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D 0314

## Working Group on Postgraduate Training

(Stockholm, 17th October 2002, 3.00 – 5.45 p.m.)

### *Present members:*

Dr Jorgensen (Norway), Dr Tiainen (Finland – PWG), Prof. Gruwez (Belgium), Dr Vilaca (Portugal), Dr Dusanka Micetic Turk (Slovenia), Dr Fras (Slovenia), Dr Giger (Switzerland).

### *Apologies:*

Dr Hofmann (Germany).

### *Agenda:*

1. Approval of the minutes of the meeting on 22 March 2002 in Brussels
2. Membership list of the WG PGT
3. Situation update Chapter 6 (missing contributions – further analysis ? – final version of the Fras proposal – publication ?)
4. Results of the inquiry on International Visitation and Board Examinations
5. Miscellaneous

***Ad 1) The minutes of the previous meeting of the WG PGT (22 March 2002 in Brussels) were approved unanimously (recommendation 1).***

***Ad 2) Membership list of the WG PGT.*** The lists of the participating delegates at the recent meetings were reviewed. For obvious reasons, the need to assure an as permanent as possible membership was stressed.

### ***Recommendation 2***

*The WG recommends that the national delegations care for the continuity of membership in the WGs.*

### ***Ad 3) The situation with regard to Chapter 6 of the Charter on Postgraduate Training.***

Prof. Gruwez reported that with the exception of Cardiology, Paediatrics (and its subsections), Radiotherapy, Surgery (and its divisions) and Neurosurgery the contributions of all Sections have been collected. The Chapter 6 of Radiation Oncology was finalized in September, and is expected soon. Cardiology will achieve its contribution at its meeting in December. Due to the profound changes in its structure the Section of Surgery asked for some delay. No replies were obtained from the Sections of Paediatrics and Neurosurgery. The secretaries of these Sections will be approached personally. It can thus be expected that the updating of the Chapter 6 will be completed soon. The WG therefore will propose to the Management Council to issue a new compendium with the updated Chapter 6.

The WG estimates that the further evaluation of each of the contributions by comparison with a newly adapted model (the Slovenian document prepared by Dr Fras) is necessary in order to establish uniformity and completeness in the contributions of the different Sections. The WG discussed the appropriate time-table. The members of the WG will receive the adapted text by Dr Fras in 2 weeks after the Stockholm meeting. The totality of the contributions (updates to Ch 6) will be sent to the members of the WG by the UEMS Secretariat and each of the members will be asked to compare 5-7 contributions with the Fras template. If necessary the Sections will be asked to correct or to complete this Chapter 6 along the line proposed in the Fras model. According to our experience, it is anticipated that such an enterprise will not be achieved before 2004.

### **Recommendation 3**

*The WG proposes to the Management Council to issue a new UEMS compendium with the recently updated Chapter 6.*

### **Recommendation 4**

*Further evaluation of each of the contributions by comparison with the model (the Slovenian document prepared by Dr Fras) is necessary in order to establish uniformity and completeness in the contributions of the different Sections.*

### **Ad 4) Results of the inquiry on International Visitation and Board Examinations**

A **survey on international visitation programmes of training centres** by the Sections and Boards and on the **examinations or evaluations of the Boards** was conducted. The early results of this inquiry are shown in the table herewith. It is to be expected that we will be able to provide complete results at the spring meeting of the Management Council but the group suggests to display already now the current results on the website of the UEMS. Twenty-five (25) out of 38 Sections replied. 11 (out of these 25) are proceeding to international visitations, 17 are planning to do so or to continue with already running programmes. A large majority of the responding considers a practical adaptation of the visitation charter, as has been established by the Multidisciplinary Joint Committee of Intensive Care Medicine, as useful.

The question was raised about national visitation programmes. Since these fall under the responsibility of the national responsible authority, national programmes were considered to be beyond the scope of the WG but remain interesting as exemplary procedures. According to Dr Giger visitation every 7 years is compulsory for accreditation or re-accreditation of training centres in Switzerland. The visits are made by a group of 3 members: 1 from the relevant specialty, 1 junior doctors' representative and 1 representative of the Swiss Medical Association. In Slovenia a system very much similar to the recommendations of the UEMS Charter on International Visitation has been established. A preliminary questionnaire is required by the Medical Chamber of Slovenia (the responsible authority for certification of training centres). For economical reasons only a few centres, designated at random, are visited. The medical profession in Slovenia estimates that at least 25% of the centres should be visited.

International visitation by UEMS Boards should be promoted as much as possible. Motivation of the centres seems somehow difficult. The financial aspect certainly plays a role. Until a more official role would be attributed to the UEMS the attractiveness of a prestigious European label of quality should prevail.

Examinations are organised by 9 Boards (out of 25 that replied). The WG discussed the pattern of these evaluations, as the majority (14) of the Boards estimated that a standardized pattern for such examinations would be welcome. The WG opted for an OSCE-type of evaluation (Objective Structured Clinical Examination) where besides

knowledge, abilities and attitudes can be tested objectively. The issue of the significance of examinations was also raised. There are indications that final examinations after a lengthy training are probably not the optimal way of assessing the trainee provided permanent evaluation is applied.

### **Recommendations 5 and 6**

*There is satisfactory feedback on international visitations in the recent past. UEMS Sections and Boards are supporting such visitations and expressed their will to proceed with them. An adaptation of the Charter on Visitation as established by the M.J.C.I.C.M. seems to be welcomed by the majority of the Boards.*

Visitation on the international and national level will be further studied by the WG.

### **Ad 5) Miscellaneous**

1. The WG briefly discussed the question of a possible need of manpower in the next 5-10 years in Europe. This problem is considered beyond the scope and only indirectly related to the work of the WG PGT. A matter of concern is the impact of the limited working hours on the quality of training. From many sides the question is raised whether training criteria can be correctly implemented under these circumstances (especially in Surgery). Experience in one European country would be positive in this respect. Further analysis is required.
2. The WG should come back to the issue of access to specialization.

Minutes prepared by Dr Zlatko FRAS