1. Introduction

2005 saw continuing progress in our work on behalf of European specialists with new projects added to those already underway.

Link with the Sections & Boards improved still further and important relationships were made with the EU institutions notably in the framework of the Recognition Directive and EACCME. The collaboration with the other European Medical Organisations was also at the centre of UEMS Executive’s priorities, especially with regard to the conference on the future of EMOs.

EACCME became increasingly widely known and acknowledged as the only independent recognised body for Accreditation. Many meetings were attended with various stakeholders (particularly the UEMS S&B) in order to achieve harmonisation and efficiency in administration of the process across Europe.

2. New Contribution Key

Following the entrance of nine new full Members, the Executive had started working on a new contribution key. The outcome of this work was unanimously acknowledged by UEMS Members during the March Board Meeting. The rationale of the document UEMS 2005/5 (population, number of specialists and GDP/habitant) was adopted and the new fees were eventually approved by the Board at its meeting in Munich on 21-22 October 2005.
A study (for information only) has also been made on weighed voting. No formal proposal or decision has been taken on this controversial subject.

3. New Members

Further contacts were made with the Lithuanian Medical Association via Lithuanian observers in the UEMS Sections but no response has been received so far. Thanks to delegates in UEMS Sections, contacts were maintained with French representatives. Several meetings were held in Paris with the participation of members of UEMS Executive. In May, UMESPE (“Union des Médecins Spécialistes Confédérés”) confirmed its will to reintegrate within UEMS and agreed to find a solution with regard to its outstanding contribution. The October Council Meeting unanimously decided to reintegrate France into UMESPE as from 1st January 2006.

4. European issues


The Directive on the recognition of professional qualifications was finally adopted with the EU Council approval in the beginning of June. UEMS personal lobbying in the European Parliament and Commission was proven to be convincing and effective in achieving change. Contacts and meetings were in force with DG Internal Market (DG Markt) in the framework of the consultation mechanism to be set up after the entry into force of the Directive (Autumn 2007). Ms. Brumter-Coret’s (Head of Unit “Regulated professions” in DG Markt) address to UEMS Council in March was the obvious demonstration of our good contacts with her services in the Commission. UEMS will also play a very important role with regard to the creation of common platforms for medical specialties that are not automatically recognised by means of its S&B. Moreover a consultation was launched among the S&B and national member associations in liaison with the working groups on “postgraduate training” and the “relations with UEMS S&B” in order to take forward the Fifth ACMT Draft Report and continue updating the denominations and training of medical specialties. Extensive coverage of this issue was made available via UEMS Newsletters (see below).

Following contacts with the European Commission, UEMS was asked to give its opinion regarding this issue. During the March Council Meeting, a motion was then adopted (UEMS 2005/13). This statement was brought to the attention of MEPs, European Commission’s officials and other stakeholders by mean of the Newsletter. Reactions were received and contributed to a dynamic debate, notably during the May meeting with the S&B. As reported via the Newsletter, MEPs in the internal market and consumer protection committee agreed to exclude healthcare from the scope of the Directive in line with the UEMS position. It was expected from many sources that the vote in plenary session (scheduled for February or March 2006) will confirm this decision. UEMS is already in contact with DG SANCO regarding a new Health Directive that would follow.


This Directive proposal was adopted in first reading by the European Parliament on 11 May 2005. The EU Council still failed to agree on this issue. The legislative process is blocked pending its approval. There is high expectation that the new Austrian Presidency of the EU will take over the issue and conclude its passing in EU Council. At its March meeting, UEMS Council adopted a motion (UEMS 2005/15), which was transmitted to EU officials and MEPs by Dr. Hannu Halila.

4.4. European Health Policy Forum & Open Health Forum

UEMS participated in the Health Policy Forum (Dr. Halila, 11 March 2005) as well as other informal meetings (Mr. Destrebecq) UEMS also took part in the Open Health Forum on 7-8 November organised by the European Commission (DG Health and Consumer Protection). A stand in the lobby of the meeting room presented the various documents and activities of UEMS, which were eagerly sought after by the attendees. The meeting as a whole was an excellent opportunity in terms of representation and networking with other NGOs and EU officials.
4.5. **eHealth Stakeholders Group**

UEMS was invited by the European Commission (DG Information Society) to actively take part in the “eHealth Stakeholders Group”. This Group aims to establish common grounds between industries and health professionals in order to accelerate the implementation of the Commission’s eHealth Communication and Action Plan (COM(2004)356) and draw up a Recommendation on eHealth interoperability by 2007. The priorities defined by the Commission are the following: patient summaries/records, patient/practitioner identifiers and emergency data sets - all areas where UEMS can make a significant contribution.

4.6. **European Definition of the Medical Act**

Discussions relating to the definition of the medical act continued within UEMS Council and S&B. At its October meeting, the UEMS Council adopted the following definition:

> “The medical act encompasses all the professional action, e.g. scientific, teaching, training and educational, clinical and medico-technical steps, performed to promote health, prevent diseases, provide diagnostic or therapeutic care to patients, individuals, groups or communities and is the responsibility of, and must always be performed by a registered medical doctor/physician or under his or her direct supervision and/or prescription.”

