UEMS 2011 / 37 FINAL

MEETINGS

OF THE

BOARD & COUNCIL

OF

UEMS

REPORT

Meetings held at the Hotel Royal Continental - Congress Centre

Napoli (Italy)

Friday 7th October 2011

Saturday 8th October 2011
Dr Fras welcomed the attendees and expressed his gratitude for the fruitful cooperation during his mandate as President of the UEMS. He acknowledged the progresses achieved over the past years which was the consequence of a healthy and increasing collaboration and trust between the Council, the Sections & Boards and the Executive.

Dr Maillet also greeted UEMS Members and added that much progress had been undertaken during the past years. He made the roll-call of delegates to the Board. The only Delegates from Cyprus were absent.

Dr Fras clarified the voting procedures and especially pointed to the failure of some National Member Associations to comply with their duties and pay their contributions. Three NMAs did not pay their contribution: Bulgaria, Latvia, and Luxembourg.

Dr Fras reminded the audience that NMAs which did not pay their 2010 contribution were not allowed to vote according to the Statutes and Rules of Procedures. He asked the Board whether they would allow Bulgaria, Latvia and Luxembourg to vote. The Board decided not to allow these three countries to vote. (15 Members against).

1. Approval of the agenda
   Approval of the minutes on the Board Meeting held in Brussels on 09.04.2011
   The agenda and the minutes of the previous meeting were unanimously approved.


   With the UEMS changing into a big international non-profit organisation, a new presentation of the UEMS financial situation was to be adopted. This Board Meeting was the first where this kind of reporting would be presented. In order to facilitate the reading, an explanatory note was also provided.

   Dr Fras informed the Board about the new rules implemented with regard to the dissemination of financial documents given the changing of UEMS from a small-sized to a medium-sized non-profit organisation.
Dr Berchicci then presented the expenses and revenues up to the 31st August 2011 with more details for the sake of transparency. He pointed to the fact that this was an interim financial report and that several expenses were to be included in the coming months: a.o renovation of the UEMS House / Domus Medica, provision for staff paid leave, UEMS conference on CME-CPD.

Dr Fras added that the draft Budget for the UEMS Conference on the 18th November had been carefully examined by the Executive in order to reduce the costs.

Dr Kalan Sivcec (Slovenia) congratulated the Executive for the well balanced budget and pointed to the need to adopt a stepwise approach while implementing the subaccounts in order to avoid double payments for NMAs (to the UEMS Council and to the UEMS Sections and Boards).

Dr Fras explained that the creation of subaccounts was a legal obligation which implied transparency both from the Executive and from the Section on the current assets.

3. **Draft budget for 2012** & Potential for a new contribution key

The UEMS financial policy for 2012 had to be voted and contributions needed to be approved on the basis of the defined contribution key.

For recall, in 2005, a new contribution key was elaborated for the UEMS further to the enlargement of its Full Membership. As agreed by the UEMS Board at that time (Brussels, 12.03.2005 – Munich, 21.10.2005), the basic figures for determining this key were: the population, the number of specialists and the GDP per inhabitant in each country. It was envisaged to update the contribution key currently in use. A Taskforce was therefore established for that purpose and was to report on the progress made thus far.

- **Draft Budget**

Dr Berchicci presented a new version of the provisional budget since new information were added in this document. It notably included the cost of the UEMS House / Domus Medica Europea and the UEMS Conference on CME on 18th November. According to him, a new draft budget should be elaborated when extra income is predicted.

Prof. Twomey (Ireland) highlighted the confusion in the presentation of the expenses and revenues as EACCME expenses appear under different items. He suggested grouping all the expenses referring to EACCME under one item.

Dr Fras responded that the new rules governing the accounts implied a different presentation of the expenses according to the Belgian accountancy norms. As a matter of fact, though he agreed that the presentation could be clearer, the presentation of the accounts were done according to these new rules.
Prof. Haas (Austria) requested additional information with regard to the renovation costs of the UEMS House / Domus Medica and asked whether these costs could be out of the draft budget in order to be more transparent.

