

## **BRUSSELS OFFICE UPDATE**

### **CED WORKING GROUPS AND BOARD TASK FORCES**

### **CED GENERAL MEETING MAY 2026**

#### **WG Education and Professional Qualifications (EPQ)**

- **WG meetings:**
  - ➔ Latest meeting: 3 February 2026
  - ➔ Upcoming meeting: TBC

The latest WG meeting took place on 3 February 2026 and welcomed the participation of Eliska Jandová, the Vice-President of External Affairs of EDSA.

#### **Public Consultation & Call for Evidence on the Skills Portability Initiative**

The biggest file the WG has been focusing on is the development of the Skills Portability Initiative. The Skills Portability Initiative was announced in March 2025 under the Union of Skills, and a consultation questionnaire as well as calls for evidence for each of the action points below were open for input between 5 December and 27 February.

The Skills Portability Initiative can be considered as part of the current Commission's simplification efforts of EU policies and regulation, including efforts to improve and extend the EU Single Market and the free movement of persons and professionals.

It aims to address the limited portability of qualifications and skills across the EU, by making skills more transparency and facilitating the mobility of workers across the EU. It's goal regarding regulated professions was also to address current barriers leading to lengthy and cumbersome process for the automatic recognition of diplomas.

The initiative is considering 3 actions:

Action 1) facilitate worker mobility through improved transparency of skills and qualifications, and digitalisation;

Action 2) facilitate, modernise and expand recognition for regulated professions through the use of digital tools;

Action 3) establish common rules to simplify procedures for the recognition of qualifications and skills of third-country nationals

The consultation and calls for evidence were seeking to collect evidence and information on foreseeable and effective measures for improving recognition of skills and the automatic recognition principles in place for regulated professions.

The CED submitted its input on Friday 27 February for the public consultation, as well as general feedback for the calls for evidence to Action 2 and action 3.

The CED response focused on several main points, including:

- The clarification and strengthening of clinical training requirements under the PQD
- The incorporation of a list of practical competence
- The clarification of a ratio between theoretical and practical education
- The better harmonisation and understanding of various credit systems and their use in different Member States, and the explicit mention of an equivalent minimum 300 ECTS credits under the PQD
- The use European Digital Credentials for Learning (EDC) and accreditation schemes for continuing professional development (CPD) with the end goal of developing common recognition agreements of frameworks for EU-acquired CPD credits.
- The establishment of digital authenticity measures and fraud-proof digital credentials
- The establishment of common tools for providing proof of equal and common clinical training skills
- Support with the Commission's suggestion to develop adaptation periods and aptitude tests for third-country nationals in the process of applying for the recognition of their qualifications.

### **Implementation Report on the Professional Qualifications Directive**

The long awaited [PQD Implementation Report](#) (for which the WG submitted a CED response to the related consultation in September 2024) was published on 20 February 2026. The publication was also accompanied by a more in-depth [Commission Accompanying Working Document](#).

The report highlights that dentistry remains the 5th most mobile profession in the EU. More importantly, both documents positively reflect a number of points put forward multiple times by the CED and other stakeholders in dentistry. This includes concerns by dental professionals regarding considerations for shortening the minimum duration of studies, clinical training standards and clinical skills requirements, patient safety, the integration of a combination of training subjects and competences, interdisciplinary collaboration and training.

This is a positive development that will hopefully reflect on future EU policy making in the field of dental education. The WG will continue carefully monitoring the integration of report outcomes into the Skills Portability Initiative and a possible future revision of the PQD.

### **Clinical Training Requirements & ADEE and CED Joint Workshop, Copenhagen**

As a follow-up from an initial ADEE workshop in February 2025 in Dublin for the update of the Graduating European Dentist curriculum framework, a second workshop was organised on 26 February 2026 in Copenhagen, Denmark.

At the occasion of this edition, the CED took part in the event as well as contributed to the organisation of the logistics, in cooperation with the Danish Dental Association, who kindly hosted the event.

This year's edition was also based on the suggestion to come up with a direction and a European-wide consensus by the CED regarding undergraduate dental training requirements. The goal of this event was to continue subsequent discussions from the previous session in 2025, as well as attempt to come to a common agreement on advocacy requests to be advanced to the EU Commission and other EU institutions, including on a prospective future revision of the PQD.

