



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

1. Introduction

It is a great honour for me to submit my first report as Secretary General (SG) of the UEMS. I would like first to pay tribute to my predecessor, my good friend and distinguished Colleague Dr Edwin Borman and express my respect and admiration for all Colleagues who have held this post in the past.

I have served the UEMS for almost 12 years and I have always been impressed and humbled by the enthusiasm, commitment, professionalism and efficiency of the distinguished Colleagues serving our organisation. The past year was no exception and we all proved that, when united and working together, we can overcome the toughest of challenges and open new avenues for our profession, always for the benefit of our patients.

The Council Meeting that was planned to take place in Brussels in April 2016, was most unfortunately cancelled due to the major problems posed by the terrorist attacks. The UEMS Extended Executive Committee (EEC) took this decision after consulting with the National Medical Associations (NMAs)- Members of the UEMS and our Sections/ Boards, Multi-Disciplinary Joint Committees (MJC)s and Thematic Federations (TFs)- the UEMS Bodies. We believe that it was the right decision. The fact that we did not have a Council meeting in April, does not mean that the activity of the UEMS stopped! On the contrary! As you already know through the frequent communication you have from the UEMS Executive, the UEMS EEC and the UEMS Office, the last 12 months have been very productive and this is what we are going to analyse in this report.

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I would like to thank all the NMAs and UEMS Bodies for submitting their reports in a timely and constructive way and of course our Team in the UEMS Office for providing all the relevant data.

We have decided that the SG report will focus on the analysis of our activities while the report by our Chief Executive Officer (CEO) (which will be circulated along with the SG report) will give facts/ data related to our activities.

2. The election and mandate of the Warsaw Council meeting

The election that took place at the Council Meeting in Warsaw offered a great mix of experience and fresh blood in the EEC.

Colleagues who attended the Council Meeting in Warsaw gave to the new EEC a very clear mandate that can be summarised as follows:

- Improve the infrastructure of the UEMS
- Improve the financial situation
- Utilise the Domus Medica Europea (DME)
- Initiate consultation for the future structure of the UEMS
- Proceed with the EACCME 2.0 project
- Improve the process for the review of the UEMS European Training Requirements (ETRs)
- Define our goals and agenda for the future

I want to assure all Colleagues that all members of the EEC have worked tirelessly to realise this mandate. The collaboration of the members of the EEC is excellent and the communication frequent and productive including regular, well-structured and minuted teleconferences. We have open, honest and constructive discussions in a collegiate and

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democratic spirit; we strongly advocate this model of work across the UEMS. Prompt and open communication solves most of the problems.

The members of the UEMS EEC are also regularly invited to attend meetings of the NMAs, the UEMS Bodies, meetings of other European Medical Organisations (EMOs) or meetings related to medical professional activities across Europe. We consider this as a most important element of our work. Our Liaison Officer is responsible for carefully reviewing the big number of invitations we receive and recommend to the EEC those that we need to attend based on the following criteria: need to support Colleagues working for the UEMS, opportunities to advance the work and influence of our organisation, affordability taking into account our overall finances. All members of the EEC are part of the decision making process as to what meetings we attend. The members of the EEC who attend meetings, submit a report and update over teleconference the EEC. It is a most valuable experience that feeds into our strategic thinking as well as day to day to work.

We want to emphasize that we are always happy to be contacted and also always available and ready to support your hard work on the ground for the UEMS.

3. The UEMS Office in the DME

The appointment of Mr Bertrand Daval as CEO advanced significantly the professionalism and efficiency of the UEMS Office. Our people are our most valuable and most cherished resource. As you will see in his report, we have now in place a very robust and transparent process for the appointment of the members of our staff. We were pleasantly surprised to see that for every position we have advertised, we had a very big number of high calibre applications. The fruits of this excellent selection process can be seen in the top class and efficient work of our staff. We are immensely grateful to them.

In the report of the CEO, you will see in detail the employment status and the day to day work of every member of our staff. We have also put in place a process of annual professional appraisal of the members of our staff coupled with a specific plan for their overall professional development; this will clearly contribute in the advancement of the work of the UEMS.

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The new model that we have introduced for offering administrative support to the UEMS Bodies through our Office in the DME has been very successful, the Sections of Surgery and Radiology being two characteristic examples. We want to strongly encourage all UEMS Bodies to consider transferring their administration to the DME; it is of the highest quality, efficient and financially advantageous.

