

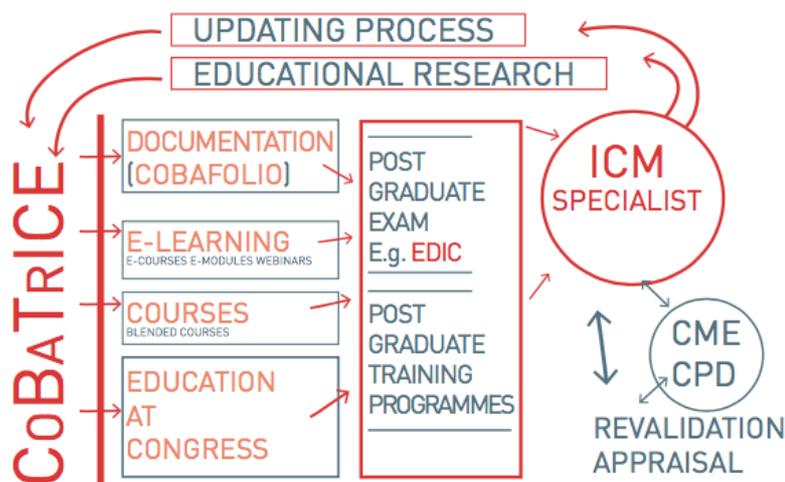
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Vision without action is a daydream, action without vision is a nightmare
Francesca Rubulotta, Pascale Gruber

One of the basic principles in the European Union (EU) is the free movement of nearly all aspects of life and trade, namely: funds, manpower and products. One of the few fields where the free movement is not fully implemented is in the Health Care System, where the provision of services is the responsibility of each European Member State. [1,3] Intensive care doctors' training and accreditation programs are based on a set of competencies and/or knowledge which are defined at a national level by the National training organizations (NTOs) and at European level by the Competence Based Training in Intensive Care Medicine program (CoBaTrICE, www.cobatrance.org). (1) The CoBaTrICE collaboration was formed in 2003 and initially funded by the European Commission Leonardo da Vinci programme (2003-2010). Currently, it is supported by the European Society of Intensive Care Medicine (ESICM, <https://www.esicm.org>).

The CoBaTrICE programme now represents the basis of the entire ESICM Academia. The role is:

- To assure high-quality education in Intensive Care Medicine (ICM);
- To harmonise training in ICM without interfering with national regulations or regulatory bodies;
- To allow free movement of ICM professionals across Europe and other world regions.



CoBaTrICE feeds most of the component of the ESICM Academia. A 'competent' doctor should have the ability to do something successfully or efficiently. Traditional medical education has been criticized for its failure to ensure that all graduates are adequately prepared for independent work at the bedside. Competence based medical training (CBMT) derives from vocational education and it is therefore linked to real life. Unfortunately, the implementation of CBMT has never been followed by international research to prove the benefit of this educational approach. The ICM specialist that is trained using this model should:

- achieve better patient's care
- continue appraisal and revalidation
- communicate the need for updating when innovation is implemented in clinical practice

- generate educational research.

Reference:

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