCM against a Medical Practitioner who might have had some health

issues which could affect patient safety and the quality of care provided to patients.

Case Status: Pending.

CC/22/2017

Complaint by a Dental Practitioner against another Dental Practitioner for advertising in a

magazine published by a Local Council.

Case Status: Pending

Related Files: CC/01/2017; CC/23/2017

CC/23/2017

Anonymous complaint against a Dental Practitioner for allegedly advertising on a local radio

station and leaving flyers on car windscreens to promoting free check-ups and X-Ray

examinations.

Case Status: Pending.

Related Files: CC/01/2017; CC/22/2017

CC/24/2017

Queries by a local newspaper regarding a Medical Practitioner who allegedly issued medical

certificates without first examining the patients.

Case Status: Case has been discussed and a Board of Inquiry was initiated on 15/10/2018.

Case is ongoing.

Complaints received during 2018.

#### • CC/01/2018:

Anonymous complaint against Health Centre Medical Practitioners regarding an alleged breach of ethics.

Case Status: Case archived since the alleged doctors were not identified in the anonymous letter.

#### • CC/02/2018:

Anonymous complaint against a Dental Practitioner regarding an alleged breach of professional ethics.

Case Status: Pending.

#### • CC/03/2018:

Complaint received by email against a Medical Practitioner regarding alleged unethical behavior.

Case Status: Pending.

#### • CC/04/2018:

Complaint against a Medical Practitioner regarding an alleged breach of professional standards.

Case Status: Pending.

#### • CC/05/2018:

Complaint against a Medical Practitioner regarding an alleged breach of professional standards.

Case Status: Pending.

#### • CC/06/2018:

Complaint against a Health Centre Medical Practitioner regarding an alleged breach of professional standards.

Case Status: The file has been archived since the case is being dealt with by the Primary Health Care.

#### • CC/07/2018:

Email from a foreign Medical Practitioner regarding various allegations.

Case Status: Pending.

#### • CC/08/2018:

Email from a foreigner against St James Hospital, Sliema.

Case Status: Pending.

#### • CC/09/2018:

Court orders the Police Commissioner to investigate a Medical Practitioner for allegedly issuing a medical certificate without first examining the patient.

Case Status: Pending.

### • CC/10/2018:

Report received by MCM concerning a Medical Practitioner who allegedly breached professional ethics.

Case Status: Pending.

### • CC/11/2018:

Complaint against a Consultant Psychiatrist regarding an alleged breach of professional standards.

Case Status: Pending.

#### • CC/12/2018:

Complaint against a Medical Practitioner regarding an alleged breach of professional ethics. Case Status: Pending

#### • CC/13/2018:

Report by SPH regarding radio spots featuring a Medical Practitioner recommending a particular energy drink.

Case Status: Pending.

#### • CC/14/2018:

Anonymous complaint against a Dental Practitioner regarding an advert on a Sunday newspaper.

This file was attached to CC/04/2016.

Case Status: A Board of Inquiry was initiated on 15<sup>th</sup> October 2018.

#### • CC/15/2018:

Email from a foreigner regarding alleged claims for prescription costs.

Case Status: Pending.

#### • CC/16/2018:

Complaint by a foreigner against a Medical Practitioner regarding an alleged breach of professional standards.

Case Status: Pending

### • CC/17/2018:

Anonymous complaint against a Medical Practitioner regarding an alleged breach of professional ethics through advertising himself on a website.

Case Status: Pending

#### • CC/18/2018:

Complaint against a Medical Practitioner regarding an alleged breach of professional standards.

Case Status: Pending

**Inquiries** 

**Inquires still pending** 

MC/D/295/2006

The MCM is currently carrying out an Inquiry regarding a Medical Practitioner who had

allegedly claimed to be a specialist without holding any specialisation certificate.

Case status: Pending

MC/40/2012

Complaint against a Dental Surgeon regarding alleged unethical behaviour and professional

misconduct and regarding a significantly lower gold content in the alloy composition than

that which was agreed upon prior to the treatment. At the end of April 2012, the Dental

Practitioner was asked to clarify his/her position.

After having preliminarily discussed and evaluated this case, the MCM decided that this case

merited an Inquiry. The Board of Inquiry was appointed at the end of 2013 while the Notice

of Inquiry was issued during the first week of February 2014.

At the end of May 2014, the MCM held a sitting with regard to this case during which both

parties gave evidence and also made their submissions.

Case Status: Still pending.

MC/41/2012

Complaint against a Dentist for alleged unethical and unprofessional behaviour in relation to

the work performed and regarding a significantly lower gold content in the alloy composition

than that agreed upon before the treatment was performed.

After having preliminarily discussed and evaluated this case, the MCM decided to proceed

with an Inquiry. The Board of Inquiry was appointed at the end of 2013 and the Notice of

Inquiry was issued during the first week of February 2014.

At the end of May 2014, the MCM held a sitting with regard to this case during which both

parties gave evidence and made their submissions.

Case Status: Still pending.

### • CC/37/2015

During the first week of May 2015, a patient, presently residing abroad, filed a complaint against a Medical Practitioner for alleged unethical and unprofessional behaviour.

This case was analysed by the SCAC during a meeting held in October 2015. At the end of October 2015, the Practitioner was invited to clarify his position with regard to this complaint and this was received by the stipulated deadline.

The SCAC presented its recommendations to the MCM during a Council Meeting held at the beginning of December 2015 and the MCM decided that this case merited an Inquiry, whereby the Board of Inquiry was appointed.

• Case Status: Pending; Inquiry still ongoing.

### **Court Cases**

## • MC/D/262 (Court Case 1100/2009AE, Dr Frank Portelli vs. Medical Council Malta)

The MCM investigated a complaint filed by a Medical Practitioner against Dr Frank Portelli (MC 0642) for alleged unethical and unprofessional behaviour in his/her regard, leading to a series of conflicts. The decision of the Medical Council was delivered on 1<sup>st</sup> July 2009 and Dr F. Portelli was found guilty of professional misconduct.

**Decision by the Medical Council Malta:** Dr F. Portelli was fined 10,000 Euros which had to be paid within three (3) months, otherwise he would be struck off the Registers.

