PLENARY MEETING

OF THE

UEMS SPECIALIST SECTIONS

&

EUROPEAN BOARDS
DRAFT REPORT

Meetings to be held at the Hotel Royal Continental - Congress Centre

Napoli (Italy)

Thursday 6th October 2011

Friday 7th October 2011

Saturday 8th October 2011
MEETINGS of the 3 GROUPINGS of
UEMS SPECIALIST SECTIONS
& EUROPEAN BOARDS

Thursday 6th October 2011 – 11.30-12.30

PLENARY MEETING of the
UEMS SPECIALIST SECTIONS
& EUROPEAN BOARDS

Thursday 6th October 2011 – 13.00-15.00
1. Approval of the agenda

Approval of the minutes of the last Meeting held in Brussels on 08.04.2011

The agenda of the meeting and the minutes of the last meeting were approved.

2. Specialist issues

2.1. Report from the 3 S&B Groupings

The UEMS Sections & Boards are represented by means of 3 Groupings.

Reports will be given on the discussions and areas of interest in each Grouping further to their meetings held in the morning.

Group I

Report was given on the discussions within Group I.

- UEMS visibility has improved

Dr O'Donnell stated clearly the recent improvements regarding UEMS visibility and well established position at the European Level. He pointed to the active and leading role of the UEMS in the field of CME, Post Graduate Training and quality in patient care. The Sections involved in this grouping had a good view of the UEMS actions at the EU level and notably with regards the ECAMSQ.

Dr Fras explained that the UEMS had currently engaged in discussions with the European Commission in order to find a legal basis for the standardisation of qualifications. He added that the Commission did not want to introduce quality criteria...
because it could eventually have a negative impact on the free movement of citizens.

Still, Dr Fras said that the UEMS would take the lead on this issue.

- **Subaccounts**

Dr O’Donnell expressed the concern that the creation of subaccounts would be considered as UEMS taking the money from the Sections and Boards. He though acknowledged that the existing subaccounts for the Section of Allergology was running properly.

Dr O’Donnell pointed to the need for the UEMS Office to circulate a document detailing the running of the subaccounts and stating clearing the rights and duties of Sections’ Presidents and Secretaries with regard to money transfer and ownership of money.

Dr Fras stressed the importance of creating such subaccounts in order to comply with the Belgian Law. Sections and Boards were part of the UEMS and did not have separate legal personality. As a result, according to the law, they could not open a bank account on behalf of UEMS. The legally responsible persons for the Sections management of money were the President and the Secretary General. As a result, they were legally liable for the management of money for which they did not know anything about.

Dr Maillet also emphasised the fact that the UEMS was not in any case willing to take the Sections’ money but only clarify the current situation and comply with the legal framework in force in Belgium.

Prof. Gruwez questioned the decision of the Executive to reimburse EACCME evaluations on the newly created subaccounts. To his opinion, this was rather an unusual way to force Sections and Boards to adopt subaccounts.

Dr Fras noted that according to the Belgian Law, subaccounts were the only appropriate solution in order to clarify this issue. The UEMS was not able to proceed to payments on Sections and Boards’ own private accounts since it contravened its legal obligations.
Dr Berchicci added that the Sections and Boards were entire part of the UEMS and therefore did not need any separate legal existence.

Dr Fras also addressed the issue of the membership fee for delegates to UEMS Sections. He underlined the need for harmonisation but also transparency in the financial management of Sections and Boards.

Prof Tica understood the Executive viewpoint but suggested that a formal document should be circulated detailing the rules governing the Subaccounts.

Dr Maillet said that such a document had been already circulated and could easily be circulated again if necessary.

Dr O'Donnel thanked Dr Fras for the clear indication given on the subaccounts.

- **VAT**

Further to Prof. Lehto's question with regard to VAT and EACCME activities, Dr Fras informed the Sections and Boards' representatives that the Executive had decided not to take any action. He notably recalled the different pieces of advice received from Tax experts and indicated that should the tax authority decide that CME activities fall under VAT application, the UEMS could only be fined for events which took place in Belgium.

