



UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

Association internationale sans but lucratif

International non-profit organisation

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Report of the Secretary General

incorporating an update on the EACCME

Executive Summary

This report is structured around the priority issues and the three key areas of UEMS function that were identified in my report to Council in April 2012, namely:

- Domus Medica Europea
 - UEMS Finances
 - Communication, co-ordination, more efficient working
- and
- Political lobbying
 - Standard setting for training and practice in individual medical specialities
 - The accreditation of CME/CPD

Since my report in April, the UEMS has made excellent progress across a wide range of areas of function, but also has had to deal with some highly challenging matters.

I wish to put on record my appreciation, and that of the Executive, for the efforts of our Secretariat, who ensure that our organisation is so effective. I encourage you to contact them should you have matters related to their specialist area of work.

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Progress on Prioritised Issues

In my report for the Council meeting, held in April, I indicated that, following a review by the UEMS Executive of all aspects of the organisation's function, certain issues have been prioritised for attention. I shall begin, therefore, by providing an update of progress with regard to these three issues.

Domus Medica Europea

This has been the most challenging of all aspects of the UEMS's responsibilities, with the planned alterations to the UEMS premises at 24 Rue de l'Industrie yet to begin.

Despite detailed architectural plans supporting our application and a clear indication that the building will be used, as it has been in the past, solely for business purposes, the renovation of our building has been delayed by negative decisions by the Planning Authorities of the City of Brussels.

The reasons given for these negative decisions have included objections to the alterations to the façade – an objection that readily can be addressed – and, more surprisingly, requiring the UEMS, when making any alterations, to ensure that the building is used for both business and accommodation purposes.

The UEMS has challenged these decisions by the Planning Authorities of the City of Brussels and further updates will be provided to the Board and the Council at the meeting in Cyprus.

UEMS finances

The transition by the UEMS to a "large organisation" under Belgian law and its registration as an "international non-profit organisation (AISBL)" has been completed successfully. Issues related to taxation largely have been addressed, though specific areas remain to be clarified as recent changes in Belgian law remain opaque even for taxation experts.

However, following detailed advice, the UEMS is in the process of applying for VAT status in Belgium as this is deemed applicable for defined areas of the UEMS's functions. A likely benefit of this change in status is that it may permit some deductions from the costs of the planned renovations of our building.

As is evident from the budget report, the UEMS continues to have healthy finances, with all parts of the UEMS family able to benefit from comparatively low subscription fees. This is a result of the income accrued from the EACCME's accreditation activities.

It is particularly encouraging to note that 25 UEMS accounts managed by UEMS Sections and Boards have been opened, thereby ensuring that the UEMS is compliant with Belgian financial law. All Sections and Boards and Multi-Disciplinary Joint Committees are encouraged to open these accounts.

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Communication, co-ordination, more efficient working

The responsiveness of the UEMS Office has been enhanced by the implementation of the promised system whereby all telephone calls are answered speedily and, wherever possible, dealt with immediately by the relevant member of the UEMS Secretariat. I would like to put on record my appreciation of the efforts made by our Secretariat to achieve this goal.

The UEMS website has been extensively renovated, with a cleaner lay-out and more speedy access to key areas. Additional work is in progress, particularly to ensure that Sections and Boards, Multi-disciplinary Joint Committees, and UEMS Working Groups can present their work, and co-ordinate their efforts, through the new UEMS website.

It is planned that a membership database will be developed that will provide an up-to-date list of contact information for members on the UEMS website. Your help in providing this information will be essential if we are to be able to achieve this.

Increased contact between Presidents and Secretaries of Sections and Boards, representatives of National Medical Associations and the Brussels Office has been helpful for everyone concerned. We now have more effective exchange of information on activities related to each speciality, are more readily able to provide support for meetings and to provide advice on UEMS functions.

Members of the UEMS Executive have attended many meetings of UEMS Sections and Boards and with senior members of National Medical Associations. This has been helpful in strengthening the links between colleagues and providing greater opportunity to address items specific to their needs.

Lobbying Activities

The UEMS has had considerable success in having its voice, hence the voice of medical specialists throughout Europe, heard at the highest levels, on a wide range of issues.

Professional Qualifications Directive

The UEMS has ensured that this important issue is addressed through its work on the revised directive. During the consultation period a large number of amendments were proposed – as are detailed in UEMS 2012/18. The UEMS was invited to participate in the European Parliament public hearing, at which it was represented by Zlatko Fras. The results of these efforts have been reflected in changes evident in the report of the Rapporteur, Mme Vergnaud. Further lobbying efforts have included members of the European Parliament's IMCO Committee, MEPs and Permanent Representatives of Member States in Brussels.

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EU Healthcare Workforce

The UEMS has been involved as an active partner in the Joint Action for data collection and horizon scanning, working in co-operation with the CEOM for the “European Observatory on Medical Demography”. Romuald Krajewski was invited to the High-Level Employment Conference related to this agenda, and spoke on “White (coat) jobs”.

