



**UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS**

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D 0439 EN FINAL

**Report of the Meetings of
UEMS Board & Management Council
Lisbon, 15th -16th October 2004**

Board

*Meeting held in the Hotel VIP Executive Art's (Lisbon)
on 15th October 2004 (8:30-9:15)*

1. Current state of the accounts of revenue and expenses up to 30.06.2004

Dr. Lamy (*Treasurer*) presented the accounts up to 30 June 2004 (D 0433).

Based on the projections made, he proposed to freeze the subscription fees for full active members.

Dr. Lamy also called on the Turkish, Azeri (2nd year), Italian and French (3rd year) delegations to pay their outstanding fees.

Dr. Halila (*President*) pointed out that the question of France should be raised, and a decision taken during the Management Council ("MC") meeting. He also indicated that despite efforts and contacts made within the Sections no solution was obvious. Therefore the Executive Committee ("EC"), with extreme regret, proposed the dismissal of the French delegation to UEMS. The EC also proposed that French representatives to the Sections would keep their mandate within the Sections until June 2005.

Dr. Gruwez (*Belgium*) underlined the internal problem of the representation of medical specialists in France.

Dr. Greff (*France*) clarified the controversy existing within UMESPE on the efficacy of a membership to UEMS. Dr. Greff also defended their view to insist on entrance of UEMS to CEPLIS, which he considered important especially regarding a possible participation to the European Social Dialogue. He also insisted on the possible link between the repartition key and voting rights.

Dr. Antypas (*Greece*) stressed the need to receive an official response from the French delegation on the situation.

Dr. Borman (*UK*) mentioned the satisfaction of the UK delegation on the way the budget was dealt with in UEMS. However he regretted the problem that had occurred with regard to the subscription of a founding member organisation of UEMS. He also pointed out the difficulty it represented for UEMS, especially at the time of enlargement of its membership but felt that the rules are the same for all members and that making an exception would create the wrong impression.

2. Approval of the 2005 draft budget (D 0434)

Dr. Lamy presented the draft budget for 2005 and quoted that the amount that could be expected from CME accreditation was equivalent to the French subscription.

It was proposed from the floor to work solely in English if France is dismissed from UEMS thus saving translation costs.

Dr. Lamy gave an idea of what the subscription fee might amount to for the ten new full active members. He also pointed out that the work undertaken by the EC in order to determine the repartition key was being delayed by the lack of data, especially with regard to the number of medical specialists in some countries. If delegations did not respond, then other sources would have to be used.

- ***The budget for 2005 was accepted by all except (Against: 1; Abstention: 1).***

Management Council

*Meeting held in the Hotel VIP Executive Art's (Lisbon)
on 15th October 2004 (10:00-17:00) and 16th October 2004 (9:00-13:00)*

Dr. Halila (*President*) welcomed all participants and thanked the "Ordem dos Medicos" (Portuguese Medical Association) for hosting this meeting in Lisbon. Dr. Halila also welcomed the new full active members as well as new delegates and introduced Mr. Destebeq (*Assistant to SG*). Dr. Halila also congratulated the Luxembourg (100 years) and Belgian (50 years) member organisations on their recent anniversaries.

1. Approval of the minutes of the Management Council meeting of 20 March 2004

Dr. Gruwez (*Belgium*) discussed the point of the valid recognition of Board exams granted by UEMS. Dr. Harvey (*Liaison Officer*) emphasised the position of the legal status of this recognition.

On the point on Vascular Surgery, Dr. Gruwez proposed to change "postponed" to "taken".

- ***The Minutes were unanimously approved with the changes proposed.***

2. Report from the Secretary-General (D 0432)

Dr. Maillet (*Secretary General*) reported on his activities. These notably include the activities of UEMS with regard to the draft Directives on the Mutual Recognition of Professional Qualifications and the Internal Market of Services, the participation of UEMS to the European Health Policy Forum, the revision of the Statutes and Rules of Procedure. Dr. Maillet also reported on his participation to the meetings of the Sections and Boards as well as the developments regarding EACCME.

3. Membership

Dr. Halila mentioned the automatic recognition of the nine new full active members following the enlargement of the EU. These organisations (*Cyprus, Czech Republic, Estonia, Hungary, Latvia, Malta, Poland, Slovakia and Slovenia*) were welcomed by the MC. UEMS now accounts for 27 full active members (Lithuania being the only exception).