- **Internal representativity of S&B to the Council**

Dr O'Donnell stressed the impossibility for Sections and Boards to be involved in the decision-making process which remains solely in the Council's remit. He argued that S&B were participating fully to the UEMS and notably through the evaluation of events in the framework of EACCME®. As a result, he suggested that the Sections and Board would be more involved in the Council's decisions given their significant contribution to the UEMS Budget through EACCME®. He also pointed to the lack of representativity of Sections in the Executive.
Dr Fras reminded the audience that delegates of Sections and Boards could easily take part to the Council’s decision through their nominating medical association which is member of the Council.

- Fragmentation of the organisation

Dr O’Donnell reported on the internal organisation of the UEMS which was said to be fragmented. Several entity were covering the same field: as far as CME-CPD was concerned, the EACCME taskforce, the Working Group on CME and the Advisory Council on CME were said to be overlapping. Moreover, as regards PGT, the CESMA, the newly created ECAMSQ and the Working Group on PGT were also seen as a superposition of structures acting in the same area of expertise.

He highlighted the lack of coordination between the Boards, Scientific Societies and subspecialties to write the curriculum and suggested to harmonise rules governing the curriculum.

Dr Fras agreed that there were ways of improvement with regard to the internal management of the organisation and recalled the aim of the Working Group on the Future Structure of the UEMS which ended its work in 2010 and which recommendations were currently being implemented.

**Group II**

Report was given on the discussions within Group II.

Prof. Molea informed the audience about the newly appointed chair of Group II which was Prof. Tomasz Trojanowski.
Prof. Molea stated that the creation of subaccounts could be somehow a form of recognition of the existence of Sections and Boards but warned that the transfer of money could be somehow problematic, especially for “rich” Sections.

Dr Fras remembered the audience that the UEMS remained a not for profit association aiming at promoting the interests of Medical Specialists at the European level. The source of the income of the Section should not be problematic since Sections and Boards follow the same goal.

Prof. Molea also backed up the position of Group I with regard to the lack of representativity of UEMS Sections and Boards in the Council and notably in the decision-making process. He argued that the indicative votes from Sections and Boards had not always been followed by the Council.

Dr Fras stressed that in a democratic system the decisions taken by the General Assembly were in any case to be respected though some did not agree with the outcome.

Prof. Twomey added that the UEMS organisation was primarily relying on National Member Associations though he acknowledged the improved collaboration over the past years with Sections and Boards. He gave the example of the Irish Member Association (IMO) which organised regularly meetings with the delegates to UEMS Sections.

**Group III**

Report was given on the discussions within Group III.

Prof. Lehto was very satisfied that Group III was so active. He evoked the different items on the agenda, most of which had already been discussed further to the presentation of Group I and II.
He notably highlighted the need for the UEMS to keep track of the number of specialists at the European level. Having such data would enable the UEMS to increase its importance and leadership.

He also addressed the issue of NMAs report in annex I of the report of the Secretary General and suggested that NMAs would better specify how they met the UEMS goals and objectives. He recommended that the reports would include specific actions taken in line with UEMS policies.

Dr O'Donnell requested the Executive to send a document on the rules governing the subaccounts. He also expressed the idea to have a Sections and Boards working Group on the internal decision-making process so as to provide recommendations on how to include delegates from Sections. He finally asked to receive a statement of accounts so that Sections might know the amount of the money they ought to receive.

Dr Fras agreed to send a document summarising the rules governing the creation of subaccounts but repeated that the Working Group on Future Structure had carefully scrutinised the different ways to integrate Sections and Boards in the decision-making process but did not provide any recommendation on this issue. Dr Fras also agreed that a statement of accounts should be sent within 3 weeks to Sections and Boards.