A Joint Declaration was co-signed by all participating stakeholders and published in April on the CED website and on other organisations' platforms and channels. The Declaration urges the EU to modernise undergraduate training and update the clinical standards that were originally established in 1978 under the Directive.

## **Specialties**

Lastly, the CED submitted an article at the end of 2025 to the Spanish iSanidadental Journal in prevision of the publication of their iSanidadental Yearbook 2025.

This article was approved and proofread by the Spanish Dental Association.

The journal and CED article entitled "Towards a European and unified body of dentists: harmonising dental specialties for better oral health" was [published](#) on 23 February.

## **WG eHealth**

- **WG meetings:**
  - ➔ Latest meeting: 27 February, hybrid
  - ➔ Upcoming meeting: TBC

## **Digital Omnibus Consultation:**

The WG reviewed the Digital Omnibus proposal, noting the 13 March 2026 deadline for feedback. A primary concern was the shift from an objective to a subjective definition of personal data (Article 4). The WG warned that an "entity-specific" approach could allow companies to bypass GDPR via "technical blindness," potentially leading to "data laundering" through subsidiaries. Members reaffirmed that patient privacy must be prioritized over commercial interests, noting that big data sharing currently favors large corporations over independent dental practices.

Regarding Article 9 and 88c, the WG expressed skepticism over the "disproportionate effort" loophole, which allows sensitive data to remain in AI models if retraining is too costly. The group argued that AI "black boxes" make it technically impossible to guarantee data deletion. Furthermore, the WG opposed removing protections for

"inferred health data" and relaxing the "strictly necessary" threshold for bias detection (Article 10.5). Such changes were identified as a strategic shift toward "general convenience" for developers, risking the commercialization of patient vulnerabilities.

In light of these discussions, the CED submitted its formal contribution to the Digital Omnibus on March 13, with a particular focus on safeguarding health data, classified as a special category of data.

### **Discussion on Previous CED Resolution Paper (2018) on e-Health:**

The WG addressed the update of the 2018 Resolution to ensure alignment with the European Health Data Space (EHDS) framework. The revised draft includes a "Digital Workflow" section tailored to the dental sector and aligns e-Prescription and Data Protection policies with current CED positions. Outdated recommendations were removed while core professional principles were retained for legal clarity.

Following the discussions held within the WG, the paper has been updated and is ready for adoption at the CED May General Meeting in Limassol.

### **WG Dental Materials and Medical Devices (DMMD)**

- **WG meetings:**

- Latest meeting: 10 February, online
- Upcoming meeting: TBC

### **Medical Devices Regulation (MDR) Proposal**

The Working Group discussed the MDR proposal, focusing primarily on the shift toward indefinite certificate validity (Article 56). While the removal of the 5-year limit was welcomed, concerns were raised regarding the potential for regulatory inconsistency. It was noted that terms such as 'periodic reviews' and 'exceptional cases' remain subjective, granting Notified Bodies excessive discretion. To ensure a predictable framework, the WG called for objective definitions of 'exceptional cases', suggesting they be restricted to Class III devices, and urged for stakeholder consultation to establish reasonable review intervals.

Regarding clinical evidence and equivalence (Article 61), the WG noted that the proposal offers greater flexibility by facilitating reliance on predicate devices without contractual agreements. While this shift could significantly reduce certification costs for incremental dental innovations, the absence of precise definitions for 'similar materials' and 'technical equivalence' was identified as a significant risk. The WG emphasized that standardized EU definitions for 'technical identity' are essential to prevent divergent interpretations and to maintain a level playing field across the Union.

The discussion then addressed the horizontal definition of 'Well-Established Technologies' (WET), which aims to apply proportionate requirements to stable, low-risk designs. Despite supporting the move toward a more structured approach, the WG expressed concern over qualitative descriptors such as 'simple' and 'common.' It was

argued that without measurable criteria or a clear 'Positive List,' these terms could lead to inconsistent assessments by Notified Bodies, potentially undermining the intended administrative relief for dental manufacturers.

The WG also reviewed the proposed changes to Classification Rules (Annex VIII), which seek to classify all reusable surgical instruments as Class I. This clarification was deemed vital for the dental sector to avoid supply disruptions and unnecessary cost increases. However, it was also noted that for certain inherently invasive dental tools, a higher risk classification (Class IIa or IIb) might still be appropriate to ensure safety standards remain aligned with other surgical fields.