Dr Fras stated that the Board had decided during the Council Meeting in Prague (October 2010) to give mandate to the Executive to purchase new premises for up to 3.2M€. As per now, 2.5M€ were already spent to buy the new house. He explained that the amount left would be used for the renovation.

The Board approved unanimously the Interim Financial Report as well as the Draft Budget for 2012 (with 1 abstention).

- Repartition key

Dr Fras then indicated that the repartition key for the calculation of the contribution had been questioned by a National Member Association. As a result, a Taskforce had been created in order to explore the potential for improvement of this key. This Taskforce never met and Mr Destrebecq was therefore asked to make projections on the different possible scenarii.

Mr Destrebecq presented the existing repartition key and stated that it was based on three indicators: the population, the GDP per inhabitants and the number of Medical Specialists. Three scenarios were thus envisaged based on the different weighting of these indicators.

Dr Fras reminded the audience that the existing repartition key had been adopted by the Council further to the recommendation of a working group. The Executive decided to keep the current repartition key which seemed to be fair to all members.

The Board decided to keep the repartition key unchanged. (1 abstention)

4. UEMS new premises

On the 29th June 2011, Dr Bernard Maillot and Dr Zlatko Fras signed, in their capacity of representatives for the UEMS, the final Official Act of purchase of new premises for the organisation in the Office of the Notary Me Bruno Michaux in Brussels. This signature finalised the whole process of purchase that was initiated by the UEMS Board’s and Council’s decisions taken over 2010.

Dr Fras reported on the outcome of the discussion with the architect with regard to the renovation of the new UEMS premises. He informed the Board about the scope of the renovation which included the entrance hall, the lift, the staircase and two additional floors at the top of the Building. According to this project, the last floor would be able to accommodate a large meeting room for about 90 participants.
The architect proposed either a two phase renovation (firstly the entrance, the staircase and the lift then secondly the two additional floors) or a single phase renovation of the whole building. Anyhow, the renovation could only start after a building/renovation authorisation would be granted by the Belgian authorities.

The renovation permit would need four to six months before being validated by the competent authorities and the estimated planning for the renovation was six to twelve months depending on the scope of the renovation.

Dr Maillet added that the renovation permit was the same whether the renovation work would be undertaken in one or two phases.

Prof. Haas (Austria) paid tribute to the Executive for these achievements and suggested to have only one phase for the renovation work which would be likely to save costs in total.

Prof. Twomey (Ireland) queried about the possibility to accommodate Staff for the UEMS Sections and Boards in the new premises as well as the other EMOs already interested in joining the new UEMS House / Domus Medica Europea.

Dr Fras indicated that FEMS, EJD, AEMH, COEM, CPME and BMA were already interested in joining in.

Prof. Tica (Romania) highlighted the determination and vision of the Executive and enquired about the UEMS capacity to afford such expenses.

Dr Fras said that the Board was to decide how to proceed with the renovation work. Anyhow, a detailed financial plan would be needed prior to take any action.

Dr Coelho (Portugal) applauded the Executive for this achievement and especially for the additional floors including a large meeting room which could be used notably by Sections and Boards. He also suggested to do all the renovation at once.

Dr Borman (United Kingdom) pointed to the organisational and political consequences of the purchase of the UEMS House / Domus Medica Europea. He stressed that the BMA had offices in Brussels and would definitely be ready to join in the new premises but pleaded that more practical information would be circulated (including exact time when partners could move in).

The Board unanimously approved the renovation and supported the one-phase renovation (1 abstention).

5. Auditing of the UEMS Accounts

Besides the internal auditing of UEMS Accounts, it was proposed to appoint an external auditor who would certify that the financial management of the UEMS was done in a proper way. It was also proposed to re-appoint internal auditors in view of the Spring Meeting of the Board & Council.
Prof. Twomey (Ireland) stated that he and Dr Van Calster had reviewed the Accounts and was pleased to see that then financial management is well handled.

Dr Fras proposed that Prof. Twomey and Dr Van Calster be reappointed as internal Auditors for the next Council Meeting.

Any Other Business:

- Elections of the new Executive

Prof. Twomey raised the issue of the timing of the elections for which there was discrepancies between the different documents sent. He reminded the Board that usually elections took place on Friday afternoon and pleaded for organising the elections when as many delegates as possible would be present.

