UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS
Association internationale sans but lucratif International non-profit organisation
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UEMS 2017/17

MEETINGS OF THE UEMS COUNCIL

Report

Friday 28th April 2017

Meetings to be held at
Kfar Maccabiah Hotel
Perets Bernstein 7 st.,
Ramat-Gan - 5224771
Israel

PRESIDENT: DR ROMUALD KRAJEWSKI
TREASURER: DR BERNARD MAILLET
SECRETARY-GENERAL: PROF VASSILIOS PAPALOIS
LIAISON OFFICER: DR ZLATKO FRAS

Welcome

Dr Krajewski (*UEMS President*) welcomed the participants and thanked the Israeli Medical Association for hosting UEMS Council meeting in the exceptional venue in Tel Aviv.

Prof. Eidelman (*President of the Israeli Medical Association*) welcomed the participants in Tel Aviv and thanked the UEMS Executive for entrusting the IMA to host the UEMS Council in Tel Aviv. The UEMS work and policy is of great importance for Israeli Doctors and IMA really wishes to continue and strengthen this collaboration. Dr Krajewski acknowledged the substantial input of Israeli doctors delegates to the work of the organisation. UEMS is also very happy to organize its meeting in Israel as recognition of the important contribution of IMA to UEMS.

Dr Krajewski opened the meeting recalling the UEMS European vision and stated that UEMS will continue being a European organisation involved in European politics. He reiterated that UEMS is a single though very complex organisation with common goals. UEMS rules exist to ensure transparent participation of all UEMS NMAs and specialties. The UEMS finances are now doing better thanks to the trust amongst UEMS bodies. There are still challenges with book-keeping but the Executive and the Office are working on proposals to fix this. If any UEMS body needs help, it should directly contact the UEMS Executive who will answer without delay. UEMS has been preparing and implementing several projects since the beginning of the year (ETRs and EU Exams for everyone; EACCME 2.0; Erasmus +, etc…). It is of paramount importance to keep CME/CPD in the hands of the profession in Europe. In 2018, the UEMS will turn 60 years old. Dr Krajewski invited participants to brainstorm on ideas how to celebrate this event. Dr Krajewski concluded by highlighting that after difficult times, UEMS is doing well with the future looking brighter than ever.

Participants observed a minute of silence in memory of Kari Pylkkanen, head of the Finnish delegation to UEMS, UEMS past Vice-president, past President of the Psychiatry Section.

Prof. Papalois (UEMS Secretary General) made a roll call of delegates present: 24 National Member Associations were present and 3 proxies were given.

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1 Approval of the agenda

- **The agenda of the UEMS Council meeting was approved.**

2 Approval of the minutes of the last meeting, held in Brussels 20/21 October 2016

The last sentence on page 2 will be corrected : "EACCME 2.0 has been designed based on practical comments from all stakeholders, the governance Board on CME paying particular attention to tangible outcomes."

On the AEMH report (page 12) the sentence shall be read: "Dr De Deus reported on the last update of AEMH activities and projects: zero tolerance to corruption; clinical leadership; E-health; access to online medical files; new website."

- **The minutes of Brussels Council meeting (UEMS 2016.08) were approved as true and accurate document.**

3 Interim report of the Secretary-General

Prof. V. Papalois (*UEMS Secretary General*) presented the Secretary General report. The SG report presents the political aspects and is circulated with the CEO report which focuses more on factual data. Both aim to reflect the superb job of the UEMS team. Prof. Papalois commented on the EEC work, stating that the spirit of the Executive team was remarkable: democracy, inclusiveness and open-minded approaches prevailing. He also thanked all UEMS staff for their involvement and excellent work. From October 2017 meeting, the UEMS office will prepare a template for UEMS Bodies and NMAs to report on their activities for the last 6 months. Prof. Papalois thanked the IMA for the warm welcome and the very good organisation of the meeting and highlighted that UEMS is having meetings in 2017 and 2018 outside the EU because we aim to honour and pay tribute to Israeli and Moroccan Associations which are doing a great job within UEMS and provide a massively important contribution to the organisation. Prof. Papalois recalled that EEC members do not receive per diem compensation. For now on, this will stay like this because the EEC is very careful and cost conscious. The DME is now fully rented and many events are organised there. UEMS NMAs and Bodies are invited to use the DME premises and to enthusiastically recommend it. Prof. Papalois briefly presented the proposal to amend the UEMS Rules of Procedure. These changes aim to bring UEMS to the next level of inclusiveness and transparency. The newly established ETR Review Committee aims to formalize the work done by UEMS bodies and to ensure that the ETR presented to