Dr. Borman (*UK*) remarked on the importance of this event not only in terms of representation but from the political aspect. He also outlined the contribution these countries would bring to UEMS.

The decision concerning Bulgaria was postponed pending further information on their application.

The floor was given to the new member organisations: Dr. Jedrzejczak (*Poland*), Dr. Magyari (*Hungary*), Dr. Fras (*Slovenia*), Dr. Stencl (*Slovakia*), Dr. Skrha (*Czech Republic*) and Dr. Fava (*Malta*) acknowledged and praised the role and activities of UEMS to represent medical specialists at European level, especially regarding CME/CPD. They also expressed their desire to take part in the UEMS political process.

4. Statutes and Rules of Procedure of UEMS

Dr. Halila informed the MC of the changes to the Belgian legislation concerning non profit-making international associations. He also mentioned that the time schedule would not be as restrictive as it had first been anticipated (extended to June or December 2005). Mr. Destrebecq commented on the main possible changes to be made. Dr. Halila indicated that the names of UEMS bodies will be reassigned and even changed in some cases. This will be examined by the EC in December.

According to the current statutes, if changes are made, the new draft would have to be presented to the delegations in mid-January.

5. UEMS Specialist Sections

5.1. Meeting of the Presidents and Secretaries of the UEMS Sections and Boards of 15 May 2004 (D 0425)

The question of the legal status of European examinations was raised. The need to assess not only knowledge but also training was discussed. It was also suggested reassessing the way national assessment was made.

Dr. Giger (*Switzerland*) was disappointed to receive such a poor response to the questionnaire sent out.

Dr. Semple (*Internal Medicine*) mentioned the difficulties encountered in the rules of UEMS regarding examinations.

Dr. Borman warned the MC members of the importance of this issue both for the MC and the Sections. He remarked on the attempt to facilitate the free movement of medical specialists in Europe and guarantee the quality of care. According to him, the difficulty arises from the legal status of these examinations. Indeed, there is no legal requirement for specialists to take these exams.

Dr. Gruwez (*Belgium*) indicated that this should be discussed within the WG of PGT. He also pointed out the effectiveness of examinations for the Sections and suggested that these should be seen as a bonus for specialists.

Dr. Bredin (*Ireland*) insisted that UEMS should certainly not undermine the importance of these examinations.

Dr. Harvey explained that while no-one in the EC or MC sought to undermine the efforts in the Sections and Boards to improve and recognise quality in their Specialty, it was a matter of European law that the only legal requirement to practice as a specialist was the National specialist qualification. Any extra recognition could only be a personal achievement but carried no legal status which must be explained to all candidates in advance.

Dr. Frasn (*Slovenia*) recalled that his WG examined this issue a year ago and informed the MC that a document had been drafted and could be discussed at a later meeting.

5.2. Report from the Sections' representatives

Dr. Semple (*Internal Medicine*) reported on the interest for clarity of representation in his Section. However, he also mentioned that no specific request was raised.

Prof. Pinheiro (*Public Health*) informed the MC on child neurology. Regarding ophthalmology, recommended training has been raised from four to five years. He also mentioned the change of name from the Section of Biopathology and the creation of a Section of Haematology (See below).

Dr. Gollnick (*Dermatology*) would intervene in the point 5.3.

Dr. Greenhaghl (*Surgery*) informed the MC on the tendency to separate the different specialties in surgery. He mentioned the proposal to create a federation of surgical specialties in order to keep them together. Dr. Greenhalgh also pointed out the shortage of surgical specialists and the maintaining of irrelevant exams.

5.3. New statutes of the UEMS Section and Board of Dermatology and Venereology

Dr. Maillet outlined the need for the Sections to have their statutes endorsed by the MC.

Dr. Gollnick informed the MC that his Section has adopted its new statutes based on the statutes and ROP of UEMS.

The question of the length of the training was raised. Dr. Bennie (*UK*) mentioned that UEMS cannot set down rules on the minimum training period as was asked in the letter of request.

It was recalled that the statutes and ROP of UEMS serve as a basis for the statutes of Sections.

Dr. Twomey asked for a simpler form of transfer of information.

- ***The new statutes of the Section and Board of Dermatology and Venereology were approved (Abstention: 1).***

5.4. Request from the UEMS Section of Medical Biopathology to change its name

Dr. Halila informed the MC of this Section's request, namely "Medical Biopathology, Microbiology, Haematology Clinical Chemistry and Immunology".