Dr Fras suggested to have the Board vote on this issue as on the one hand the election documents mentioned Friday while on the other hand, the elections were scheduled on item 11.

The Board decided to have the elections of the new Executive at 16.00 on Friday 7th October (16 for; 2 Abstentions).

- VAT

Dr Fras gave some updates on the VAT issue and informed the Board that further to the advice received from the law firm Laga and the University of Naples, the Executive decided not to take any action for the moment. He notably stressed the low risk for the UEMS should the tax authorities decide that VAT would apply to CME activities as only CME events organised in Belgium would be submitted to VAT. Moreover, Dr Fras added that the European Society of Anaesthesiology had received a formal letter from the Belgian Tax Authorities whereby the European examinations were not submitted to VAT.

From 10.00 to 10.30 – Coffee break

*Items in italic with ** require a vote or a decision.*
Welcome and Introduction of new attendees
Roll-call of delegations

Dr Fras welcomed the members of the Council and delegates from Sections and Boards. Dr Maillet also gave a warm welcome to all the participants and made the roll-call.

1. Approval of the agenda
Approval of the minutes on the last meeting held in Brussels on 09.04.2011

Dr Fras informed the Council members that the Board had decided to change the order of the item 11 to the agenda with regard to the elections of the new Executive. He informed the Council that the elections would take place at 16.00 on Friday 7th.

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

2. Annual report of the Secretary-General

Dr Maillet presented the key features of 2010 and notably pointed out the improvements of the contacts with Sections and Boards, the decision by the Council to purchase new premises as well as the signature of an agreement between EACCME and AMA.

3. Working Groups

3.1. CME-CPD

Dr Borman reported on the discussions held in the framework of the Working group and explained that due to time constraints, some items on the agenda had been postponed. The Working Group on CME-CPD approved the documents elaborated by the EACCME Taskforce and discussed the ECMEC system as it appeared that the educational value of an hour of CME was relative. Dr Borman stated that both the working group and the EACCME taskforce would work on this issue.

Dr Maillet agreed that the ECMEC system could be improved but highlighted the need to also take into consideration the viewpoint of National Accreditation Authorities as they remained a key player in the EACCME system through the mutual recognition of evaluations of CME events.
Dr Borman committed himself to take into consideration all involved partners in the EACCME system.

3.2. e-Health

Prof. Twomey (Ireland) emphasised the fact that the time schedule for Working Group could be improved as some people could be interested in attending several Working Groups. He suggested scheduling the meetings of the Working Group on e-Health during the meeting of the Groupings.

He then gave an overview of the e-Health project in which the UEMS was currently involved.

- Renewing Health
The involvement of the UEMS in Renewing Health is rather limited since only one Member of the Section attended the meeting of the User Advisory Board. Prof. Twomey advocated for more involvement of the delegates to the Sections.

- EHUSG
The e-Health Users’ Stakeholders Group (EHUSG) was established 4 years ago with an aim to bring the European Commission with Health Professionals’ views on e-Health issues. The Commission decided to merge the EHUSG and the e-Health industry group into one large group of experts on e-health. The members of the eHUSG sent a letter to the European Commission by which they expressed their concerns with regard to this initiative. No feedback was received yet.

- Calliope
Prof. Twomey reminded the Council that this Project was finished and that all the information were available on the Internet www.Calliope.eu

- Future of the Working Group
Prof. Twomey recalled the aims of the Working Groups and especially the need to examine every two years the usefulness of these groups. He welcomed the strong will from members of this Group to continue committing to this issue.

3.3. Postgraduate Training

Dr Akyol (Turkey) addressed the issue of the Chapter 6 which were said to be very different from one Section to another and pleaded for a harmonisation of the length of these documents for the sake of transparency. He added that a subgroup within the Working Group would meet in order to propose template of Chapter 6.
Dr Fras reminded that the issue on Chapter 6 was a remaining problem and encouraged the working group to continue its work and strive toward harmonisation of the different curriculum.

3.4. Quality of Patient Care

Dr Berchicci pointed to the need to have a working group on Ethic. He emphasised the role of Ethic in the management of the UEMS and added that the collaboration with GIN had been ended.