Regarding the reprocessing of single-use devices (Article 17), the WG discussed the new requirement for manufacturers to scientifically justify 'single-use' labels. A significant legal point was raised concerning 'refurbishment,' as any entity performing this role assumes full manufacturer-level liability. To protect dental professionals, the WG proposed that reprocessable devices be clearly marked to ensure a definitive distinction between routine sterilization and technical refurbishment. Finally, the WG took note of the efficiency measures in Conformity Assessment Procedures (Article 52), such as representative sampling and remote audits, aimed at reducing the burden on lower-risk devices.

Lastly, it was agreed that discussions regarding medical devices that may potentially fall under the WET category, considering their specific clinical use and risk profiles, will continue within the Working Group.

## **WG Oral Health (OH)**

- **WG meetings:**
  - ➔ Latest meetings: 26 January
  - ➔ Upcoming meeting: TBC

### **Prevention and accessibility of oral healthcare**

The WG has been discussing and advancing the draft CED White Paper on Oral Health Promotion and Oral Disease Prevention in Europe.

As a reminder, this paper acts as an update of two outdated CED policy papers: the 2019 CED White Paper on Oral Care: "Prevention is better than cure" and the 2011 CED Resolution "For Better oral health of all EU citizens: Mutual Integration of Oral and General Health", while integrating new and targeted EU recommendations.

A third version of the draft was presented to the WG on the 26 January, and a bibliography was integrated separately to the document.

As agreed by the WG, an expert was identified and invited to provide input and feedback on the third version of the draft. The CV was shared with members prior to the meeting. This expert, as suggested by the WG Chair, is Greek Professor William Papaioannou from the University of Athens. Prof. Dr. Papaioannou specializes in preventive and community dentistry. The draft was disseminated to him. Feedback and comments were received from the expert on the paper mid-April. These amendments

have been integrated. Following the Board's decision on 13 March 2026, a paragraph restating the key benefits of sodium fluoride in oral disease and caries prevention, will be integrated into the body of the paper.

The White Paper will be presented for adoption at the November GM.

### **Obstructive Sleep Apnea (OSA)**

Following guidance from the Board at the latest BM in November 2025 to reconsider the scope of the foreseen CED policy paper on Obstructive Sleep Apnea, the WG agree on a new simplified version, which was presented and approved by the Board at the BM on 13 March.

In January, members discussed the mandate of dentists in relation to OSA and focused on the strong collaborative approach dentists must maintain with medical general and specialised doctors.

The work on drafting the paper has commenced, focusing on the supportive role and mandate of dentists, within an interdisciplinary team of healthcare professionals.

### **Vaccination**

As a member of the Coalition for Vaccination, the CED participated in the latest Coalition's meeting on the 5<sup>th</sup> February. The event welcomed interventions from all three co-chairs (the European Federation of Nurses Associations (EFN) Standing Committee of European Doctors (CPME) Pharmaceutical Group of the European Union (PGEU)), as well as addresses from the Head of the Unit for Health Security of DG SANTE, a representative from the European Medicine Agency's unit dealing with stakeholder engagement, and other participating organisations.

A Joint Statement was co-signed and published following the close of the event on all websites and social media of Coalition members. The Statement called specifically for an increase of vaccination coverage and stronger measures to appropriately address misinformation across Member States. This Statement was developed, among other reasons, in response to recent U.S measures and recommendations by the U.S Centers for Disease Control and Prevention (CDC) regarding vaccination, and an increase in fear around vaccine uptake.

In parallel to the Coalition's work, the CED was approached by a journalist from the online journal VaccinesToday, an online information portal about vaccine-preventable diseases and a member of WHO's network of vaccine-related websites, Vaccine Safety Net. The Board was consulted, and the CED provided information and updates on the role of dentists in HPV vaccination campaigns, by stressing the major role of dentists in vaccine promotion, referral and awareness-raising on the link between HPV, cervical cancer and oropharyngeal cancers, particularly at the occasion of regular oral health check-ups with children and teenagers. The CED highlighted that there is not common practice of administering of vaccines by dental practitioners.