Dr. Halila informed the MC of the statements in the statutes. According to the EC, the notion of third-party consultation needs clarification in the future as was now considered as external organisations and institutions. The EC proposed therefore to treat the change of name of UEMS Sections as an internal matter.

Dr. Harvey outlined the way abstentions were considered within CPME and proposed the introduction of a definite vote ("yes" or "no") in the new statutes.

- ***The change of name is approved (For: 15; Against: 2; Abstention: 6).***

5.5. Request from the UEMS Section of Ophthalmology to have the definition of “the Medical Act” officially recognised by the European Commission and/or European Parliament (D 9640)

Dr. Harvey recalled the background of this initiative: the increasing attempts from paramedical professions to become the first point of contact with a patient and give treatment. Paramedical professions should not be entitled to make a medical diagnosis (depending on history, tests, diagnosis, treatment). This would increase the risk of inappropriate treatment. Dr. Harvey pointed out that this definition would contribute to promote the title of “Doctor” in many countries, such as the UK.

- ***It was agreed to ask the Sections and Boards for their comments. A mandate was also given to the Working Group on Specialist Practice to draft a proposal for a better wording to be presented at the next MC Meeting in March 2005.***

5.6. Request for approval on a position paper concerning psychotherapy by the Management Council (D 0436)

Dr. Pylkkänen (*Finland*) introduced the paper of the Section of Psychiatry, defending the practice of psychotherapy compared with paramedical professions. He also insisted on the need to set guidelines

Dr Bennie mentioned the quality of the work carried out by this Section and the importance of this issue which is strongly related to specialist practice. He also asked for some clarification on the interpretation of the wording.

- ***The position paper was unanimously approved.***

5.7. Request from the Polish Chamber of Physicians to create a UEMS Section of Haematology

Dr. Jedrzejczak mentioned the importance to have clearly defined Sections. He recalled that this proposal had been already rejected several times. He insisted on the distinction between the Section of Biopathology and that of Haematology.

Dr. Halila stressed that the Sections should be named according to the Doctors’ Directive (“Haematology” or “General Haematology”).

Dr. Twomey insisted on the need to collaborate with the Sections of UEMS in order to get their views before taking any decision on this.

- ***It was agreed to ask for the comments of the Sections of Internal Medicine, Biopathology, Surgical Pathology and Radiotherapy. The notions of “Clinical Haematology” and “Laboratory Haematology” should also be clearly distinguished.***

5.8. Upgrading of the Division of Vascular Surgery into a Section of Vascular Surgery

Dr. Halila explained the background to this request. It was also considered that a Federation of Surgery, including all the surgical specialities, should be constituted.

Dr. Liapis (*Vascular Surgery*) recalled the history of the speciality of Vascular Surgery, especially the difficulty met in constituting a Section due to lack of recognition within the EU.

Dr. Polonius (*Surgery*) mentioned that the Section and Board of Surgery are concerned about establishing separate Sections and Boards on surgical specialities. (See Annex to these Minutes)

Dr. Semple highlighted the possible antagonisms between Vascular Surgery and Surgery. According to him, Internal Medicine is also concerned by this question as Vascular Medicine can also be considered as a subsection of Internal Medicine.

Dr. Halila informed the MC of the number of countries requesting the aforesaid creation. A 2/3 majority was required on this matter.

- ***The creation of a Section of Vascular Surgery was accepted (For: 16; Against: 2; Abstentions: 5).***

6. Professional recognition Directive (D 0426)

Dr. Halila reported on his paper showing which specialities might be affected in the Directive in question. He stressed the importance of the decision of the Council of Ministers and highlighted the category mentioned as “Annex VI” representing the specialities needing mutual agreement to be recognised. Dr. Halila pointed out the official position of UEMS (“two or more”) and asked whether the MC was ready for compromises.

Dr. Borman emphasised the importance of this document in the light of the lobbying potential of UEMS. He considered that the activities of UEMS with regard to this issue justify the representation of medical specialists at EU level.

The 2/5 principle was also discussed. The need to ensure quality requirements was highlighted. Even though UEMS should not leave its official position (“two or more”), some flexibility might be called for.

Dr. Fabian (*UEMO*) informed the MC that UEMO has adopted a policy statement on the recognition of GPs as specialists in family medicine.

Dr. Halila informed the MC of the participation of UEMS in the consultation mechanisms to be set up by the European Commission in this respect.