Dr F. Portelli filed an appeal against the Medical Council Malta by means of an application *Dr. Frank Portelli vs. Kunsill Mediku* (filed in the Court of Civil Appeal, No. 18/2009). The Court of Appeal did not accept Dr F. Portelli's request as laid down in the judgement dated 22<sup>nd</sup> 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 the case *Dr Frank Portelli vs. Av. Josella Farrugia et noe* (Citation Number 1100/2009AE). The Medical Council objected to and contested all the allegations made by Dr F. Portelli. The First Hall of the Courts of Malta delivered its decision on 25<sup>th</sup> April 2014, hereunder reproduced:

'Ghal dawn il-motivi l-gorti tiddeciedi l-kawza billi:-

- 1. Ghar-ragunijiet fuq moghtija tilqa' l-ewwel eccezzjoni tal-Prim'Ministru, Avukat Generali u Ministru tas-Sahha, l-Anzjani u Kura fil-Komunita ghal dak li jikkoncerna lilhom u tilliberahom mill-osservanza tal-gudizzju. Spejjez a karigu tal-attur.
- 2. 2. Tiddikjara li l-Kunsill Mediku naqas milli jtemm l-inkjesta fil-perjodu ta' sentejn (Artikolu 31(4) tal-Kap. 464 tal-Ligijiet ta' Malta) u ghalhekk wara li ghadda tali terminu l-Kunsill Mediku ma kellux l-awtorita' li jaghti decizjoni fl-inkjesta. Decizjoni li meta nghatat fl-1 ta' Lulju 2009 kienet ultra vires. F'dan ir-rigward tichad l-eccezzjonijiet tal-Kunsill Mediku li jirreferu ghal dan l-ilment.
- 3. Thassar id-decizjoni tal-Kunsill Mediku tal-1 ta' Lulju 2009.
- 4. In vista ta' din id-dikjarazzjoni m'hemmx htiega ta' xi dikjarazzjoni ulterjuri fir-rigward tat-tielet sas-seba' talba tal-attur.' <sup>4</sup>

On 15<sup>th</sup> May 2014, the MCM filed an Appeal in line with the Law which states that when, and if, the lapse of the two (2) years is no fault of the MCM, the two (2) year limit may not be applied. The Medical Council Malta made reference to the evidence produced before the Court and to the reasons submitted for the delay in this process. The Council asked the Court of Appeal to determine and decide that the length of time over and above the two (2) years, occurred for reasons not attributable to any fault of the Council. Furthermore, the MCM asked the Appellate Court to revoke the decision of the First Hall of the Civil Court.

Current Status of the case: The Medical Council awaits the Court's date of appointment in the appellate stage.

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<sup>&</sup>lt;sup>4</sup> The First Court decided in favour of Dr F. Portelli on the basis of the fact that the Medical Council Malta took over two (2) years to determine the case. It was decided that since the Council failed to terminate the investigation of this case within the time-frame stipulated by Law (Article 31(4) of the Health Care Professions Act, Chapter 464 of the Laws of Malta), the MCM had no power to deliver its decision. The Court specified that the decision delivered by the MCM on 1<sup>st</sup> July 2009 was '*ultra vires*', and did not accede to the position of the MCM submitted in Court.

 MC/79/2007 (Court Case 1196/10JRM, Dr Franco Mercieca against Medical Council Malta)

'During 2009, the Medical Council Malta held an Inquiry in order to investigate a complaint by a patient regarding alleged unethical and unprofessional conduct with regard to Dr Franco Mercieca (MC 0224). It was decided that Dr F. Mercieca's behaviour was in breach of Article 5 of the *Ethics for the Medical Profession*, whereby "a doctor must by his conduct in all matters set a high standard". This case exposed a situation wherein Dr F. Mercieca failed to:

- consider past medical history prior to starting the treatment;
- take radiographs;
- inform the patient beforehand regarding the costs involved;
- abide by the patient's consent regarding local anaesthetic.

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

**Decision by the Medical Council Malta:** The MCM temporarily suspended Dr F. Mercieca from its Registers for two (2) months coming into effect one (1) month from the date of the delivery of the judgement.

Current Status of the case: Dr F. Mercieca contested the decision of the MCM in the Civil Courts of Malta through Court Case No. 1196/2010JRM and the Appeal No. 140/2010JRM. On 28<sup>th</sup> March 2014, the Court of Appeal decided in favour of the MCM in the proceedings filed by Dr Franco Mercieca to appeal the Medical Council's decision.

The Court then proceeded with the investigation of Case No 1196/2010JRM filed before the First Hall of the Civil Court whereby Dr F. Mercieca contested the validity of the decision of the Medical Council.

Case Status: Pending, awaiting the decision of the Court.

• MC/77/2008 (Court Case 948/09APP, Dr Johanna Vant' Verlaat vs. Medical Council Malta)

'A patient filed a letter of complaint against Dr Johanna Van't Verlaat (MC 2456), who allegedly failed to attend the operating theatre when the patient was already under anaesthesia. This intervention involved two Surgeons. The MCM investigated this case and after due inquiry, on 9<sup>th</sup> September 2009, the MCM decided that Dr J. Van't Verlaat's behaviour was unethical and unprofessional.

**Decision by the Medical Council Malta:** Dr J. Van't Verlaat was found guilty of unethical and unprofessional conduct whereby she was suspended from the Registers for a period of three (3) months and fined the amount of  $\in 10,000$ . The suspension came into effected within one (1) month from the delivery of the judgement on  $9^{th}$  September 2009.

**Current Status of the case:** Dr J. Van't Verlaat instituted Court Case No. 948/09RCP before the First Hall of the Civil Court to nullify the decision of the MCM. Her request was dismissed by the First Hall of the Civil Court by means of an independent delivery handed down on 29<sup>th</sup> May 2012. The Court rejected and dismissed the demands of the plaintiff as filed in her sworn application dated 30<sup>th</sup> September 2009.

Dr J. Van't Verlaat filed an appeal towards the end of 2012 but up to the end of 2015 this case had still not been appointed by the Court of Appeal. This case was consequently appointed at the end of 2016 but the sitting was postponed.