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the Council meeting are the result of a vast consultation amongst all stakeholders. The CESMA will celebrate its 10 years in Glasgow on May 13th, 2017. Prof. Papalois stressed the unique character of CESMA and paid tribute to the CESMA chair, Dr Zeev Goldik, who has brought CESMA to the level of a very professional and open group of experts.

Prof Papalois highlighted next year 60th birthday of UEMS, delegates are invited to reflect on the future strategy to keep UEMS going further as a unique organisation doing real projects, for real people in real life.

Dr Kirschner (*EBCOG Secretary General*) raised the question of UEMS status as big non-for-profit organisation. Dr Krajewski explained that as long as the UEMS invests in constructive projects for medical specialists' education in line with its statutory goals, it will remain a non-for profit organisation.

4 Specialist issues

4.1 Report from the Meetings of UEMS S&B and Groupings

Prof. Papalois explained that UEMS will organise a meeting with European Scientific Societies in October 2017. The overall goal is to strengthen relations between UEMS and ESS and to explore new areas of collaboration. Invitations will go through Specialist Sections and MJCs. A Working group will be launched to start preparation for this meeting in which ESS representatives shall also be included. The European Society of Cardiology already showed willingness to participate.

Prof. Gans reported on the Grouping I discussions.

- On the ETR guidelines, Grouping I made recommendation to have an educationalist involved in the ETR production/review.
- The Section of Rheumatology had launched a survey on ETR adoption by EU countries. It turned out that the majority of national societies acknowledge the existence of UEMS ETR but keep using their own standards. It would be opportune to come up with a strategy for ETR dissemination.
- Dr Bisdorff (*UEMS Section Neurology*) and Dr Christodoulou (*UEMS Section PRM*) volunteered to coordinate preparation of the meeting with European Scientific societies.

Prof. Agius reported on Grouping II discussions.

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- The meeting was well attended. Prof. Benedetto apologies were presented to the delegates.
- Dr Magennis (*UEMS Section OMFS*) and Dr Felicissimo (*UEMS Section Orthopaedics*) volunteered to coordinate preparation of the meeting with European Scientific societies.
- The ETR and visitation Guidelines are of good quality and participants welcomed them.
- Participants had a lively discussion about the creation of MJC Head and Neck Surgery. Prof. Papalois proposed to create a working group to help to find a consensus.
- Delegates welcomed the new RoP and the inclusion of groupings chairs within EEC. In October 2017, elections will take place.

Dr Hermans reported on Grouping III discussions:

- Participants discussed RoP based on the comments prepared by the Psychiatry Section.
- ETR and visitation guidelines were welcomed and approved.
- The proposed changes on RoP were well received and are beneficial for the organisation on the condition that it should be thoroughly evaluated in two or three years as foreseen. The group found that the proposals related to the Groupings were more difficult to judge. To know if these proposals would allow for a higher level of impact or influence on the Council through the Advisory Board was difficult to estimate.
- The meeting with ESS lead to a lively discussion, many attendees thought that their Section had already excellent/good working relationships with their scientific association. Most of the attendees suggested to look at the agenda of the last meeting given the fact that it was seemingly so successful. Some attendees suggested to organise small group discussions, to engage a professional facilitator. Perhaps a list of successful collaborative events would be boring, therefore selection is considered to be needed.

Prof. Papalois thanked the groupings for their reports. He recalled that according to UEMS amended RoP, the chair of groupings will, from October 2017, be elected from amongst Presidents of UEMS Sections and should have the blessing of their NMA. He invited colleagues to start the work on the UEMS / ESS meeting to be held on October 19th, 2017, in Brussels, prior to UEMS Council meeting.

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4.2 **Training Requirements and other documents**

4.2.1 **Training Requirements in Nuclear Medicine**

Dr Frangos (*Secretary General-treasurer NM Section*) presented the ETR in Nuclear Medicine and its drafting process.