4. The DME

Although the history of the decision to buy and refurbish the building of the DME has been discussed many times, it is worthwhile summarising again some facts, especially for Colleagues who joined our organisation recently. The UEMS had a very healthy financial reserve but as a non-for-profit organisation operating under Belgian law, the UEMS cannot act as a “bank” accumulating cash. The financial resources of our organisation have to be invested in a way that advances the scope and work of the UEMS. It was decided unanimously by the NMAs to proceed with the investment of buying and refurbishing the DME aiming to use it as a hub of networking and collaboration of medical specialists across Europe. Despite the fact that the process was carefully planned, once construction started, the architect informed the EEC that the refurbishment needed was much more extensive than anticipated. Practically, only the front of the building was to be preserved and everything else had to be constructed from scratch. Inevitably, this increased the cost significantly and put the organisation under a lot of pressure financially.

With the approval of the UEMS Board, the UEMS had to take some significant loans to deal with those challenging circumstances. In addition, a series of cost cutting measures were put in place that have been described in detail in the reports of my predecessor; I will only characteristically mention the decision of the EEC to stop any remuneration of its members for the work they do for the UEMS. In addition, the EEC had to take the most difficult decision to delay the payment to the National Accreditation Authorities (NAAs) and the Sections of their share of the fees for providing national and specialist review respectively for the applications for accreditation by the European Accreditation Council for Continuing Medical Education (EACCME). Their support was truly appreciated and helped immensely to overcome the financial challenges. They have our most sincere gratitude.

Despite the great challenges, the DME is now up and running and is running well! We are delighted that all the space that could be rented for office use has been rented. Our

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most recent tenant being the European Office of the National Health Service (NHS) of the UK. Renting all the available space of the DME is a major achievement especially considering that almost half of the available office space in Brussels is not rented.

Furthermore, the DME is getting more and more popular as a venue for business meetings, exams, conferences etc. for the UEMS Bodies and beyond. The report of the CEO demonstrates the clear increase of the income generated from the utilisation of the DME in 2016 compared to 2015. However, we believe that we can do much more and our NMAs and all UEMS Bodies are strongly encouraged to use the DME for their functions; it is excellent service to them in very affordable prices and supports the financial status of the UEMS.

We are really pleased to sense that the DME becomes gradually part of the UEMS culture as well as part of the culture of the medical profession in Europe. Winston Churchill said “... first we shape our buildings, then they shape us...”. This is our ultimate aspiration for the DME!

5. Finances

The details regarding our financial status (budget, assets, expenditure, income, cash flow, internal fund) will be forwarded to you in separate documents. I would like to take the opportunity to highlight in my report the following:

- The UEMS has been over the last few years an organisation rich in assets but cash flow challenged. Thanks to the cost cutting schemes that have been put in place, the increase of the income coming from the utilisation of the DME as well as from the EACCME fees and the support of the NMAs (advance payment of membership fees) and the UEMS Bodies (delay in payment of EACCME fees), we are now on much more solid ground financially compared to what was the situation a year ago.

- We have a healthy cash flow situation to serve all our obligations and activities and we monitor very tightly the cash flow status of the UEMS and all UEMS Bodies.

- We have honoured the monthly payments of all our loans without any problems that speaks volumes for the probity and credibility of our organisation.

- We have repaid in total and in time our short term loan.

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- We have created the Internal Fund (IF). The IF serves like an internal UEMS “bank”. In the IF we have placed the delayed EACCME fees related to each UEMS Body as well as any additional voluntary contributions that UEMS Bodies have made to the IF. We enhance the funds of each UEMS Body in the IF by 2% per year and we send detailed reports to the UEMS Bodies regarding the status of their funds. It is most important to emphasize that from the volunteer contributions of the UEMS Bodies to the IF we have used only a very small amount. UEMS Bodies can continue to have their funds in the IF enhanced by 2% every year or options will be offered to them to gradually return their funds.

- We have emphasized on many occasions that if a UEMS Body is facing financial difficulties, Colleagues are strongly encouraged to communicate with the UEMS EEC and we will take all necessary measures to support them.

- As it is our practice, we had an external and internal audit of our finances. The audit reports highlighted our good practice but also emphasized the need to get the financial management of the UEMS to the next level. We are fast approaching the 10 million Euros mark for our overall assets and this will change our status from medium to big size non-for-profit organisation operating under Belgian law. We need to have much more professional and efficient management of our finances.

In response to the comments by the auditors, the UEMS EEC has decided to outsource the accounting services of the UEMS to a professional company. The company was carefully selected from a variety of options and will operate partly from their offices (which are very close to the DME) and partly through one of their employees based at the DME. The overall cost of accounting services for the UEMS will stay the same. The new model will help us significantly with our day to day accounting as well as with our budgeting and financial planning. The new scheme is already in place and working well.