The Court of Appeals remitted back the case to the 'Prim Awla' to re-examine the merit of the case. Dr Van't Verlaat's lawyer proposed to negotiate the sentence of the 9<sup>th</sup> September 2009 such that the Council retains the suspension from the Register for three months but withdraws or forfeits the fine of €10,000. If an agreement is reached, Dr Van't Verlaat would withdraw all court action provided that both parties bear their own costs.

#### The MCM decided that:

- 1. A suspension no longer affects the doctor as she is now retired; and
- 2. A sentence cannot be negotiated.

Consequently the Medical Council will proceed to defend its decision taken in 2009. Case Status: Deferred for Court Judgement.

# • MC/27/2009 (Court Case 1043/12JRM, Dr Louis Buhagiar vs. Medical Council Malta)

'In 2009, a family who had filed a complaint in 2008 (Case No. MC/78/2008; Case Closed) provided new evidence against Dr Louis Charles Buhagiar (MC 1289) to the Medical Council Mlata. After evaluating these allegations, the MCM decided that this case merited an Inquiry for alleged unethical and unprofessional behaviour. This case was investigated from 2009 to 2011 and the Inquiry was concluded on 22<sup>nd</sup> March 2011.

The Medical Council Malta delivered its decision on 27<sup>th</sup> June 2012. The complainants were present but Dr L. C. Buhagiar failed to attend and was sent a copy of the MCM's decision by registered mail.

**Decision by the Medical Council Malta:** Dr L. C. Buhagiar was found guilty of unprofessional conduct and was to be suspended from the Register for a period of one (1) month and also fined the sum of five thousand Euros ( $\in$ 5,000). The suspension was to come into effect five (5) months from the delivery of the judgment.

**Current Status of the Case:** On 26<sup>th</sup> September 2012, Dr L. Buhagiar filed a judicial letter in the Court, which was notified to the MCM on 2<sup>nd</sup> October 2012. The Council's legal adviser filed the MCM's reply in Court on 5<sup>th</sup> October 2012. Dr. L. C. Buhagiar is currently contesting the MCM's decision in the Civil Courts of Malta, Court Case No. 1043/12JRM.

During the past year, the Court heard the evidence of both parties and declared that stage as closed. Further Court sittings were scheduled for 2017.

Case Status: Awaiting Court judgement.

# • MC/138/2010 (Court Case 740/11JRM, Dr Isabelle Zananian Desira vs. Medical Council Malta)

'Dr Isabella Zananian Desira M.D. (citizen of Georgia) filed an application with the MCM for registration in Malta on 2<sup>nd</sup> December 2010. The applicant was asked to produce evidence of her training as a Medical Practitioner, the relevant curriculum and her achievements as issued by the relevant University Medical School. During a Council Meeting held on 3<sup>rd</sup> February 2011, the MCM accepted her course curriculum as being

equivalent to a Doctorate in Medicine. However, in line with the provisions of the Law and standard procedures, since Dr I. Zananian Desira was a third country national and had a non-EU primary degree, she was also requested to sit for the Medical Council Malta Statutory Examination (MCMSE) 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 could file an appeal with the Health Care Professions Appeals Committee.

On 1<sup>st</sup> March 2011, the Council was informed that the applicant had filed an appeal with the Health Care Professions Appeals Committee and a sitting was held on 31<sup>st</sup> May 2011. Dr I. Zananian Desira alleged that the MCM'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 22<sup>nd</sup> June 2011 wherein it stated that the Council had acted in conformity with the proviso in Section 11(1)(c) on which its 'standard policy' is based; and that the Council was the competent authority in Malta to decide in such matters and therefore did not act 'ultra vires'. The decision also stated that the MCM was duty bound to assess qualifications under the Law. In this context, the Malta Qualifications Recognition Information Centre (MQRIC) is the competent authority to recognise qualifications but awarding the right to practice a medical profession fell under the remit of the Medical Council.

The decision emphasised that both the Medical Council Malta and the Appeals Committee had to abide by the HPCA 2003, Chapter 464 of the Laws of Malta, and they do not have the 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 MCM's decision was confirmed.

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

Current Status of the Case: On 18<sup>th</sup> August 2011, Dr I. Zananian Desira filed a case in the First Hall Civil Court against the Medical Council Malta. Court Case No. 740/2011JRM was reviewed by the Judicial Assistant in 2014 and the Court's decision was scheduled for delivery on 29<sup>th</sup> January 2015, however, in February 2015, the Council was informed by its lawyer that the Court required more time to deliver the decision.

On 14<sup>th</sup> February 2017 the court accepted plaintiff's argument that the recognition of qualifications by MQRIC is sufficient for the issuance of licenses by a regulatory body, in this case the Medical Council Malta, and that no further requirement is necessary.

The Medical Council appealed this preliminary judgement and the case was adjourned for submissions.

Court Judgement was delivered on the 2<sup>nd</sup> March 2018 wherein the Court rejected the appeal application filed by the MCM and confirmed the judgement delivered on the 14<sup>th</sup> February 2017 by the First Hall of the Civil Court.

On 19<sup>th</sup> April 2018, the MCM filed an application for a re-trial.

Case Status: Still pending a retrial.

#### • MC/13/2012 (Court Case 12/2014EG Dr Adam Bartolo vs. Medical Counci Maltal)

**Decision by the Medical Council Malta:** In May 2014, the MCM decided that Dr A. Bartolo was to be removed from the Specialist Register since, in line with Article 35 of the HCPA 2003, Chapter 464 of the Laws of Malta, the registration had been done incorrectly. The implementation of this decision is pending the hearing of cases filed by the Practitioner with the Health Care Professional Appeals Committee and in Court.

Dr A. Bartolo filed a Case in the Courts of Appeal against the decision of the Medical Council Malta given on 29<sup>th</sup> May 2014. The Medical Council filed its position in Court on 13<sup>th</sup> June 2014.

Current Status of the Case: This case was investigated by the Court during 2015 and the decision was delivered on 14th October 2016. Nevertheless, the case remained suspended until the proceedings currently pending before the Health Care Professions Appeals Committee are concluded and a decision is delivered by the said Committee. The Case has been deferred for further proceedings in this regard.