➢ **The ETR in Nuclear Medicine was approved by the Council (2 abstentions).**

4.2.2 **Training Requirements in Psychiatry (UEMS 2017/**

Dr Hermans (*President Psychiatry Section*) presented the ETR in Psychiatry. The Section has signed a Memorandum of Understanding with the European scientific society; trainees were also consulted. The overall goal of the redactors was to define a framework for stakeholders respecting all national contexts.

➢ **The ETR in Psychiatry was approved by the Council (1 abstention ; 1 against).**

4.2.3 Training Requirements in Clinical Genetics

Prof. Melegh (*President Clinical Genetics Section*) presented the ETR in Clinical Genetics. Some delegations (Germany, the Netherlands, Denmark) asked for the specialty to be mentioned as "clinical genetics" and not as "clinical genetics and genomics". Prof Melegh commented that specialists of clinical genetics do Genomics, so such mention reflects the reality of the specialty. Dr Krajewski recalled the UEMS position on specialty names: names of UEMS Sections should be in strict compliance with the title mentioned in Annex V of the Directive on professional qualifications. Dr Duffy (*NMA - Ireland*) explained that the mention of "genomics "as competence is acceptable, while the mention of specialty as "Clinical genetics and Genomics " is not. This should be removed wherever it is mentioned as name of specialty. Dr Krajewski emphasized that whenever a competence is mentioned, it does not mean exclusive competence belonging only to this specialty.

Prof Papalois proposed to amend the ETR as such:

- The title of the ETR would be changed to "ETR for the Specialty of Medical Genetics" performed by the UEMS Section of Clinical Genetics.
- "*Genomics*" can remain in ETR when it refers to a competence.

➢ **The ETR in Medical Genetics was unanimously approved by the Council.**

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4.2.4 Training Requirements in Gastroenterology

Dr Jacques (*President Gastroenterology Section*) presented the ETR in Gastroenterology.

Prof. Rowland (*NMA - UK*) congratulated Dr Jacques for an excellent document and encouraged UEMS bodies to use it as a template for future UEMS ETRs.

- **The ETR in Gastroenterology was unanimously approved by the Council.**

4.2.5 ETR guidelines

Prof. Papalois presented the ETR guidelines document. He recalled the consultation process that was launched for these guidelines and stressed that these guidelines are advisory tools for UEMS bodies, not a legal requirement. Prof. Papalois highlighted that the ETR Review Committee is open to all interested participants.

- **The ETR Guidelines were unanimously approved by the Council.**

4.2.6 Visitation of Training Centres

Prof. Papalois presented the updating Appendix on the UEMS 1997 Charter on "The Visitations of Training Centres". He explained that the excellent Charter adopted in 1997 needed an update and that was the goal of this document, that has been discussed by the whole UEMS family for two years.

- **The Appendix on the UEMS 1997 Charter on visitations of training centres was approved by the Council (1 abstention)**

5 Constitutional issues

5.1 UEMS Rules of Procedure

Prof. Papalois described the context and proposed changes in UEMS Rules of Procedure. Due to the unique character of UEMS, Sections & Boards are doing an important amount of work on the ground. It is essential that their role is emphasized and translated into UEMS functioning. The nature of the UEMS will remain the same, but an Advisory Board composed of elected leaders of UEMS bodies will advise the UEMS Council on topics related to the Sections activities. The UEMS NMAs, constituted in the Council will, after having being advised by the AB, vote independently. This reform aims to enhance dialogue between NMAs and UEMS bodies. Dr Krajewski highlighted the very intensive consultation that took place within UEMS and thanked delegates who proposed amendments and comments. In April 2018, we will already be able to review the implementation of these rules and

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amend if necessary. Prof. Papalois stressed that consultations were open until the very end. A very late proposal from Nordic Countries has been added to the draft and shall be read as follows:

"*III.3. Voting procedure in the Council*
Before the meeting of the Council, the Advisory Board (Art VII) will hold its meeting and will vote in an open ballot indicatively on the topics that are to be voted on by the Council and have been put on the agenda of the Advisory Board meeting (Art. VII), except for items concerning elections. The outcome of the Advisory Board voting (Art. VII) is announced to the Council by the Advisory Board chairperson when the topic is considered by the Council. Then, the Council will vote on this topic.
If the outcome of the voting by the members of the Council for a specific topic is in agreement with the outcome of the voting by the Advisory Board, the Council decision is final and the matter is closed.
If the outcome of the voting by the Council for a specific topic is different from the vote of the Advisory Board, the UEMS Executive will conduct discussion between the Council and the Advisory Board aiming at achieving a consensus. After the discussion, the Council will decide either to vote again on this topic at the same meeting or to postpone the decision until the next meeting. If the Council decides to vote again at the same meeting, the second vote of the Council will be final."
The proposal includes this last amendment. Dr Krajewski recalled that RoP apply to all UEMS bodies.

- **The amended Rules of Procedure were approved by the Council (2 abstentions).**

The UEMS Executive Committee thanked Thomas Holzgruber for his outstanding contribution to UEMS as legal adviser. Mr Holzgruber received a diploma and thanking letter from Dr Krajewski.

5.2 Proposed creation of a MJC Head & Neck Surgery

Prof. Papalois presented the state of discussions on this topic: it was decided amongst the interested parties to take this issue out of the agenda for the present Council meeting. A working group will be created on this topic with all interested Sections. This Working group will aim to produce Terms of Reference for the MJC Head & Neck Surgery to work. Prof. Papalois and Dr Grenho will facilitate the WG and ensure that negotiations lead to tangible results. The overall idea of the MJC is for colleagues to share expertise and collaborate on projects.

5.3 Proposed creation of a MJC Thoracic Oncology

Dr Turhal (*President Medical Oncology Section*) presented the proposal on behalf of Dr Massard. Dr Krajewski recalled that creation of MJC does not aim to lead to new specialty. The purpose of MJC is to have a multidisciplinary approach to a special competence. In oncology, multidisciplinary work is very frequent. Dr Duffy (*NMA - Ireland*) stated that MJCs are a very unique strength of UEMS, they might create lots of challenges but also many opportunities. Reflection on MJC work could be important for the future of the organisation.

Prof. Papalois thanked Dr Duffy for his comments and proposed to have this topic covered during the October Session about the strategy of UEMS.

- **The creation of MJC Thoracic oncology was approved by the Council (2 abstentions).**

5.4 **Proposed creation of a Division Reproductive Medicine**

5.5 **Proposed creation of a Division Clinical Embryology**

Dr Kirschner (*Secretary General EBCOG*) introduced Mr Kovacic from ESHRE and indicated strong links and good cooperation between EBCOG and ESHRE. EBCOG supports and stands behind the proposal to create divisions of Reproductive Medicine and Clinical Embryology. The subspecialties sit on EBCOG Council and joint visitations are organized. Mr Kovacic presented both proposals. The overall aim is to provide quality education, harmonized standards and training. Dr Krajewski stressed that divisions, even if under the scope of one Section are open to other specialties.

Dr Akyol (*NMA - Turkey*) wondered whether these divisions would be open to non-medical specialists. Dr Kovacic explained that infertility treatments are lead by medical specialists. Dr Krajewski stated that only medical specialists appointed by UEMS NMAs can be delegates within UEMS bodies and can vote. Dr Kirschner underlined that both divisions aim to improve competence of people working in this very wide sector. Several delegates raised the question of non-medical specialists participating in the Divisions.

- **Both proposals were postponed to October 2017 Council meeting.**

5.6 **Proposed change of name - Section of Pharmacology to Clinical Pharmacology**

Dr Griesbacher (UEMS Section Pharmacology) presented the proposal to change the name of the Section. Dr Krajewski explained that the Section title is linked to the title used in the Annex V Directive 2013/55/CE. The Council shall decide whether this proposal shall be integrated on the UEMS proposal to the European Commission.

- **The UEMS Council approved to propose the change of the name of the specialty "Clinical Pharmacology" within the framework of revision Annex V Directive 2013/55/CE (2 abstentions)**

6. Medical Specialist Qualifications

6.1 UEMS-CESMA Report

Dr Goldik (*President CESMA*) presented the report of CESMA. To date, more than 30 European Examinations are organised within UEMS. Some of them are being quite well recognized by national

competent authorities – such as Anaesthesiology recognized in 16 countries. CESMA delegates meet twice a year in Brussels and abroad. CESMA aims to allow experts to exchange views about European exams and to define guidelines for exams. The CESMA also runs appraisal of the European exams, it is a quality mark. This year is the 10th Anniversary of its Glasgow declaration.