### **Survey on restorative dental materials**

Krunoslav Pavlovic, the initiator of the survey on restorative dental materials, disseminated in January 2026, presented initial results from the collected data. The survey received 22 from 22 CED member associations.

As an initial overall conclusion, it was highlighted that the Commission did not provide enough support following the ban on amalgam to address its consequences on public health accessibility.

However, the WG raised a number of limitations to the survey, relating for example to the nature of some of the questions, leading to some answers remaining open to interpretation, and the need to contextualise and collect additional data in order to clarify some of the findings.

Members highlighted for example the gap between legal and declared coverage and the realities of implementation in practice in the country.

Complementary information is to be collected in order to clarify a couple of points and help utilize the survey findings for advocacy purposes.

### **Sodium Fluoride**

Following discussion with the President and the Chairs of WG PSICWM and WG DMMD, the WG prepared and submitted feedback in January to an important consultation on Sodium Fluoride by the European Chemicals Agency (ECHA).

As a reminder, this submission followed the announced by ECHA of the review of the classification of sodium fluoride under ECHA, triggered by a report by the French ANSES (French Agency for Food, Environmental and Occupational Health & Safety) analysing sodium fluoride as an endocrine disruptor and reproductive toxicant.

The CED's feedback to the consultation highlights the positive effects of sodium fluoride on dental health, focusing specifically on the preventative role of fluoride in dental care products, and preventative treatments.

The ECHA consultation is now closed and all received stakeholder feedback is being reviewed.

ECHA's Risk Assessment Committee (RAC) has until 4 April 2027 to adopt and publish its final opinion on the proposed classification.

### **Cardiovascular Health**

The European Commission is continuing its work in relation to the EU Cardiovascular Health Plan, with the publication on the 21 April of a Call for Evidence for the publication of a Council recommendation on health checks for cardiovascular diseases, including early detection and screening of cardiovascular diseases. The public consultation is open for input until 19 May 2026. The WG is currently considering the possibility of providing feedback to the consultation.

### **AMR**

WG member Harry-Sam Selikowitz, delivered on 24 November 2025 an online intervention on behalf of the CED addressing "*The Importance of Oral Health: Managing Oral Health in the Context of Antimicrobial Resistance*" to the European Commission AMR One Health Network.

### **WG Patient Safety, Infection Control and Waste Management (PSICWM)**

- **WG meetings:**

- Latest meeting: 9 March
- Upcoming meeting: TBC

### **Renaming of the WG PSICWM**

The Working Group has been renamed to the "Working Group on Patient Safety, Infection Control, and Sustainability." This adjustment reflects the transition from a narrow focus on waste management to a broader, more proactive sustainability mandate. By aligning the WG name with evolving environmental challenges, it aims to better address the dental profession's increasing vulnerability to external scrutiny while ensuring no overlap with other CED working groups.

### **Respirable crystalline silica (RCS) and BisGMA**

**Respirable Crystalline Silica (RCS):** A meeting was held with RPA Europe regarding the revision of occupational exposure limits. It was clarified that the dental environment is distinct from industrial manufacturing. The efficacy of high-vacuum aspiration and rubber dams was highlighted to demonstrate that dental practices maintain a significantly lower risk profile than industrial sectors.

**Bis-GMA:** In response to technical inquiries from RPA Prague, and supported by expert input (Prof. Dr.Pala and Prof. Dr. Schmalz), the WG underscored that the GMA moiety within Bis-GMA is not readily released under clinical conditions. The ether linkage remains stable except under extreme laboratory settings, distinguishing its risk profile from pure GMA.

### **ECDC - Infection control policies among EU countries**

The WG was informed of the upcoming initiative to engage with the European Centre for Disease Prevention and Control (ECDC) regarding an update to the "Infection Prevention and Control in Dentistry" section of their website. Originally focused on EU-based information, the ECDC page has expanded its scope to include data from non-EU countries. The objective of this update is to ensure that the resources and data represented for each CED member are current and comprehensive. In line with this, the CED members has been invited to contribute by sharing recent national publications, clinical guidelines, or relevant protocols issued by their respective associations. These contributions are currently gathering, and an official request will be submitted to the ECDC shortly.