MC/13/2012 (Court Case 988/14JRM Dr Adam Bartolo vs. Medical Council Malta)

**Decision by the Medical Council Malta:** In May 2014, the MCM decided that Dr A. Bartolo was to be removed from the Specialist Register since, in line with Article 35 of the HCPA 2003, Chapter 464 of the Laws of Malta, the registration had been done incorrectly. The implementation of this decision is pending the hearing of cases filed by the Dental Surgeon with the Health Care Professional Appeals Committee and in Court.

Dr A. Bartolo filed a Case in front of the Civil Courts of Malta on 24<sup>th</sup> October 2014. The MCM submitted its reply in Court on 15<sup>th</sup> December 2014.

**Current Status of the Case:** The proceedings are pending the determination of the Appeal (Court Case 12/2014EG). The Case has been deferred for ulterior information in this regard.

#### Appeals against the Medical Council regarding Registrations

In accordance to the Health Care Professions Act (HCPA) 2003, Chapter 464, applicants whose application for registration with the Medical Council Malta has been declined may file an appeal with the Health Care Professions Appeals Committee (HCPAC) <sup>5</sup> within 20 calendar days from the receipt of the decision delivered by the MCM.

During 2018 there were 4 new cases (1 pending, 1 withdrawn, 2 cases closed). The Appeals Committee revoked the decision of the MCM in both cases which had been closed.

### **Quality Assurance for the Malta Foundation School Programme**

In 2009, the UK Foundation Programme entrusted the Medical Council to conduct the Quality Assurance of the Foundation School Malta (FSM). The Maltese Foundation Programme is an affiliate of the UK Foundation School and it follows the same aims,

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

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<sup>&</sup>lt;sup>5</sup> The Health Care Professions Appeals Committee:

methodologies and assessment processes in principle. However, the nomenclature and the structure of the Foundation School Malta tend to deviate from that exercised in the UK.

In October 2009, Dr Doreen Cassar and Dr Bryan Flores Martin attended Quality Assurance visits of the Foundation Programmes held by the GMC and PMETB in the UK as observers, and were then appointed as the Quality Assurance Team in order to conduct this process in Malta.

In 2010, the Medical Council adopted the United Kingdom Foundation Programme (UKFP) guidelines for the FY1 and FY2 doctors, 'The New Doctor', as the standard competences required for Full Registration in Malta

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.<sup>6</sup>

Following 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 account, Dr Doreen Cassar and Dr Bryan Flores Martin were appointed to sit on the MCQAC for the Foundation School Programme for a period of three (3) academic years starting from 14<sup>th</sup> May 2014<sup>7</sup>.

Since 2009, the Quality Assurance exercise has been regularly carried out and with notable success<sup>8</sup>. The frequency of the Quality Assurance for UK Foundation Schools occurs every two to three years, or as deemed necessary.

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<sup>&</sup>lt;sup>6</sup> More information may be accessed from the Malta Foundation School website: <u>http://fpmalta.com/</u>

<sup>&</sup>lt;sup>7</sup> This post carries a remuneration of EUR 3494.06 for the specified period of appointment, which are paid in three annual instalments of EUR 1164.69.

<sup>&</sup>lt;sup>8</sup> The Quality Assurance reports for the Foundation School Malta, dated February 2011 and July 2012 respectively, may be downloaded from:

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

On 24<sup>th</sup> March 2017 a request for participation (RFP) inviting applicants from interested parties, for the post of members with the Medical Council Quality Assurance Committee was published in the Government Gazette.

Following the Expression of Interest for filling the Post of Members with the Medical Council Quality Assurance Committee (MCQAC) Dr Doreen Cassar, Dr Bryan Flores Martin and Dr Tanya Melillo Fenech have been selected to sit on the MCQAC for the Foundation School Programme for a period of 3 academic years starting from 1<sup>st</sup> February 2018.

#### **Code of Ethics on Advertising and Financial Conduct**

The Code of Ethics on Advertising and Financial Conduct by Medical/Dental Practitioners is an important document which seeks to offer guidance to the patients, the professionals and various stakeholders. These guidelines offer direction to all the parties concerned an can in turn reduce the occurrence of disputes.

Over the past year, the Medical Council Malta has entrusted a new Sub-Committee to review the guidelines on Advertising and Financial Conduct by Medical/Dental Practitioners with the aim of updating them in the light of ongoing complaints which arise from the day to day activities of Practitioners. The MCM aims to draft an updated set of guidelines that would address more effectively the requirements of the professional environment in which Practitioners perform their duties. The MCM published these new guidelines in June 2017.

### European Professional Card (EPC) and the Alert Mechanism

Since 2014, the Member States of the European Union (EU) were involved in an extensive debate concerning the adoption and implementation of the European Professional Card (EPC) and the Alert Mechanism.

The Medical Council Malta has over the past years strived to keep abreast of these developments by attending Conferences and Meetings held at EU level. These meetings offer invaluable information regarding the implications of the EPC as foreseen by the participants.

The EPC is aimed to further facilitate the free movement of professionals throughout the EU's Member States, since this process would simplify the recognition of professional qualifications. It is also aimed to enhance transparency for EU citizens and increase trust among competent authorities and other stakeholder across the EU.

The Alert Mechanism is a set up created for all the regulated professions having patient safety implications such as the Medical and Dental Professions. The AM will effectively introduce a fitness to practice alert mechanism mandating the exchange of information about a professional who has been prohibited, even temporarily, from exercising his/her professional activity or who made use of falsified documents, amongst EU Competent Authorities with the main aim of improving patient safety. This exchange of information will be based on the use of the Internal Market Information system (IMI).

The Medical Council Malta presented its recommendations for the implementation of the EPC to the Chief Medical Officer at the Ministry for Health, and it remains fully committed to the implementation of the Card as stipulated by EU Legislation.

### **Concluding Remarks and Acknowledgments**

During the past year, the Medical Council Malta has strived to fulfil its duties and obligations by "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".

This report refers to one of the main tasks of the Medical Council Malta as stipulated by the Health Care Professions Act 2003, Chapter 464 of the Laws of Malta, namely the keeping of the Registers. It also provides an overview of the regulatory role exercised by the Medical Council Malta by providing a brief summary of the disciplinary actions and related decisions delivered by the Council. Additional information regarding ongoing Court Cases is also provided.