Finally, in the UEMS financial world, our Treasurer has put together a new Financial Committee (FC) reflecting the three elements of our organisation: UEMS EEC, NMAs and UEMS Bodies. The FC will play a crucial role in the strategic planning and day to day monitoring of our finances and I believe that we will see the fruits of this work soon.

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6. EACCME

EACCME is a flagship project for the UEMS making us the dominant force of specialist accreditation in Europe. The agreements we have with the American Medical Association (AMA) and the Royal College of Physicians and Surgeons of Canada (RCPSC) for mutual recognition of credits further enhances the international status of EACCME.

Once I took over the post of SG, I made EACCME my top priority.

With the precious collaboration and support of Ms Nathalie Paulus and Ms Patricia Demeulemeester, we have cleared a back log of outstanding issues and have put an efficient system in place aiming to deal with all matters within a few days the latest. I am most grateful to both of them for their superb work. Never hesitate to bring to our attention any issues related to EACMMME work and we will do our very best to deal with them promptly.

The overall EACCME activity is strong (please see the relevant table in the CEO report) and on the 5th of October 2016, the number of new applications for accreditation of live events is up by 7% compared to the same period of time in 2015. What is equally important is that we are being approached by more and more providers asking us to consider for accreditation very impressive educational activities which are, strictly speaking, beyond our current accreditation portfolio. This experience clearly fed into the overall development of the EACCME 2.0 project.

EACCME 2.0 is a most significant milestone in the field of specialist accreditation in Europe. The basic elements of the project have been discussed and approved in principle by the EACCME Governance Board and the EACCME partners (NAAs, UEMS Bodies and European Specialist Accreditation Boards-ESABs).

The actual development of the project was a huge piece of work shared between the UEMS EEC and the EACCME Governance Board. I am truly grateful to all Colleagues who contributed over the past year to develop the documents related to EACCME 2.0

The EACCME 2.0 documents have been circulated to all members of the UEMS Family in a timely way and with an open invitation for comments that keep coming even at the time I write this report! They are all very constructive and show the great interest generated by EACCME 2.0

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I would like to take this opportunity to highlight the basic new elements of EACCME 2.0:

- The whole process of application-review-accreditation will be much faster and much more efficient.
- The EACCME process will be supported by a brand new IT platform which will be fit for purpose and will make justice to the scale and complexity of the project.
- Our accreditation portfolio will expand to embrace a much wider spectrum of educational material that reflects how specialist medical education is provided in the modern world.
- While we continue to categorically oppose provider accreditation, we are enhancing the status of Trusted Provider. For those providers, the process of application-review-accreditation will be as robust as ever but the process will be much faster.
- We introduce the process of recognition of CME-CPD activities beyond live events and e-learning material.
- We give a lot of emphasis on the quality control process of the accredited events to ensure that what has been submitted to EACCME “on paper” is what actually happens when the event takes place (live events) or goes live (e-learning material).

We sincerely hope that EACCME 2.0 will go live as of January 2017. Its implementation will be of course carefully reviewed and any adjustments will be made when needed.

We have signed new agreements with the European Society of Radiology (ESR) and the European Society of Cardiology (ESC) (with the participation of course of the Sections of Radiology and Cardiology respectively) for the specialist part of the review of relevant applications submitted to EACCME for accreditation. The implementation of both agreements is progressing really well.

We have also decided to formally stop our collaboration with the European Board of Accreditation in Cardiology (EBAC) for the very serious reasons that were discussed at the Council meeting in Warsaw; in a nutshell totally unacceptable behaviour of EBAC towards the UEMS with EBAC owing the UEMS a very significant amount of money. A letter explaining the details regarding this issue and our decision to stop our

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collaboration with EBAC has been prepared by our legal team and will soon be forwarded to our NMAs, UEMS Bodies and EACCME partners.

I will finish the part of the report related to EACCME by mentioning our upcoming EACCME Conference in Amsterdam on the 12th of November 2016. The event is almost fully booked! The programme aims to facilitate an in depth discussion of all elements of specialist medical accreditation in Europe and around the world; special emphasis of course will be given to EACCME 2.0 while we will also start exploring EACCME 3.0! We are looking forward to seeing you in Amsterdam!

7. Future UEMS Structure

The mandate of the Council meeting in Warsaw was very clear: the voice and influence of the UEMS Bodies have to be amplified to reflect the great work that they are doing for the organisation but also the fact that their funds have supported the UEMS through difficult times.