- ***It was agreed to maintain the official position of UEMS (“two or more”). The MC also recognised the need for compromise when appropriate.***

7. European political issues

7.1. *European Health Policy Forum*

Mr. Destrebecq reported on his participation to the Health Policy Forum. Dr. Grewin (*CPME*) commented on the importance of this Forum to influence the policy-making process as well as the new EU Health Strategy.

7.2. *Draft Directive on Services*

Dr. Halila informed the MC of the background to this Directive in the framework of the Lisbon Strategy. He highlighted the inclusion of healthcare services within this proposal. Dr. Halila mentioned the participation of UEMS in the questionnaire on the common values of the regulated professions. Mr. Destrebecq presented the possible developments that could come out of the answer of UEMS.

Dr. Grewin informed the MC of the work of CPME working groups on this issue. A position will be proposed and a decision is expected for their November meeting.

Dr. Halila mentioned some controversial statements with regard to the medical profession, notably the principle of the country of origin.

Regarding the questionnaire, Mr. Koutroubas (*CEPLIS*) explained the definition of the liberal professions and the difficulty to come to terms with the French definition of "profession libérale". He also informed the MC on the evolution of the debate on this issue. He pointed out that some MEPs were considering the exclusion of healthcare services from this draft Directive.

Dr. Borman mentioned the concern of the UK delegation on this matter. He emphasised the importance not to confuse business services with healthcare in order to safeguard the quality of care. Therefore he proposed that the MC takes a position on this.

Mr. Koutroubas said that some statements in this Draft Directive were not clear enough and needed to be revised. He also referred the Report of Commissioner Monti on the regulation of liberal professions.

- ***It was agreed to draft a document summarising the comments of all delegations to be presented at the next MC Meeting in March 2005.***

7.3. *Draft Directive amending the Directive concerning the organisation of Working Time*

Dr. Tiainen (*PWG*) reported on the main questions raised by this issue: individual opt-out, reference period, definition of working time and compensatory rest. She also insisted on the need to recognise onside on-call as working time. Dr. Tiainen mentioned that there was little space for negotiations and the position of PWG was the best possible.

Even though Medical Doctors cannot be considered in the same way as other workers, the analysis of PWG seemed too systematic to some delegations. The lack of practical consideration in this issue was raised by Dr. Gruwez although it was recognised that any employed doctor, not only trainees, were covered by this Directive and might discriminated against.

Dr. Costa (*Vice-President*) informed the MC that FEMS has adopted a policy statement on this issue.

- ***It was agreed that UEMS should also adopt a position on this issue. A draft will be presented at the next MC Meeting in March 2005.***

8. Associated European Medical Associations

8.1. Report from the Liaison Officer (D 0428)

Dr. Harvey reported on the CPME meetings of March and September. The main issues are the Draft Directives on Services and Working Time. CPME will also organise two important conferences on the future of the European Medical Organisations (“EMOs”) (April 2005) and CME/CPD (Spring 2006). Dr. Harvey also pointed out the new CPME working group on the declining popularity of medical studies as well as the recent statement on the Bologna Declaration (seeking to divide the medical degree into 2 parts: Bachelor after basic science and Master after completion of clinical studies).

8.2. Conference on the future of EMAs

Dr. Grewin presented the conference in question to the MC. It aims to:

“1. For National Medical Associations, who are members of European Medical Organisations, to meet and learn from and about each other’s organisations, views and visions on how to best meet demands of national members for an efficient and strong voice of the medical profession in Europe.

2. Best ways of organising ourselves and the work on the European level.

3. We are not to formulate precise solutions nor decide on this. The conference has no formal authority to decide on these matters, but

4. Instead to give food for thought and reflection for all those who take part on how they want to organise their European work in the future.” (Reference: CPME 2004/097 Rev2 en)

Dr. Halila recalled the specificity of UEMS due to the background provided by its Sections and Boards (39). Concerns were also pointed out notably concerning the mechanism of invitation.

8.3. Reports from EMAs

Dr. André (*UEMO*) pointed out the collaboration between UEMO and CPME and the new publication by UEMO in association with Medical Futures. In the framework of the Draft Directive on the Mutual Recognition of Professional Qualifications, he also mentioned the position of UEMO to consider GPs as specialists and delete Title IV (specific to General Practice).

Dr. Costa reported on his recent meeting of AEMH.

Dr. Goeggel (*PWG*) mentioned the recent issues examined by PWG: the impact of enlargement; the reduction of working time and the take-over of Junior Doctors’ activities by newly created professions; the funding of PGT.