Prof. Tica (Romania) suggested that UEMS advertise national guidelines which were seen as high quality in terms of content. Dr Hofman agreed that some National Guidelines were of good quality and UEMS should advertise them.

Scientific Societies but also other entities had already created guidelines and Dr Fras recalled the need to avoid entering the competition through the creation of additional guidelines. Dr Fras encouraged Sections and Board to go even beyond in order to limit the number of guidelines which was said to be too important.

Dr Coelho (Portugal) pointed to the need to take into consideration the aim of the UEMS which was to advocate in favour of Medical Specialists at the European level and warned that endorsing National guidelines would be in potential contradiction with UEMS European dimension.

3.5. Specialist Practice in current Health Systems

Dr Götte (Germany) reported on the work done by the working group and notably recalled the questionnaire sent out to the UEMS membership earlier this year. From the result of this questionnaire, Dr Götte presented the different issues at stake with regard to medical practise and stated that the definition of medical care was understood differently throughout Europe.

Dr Fras suggested that both the working group on Specialist practice and on Post Graduate Training work on drafting a new questionnaire which would be more focused on the daily practice.

4. Discussion Forum

Dr Fras reported on the discussion and stated that it had been a very constructive. He notably informed the audience about the UEMS actions at the European level which aimed to promote the idea that competence-based training could address the issue of the limits of duration-based training. The European Commission as well as Members of the European Parliament encouraged UEMS to further raise awareness with regard to competence-based training.

Prof. Twomey (Ireland) insisted on the need for the UEMS to advocate for clear wording to be included in the Directive with regard to competence-based training as unclear wording would jeopardise the impact of the Directive. He also encouraged the Executive to further continue the pilot tests in the framework of ECAMSQ.
Dr Ramuscello (Italy) congratulated the Executive for the work done and insisted on the strategical aspect of the Professional Qualifications Directive for the UEMS. He stated that he would take the UEMS position as a take-home message.

Prof. Molea (Italy) added that European Examinations should be further presented at the European level as the best way to harmonise Medical Doctors competence across Europe.

Dr Fras replied that many Countries would never accept that European examinations of Medical Doctors be mandatory. He reminded the audience that Health was a national competence and most EU members would consider these exams as questioning their sovereignty.

5. Continuing Medical Education

5.1. EACCME Progress Report

Dr Maillet presented the latest developments of EACCME for the year 2011. He notably informed the audience that new agreements had been signed with Canada and ongoing discussions were engaged with Dubai. He also insisted on the territoriality principle as the basis for signing new agreements.

Prof. Tica (Romania) raised the issue of ESAB and the different approaches they had with regard to accreditation. He wondered why ESAB had different procedures.

Dr Maillet stressed the importance of maintaining coherence in the accreditation process and highlighted the current efforts undertaken by the Executive to harmonise the accreditation process while strengthening the collaboration with ESABs.

Dr Coelho (Portugal) voiced the concern of Portugal which did not agree with EACCME rules and strongly advised the Executive to meet the Portuguese Accreditation Authority so as to clarify the remaining uncertainties.

Dr Fras insisted on the aim of EACCME which was to facilitate the mutual recognition by National Accreditation Authorities of CME events through EACCME.

5.2. EACCME Taskforce

Dr Borman reported on the latest developments of the EACCME taskforce and acknowledged the excellent work done at the last meeting in Athens. He notably insisted on the documents issued by the taskforce which were to be adopted by the Council (see point 5.3)
5.3. **EACCME Taskforce proposed Policy Documents**

The following Policy Documents elaborated by the EACCME Taskforce are recommended for adoption:

- **Criteria for the Accreditation of Live Educational Events by the EACCME**
  UEMS 2011/yy

- **Proposed Constitution of the Governance Board of the UEMS Standing Committee on Continuing Medical Education and Professional Development (CME/CPD)**
  UEMS 2011/yy

Dr Borman presented the rationale underpinning the documents on accreditation of Live Educational Events proposed for adoption. He described UEMS as the leading organisation with regard to accreditation of CME events and recalled the important achievements since the creation of EACCME. It enabled Medical Specialists to attend CME events throughout Europe and receive credits which could be recognised at National level.