Prof. Papalois stressed that even if CESMA appraisals are not compulsory, the UEMS Council strongly encourages all delegates to go through the process. It is a very important quality control instrument.

Other projects are being developed under CESMA auspices such as the school of assessors, guidelines for preparatory courses, etc… The added value of European Examinations is very tangible for successful candidates. It helps them to obtain a better position and better salary. Dr Pedersen (*ORL Section President)* expressed interest for CESMA appraisal. Prof Papalois explained that examiners in European Exams will be granted EACCME credits. This is included in EACCME 2.0 proposal and will be implemented in 2017. Prof. Papalois recalled the UEMS Council decision of October 2015 that all UEMS bodies shall send the list of successful candidates to the UEMS office. Mrs Carratala will send a reminder with the ToR to all UEMS S&B.

7. The floor was opened to representatives of other European Medical Organisations

7.1. AEMH

Dr De Deus reported on the last update of AEMH activities and projects. He stressed the importance of cooperation between EMOs and highlighted the value of UEMS European Boards for doctors in Europe.

7.2. CPME

Dr de Haller reported on the last update of CPME activities and projects. He stressed the great cooperation between UEMS and CPME and the frequent contacts between presidents. CPME is currently working on Autonomy ("Proportionality", "Standardization"); Health workforce planning, collaborative practice; European Semester, TTIP, refugees, socio-economic determinants of health; Prevention (tobacco, alcohol, diet, vaccination, AMR); eHealth, mHealth; Defensive medicine; Patients' rights and safety; sex and gender; Medication (HTA, access); relationship to industry; Communication.

7.3. BMA Brexit Brief

The floor was given to Prof Rowland for an update on Brexit. Prof Rowland speech is available here. Dr Duffy (Ireland) formulated declaration of support to British colleagues. Interactions between UK and Ireland are an example in the Healthcare Area. Dr Krajewski congratulated Prof. Rowland for the BMA medal received this year.

8. Report to Council of the outcomes of the Board Meeting

Dr Maillet (*UEMS Treasurer*) presented a short report of UEMS Board meeting held on 27th April 2017. All data will be circulated to UEMS family as the financial reports have been approved by the Board. Both EACCME and European Examinations numbers are increasing. UEMS has some troubles when it comes to documentation but the EEC is working on a proposal to solve this issue. Dr Krajewski recalled that EEC is ready to help any Section in need. Dr Maillet gave an update on EBAC case. All NMAs are invited to check and appoint to the Cardiology Section delegates who value and share UEMS goals. The accreditation of cardiology events is now organized together with the ESC.

9. Continuing Medical Education

a. EACCME Progress Report

Prof. Papalois presented the EACCME progress report for 2016. He thanked colleagues at UEMS office for their involvement and expertise on EACCME. In 2016, we saw an increase of 13% of accreditation requests. EACCME 2.0 is being finalized and works already. It is a very inclusive project reflecting UEMS proactive approach in the field of CME-CPD. Prof. Papalois encouraged NMAs to trumpet EACCME accreditation as much as possible. Colleagues from Sections and NMAs are also required to appoint back-up reviewers.

10. Working Groups Reports

a. eHealth

The eHealth group discussion was reported by Dr Caruana-Dingli (*NMA – Malta*). The discussion focused on two topics:

1. How can doctors use eHealth to make their work more efficient?
2. How can eHealth data be shared safely and effectively across country borders?

There was a very interesting discussion on electronic health records and eHealth. Portugal has an

excellent national electronic health records system which was introduced 4 years ago. It has different levels of access and patients have the right to limit access to data. Doctors input a summary of the legacy paper records as new patients are enrolled onto the electronic health records. Other countries have other systems but there are problems in some countries because systems are not compatible. Another topic discussed focused on whether patients should carry their own data on a card or pendrive. Apparently this system is used in India but Switzerland has rejected this system not only because patients tend to lose them but also because these cards often carry outdated data. The participants discussed then the disadvantage of patients who are not IT savvy can be marginalised from health services. ePrescriptions have been introduced in various countries. Sweden has a good system which is easier to use and safer than the paper alternative. Portugal's system has alerts for wrong doses and interactions. To conclude eHealth allows increased efficiency but introduces new challenges for data protection and also payment for remote services with indemnity challenges. The group agreed that eHealth systems are best when doctors are involved in their design. IT systems are a tool and not a target. It is important that IT systems are intuitive and easy to use eg. with search functions.