I would like to thank Dr Ilona Debono, for her dedication and commitment towards the MCM and its operations, and all the Members for their work and dedication towards realising the mission of the Medical Council Malta.

Finally I would like to express my sincere appreciation to Ms Lara Sultana and Ms Joanne Vella for their continuous support and cooperation.

(sgd)

Inez Cassar

Registrar

Medical Council Malta

#### Annex 1

### 19<sup>th</sup> meeting of the European Network of Medical Competent Authorities (ENMCA) Hosted by the French Medical Council Friday 22 June 2018

ENMCA brings together European competent authorities responsible for the recognition of medical qualifications, in line with Directive 2005/36/EC on the recognition of professional qualifications. The Network has considerable expertise and practical experience in managing the implications of high levels of professional mobility.

Network participants meet regularly in order to share experiences in the implementation of Directive 2005/36/EC and to develop common positions and jointly respond to EU proposals and consultations.

On behalf of the Medical Council Malta, the Paris 19th Meeting of the European Network of the Medical Competent Authorities hosted by the French Medical Council in its offices in Paris was attended by Dr B. Flores Martin.

The meeting was attended by delegations from seventeen European Union Member States (Austria, Belgium, Cyprus, Croatia, Denmark, Estonia, France, Germany, Ireland, Malta, Netherlands, Norway, Romania, Slovenia, Spain, Sweden and the UK), together with Bernard Zaglmayer from the European Commission, Jean-Michel Brevet from the French Prefecture de la Police, Gaetan Lafortune, Akiko Maeda and Marie-Laure Delamaire from the OECD and Claude-Francois Degos General Delegate for International Affairs of the CNOM.

The meeting was an opportunity to meet and discuss:

#### 1. Combating fraudulent documents:

A talk by the Chief Superintendent Jean-Michel BREVET Head of the Division of Expertise on Document and Identity Frauds Central Directorate of Border Police on the "Strategies of French law enforcement", gave detailed information on how the police and French authorities detect fraudulent applications including medical qualifications. It was highlighted how "authentic" documentation can be obtained by initiating a chain of documents originating with a false one.

One advice which was taken up in the subsequent discussion was for each national council to set up a photographic record of various documents obtained from different applicants/countries so as to enable future

comparisons between documents. Furthermore, it was agreed that consultations between various councils on this issue was advisable.

An example was the British knowledge of Indian documents and the French of documents from Francophone countries.

#### 2. Medical migration and regulation

Gaetan Lafortune and Akiko Maeda from the Organisation for Economic Cooperation and Development (OECD) gave a talk on "Medical migration and the internationalisation of medical studies." They illustrated an ongoing study "OECD project on trends and policies affecting international migration of doctors and nurses" begun in 2010 to collect data on how health workforce migration can be used to analyse the impact of both policy and economic developments.

#### These developments included:

- EU enlargement in 2004, 2007 and 2013
- Economic crisis that started in 2008
- Adoption of WHO Global Code in 2010
- National policies designed to reduce emigration from some countries or improve migration management (e.g. bilateral agreements)

The goals of this study (which does not include Maltese data) are

- For each country to identify major policy challenges and opportunities, and the approaches taken to address them
- To create space for dialogue among stakeholders, and learning opportunities across countries
- To relate them to emerging trends in health worker migration in the EU

It is envisaged that this study should be completed and published next year, at which point it is planned to be extended to all EU states.

- 3. Bernhard Zaglmayer, Deputy Director of the Internal Market Affairs Directorate of the European Commission's EFTA Surveillance Authority (whose expertise is social security law {national and international} and European law in relation to free movement of persons, in particular social security coordination law and recognition of professional qualifications) gave a talk on "Assessment of stakeholders' experience with the European professional card and alert mechanism".
- 4. "Proportionality Directive and its impact on medical competent authorities" was then discussed by Bernhard Zaglmayer. Mr Zaglmayer explained why the European Commission could not exclude health care professionals from the new proportionality Directive. With this Directive (which has been approved and is awaiting publication) all changes in law and regulations must be preceded by an assessment for:

- 1. Objectivity, involvement of external bodies
- 2. The extent of assessment to be proportionate to the nature, content and impact of new or amended provision/s
- 3. Detailed list of criteria to be checked
- 4. Qualitative and quantitative elements to demonstrate need for regulation
- 5. Assessment of combined effect/s of requirements both within and outside regulation of profession
- 6. Ex-post notification in accordance with PQD
- 5. In "The impact of EU exit on medical regulation" Nicola While from the General Medical Council illustrated the persistent uncertainty within the UK on the future of non-British Medical Practitioners. The GMC has been preparing for different scenarios in anticipation of Brexit but, to date, no exact knowledge of the future prevails.

During discussions it was made evident that the GMC is already receiving numerous applications for registration from Medical Practitioners who **might consider** moving to the UK post-Brexit. This would eliminate their need to sit for their aptitude test, the PLAB.

- 6. Other topics discussed were:
  - Possible common procedures to be used for third country qualifications
  - Results of the Revalidation Survey
  - Future ENMCA and HCBI activities

The meeting provided an excellent opportunity, during conference breaks, for all delegates to bring forward topics of bilateral interest between them, and also an opportunity to learn how the other competent authorities were dealing with various situations.

Finally, it was decided that the next meeting of ENMCA will be held in Vienna in November 2018.

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

#### Annex 2

## The FEDCAR GENERAL ASSEMBLY in DUBLIN 2018 HOSTED by the IRISH DENTAL COUNCIL

Attended by Dr David Muscat. elected dentist member of the Medical Council Malta.

#### ACCREDITATION OF DENTAL EDUCATION IN EUROPE

The role of educators – the aim of undergraduate dental education is to provide competent dental professionals, able to practise independently, to serve societal needs and improve population oral health/care.

An example was given of the Irish way of accreditation.

#### IRISH EXAMPLE OF ACCREDITATION

The role is to ensure that programmes meet minimum national standards; that programmes meet minimum EC requirements; that safe and competent graduates qualify; and, public protection.

The accreditation process is based on standards. These standards are mandatory but not prescriptive. The focus is on the ability of programmes to develop competences and learning outcomes. The process for dental and auxiliary programmes is identical.