Dr Borman added that the criteria for evaluation of Live Educational Events dated 1999 and needed update so as to adapt to current realities. He also thanked the Executive for initiating a Conference on CME which would be the first time the UEMS met CME providers.

Dr Harvey (UEMS Honorary President) stated that the Pharmaceutical Industries had created companies which were CME providers in order to hide the origin of the CME event.

Dr Borman mentioned the paragraph 32 of the document which obliged CME providers to disclose the source of all funding.

Prof. Tica (Romania) said that sponsored session should not be the basis to refuse the whole session.

Dr Borman proposed to delete the sentence and to refer to guidelines for reviewers and FAQ for providers the question of sponsorship.

Dr Fras insisted on the need to prevent Pharmaceutical Industry from influencing CME events and organise themselves CME events.

As per the fee sliding scale, it was decided to change the fees for large meetings in order to better fit the reality. Dr Maillet noted that the majority of events for which an EACCME accreditation is requested attracted less than 2000 participants. Therefore, the new sliding scale would not have a significant impact on the majority of providers.

Prof. De Monchy (S. Allergology) congratulated Dr Borman for the new criteria and asked whether EACCME could introduce quality criteria for reviewers in order to highlight high quality CME events and grant additional points or comments.

Dr Fras added additional research on quality criteria was obviously needed with an aim to improve the accreditation system.
Dr Borman recalled the paragraph 21 and 40 of the document and said that the event report aimed at assessing the quality of the event through the collection of attendees’ feedback.

Prof. Tica (Romania) pointed to the linguistic requirements for Accreditation of International CME events which should cover major European languages and not only English. He, therefore, suggested to replace the word “English” by “Major European Languages” for the linguistic requirements for the accreditation of International CME events.

Dr Fras insisted on the need to accept all European Language since EACCME accredits International events. He invited UEMS reviewer to send the application to a colleague from the Section who could understand the language of the application.

Prof. Gruwez (Belgium) asked whether a Symposium on a particular medical equipment could be granted EACCME accreditation. Dr Fras argued that when the name of a brand is mentioned, the EACCME would not grant European Accreditation. He added that Falk symposium and Serono Symposium would not be anymore accepted.

Dr Borman referred to paragraph 37 which addressed this issue.

**Vote:**

The Council adopted the revised criteria of accreditation of Live Educational events and e-learning materials (22 for; 2 Abstentions; 0 against)

**Governance Board:**

Dr Fras gave background information on the rationale underpinning the document. Further to the adoption of the new Statutes by the Council, Standing Committees in the three areas of expertise of the UEMS (CME-CPD, PGT and Quality Assurance) were to be created. The Executive asked the Chairmen of the Working Groups to draft rules governing these Committees in order to present them to the Council.

Dr Fras expressed his concern that improper rules would jeopardise the good functioning of the UEMS as a whole and recalled the problems encountered in the United States between ACCME and AMA.

He added that the creation of Standing Committees aimed at consolidating the organisation.

Dr Harvey (UEMS Honorary President) strongly advised to prevent a division of the UEMS through the creation of the Standing Committees. He favoured the idea that they should remain a division of the UEMS and warned that too much autonomy granted to these Committees would endanger seriously the organisation.

**5.4. UEMS Conference on CME-CPD**
As agreed last year, the UEMS was to organise a Conference on the Accreditation of CME-CPD in Brussels on 18th November 2011.

Dr Fras stated that the UEMS was becoming the leading authority with regard to accreditation of CME events in Europe. He acknowledged that other organisations were organising events in this field such as GAME or CME Forum but stated that the UEMS should take the lead on this issue.

He informed the audience that the Conference would be held one day before the UEMS Advisory Council on CME.

The registration fee was debated and it was decided to charge attendees a flat fee covering lunch and refreshment.

5.5. Medical Specialist Qualifications

5.6. European Council for the Accreditation of Medical Specialist Qualifications

Dr Fras reminded the audience about the pilot project initiated during the first semester of 2011 and informed that a meeting on ECAMSQ would be scheduled in December in order to decide how to further develop this project.