What is the future for this eHealth subcommittee? This is a very large field with many stakeholders including industry. Should it tackle single aspects of eHealth and prepare position papers perhaps in co-operation with CPME?

b. Continuing Medical Education & Professional Development

Dr Duffy (*NMA Ireland*) reported on the discussions held in the WG CME-CPD. The chairman of the working group Dr. Hannu Halila welcomed the participants and there was a round of presentation of the participants (n= 21). The Chair gave an overview of the 3rd UEMS Conference on CME-CPD, Amsterdam, November 12, 2016. He advised that meeting relevant documents are available on the UEMS website. The Amsterdam meeting was described as a successful venture, which was overbooked. The main theme was the new EACCME 2.0 system. This was well received. The chair called for suggestions from the floor for the 4th such meeting, due to be held in 2018. Suggestions included: eLearning, Refinements of EACCME 2.0, Alternate issues for CME credits e.g. reading papers, Examination of what's happening at EU Commission level regarding CME/CPD. A suggestion is to invite a speaker from DG Internal Market. About 2/3 member states have some form of mandatory

system currently. There was a suggestion that meeting may be 2 days rather than 1 day because there wasn't much time for informal dialogue with providers.

The chair gave an overview of the UEMS EACCME Advisory Council meeting, January 14, 2017. The main topic was introduction of EACCME 2.0. Next meeting will take place in Sofia, Bulgaria 13th Jan 2018.

On EACCME 2.0, participants reviewed and shared experiences from the new system to date

- Specialists can now get points/credits for reviewing articles
- Status of trusted providers – regular meetings with proof of good quality
- Specific comments and suggestions:
- Credits for faculty members of the events – has not yet been introduced but is under discussion.
- Suggestion to change name in the future to EACCPD as the subject material is increasingly broad and CPD is a more appropriate term than CME.

As a closing comment on this topic the chair stated the number of accreditations is now picking up, system appears to be working well.

Participants discussed the need for a register of approved events by EACCME. On the future work of the UEMS Governance Board on CME-CPD: Working groups of EACCME: The chair outlined the four planned working groups and called for suggestions:

1. Development of a training module for reviewers- participants are in favor, online module could be appropriate.
2. Conflict of Interest Disclosure forms : need for more precise questions and perhaps give examples of conflict or potential conflicts. Note the "potential" for conflicts of interest was stressed as an important area to include. Not just limited to financial conflicts.
3. Expansion of recognition of professional qualifications: What kind of activities are needed for future recognition.
4. Collaboration with other healthcare professionals: This would be a new development. Could other professionals attend some of our accredited meeting and gain credit. Slovenia – informal agreement as such- e.g. Nurses can attend medical specialist events and get recognition

The chair sought updates from participants of recent developments in the field of CME-CPD in the UEMS member countries. The meeting was of the opinion that there is some level of eagerness in Europe for revalidation. The meeting was advised that the UK recently undertook review of their appraisal system, the results are available online.

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The meeting was advised of the AMEE (Association for Medical Education in Europe) Annual Conference, Helsinki, Finland, August 26-30, 2017, which may be of interest. AMEE has more and more topics also related to specialist training and CME/CPD. Around 4000 participants are expected.
Prof. Papalois thanked Dr Duffy for his report and commented that list of EACCME accredited events already exists and will be available very soon on the new EACCME website.

c. **Postgraduate Medical Specialist Training**

Dr Z. Fras reported on the PGT working Group. Participants discussed the e-platform project and the opportunity to follow up. A clearer view on this must be defined. Participants proposed to have a session during October Council about the strategy on the future of education.
Dr Christodoulou raised concerns about the Annex V amendments, how to push the process forward.
Dr Krajewski recalled that UEMS is in constant contact with the European Commission but the EC claims that such reform is above its competence.
Prof. Papalois suggested to go forward with organization of a Conference on Future of Medical Education. It is crucial to start brainstorming and to propose ideas for such a Conference. Dr Fras will coordinate the preparation for this Conference and circulate a proposal before the end of May 2017.

d. **Quality of Patient Care & Specialist Practice in current Health Systems**

Dr Haas reported on the discussions held during the working group (report from Dr Berchicci to follow).