The key stages in the accreditation process involve a self-evaluation questionnaire. There is a document review, a site visit, an accreditation report and findings/action.

Specific documents requested are: curriculum mapping, University strategic plans, research output, handbooks/course material, student feedback loop, management of external placements.

Accreditation teams include external assessors.

A site visit takes about two days. There is an inspection of facilities, engagement with students, staff, senior faculty members and recent graduates.

The accreditation report confirms the findings of the accreditation team. Potential outcomes - conditions, recommendations, observations and commendations.

Reports are prepared and these are considered and approved by the Dental Council. The Council considers the adequacy of the response and determines the next steps. If the response is adequate: the programme enters a monitoring phase and there will be periodic updates/progress. If response is deemed inadequate: there will be further engagement with the potential to remove approval status.

#### ACCREDITATION PROCESSES IN EUROPE

#### Regulation involves

- 1. Education developing the dental team-education and training.
- 2. Regulation the gateway to the dental profession/oversight of professional life
- 3.Standards/CPD ensuring compliance
- 4. Fitness to practice risk assessment. Enforcing regulations poor/illegal conduct.

There are concerns regarding the quality and quantity of clinical care provided for patients in the programme. With poorly resourced programmes what is the competence of teachers and managers and the physical infrastructure and facilities?

Graduates who are fit to practice are 'safe beginners' but there is then the need for ongoing professional development of those young graduates.

In a survey carried out by EDSA (European Dental Schools Association) 10% of students had not performed clinical procedures. At end of the programme, 90% of students felt they could not carry out 7 procedures on their own. There were issues with extractions, endodontics, treatment planning etc.

Patel et al 2006 - the view of professional trainers - new graduates lack competence in orthodontic case assessment, molar endodontics, crown/bridge, immediate dentures and surgical extraction of teeth.

The quality assurance school visits by the Dental Council brings

- 1 a re-focus on the strategy-vision-mission.
- 2. an impetus for change
- 3. an engagement in dialogue with the regulator
- 4 leverage with University, funders, collegiality

The Dental schools need

- 1. Timeliness
- 2. Transparency
- 3. Simplicity
- 4. Competence of peer reviewers
- 5. Cohesion of programmes

A traditional dental curriculum is discipline-related knowledge. There are historical traditions - academic pride and protectionism. There is professional expertise - the educators teach what they know. The curriculum should be competency-based education. It should be shaped by societal needs. The focus should be on student-centred learning - promotes self-directed learning. It is aimed at learning achievement.

A competency-based accreditation process should move from a regulations/adversarial approach towards building consensus. It should be independent, peer-led and standards driven. There needs to be a continuum from a safe beginner to a General Professional Training to lifelong learning.

Clinical academia has public responsibility and social accountability. There is relevance, quality, cost effectiveness and equity. There is a regulatory obligation to embed quality assurance.

#### THE INTERNATIONAL SOCIETY OF DENTAL REGULATORS

The ISDR supports and encourages the development and implementation of robust, independent dental school accreditation systems that ensure the provision of high quality dental education, identify inadequate dental education programmes, assist education providers to improve the quality of their programmes and ultimately, protect patients.

By 2020 all countries will have established accreditation mechanisms for health training institutions. (WHO objective 1.1).

#### FEDCAR COMMON DRAFT POSITION ON DENTAL ACCREDITATION IN EUROPE

By 18 January 2019, the EU Commission shall publish a report on the implementation of Directive 2005/36 on the mutual recognition of professional qualifications.

The mutual recognition of qualifications relies on mutual trust between Competent Authorities that the standards of education in the home and in the host countries are equivalent or, at least, that a comparable assessment of quality exists in both the home and host countries.

There is no current EU requirement, or supporting EU legislation, to actively ensure the comparability of education and assessment standards between countries. In this regards, FEDCAR would like to highlight this situation and suggest a solution.

During the meeting it was pointed out that there is a difference between the quality of dental training and the evaluation of dental training. These should be different and not confined.

Evaluating the quality of dental education is a matter for each Member State and as a result there is a great variety of national systems. This has strained mutual trust between Member States and last year there was a complaint made to the European Parliament.

FEDCAR will present a proposal to alert the EU legislator of the need to mandate a system of evaluation to ensure that host countries can trust that the dental education provided in a home country is properly equipping students to practice as dentists. This is key to maintaining mutual trust between Competent Authorities when processing applications under the provision of automatic recognition of dental qualifications under the Professional Qualifications Directive.

FEDCAR would like the EU to mandate all countries to implement a system of independent evaluation of dental training. It is calling for the Commission to include this in its statement.

A good yardstick is the ADEE. The ADEE project develops the faculties and helps to achieve the standards. Other agencies give a diagnosis but not a treatment plan.

The ADEE, CED and EDSA representatives all stated that they are all on the same side. The main goal is patient safety and health. Patient safety is always the top priority of the Commission.

The EDSA representative stated that some aspects of teaching are cumbersome in achieving. The students want minimum requirements but are concerned about regulations.

A salient point which emerged from the conference was the issue of 'what constitutes a good teacher?' The effective quality of the dental training is paramount. This may in fact be the basis of another Directive.

#### **BREXIT**

Any negotiations have to take place between the UK and the EU and not with any individual countries of the EU.

From negotiation, to ratification and then a transition and further ratification followed by a new relationship. Access to Medical Devices - not a priority issue. There is a strong case for the UK continuing to converge with the new Medical Device regulations.

Mutual recognition agreements require both parties to agree.

Ideally there would be an agreement with both sides to preserve these reciprocal rights to healthcare for resident citizens and qualifying family members.

## DRAFT DIRECTIVE ON A PROPORTIONALITY TEST BEFORE THE ADOPTION OF A NEW REGULATION OF PROFESSIONS

The Regulation results in an obstacle to access. The justification is based on the grounds of public interest objectives.

'The requirement concerned should not go beyond what is necessary to attain the objective in question. It should be noted that the protection of public health ranks foremost among the assets or interests protected by the EU Treaty and that it is for the Member State to determine the degree of protection which it wishes to afford to public health and the way in which that degree of protection is to be achieved. As this may vary from one Member State to another, Member States should be allowed a measure of discretion.'

