
Volume - 5 - Issue 1, 2006 - Partner Focus MIR

The Role of the European Association of Radiology (EAR)

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The European Association of Radiology (EAR) is a federation of all the European (EU and Non-EU) National and Sub-specialty Radiological Societies and is responsible for representing the combined views of all these groups on radiological matters in Europe. The objectives of the EAR are to develop and maintain high quality standards for patient care through radiological education training and research and to promote good practice of radiology throughout all member states. The EAR addresses these objectives through its executive structure with an executive bureau, which is responsible for the overall management, and a number of key committees and ad hoc working groups. The main committees are those of education, professional organisation, sub-specialties and research and the chairmen of these are members of the executive bureau. The EAR also works closely with the radiological section of the Union of European Medical Specialists (UEMS), which is the political union of all medical specialties in the European Union.

The importance of the EAR's role has increased significantly in the last few years with the accelerated progress of European integration and the dramatic technological advances in image transfer. There has been free movement of specialists throughout Europe for many years but it is only in recent times that the workforce has become more mobile. The European Union considers health care to be a service and although there are many different structures for the provision of health care in different European countries, patients have the right to be treated in any member state. Health care services can also be provided across national boundaries and although this has been limited in its impact until recently, the advent of efficient teleradiology services has changed the whole perspective.

The EAR therefore has been focussed on optimising standards of radiological education throughout the member states and to try to develop more uniformity of educational structure and standards so that radiologists are trained to a high level in whichever country they train and registration authorities and employers can be confident of the quality of the workforce. To this end the EAR, through the education committee and in conjunction with the Radiological section of the UEMS, has produced a curriculum for the five years of radiological training which includes objectives for each period of training and enables some diversity depending on whether the radiologist will be providing a broad-based general or a more focussed specialised service. This curriculum also identifies the resources required to provide adequate training of radiologists. The sub-specialty member societies have made a major contribution by developing detailed curricula for each area of training to assist the trainee in assimilating the necessary knowledge and competence in each area of the curriculum. In order to stimulate the implementation of the curriculum and to support high quality radiological education EAR and UEMS have been undertaking a series of training assessment visits to teaching centres in EAR member countries. Expert educationalists have provided these centres with an in-depth review of their training programme and advice on potential improvements if appropriate. The programme is in its early stages but is now being expanded after a successful pilot phase. The EAR has produced policy guidelines for Continuing Medical Education (CME) and Professional Development (CPD), which provide for flexibility in the accumulation of credits with hands-on training being accorded equal importance to attendance at review lectures.

The Professional aspects of the delivery of a high quality radiological service have been addressed through guidance documents on good radiological practice for European Radiologists. This is supplemented by an evaluation of risk management in radiology. Both documents provide guidance to individual radiologists and department chairman on how to limit problems by careful forward evaluation and planning. It also recognises that radiology is not always accurate and that complications will occur and endeavours to instruct on how such difficulties are best resolved.

Most recently, the EAR has been concerned that the rapid development of tele-radiology, which has considerable benefits to patients, is implemented by purchasers of health care in a way that will maximise patient benefits and eliminate the disadvantages. In particular, that the importance of the clinico-radiological interaction in hospitals over individual patients is not jeopardised by the advent of off site reporting services. It is vitally important that those caring for patients have a close link with those advising on appropriate diagnostic imaging studies, evaluating those studies and in some cases providing treatment. Radiology is a clinical specialty with direct patient care being the focus.

The EAR is working with Industry to provide information on the level of diagnostic resources in member states so that where resources are poor the comparison can be emphasised to those funding the health care system. The importance of management is appreciated by EAR, who have a very active Management in Radiology sub-committee which organises a very successful annual congress and workshops on management topics.

Finally Radiology continues to rapidly develop and innovate. It has been clear that European Radiologists have not achieved a satisfactory proportion of the research resources that are available. The EAR is therefore developing a robust Research strategy to try to increase the research contribution of radiology and to increase the volume of European research grants being awarded to the specialty.

The EAR is uniquely placed to develop radiology through the combination of the political knowledge and educational structure of the National societies and the scientific and educational skills of the sub-specialty societies. The EAR works closely with the European Congress of Radiology to optimise all these energies to promote high quality patient care in imaging diagnosis and treatment.

Published on : Sun, 12 Feb 2006