As agreed in Warsaw, I chaired a working group with members from the UEMS EEC, the NMAs and the UEMS Bodies. Over the last year, a lot of proposals were explored, working documents were produced and there was also a lot of communication over e-mail and teleconferences as well as consultation with the broader UEMS Family.

The final document of this work has been circulated to you in a timely manner and the comments we have received have been very positive.

The basic elements of the proposal for approval at the Council meeting are as follows:

- The UEMS is a non-for-profit organisation operating under Belgian law. Our legal team reviewed the law most carefully and they were crystal clear: under Belgian law for organisations like the UEMS only the members (for the UEMS the NMAs) have voting rights. Therefore, any proposals have to be strictly within this framework.
- We have put in place robust terms of reference for the election of the Chairs of the three Groupings of Sections and we propose that the Chairs of the three Groupings will be part of the UEMS EEC. This way, they will be part of the day to day management and decision making process of the UEMS.

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- We propose the creation of an Advisory Board where the members will be the Presidents of the UEMS Sections. The Advisory Board will be voting for matters relevant to the Sections discussed at the Council prior to the vote of the NMAs. The NMAs will take into consideration the vote of the Advisory Board prior to casting their vote. In case there is discordance of the result of the vote of the Advisory Board and that of the NMAs, the UEMS EEC will facilitate a dialogue aiming to reach consensus. Following that, a second vote will take place for the same topic. In case there is again discordance of the outcome of the vote of the Advisory Board and that of the NMAs, this time the vote of the NMAs will be the decisive and binding one. This way, the UEMS Sections have a strong say in the process but the process does not go against the law allowing the NMAs to have, in case of disagreement, the final word.

We believe that this is a very positive development for the UEMS which is in accordance with the law, enhances the influence of the Sections and facilitates collaboration between the Sections and NMAs. It is the much needed evolution of our organisation.

8. ETRs, Assessments

The UEMS ETRs are one of the most important contributions of our organisation in the field of post graduate training in Europe and beyond. The preparation of the ETRs requires a very wide consultation and an enormous amount of work and their review by the NMAs and UEMS Bodies and their eventual approval by the UEMS Council is a complex and demanding process.

A few years ago, an informal Committee was put in place to help Colleagues to prepare their ETRs. Based on the experience gained, we have put in place formal terms of reference and we have issued an open invitation to the NMAs and the UEMS Bodies to nominate members. This is coupled with a very strict time line for the review process of the ETRs prior to the discussion at the UEMS Council. All is in place now for the new scheme to function after the upcoming Council meeting.

The UEMS assessments for accreditation of trainees and training centres are gaining popularity and many congratulations to all Colleagues who work very hard to promote those great projects. We also want to highlight the great work of the UEMS Network of Accredited Skills Centres in Europe (NASCE), a new but very successful UEMS MJC that paves the way for the accreditation and collaboration of modern skills centres. Their

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recent most successful Congress in Dublin is a characteristic example of the quality of their work.

Last but most certainly not least, we need to express our deep appreciation for the UEMS Council of European Specialist Medical Assessments (UEMS-CESMA) for their superb work in appraising the UEMS assessment projects as well for their work in exploring new avenues for the content and format of those assessments.

9. UEMS 2026

At the Council meeting in Warsaw there was also agreement that we will proceed with a consultation process that will allow us to define the UEMS scope and work for the next 10 years.

We have received a good number of replies but we would like to have many more and we will therefore invite again Colleagues to submit their input.

A summary of the most interesting proposals that we have received so far are:

- Closer collaboration in Europe in the field of the organisation and accreditation of specialist training
- Post-CCT training and accreditation, appraisal and revalidation
- Work force planning
- Support Colleagues to develop their CME-CPD portfolios in the context of financial challenges and more government involvement and regulation
- New horizons for CME-CPD in Europe
- The balance between primary, secondary and tertiary care.
- Closer and more constructive collaboration of the EMOs
- Targeted and effective lobbying in the EU institutions

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These are clearly massive common challenges that demand common answers and, following sound analysis, will eventually form our agenda for the future.

10. In conclusion

I believe that all the members of the UEMS Family have worked very hard over the last year to honour and realise the mandate of the UEMS Council in Warsaw in October of 2015.

I also believe that what was presented in this report and the linked report by our CEO show very clearly that, without losing focus even for one moment and without underestimating the big challenges that we still have to deal with, we have made a lot of progress with palpable results and some very exciting prospects to discuss next week in Brussels.

We must always be very proud of our identity as an EMO that offers real services for real people in real life.

12th October 2016
Professor Vassilios Papalois
UEMS Secretary General