The Portuguese delegate stated that it is regrettable that dentistry has been included in proportionality. The CED representative stated that all health professionals rejected this and lobbied MEPs. However it seems that market forces are stronger than health protection. Dentists were not able to defend their position against exclusion from this Directive.

Dr David Muscat Medical Council Malta, 22/4/2018

#### Annex 3

#### ENMCA Vienna Meeting - 26/11/18

The **20<sup>th</sup> meeting of the European Network of Medical Competent Authorities (ENMCA)** was hosted by the Österreichische Ärztekammer, the Austrian Medical Chamber, at their offices in Weihburggasse 10-12, 1<sup>st</sup> Floor, 1010 Vienna.

The Network brings together European Competent Authorities responsible for the recognition of medical qualifications in line with Directive 2005/36/EC on the recognition of professional qualifications. The Network has considerable expertise and practical experience in managing the implications of high levels of professional mobility.

Network participants meet regularly in order to share experiences in the implementation of Directive 2005/36/EC and to develop common positions and jointly respond to EU proposals and consultations. Set up in the spring of 2010, the European Network of Medical Competent Authorities is coordinated by the <u>Bundesärztekammer</u> (BÄK-GMA), the <u>Conseil National de l'Ordre des Médecins</u> (CNOM) and the <u>General Medical Council</u>.

The primary topics under discussion at this meeting were the new plans for the revision and implementation of EU Directive 2005/36. ENMCA is a major stakeholder in the application of this Directive and its input is valued by the EU Commission Directorate for Internal Market, Industry, Entrepreneurship and SMEs (GROW). The consultations are meant to take into consideration the various local experiences and are envisaged to apply the principles of Subsidiarity, Proportionality, Equality and Fundamental Rights.

The meeting was attended by representatives from 19 Competent Authorities similar to the Medical Council Malta. The three European Commonwealth countries were all represented. Also participating at the meeting was Dr Bernhard Zaglmayer, Deputy Director of the Internal Market Affairs Directorate with particular interest in relations to the free movement of persons, in particular the recognition of professional qualifications (DG GROW, European Commission).

After the welcoming speech by Prof T. Szekeres, President of the Österreichische Ärztekammer, the meeting started off with a talk on "Implementation of revised Directive and plans for the future" by Dr Bernhard Zaglmayer DG GROW. This served as a good basis for a detailed discussion on how the ENMCA was serving as valued stakeholder within the EU and numerous suggestions would now be presented as a draft framework to the EU, as well on ENMCA participation on the various surveys organised by GROW.

Two speakers from Austria, Prof Zlabinger from the Medical University of Vienna and Helene Woeger from the Austrian Medical Chamber, discussed Austria's "Process for recognising third country qualifications in Austria" and the "Role of the Austrian Medical Chamber in recognising third country qualifications" respectively. One notes that the recognition of non-EU awarded medical degrees occurs after their equivalence to Austrian degrees is assessed only by Austrian Universities and by no other entity. This could be in fact

be an expensive and a lengthy process (€8000 and four years were mentioned). The Chamber then assesses the applicants for registration and licensing on the merits of good standing, curriculum vitae, language and employment opportunities.

C. Lien Jensen from the Norwegian Directorate of Health in "Process for Recognising Third Country Qualifications in Norway" elucidated the Norwegian process, whilst Annie van Loo illustrated the results of a Dutch-led survey on how Member States recognise non-EU citizens with an EEA first degree in "Dutch Survey on recognising third country citizens with an EEA qualification". Like Malta, the majority of Member States, as stated in the EU Directive, do not grant any rights to these applicants and no automatic recognition is given. Only two states ignore nationality and act on the basis of the degree's origin.

The afternoon session began with an explanation on "CME/CPD and language knowledge in Austria" by Günther Ochs from the Austrian Medical Chamber. All applicants for registration are tested for fluency in German and stringent standards for ability to communicate are in place. Applicants are in fact advised not to apply unless they are fluent both colloquially and in medical terminology. With regards to CME/CPD, revalidation has been introduced and all Medical Practitioners are obliged to follow speciality refresher and retraining programmes.

Alexander Jaekel from the German Medical Association was the speaker on "Differing models of satellite universities". The German representation described how low admission rates to European Medical Schools were resulting in the creation of:

- 1. What may be described as overseas campuses of established universities such as the QMUL Barts Medical School in Malta.
- 2. New private business-oriented medical schools which basically supply particular associated hospitals with new graduates to offset doctors' shortages.
- 3. EDU: This on-line Maltese licensed entity was singled out as a dangerous first in that an EU Member State has issued a license for teaching Medicine but not actually being involved in any way with either the academic aspect (this being done entirely on-line from one's home, wherever that is) nor with the clinic exposure which at the moment is being planned to be undertaken in German non-teaching hospitals (with clinical training amounting to three weeks annually). As one could imagine, this new Maltese concept shocked all those present. It was revealed that the German Medical Association had inconclusive talks with EDU and Dr Zaglmayer also revealed that the EU Commission had held some discussions with the Maltese Authorities and had also advanced its grave reservations on this new concept.

A Danish survey on training internships within the EU was presented by S. Vinther Nielsen. The survey was undertaken to assesses whether any structural and organisational changes in EU states would have any effect/s on the content of both basic medical training and the subsequent post-graduate specialisation. It was noted that all Nordic countries and the ones following the British Model have some form of further training (like our own Foundation Programme) after the first degree and prior to initiating specialised training. It transpired that some of these countries, like Ireland and Sweden, were envisaging lengthening this prespecialisation period and Slovenia would probably introduce it. Most representatives agreed about the value of this training even though their own systems did not have it and were not even considering adopting it.

Ms N.While from the General Medical Council, as has been the custom recently, attempted to explain the "Impact of EU exit on Medical Regulation". She basically admitted that in view of the uncertain outcome of the Brexit negotiations, the GMC has not as yet finalised any position on the future of EU Medical Practitioners registered and working in the UK. However, she did explain that as from the end of November, EU doctors are being advised to register in a new "EU Settlement Scheme" to ensure their right to live, work, and access public services, such as healthcare, in the UK.