11. EU Affairs

Dr Fras presented the last developments on EU affairs.
Dr Caruana-Dingli (*NMA – Malta*) explained the project of Erasmus for Doctors initiated by the Maltese presidency. Several meetings took place and this project is seen as a good opportunity to harmonize standards within EU Countries. Lots of enthusiasm was shown for this project but there are some concerns about the funding. The risk of brain drain should also be taken into account. UEMS may explore ways to implement exchange of students for some specialties. Dr Kirschner (*EBCOG SG*) stated that in the Gynecology specialty, such exchanges exist and EBCOG provides some grants for short term exchanges, the problem remains the recognition of the training period abroad. Prof. Rowland (*United Kingdom*) supported the idea of UEMS initiative on this field. The proposal to

launch the Erasmus + on our own is accepted. Dr Caruana-Dingli will coordinate actions on a limited number of specialties first.

- **The proposal to launch the Erasmus + on our own is accepted. Dr Caruana-Dingli will coordinate actions on a limited number of specialties first.**

Dr Krajewski reported on the last developments on CEN: UEMS has decided not to participate at all in the CEN process to make sure this initiative is not legitimized by doctors. The methodology is unacceptable and several countries strongly opposed it. However it seems that CEN is still getting requests to set standards in medical field. The question of CEN action legality was raised by participants. P. Laffin (*NMA - UK*) stated that the BMA received information from the European Commission that the CEN action is not illegal. The question of legality has to be resolved before any action.

a. Titles for European examinations laureates

Dr Fras presented a survey launched about the titles of successful candidates for European Examinations. The majority use the title " Fellow of the European Board of…". It would be opportune to harmonize this.

- **Dr Fras will prepare Terms of Reference (including administrative arrangements) on this topic for October Council meeting.**

b. Experience jobs placement services

Dr Haas (*UEMS Vice-President*) presented the Austrian experience on job placement services. This could be an idea for UEMS to get some extra funds, but it implies great increase of human resources. Furthermore competition in this area is huge. This topic was presented for information only.

12. Next Meetings

UEMS Council Fall 2017	Brussels, 20-21 Oct. 2017
UEMS Council Spring 2018	Morocco, 27- 28 Ap. 2018
UEMS Council Fall 2018	Brussels, 19-20 Oct. 2018

UEMS Council Meeting
Tel Aviv 26/28 Apr. 2017

UEMS NMAs Representatives

	First Name	Last Name	Country
Dr.	Othmar	Haas	Austria
Dr.	Thomas	Holzgruber	Austria
Dr.	Jean-Paul	Joris	Belgium
Prof.	Nikolay	Gabrovsky	Bulgaria
Dr.	Nada	Cikes	Croatia
Prof.	Nicolas	Christodoulou	Cyprus
Dr.	Carl Johan	Erichsen	Denmark
Dr.	Klaus Peder	Klausen	Denmark
Mr.	Lars	Strunge	Denmark
Dr.	Mikko	Pietilä	Finland
Dr.	Jean-Paul	Jacques	France
Dr.	Hans-Peter	Ulrich	Germany
Dr.	Charampoulos	Koulas	Greece
Dr.	Konstantinos	Koumakis	Greece
Dr.	Andreas	Papandroudis	Greece
Prof.	Béla	Melegh	Hungary
Prof.	Trevor	Duffy	Ireland
Ms.	Vanessa	Hetherington	Ireland
Dr.	Naishadh	Patil	Ireland
Dr.	Giorgio	Berchicci	Italy
Dr.	Piero attilio	Bergamo	Italy
Dr.	Salvatore	Ramuscello	Italy
Dr.	Renato	Mancuso	Italy
Ms.	Michelle	Glekin	Israel
Prof.	Leonid	Eidelman	Israel
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