The e-platform was developed by a Swedish company (Orzone) which was now working on the platform so as to integrate skills and Professionalism assessments.

Dr Fras added that the Executive had good contacts with the European institutions and mentioned the fact that the idea of competence-based assessment of medical training was spreading across Europe.

5.7. Council for European Specialty Medical Assessments

Prof. Tenore (CESMA) presented the latest developments of the CESMA’s activities and informed the Council that 28 Sections were already organising European Examinations.

Dr Coelho (Portugal) raised the issue of non-European citizens taking European Board examinations and invited the Executive to have a position on this serious issue.

Dr Fras replied that it belonged to National Competent Authority to recognise the value of European examination and that the UEMS would not interfere in their position. He added that the ECAMSQ project aimed to facilitate the recognition of Medical training across Europe in the same way as EACCME facilitate the recognition of CME through agreements with national accreditation authorities. The ECAMSQ aimed at encouraging National Authorities to further collaborate in order to achieve the highest quality of training for medical specialist across Europe.

Dr Akyol warned that giving too much importance on national Competent Authorities could eventually minimise UEMS Member Associations’ role in their own countries. He pointed to the situation in Turkey whereby the government is opposing the Turkish Medical Association on many issues.
Dr Fras acknowledged that this was a sensitive issue and reminded that the aim of ECAMSQ was to improve the quality of medical training. The collaboration of National Member Associations and Sections & Boards was said to be an essential element in the implementation of ECAMSQ.

6. EU Affairs

6.1. The EU Professional Qualifications Directive

Dr Fras referred to the Discussion Forum held on October 7th and noted the fruitful exchanges of views during this Forum (for more information, see the report on Sections and Boards.)

6.2. Working Time

Dr Borman commented on the European Commission report on the implementation of the Working Time Directive. According to this report, 25 out of 29 European Member States had not adequately implemented the WTD. The Commission initiated against Greece and Ireland a proceeding for lack of implementation of the Working time Directive.

Dr Fras asked members of the Council to inform the UEMS when receiving such letters in order to adopt a strategy.

Dr Skerjanc (S. Occupational Medicine) presented the outcome of the work undertaken by the Section with regard to the impact on the Working Time on health professionals.

Dr Fras proposed that the UEMS adopt the document of the Section as the UEMS policy with regard to the Working Time Directive.

Prof. Gruwez (Belgium) stated that in Belgium, the new law on Working Time permitted an opting out and according to him it was largely followed. He added that the Belgian Authorities were currently revising the criteria for Training and voiced the concern that 48 hours/week were not sufficient to properly train a surgeon.

Dr Fras agreed that it was a complex issue influencing the Profession as a whole.

Vote:
The Council unanimously adopted the document drafted by the Section of Occupational Medicine (except Belgium).

6.3. EU Workforce for Health

Dr Fras gave an overview of the background on this issue. He notably stated that in the framework of its EU Presidency, Belgium had addressed a certain number of key healthcare issues including the EU workforce for Health.

For that purpose, a European Ministerial Conference was held in September 2010, in which he and Dr Maillet were invited to take an active part. He added that similar
initiatives were launched in the course of 2011, such as Workshops in the European Parliament were the UEMS did take an active role as well.

There were no discussions on this item.

7. Specialist issues

7.1. Report from the last UEMS S&B Meeting and the 3 S&B Groupings held on the day before

The Chairs of the three groupings reported on the discussions held on October 7th. In the course of the discussions, key issues were pointed to such as: subaccounts, relation between Sections and Boards and Council or communication within the UEMS.

7.2. Chapter 6 in Anaesthesiology

This item was postponed failure for a member from the Section to support the request.

7.3. Chapter 6 in Neuroradiology

Prof. Flodmark presented the new Chapter 6 in Neuroradiology.

The Council unanimously approved the new Chapter 6 in Neuroradiology

7.4. Chapter 6 in Medical Microbiology

Prof. J. Degener presented the Chapter 6 in Medical Microbiology and explained that an extensive document was available on the website.

The Council unanimously approved the new Chapter 6 in Medical Microbiology.