During informal discussions, problems between individual Member States were discussed. A large number of delegates were enquiring about EDU and Malta's position. It was explained that in Malta, licensing is undertaken by the Ministry of Education and that under present EU and Maltese law, graduates from EDU could not be registered with the Medical Council Malta; so at present there could be no automatic recognition within the EU. Another topic which was mentioned was the position of Malta and Cyprus as Commonwealth nations. Both have a British University overseas campus on their territory and the possible effects of Brexit were discussed.

The participation of the representative of the Medical Council Malta is particularly important as this has ensured that the MCM keeps abreast with evolving European Regulations/Directives and will also ensure that Malta's opinion and national needs are heard and registered thereby safeguarding Malta's national interests in any proposal for new legislation /regulations.

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

#### Annex 4

#### FEDCAR GENERAL ASSEMBLY in PARIS 29 NOV - 1 DECEMBER 2018 on PROFESSIONAL ADVERTISING

The Vanderborght case C-339/15, decided by the European Court of Justice, took place in Belgium and the decision was that there was no general prohibition of professional advertising. However, it was deemed necessary to have a framework for which there were two proposed criteria: to protect the dignity of the profession and the trust of patients, i.e. this was NOT a blank cheque.

Confirmation 1 Order C-356/16 'must be interpreted as not precluding a provision of national law, which protects public health and the dignity and integrity of the professions of a plastic surgeon and a plastic doctor by prohibiting any natural or legal person from disseminating advertising for procedures relating to plastic surgery or non-surgical plastic medicine.

Confirmation 2 Order C-296/18 refusal of any general prohibition of professional advertising, with no recall of 2 proposed criteria.

This was an order not a decision, so the Vanderborght Case Law must refers to it. There is a general switch from the former distinction between advertising (commercial purpose) and information (no commercial purpose) to commercial communications in general.

Currently, adaptations are taking place in Luxembourg, France and Belgium.

There are challenges by Corporate Dentistry - Legal status - not a practitioner bound by the Code of ethics but a chain/company. The management is not a health profession but a service provider.

In ICT it is difficult for the regulator to identify Metatags - used to increase ratings in a search engine.

Once something is on social media one can no longer own it. On Facebook one must never mix professional and personal issues.

ICT challenges - the Belgian solution was to have a single provision for all health professions regarding any medium whereby professional information must be truthful, objective, relevant and verifiable, and must be scientifically sound.

There are cross border challenges as the regulation of the host and home base country may not be the same e.g. advertising services provided in one country originate from outside that country and provide flight bookings, transport, etc.

In the UK, the GDC provides an 'advertising checklist' with principles for dentists, e.g. 'Ask yourself questions such as 'is the content legal, decent, honest and truthful?', 'Have you included your GDC number?', 'Have you provided balanced, factual information?', 'Have

you made sure that you have not implied specialist status by describing yourself or someone else as an 'endodontist' or 'orthodontist' if they are not on the appropriate specialist list?', 'Is the information current and accurate?'.

The extensive use of advertising or the selection of aggressive promotional images such as to mislead patients regarding the care being offered, damaging the image of the profession of the dentist, distorting the relationship between dentists and their patients, and promoting the provision of inappropriate and unnecessary care. This may undermine the protection of health and compromise the dignity of the profession of the dentist.

The Conseil d'Etat recommends 'to put in place tools to evaluate the effects of advertising or commercial communication on health care costs as well as its ultimate effects on healthcare provision in France through competition between providers in the EU and in the rest of the world.' (proposal no 14)

The Conseil d'Etat proposes to EU Member States the need for a better coordination of legislation establishing the rules applicable to healthcare professionals' communication (proposal no 15).

#### CAN REGULATORS REALLY CONTROL SOCIAL MEDIA AND ADVERTSING?

Three trends that are impacting regulations are: changing demographics of dental professionals, new ownership structures of dental practices and disruption innovation in the dental scope of practice.

Peer to peer online collaboration may create data privacy risks.

Online self-promotion blurs the boundary between advertising and communication.

Corporate board members are obliged to increase profitability.

In Canada start-ups explore online diagnosis tools and facilitate free market pricing.

Each of these trends requires a tailored recommendation.

#### **BREXIT**

Many European qualified dental professionals came to the UK to work and earn a better salary. Due to current uncertainty many are considering leaving the UK. They want clarity regarding future rights and a continuation of a system of mutual recognition.

There are three scenarios with regard to Brexit:

- 1. automatic recognition
- 2. automatic recognition and the need to apply for a work permit
- 3. no automatic recognition. A need to sit for an exam. A need for a work permit.

TRANSITION PROFESSIONALS - retained rights for EU/UK citizens whose qualification was recognised in the UK/EU before December 2020.

POST TRANSITION - IRELAND - Solution to be found

TRANSITION – PARALLEL NEGOTIATION - on 30 March 2019 the UK will be automatically withdrawing from 750 agreements, Euratom, Europol, the European Defence Agency and multiple trade agreements. WTO negotiations are already engaged and hampered.

Patients - residents - maintenance of existing EU residence and SS rights of more than 3 million EU citizens in the UK and about one million UK nationals living on the continent. Patients – EHIC card – around 190,000 UK pensioners are affected.

#### THE DENTAL SCANDAL IN SPAIN

In 2014, Dental was created by a large number of companies and the model was 'low cost clinics'. There were 800 dentists and 350,000 patients were treated in these clinics. Patients were provided with poor treatment and were also roped into compulsory financing schemes. There was rapid growth and expansion without the ability to cope with contracted treatments; there was aggressive mass advertising; techniques of 'all on four' were used (Implants).

The patients were sought from disadvantaged social sectors with poor educational levels, and this occurred within the context of the economic crisis. In Spain there was no public involvement in dental care. The clinics were all closed down. The Dental company was investigated for defrauding patients through pyramid schemes, for crimes against public health and for damages to health/patients.

IMPLEMENTATION OF THE REVISED PQ DIRECTIVE AND PLANS FOR THE FUTURE

Changes in the alert mechanism - facilitating updates in cases of appeal. An easy way to request additional information and new alert modules.

#### PARTIAL ACCESS

There are doubts about Partial Access as it creates first class and second class professionals.

Dr David Muscat Member, Medical Council Malta