9. UEMS Compendium 2005

Dr. Harvey emphasised the work in progress and thanked all those who had sent in contributions. Some were still outstanding but time was now urgent if publication is to be realised for a March 2005 edition. Dr. Halila insisted on the need to have the issue as comprehensive as possible.

10. UEMS website

Dr. Theuvenet (*Vice-President*) presented the projects concerning the homepage of delegations and Sections-Boards on the website. He insisted on the importance to publish unified documents. He was warmly applauded for his efforts.

11. Reports from the Working Groups

11.1. Post-Graduate Training

Dr. Fras (*Chairman, Slovenia*) presented the main activities of his working group. Concerning PGT assessments, he called on the delegations to answer the questionnaire before 15th November 2004. A position paper will be drafted for the MC Meeting of October 2005. He also proposed to organise a conference with experts on PGT, possibly in March 2005 prior to the MC Meeting. With respect to Update of the Chapter 6 of the UEMS Charter on Postgraduate Training, a reminder letter will be sent to the Sections and Boards asking for up-to-date information.

11.2. Continuous Medical Education and Continuous Professional Development

Dr. Rasmussen (*Rapporteur, Denmark*) pointed out the recent activities of his working group.

Dr. Borman (*Chairman*) presented the final position paper drafted by the working group "Promoting good medical care" (D 0349). The importance of this document was acknowledged but the need to add a glossary was of primary importance due to the complexity of this issue. Work on a glossary is already underway and could also be subject to collaboration with the working group on PGT.

- ***The document on "Promoting good medical care" was unanimously adopted.***

11.3. Relations with the Sections and Boards

Dr. Bredin (*Rapporteur*) drew attention to the fact that the meetings of this working group and the system of groups contributed to improved relations with the Sections and Boards. He also pointed out the questions of the representation and legal status of the Sections and Boards.

Dr. Brenning (*Chairman*) mentioned the improvements in the work method due to the participation of representatives from the Sections and Boards.

Dr. Fras suggested organising a joint committee with the Sections and Boards prior to the March MC Meeting.

11.4. Guidelines Internal Network (GIN)

Dr. Theuvenet remarked on the lack of reaction regarding this issue and his intention to draft a position paper for the MC Meeting in March 2005. In this framework, he called on the members of UEMS to collaborate in the drafting of this document.

11.5. Specialist Practice in Current Health Care Systems

Dr. Greff (*Chairman*) pointed out the document drafted by his working group on European healthcare systems, which will be added to the Compendium. He also talked of the project launched by Dr. Zilberman in order to compare the cost of several frequent medical acts.

- ***A mandate was given to the working group on Specialist Practice to analyse the contributions of the Sections and Boards on the definition of the medical act.***

12. Treasury

12.1. Current state of the accounts of revenue and expenses up to 30.06.2004

Dr. Lamy (*Treasurer*) presented the state of the accounts up to 30 June 2004 (D 0433).

The EC will present the outcome of its work with regard to the new repartition key next time. Dr. Lamy commented on the lack of data from delegations regarding the number of medical specialists.

12.2. 2005 draft budget (D 0434)

Dr. Lamy presented the draft budget for 2005 already agreed by the Board.

13. Possible dismissal of the French member association

Dr. Greff (*France*) presented a general description of the recent evolutions regarding the French delegation to UEMS: the demand for the entrance of UEMS into CEPLIS and the qualified vote linked with the new repartition key.

The French delegation left the room.

- ***The proposal for the dismissal of the “Union Nationale des Médecins Spécialistes Confédérés” from UEMS was accepted. (For: 18; Against: 1; Abstentions: 2; Blank: 1)***

As a consequence, a proposal to abandon the dual translation in order to balance the budget was made.

14. EACCME

Dr. Maillet informed the MC of the new agreements signed with Greece and Ireland. He also pointed out the increased income generated this year.

15. Venues and dates of future meetings

Bratislava, Istanbul and Prague submitted themselves as future venues of the MC Meeting.

The next meetings are the following:

27 November 2004: EACCME, Meeting of the Advisory Council, Brussels

11-12 March 2005: MC Meeting, Brussels

21 May 2005: EC Meeting with Sections/Boards, Brussels

21-22 October 2005: MC Meeting, Munich

October 2006: MC Meeting, Budapest

October 2007: MC Meeting, Bratislava

October 2008: MC Meeting, Copenhagen

October 2009: MC Meeting, Istanbul

October 2010: MC Meeting, Prague

Frédéric Destrebecq