E-Health

The UEMS has been involved, as expert organisation, in the Commission’s E-Health Stakeholders Group, at which it is represented by Cillian Twomey and Gordon Caruana-Dingli. Further involvement includes the representation by colleagues from the Sections and Boards of Clinical Neurophysiology, Radiotherapy and Radiology in the “MOMENTUM” and the “Renewing Health” initiatives. Colleagues will be able to refer to the document “UEMS contribution to the e-Health Action Plan” (UEMS 2011/22) for more detailed information on the UEMS’s lobbying position in this area.

Comité Européen de Normalisation (CEN)

The UEMS has responded robustly to this controversial attempt to apply to healthcare standards used in other sectors. This initiative by a branch of the Commission does not have the support of the UEMS, as has been made clear by the UEMS response to CEN and the launch of a campaign, via an open letter to European Medical Organisations (EMOs) and National Medical Associations (NMAs).

Corporate Social Responsibility (CSR): Ethics & Transparency

The UEMS has participated in the Commission platform group that is drafting the European Code of common values and principles applicable in the Pharmaceutical Sector. As a result of this work, I contributed to a programme on CSR at the European Health Forum in Gastein.

Specific lobbying efforts

The UEMS has lobbied, with delegations comprised of members of our Brussels Secretariat and senior members of the UEMS Sections and Boards, on issues that are particularly important to individual specialities. These include:

- Health Research: promoting greater investment in and emphasis on this
- Ophthalmology: to block attempts by the Commission to bar the use of fluorescein
- Obstetrics and Gynaecology: lobbying on matters related to Womens’ Health.

All specialities are encouraged to identify issues where lobbying initiatives of this nature will increase their ability to influence the European agenda.

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Standard setting for training and practice in individual medical specialities

CESMA

CESMA met in Ljubljana on 5th May and will be meeting in Brussels on 3rd November 2012. Its work on the validation of European medical examinations continues to attract considerable support from within specialities and also from national authorities.

Of particular importance is that the Belgian Ministry of Foreign Affairs has approached the UEMS to draw on the work of CESMA as part of their authentication of European Diplomas for non-EU citizens who have passed the European examination in their speciality. This work also has been of assistance for doctors, such as from Dubai, who have approached the UEMS for assistance in achieving acceptance of their diplomas.

ECAMSQ

Following the successful pilot tests of knowledge assessment conducted in 2011, this initiative has continued to develop with a meeting of the Steering Committee on an e-platform held in Ljubljana on 5th May. Disappointingly, the submission of an application for European Funding for the OLIMPE project was unsuccessful, with a negative response having been received in July. However, the work on this initiative certainly will continue, with funding derived from the UEMS and partner organizations.

New structure for the Chapter 6 of the UEMS Charter on Postgraduate Training

It is proposed that the terminology changes! The “Chapter 6” of the past will become “Training Requirements” in the future. Much work has been performed in preparing a template which will pave the way to the development of European Curricula in each speciality training area and, following amendments derived from an internal consultation, the document for this template is on the Council agenda.

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The Accreditation of CME-CPD

Mutual Recognition Agreements

The UEMS has renewed its mutual recognition agreement with the Royal College of Physicians and Surgeons of Canada for a further three years. This permits European colleagues to use their CME credits gained from attending live educational events (LEEs) in Canada, and Canadian colleagues to use ECMECs gained in Europe.

The EACCME Taskforce met in London to consider the many responses to the consultation on the criteria for the accreditation of LEEs as had been set out in UEMS 2011/30. A further internal consultation on the revised draft was performed, and the amended document is on the Council agenda for adoption.

EACCME

Requests for accreditation by the EACCME continue to be a considerable component of the UEMS's functions and a major element of the work performed by our Secretariat.

My thanks to all representatives of Sections and Boards, National Accreditation Authorities and European Speciality Accreditation Boards for their contributing work that helps to make the EACCME so successful. If you're not yet involved, please become so!

The figures for Live Educational Event applications to the EACCME for accreditation from 1st January to 31st August 2012 are:

• Total of new events received during the period:	1350
• Accreditation	1087
• Rejection:	27
• Suspension:	54
• Reviewed by Section:	1200
• Reviewed by NAA:	988
• Reviewed by both Section and NAA:	909

The figures for e-learning applications to the EACCME for accreditation from 1st January to 14th September 2012 are:

• Total number of applications:	57
• Number of accredited applications:	26
• Number of applications in amendment:	21
• Number of applications in review:	9

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Conclusion

This “state of the organisation” report confirms that while there are significant challenges facing the UEMS, there is ample confirmation that the UEMS is capable of addressing these challenges successfully and continuing to develop and strengthen.

A few quick facts about the UEMS

The UEMS:

- is the oldest “political” EMO (established in 1958)
- has around 1000 colleagues actively engaged in its work
- represents the approximately 1.4 million medical specialists in Europe
- works with colleague EMOs to represent the medical profession as a whole
- has 35 countries represented on its Council
- has 39 Sections (most of which have associated Boards) and 10 MJC
- 21 of which having developed Chapter 6 training charters
- 28 are involved in CESMA
- 22 organise European examinations

Edwin Borman
Secretary General
October 2012