Report of the Secretary General
UEMS Management Council Meeting
Lisbon, 14-16 October 2004

1) Introduction
The activities undertaken last year by the new Executive Committee are in force. Contacts with the Sections and Boards were strengthened. Collaboration with other medical associations was confirmed. The accreditation has been very successful in 2004 and income has largely increased.

2) New members
We are pleased to welcome nine new full active members. Contacts were made with the Lithuanian Medical Association but no response has been received yet. (point 3)

3) EU institutions
   Contacts were made with representatives of DG Markt (Internal Market) in order that UEMS be included in the consultation process of the European Commission. The evolutions of the Directive project were followed carefully (to be discussed in point 6).

   b) Proposal for a Directive on Services in the Internal Market (COM(2004)2)
   Actions were taken in this respect by answering the questionnaire drafted by CEPLIS and DG Markt on the common values of the European regulated professions. This questionnaire aims to draw up a European code of conduct for regulated professions. Therefore, it was important for medical professions to be represented in this issue. Great commitment of the member organisations has allowed the Executive Committee to provide DG Markt with a complete answer within the deadline.
c) Health Policy Forum
UEMS was represented in the Open Health Forum (Dr. Halila and myself, 17 May 2004) as well as in the Health Policy Forum (Mr. Destrebecq, 11 October 2004).

d) Definition of the medical act
Several Sections have asked to present a definition of the medical act to the EU institutions (Commission and Parliament). Progress has been made for this purpose and will be discussed further during this meeting (point 5-e).

4) Revision of the Statutes and Rules of Procedure
Due to the change under Belgian law, UEMS has to adapt its statutes and rules of procedure in order to comply with the new legislation. A proposal, which includes the former statutes under the new law, will be made towards the latter part of this meeting (point 4).

5) European Medical Associations
Regular meetings were organised between the different EMA. Relations between UEMS and CPME have greatly improved as relations are now based on mutual respect and information. Much effort resulted in closer and efficient collaboration.

Close cooperation with the other EMA allowed UEMS to be aware of several issues, notably, the Directive proposal for the revision of working time.

6) UEMS Sections
The Executive Committee wanted to increase and improve the contacts with the Sections of UEMS. Much was made for this purpose and it allowed us to present at each meeting the functioning and efficacy of EACCME.

A broader presence in the meetings of the Sections strengthened the links between “the top and the bottom” and was fruitful in terms of publicity.
7) **UEMS Working Groups (point 11)**
   a) Postgraduate training and Updating of Chapter 6 of the Charter (Chairman: Dr. Z. Fras, Rapporteur: Dr. M. Giger)
   b) CME/CPD – Quality Assurance in Clinical Practice (Chairman: Dr. E. Borman, Rapporteur: Dr. L.B. Rasmussen)
   c) Relations with the Sections and European Boards (Chairman: Dr. G. Brenning, Rapporteur: Dr. H. Bredin)
   d) Quality of patient care (Chairman Dr. P.J. Theuvenet, Rapporteur: N)
   e) Specialist practice in current health care systems (Chairman: Dr. M. Greff, Rapporteur: N)

8) **Executive Committee**

   The Executive Committee met in January, March, May and September. Discussions notably focused on EACCME, the “Recognition Directive” and training as was mentioned, the training work undertaken last year is in force to promote the aims of UEMS.

9) **EACCME**

   Demands for accreditation have risen strongly this year. This is the consequence of contacts undertaken with the national CME regulating bodies. The presence of Executive Committee members in the Sections and Boards meetings might also have played an important role in this respect.

   Increasingly, more national professional or governmental organisations realise the need to participate in EACCME as it facilitates the free movement of European and non-European doctors and encourages mutual scientific and cultural exchanges.

   New agreements will be signed today with Ireland and Greece (point 14). But it also gives us an opportunity to underline the danger of European Societies considering to only organise their events in countries where EACCME agreements exist. Even if this could strengthen the role of EACCME, it could also jeopardise the control of national CME regulating bodies over the European standard.

10) **UEMS website**

   Dr. Theuvenet has made great progress with the website. We are now looking into the question of adding further information on the Sections, the newsletters, etc…

11) **Secretariat**

   Mr. Destrebecq has been appointed as Assistant to the SG at the beginning of September. He is now in charge of the newsletter of UEMS and helps the SG deal with his everyday work.

   Mrs. Paulus and Mrs. Reychler run the Secretariat efficiently following the retirement of Mrs. Degotte.