2.2. Chapter 6 in Anaesthesiology

This item was raised by Dr Jannicke Mellin-Olsen (S.Anaesthesiology)

The UEMS Section of Anaesthesiology presented its Chapter 6 to the UEMS Charter on specialist training for endorsement by the UEMS Council.

This item was postponed due to the absence of representatives from the Section to present the new Chapter 6.
2.3. Chapter 6 in Neuroradiology

This item was raised by Dr Olof Flodmark (Div. Neuroradiology)

The UEMS Section of Neuroradiology presented its Chapter 6 to the UEMS Charter on specialist training for endorsement by the UEMS Council.

Prof. Flodmark made a presentation and outlined the rationale underpinning the request to endorse the Chapter 6.

Prof. Gruwez pointed to the use of non professional institutes which was said to be rather unclear. Dr Demuth (S. Radiology) explained that this term had been intentionally left in the Chapter 6 further to the request of German Doctors who feared that non-professional associations would be excluded should they not be part of an academic institution.

Dr Maillet proposed to replace this term by “recognised training institutions”.

2.4. Chapter 6 in Medical Microbiology

This item was raised by Prof. J. Degener (S. Med. Microbiology)

The UEMS Section of Medical Microbiology presented its Chapter 6 to the UEMS Charter on specialist training for endorsement by the UEMS Council.

Prof. Degener presented the chapter 6 in Medical Microbiology and reminded the audience that the Section, which was created in 2008, has drafted a Chapter 6 which was approved in 2010 by the Section.

Members of Sections and Boards did not comment this proposal.
2.5. **Reference Book (Chapter 6) in Oro-maxillo-facial Surgery**

*This item was raised by Prof. M.Mommaerts (S.Oro-maxillo-facial Surgery)*

The UEMS Section of Oro-maxillo-facial Surgery presented its Chapter 6 to the UEMS Charter on specialist training for endorsement by the UEMS Council.

Dr Ulrich *(S. OMFS)* presented the revised Reference Book in OMFS and reminded the members of the Sections and Boards that this Reference Book had already been endorsed during the Council meeting in Prague. He stressed that slight changes were brought to this Reference book hence its submission for endorsement by the Council.

Prof. Yacoumettis *(S. Aesthetic Surgery)* pointed to the definition of the scope of the specialty. To his opinion, Oro-maxilo-facial surgeons cannot practise cosmetic surgery which was said to be in the aesthetic surgeons’ remit. He therefore strongly advocated for the word “cosmetic surgery” to be removed from the reference Book.

Dr Ulrich explained that the Reference Book had been adopted in Prague with no comments and suggested to leave this document unchanged before endorsement by the Council. He also added that he had not been given the mandate by the Section to change the content of the reference Book and could not as such amend this document on so short notice.

Dr Fras proposed that Prof. Yacoumettis and Dr Ulrich discuss together on how to overcome this misunderstanding prior to submitting this document to the Council on the 7th October.
2.6. **Manual Medicine**

This item was raised by Dr M-J. Teyssandier (EU for Manual Medicine - UEMMA) & Dr H. Locher (European Society of Manual Medicine – ESMMO).

The UEMMA contacted the UEMS Secretary-General to request the creation of a Multidisciplinary Joint Committee on Manual Medicine within the UEMS.

Dr Götte (Germany) recalled the support from the GFB to create an MJC in Manual Medicine.

Dr Magyari (Hungary) gave a quick overview with regard to the situation in Hungary.

Dr Fras stated that the criteria for a submission to the Council were met and proposed that the request be submitted to the Council for endorsement.

2.7. **Section of Haematology**

This item was raised by the Slovenian Medical Chamber.

The Slovenian Medical Chamber requested that the creation of a Section on Haematology should be considered by the UEMS Council. A presentation of the opportunity for doing so will be given by representatives of the European Haematology Association.