### **ECHA's assessment of Ethanol**

The ECHA Biocidal Products Committee has issued a positive opinion supporting the approval of ethanol for hand disinfectants and hygiene products. Notably, no new hazard labels were proposed as no definitive conclusion was reached regarding long-

term health risks. The file is moving to the European Commission for a draft regulation, which will establish the legal framework for EU-wide product authorizations.

### **Water quality in dental clinics**

The WG reviewed the status of the Water Directive and the need to continue monitoring water quality standards for clinical use. It was noted that municipal water supplies in some countries do not always meet the levels required for dental practice. Members were asked to share any national initiatives or directives from health authorities related to water safety in dental clinics to support a coordinated response.

While municipal water quality is generally high in many countries, concerns remain regarding bacterial contamination within internal piping systems. At the same time, the WG agreed that any future position paper should take a cautious approach, as there is currently no statistical evidence indicating a higher risk of waterborne infections in dental practices compared to residential settings.

Members also emphasized the importance of avoiding additional administrative burdens, since existing national standards for dental clinics already ensure baseline compliance with drinking-water quality. Particular attention was drawn to practices in isolated or seasonal locations, where stagnant water in pipes during periods of inactivity may increase risks.

### **BTF Internal Market (IM)**

- **BTF meetings:**
  - ➔ Latest meeting: 12 March
  - ➔ Upcoming meeting: TBC

### **EU Health Workforce Crisis Plan- Own Initiative Report:**

The Chair provided an update on the 'EU Health Workforce Crisis Plan' Own-Initiative Report, noting that dentistry was not specifically mentioned in the current draft. Regarding the legislative process, it was reported that the file is currently awaiting a committee decision, with the Committees on Employment and Social Affairs (EMPL) and Public Health (SANT) responsible for its review. The final plenary vote was scheduled for May 18, 2026 but is now postponed further into summer. If adopted, the report will serve as the Parliament's official resolution, potentially shaping future EU health policy and legislation.

### **OECD Health at a Glance 2025**

The Chair informed the members that, the OECD 'Health at a Glance' report now includes a brief reference to corporate dentistry. It was highlighted that this is a significant development, as it represents the first explicit mention of corporate dentistry in such a major institutional document.

The reference: 'Public coverage for the cost of dental care is far more limited across OECD countries due to restricted service packages (frequently limited to children) and higher levels of cost-sharing. On average, less than one-third of dental care costs were borne by government schemes or compulsory insurance. Services with poor public coverage are targets for the involvement of financial and non-healthcare corporate actors in the ownership and operation of services. In recent years, the dental care sector has been notably affected by these actors. In Spain, for example, the share of practices run by dental service organisations (that handle the business side of dental practices) in dental markets doubled between 2015 and 2018.

### **Supportive Courses for Foreign-Trained Dentists**

The Chair introduced the proposal from KNMT for the additional training for non-EU dentists to improve their adaptation to national healthcare systems. While the importance of ensuring educational quality was acknowledged, it was emphasized that professional regulation remains a national competency. The group discussed the legal constraints of imposing mandatory requirements on EU dentists, noting that any additional training must remain voluntary and not act as a barrier to the right to practice. Instead, the focus should be on addressing knowledge gaps regarding host countries' financial systems, patient rights, and ethical frameworks.

The consensus was that the CED should focus on sharing best practices and developing voluntary recommendations.

### **Recognition of non-EU qualifications**

During the BTF IM latest meeting, the Chair and Marek Szewczyński provided an update on a non-public European Commission document regarding the recognition of non-EU qualifications. The Commission is assessing three potential policy approaches: enhancing transparency between Member States, streamlining procedures through shared deadlines and "tacit authorization," and potentially introducing automatic recognition for specific professions by accrediting non-EU institutions that meet EU standards. As dentistry is a harmonized profession, it was noted that these proposals could significantly impact the sector.

The BTF raised significant concerns regarding the proposed EU accreditation for non-EU universities, emphasizing potential risks to patient safety and educational quality. While acknowledging the dentist shortage across Europe, the consensus was that maintaining consistent standards must remain the priority. The Chair questioned the feasibility of effective oversight for institutions outside the EU, arguing that a robust and constant monitoring mechanism is essential and that simply listing accredited institutions is insufficient to ensure ongoing compliance with EU standards. The CED will continue to monitor these developments closely.

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