7.5. Reference Book (Chapter 6) in Oro-maxillo-facial Surgery

Dr Ulrich presented the Reference Book in OMFS and recalled that this document had already been discussed in Prague (October 2010).

The Council unanimously adopted the Reference Book

7.6. Manual Medicine
Dr Teyssandier and Locher presented the rationale underpinning the request to create a MJC in Manual medicine.

Further evidence were requested by delegates to the Council prior to vote on this issue. Dr Fras invited Dr Teyssandier and Locher to further provide evidence and submit again their request to the Sections and Boards during the next Council meeting.

7.7. **Haematology**

Dr Fras explained that further discussions between the UEMS and the European Haematology Association were needed in order to clarify the scope of the specialty. As a result, it was decided to postponed this item to the next Council meeting.

7.8. **Emergency Medicine**

Dr Williams made a presentation supporting the request to create a Section in Emergency Medicine. This issue was much debated within the Council. Whereas some argued that emergency Medicine should remain a MJC as it is a transversal specialty, other claimed that this discipline already existed in some European Countries and therefore supported the idea of creation a Section.

The Council adopted the creation of a Section of Emergency Medicine (16 for: 4 against).

The MJC in Emergency Medicine was said to remain in place pending further discussions on the coexistence of a Section and a MJC in the same discipline.

7.9. **Chapter 6 in Emergency Medicine**

Dr Williams presented the revised version of the Chapter 6 in Emergency Medicine.

The Council unanimously adopted the Chapter 6 in Emergency Medicine.

9. **The floor to representatives of the European Medical Organisations present**


Dr Wetzel (FEMS) reported on the recent activities in which the FEMS is involved and notably highlighted the need for increased collaboration between European Medical Organisations. He congratulated the UEMS Executive for launching the Domus Medica Europa which will pave the way to efficient cooperation. He though regretted that the CPME would not join in the new premises.
Dr André (UEMO) welcomed the idea of a Domus Medica at the European level. He reported on the meeting with Commissioner Dalli during the last UEMO General Assembly. Mr Dalli stated that there was a lack of General Practitioners at the European level combined to the ageing of the current population. Dr André reported that the Commission had proposed four actions to address these issues:

a) create a map of the medical population in order to have a clear view of the repartition of the medical workforce in Europe,

b) improve the attractiveness of the medical profession and notably for General Practitioners,

c) use the WHO guidelines with regard to the recruitment process for healthcare workforce,

d) insist on CPD but also on the use of ICT in the healthcare sector.

Dr André also emphasised the need to promote health as an investment based on programs related to health determinants.

Dr Mohrhart (EJD) expressed his strong interest in working with the UEMS and especially to join the future Domus Medica Europea. He reiterated EJD’s commitment to ensure effective and efficient cooperation with all EMOs.

Dr De Deus (AEMH) also expressed his commitment to further collaborate with all EMOs.

Ms Ribeiro (EMSA) thanked the UEMS Executive for the invitation and expressed EMSA’s interests in taking part in UEMS discussions and activities.

10. Items for information

10.1. UEMS new premises

Dr Fras provided an update on the current actions undertaken by the Executive and presented the renovation work which was necessary prior to UEMS relocation to its new premises. He detailed the changes that would be brought to the premises and explained that according to the architect, it would be ready by end of 2012.

10.2. Treasury

Dr Fras explained that an intermediary balance had been drafted and the Board examined and adopted the revised Budget for 2012.

Dr Fras also informed the Council that the repartition key for the contributions of the UEMS had been discussed by the Board and it was decided not to change the current key.

11. Elections for a new Enlarged Executive

The next Executive of the UEMS has been elected as follows:

President: Dr Romuald KRAJEWSKI
Besides, four vice presidents were also elected:

Prof. Hans HJELMQVIST  
Dr Salvatore RAMUSCELLO  
Prof. Jan SKRHA  
Dr Hans-Peter ULRICH

12. Any other business

The UEMS Executive decided to propose Dr Gerd Hofman as Honorary Member of the UEMS.

The Council unanimously adopted the proposal

12. Next Meetings

UEMS Council  
Cyprus  2012  
France, Paris  2013

UEMS Conference on CME-CPD  Brussels  18th Nov.2011