Dr Fras gave background information on the rationale behind the request to create a Section in Haematology. He informed the Sections and Boards that further to a discussion with the President of the European Haematology Association, the request to create a UEMS Section was postponed to the next Council meeting, pending a future meeting between EHA and the Executive to discuss the scope of Haematology.
**2.8. Emergency Medicine**

*This item was raised by the British Medical Association.*

The British Medical Association requested that the creation of a Section on Emergency Medicine should be considered by the UEMS Council. A presentation of the opportunity for doing so will be given by Dr David Williams, Chair of the MJC and Board of Emergency Medicine.

Dr Williams presented the rationale supporting the creation of a Section in Emergency Medicine. He notably highlighted the evolution of the discipline over the years and noted that it now met the formal criteria as set in the UEMS Rules of Procedures.

Dr O’Donnell (S. Gastroenterology) agreed that Emergency Medicine is a transversal specialty and pointed to the need to define the core competencies of the discipline prior to create a Section.

Dr Parigi (S. Paediatric Surgery) emphasised the different approaches in European countries and suggested to continue having only an MJC. He exemplified the Italian situation according to which Emergency Medicine covers only adult patients.

Prof. Tica (Romania) congratulated Dr Williams for the work done and stated that MJC was a more suitable platform for such a transversal discipline. To his opinion, a better definition of the scope of the specialty should be addressed prior to creating a Section.

Dr O’Donnell (S. Gastroenterology) advised that the document submitted to the Council include a definition of the relationship with other interested medical specialties.

Dr Fras proposed that this issue be discussed by the Council.
2.9. Chapter 6 in Emergency Medicine **

This item was raised by Dr D. Williams (MJC&B. Emergency Medicine) 

The UEMS Multidisciplinary Joint Committee and Board of Emergency Medicine presented its Chapter 6 to the UEMS Charter on specialist training for endorsement by the UEMS Council.

Delegates of Sections and Boards did not comment this Chapter 6.

3. Any other Business

3.1. The European Committee for Standardisation (CEN)

The CEN (Centre Européen de Normalisation – European Committee for Standardisation) contacted the UEMS in order to establish European standards in the field of Aesthetic Surgery.

This approach was meant to involve a certain number of UEMS Section and Boards. In doing so, the process in general had direct and indirect implications with regard to the medical profession. The UEMS Executive therefore reminded the CEN to consider this matter very cautiously in the future, particularly when intending to develop regulations in the field of medical practice which is clearly outside of its scope of competence and should be left to the relevant and legitimate professional organisations.
Dr Fras explained that the Executive had decided to refuse collaboration with CEN as it might endanger the Medical Professional should the CEN start issuing standards in the medical field.

Prof. Yacoumetis reminded the audience the history of this issue. He stated that Esthetic and Cosmetic Surgery was often practiced by money-makers which did not include quality in their practice. As a result, the Austrian Society of Plastic Surgery wished to established European Standards and submitted a request to CEN. As per now, four meetings were convened thus far.

Given the consequences on the practice of Plastic Surgery, the UEMS Section of Aesthetic and Plastic Surgery decided to be involved in the process so as to make sure that standards were being elaborated in accordance with UEMS policies and standards. It would also prevent non specialists from practicing a profession without having the proper qualifications to do so.

Dr Fras referred to the campaign initiated by CPME in order to oppose the process and recalled the Executive position not to continue collaboration with CEN in this regard since there are risks for the medical practice as a whole.

Prof. Yacoumettis added that UEMS documents produced by Sections and Boards are also used by the CEN. Prof. Molea backed up this position and stated that he participated in this process as an observer.
WORKING GROUPS

Thursday 6th October 2011 – 15.00 to 16.30

DISCUSSION FORUM ON

THE PROVISIONAL PROPOSALS ON THE REVISION
OF THE PROFESSIONAL QUALIFICATIONS DIRECTIVE

Thursday 6th October 2011 – 16.45 to 18.30

COUNCIL MEETING

Friday 7th October 2011 – 10.30 to 17.00
Saturday 8th October 2011 – 9.00 to 12.30