4.7. **Conference of the European Medical Organisations on CPD**

In collaboration with the other European Medical Organisations, UEMS was invited to take part in organising a major conference on continuing professional development to be held at the end of 2006. This conference will aim to provide politicians and health officials with extensive information on European doctors’ commitment to CPD. For this purpose, the Standing Committee of European Doctors (CPME) convened representatives from all associated organisations to share their know-how on this issue within one single working group. It has been agreed that UEMS would chair the working session on “Formal regulation vs. Ethical obligation”, which will present the different ways CPD is dealt with by national health authorities across the EU. UEMS also intends to give a thorough presentation of EACCME’s practical operation, possibly within the framework of another working session on quality management.
5. Revision of the Statutes and Rules of Procedure

UEMS Statutes needed to comply with the new Belgian Law on non profit-making associations, before the end of 2005. The Executive took this opportunity to review its text as well as the ROP in order to clarify several archaic statements. This issue was one of the Executive’s major concerns during the last year. Proposals for new Statutes and ROP were issued to UEMS Members in good time and comments were sent to the Secretariat and discussed in the March Council Meeting and the May S&B Meeting.

At its meeting in Munich on 21-22 October, the UEMS Council unanimously adopted these new texts (see UEMS 2004/47-en-adopted and UEMS 2005/07-en-adopted), which were then sent to the Belgian authorities. They will come into force after publication to the Belgian Official Journal (“Moniteur belge”).

For recall, these texts now include clear and detailed objectives and activities for UEMS as well as the definition of Medical Specialists. 5 bodies are now identified: the Council (main decisions), the Executive (daily management), the Board (financial matters), Sections and Boards (practicing specialists and scientific input) and the EACCME. Voting majorities were also examined, adapted and rationalised (1/2, 2/3, 3/4).

6. European Medical Organisations

Last year, the European Medical Organisations collaborated in a positive way. The conferences and assemblies held by associated EMOs were attended by members of the Executive. This allowed UEMS to be kept informed of recent progress made by our partners. The Executive still believes that a stronger cooperation between EMOs is needed but not amalgamation.

A conference on the future of EMOs was facilitated by CPME on 7th April 2005. UEMS was the only European organisation to come up with an innovative proposal (UEMS 2004/43). During the conference, it was felt that, despite the efforts already made towards a convergence of view, mutual respect and recognition of autonomy still need attention. Moreover several hindrances to uniformity and practical problems were raised by the audience. UEMS remains committed to improve its efficacy and the reflection process is still in force.

A questionnaire was distributed by the CPME in December in order to prepare for a new Conference in 2006 but the questions need further thought to make them objective.
7. UEMS Sections & Boards

The improvement of relations with our S&B continued as a priority for the Executive in 2005. The presence of the Executive in S&B meetings demonstrated this commitment and was also an occasion to increasingly involve S&B in EACCME.

In order to improve the promotion of UEMS S&B activities, an agreement was signed with Guidelines-International-Network in order to examine the possibility for further collaboration.

In Munich, the UEMS Council agreed to set up two new Multidisciplinary Joint Committees in Sports Medicine and Immune Mediated Diseases. The first meeting of both these MJC will be facilitated by the Secretariat.

8. Executive

The Executive met in November and December 2004 and February, March, May, September and October 2005. Discussions notably focused on EACCME, the “Recognition Directive”, the revision of UEMS structure (Statutes-ROP and Repartition Key) and medical training.

A particular focus will be on taking over the work done by the Advisory Committee on Medical Training (ACMT) in the framework of the “Recognition Directive”. As UEMS was called to actively take part in the consultation mechanism, this work will be essential.

Elections were held during the October meeting in order to nominate a new Executive. The new members of the UEMS Executive are:

- Dr. Zlatko Fras, President
- Dr. Bernard Maillet, Secretary-General
- Dr. Gerd Hofmann, Liaison Officer
- Dr. Vincent Lamy, Treasurer
- Dr. Giorgio Berchicci, Vice-President
- Dr. Edwin Borman, Vice-President
- Dr. Gunilla Brenning, Vice-President
- Dr. Zoltan Magyari, Vice-President
- Dr. Hannu Halila, Past-President

The “old” and “new” Executives of UEMS will be meeting on 20-21 January in Brussels in order to liaise and ensure continuity in the policy of UEMS.
9. **EACCME** (see UEMS 2005 / 54 and UEMS 2006 / 02)

UEMS-EACCME continues to become increasingly widely known and appreciated. Contacts and regular meetings with national authorities and S&B greatly helped in this respect. Increasingly, more national professional and governmental organisations realise the need to recognise and participate in UEMS-EACCME as it facilitates the free movement of European and non-European doctors and encourages mutual scientific and cultural exchanges. New agreements were and will be signed with national authorities and Sections in 2006.

Meetings were also held with representatives of partners of UEMS-EACCME in order to improve cooperation with the different actors. A flowchart was designed in order to clarify EACCME practical operation. A set of common values and commitments for physician-learners, accreditation bodies and event organisers has also been drawn up.

On the occasion of the November EACCME Advisory Council Meeting, agreements were signed with the Royal College of Physicians of Ireland, the Medical Association of Malta as well as the UEMS Sections of Dermatology & Venereology and Paediatric Surgery. These formal agreements aim to guarantee an easy and non-bureaucratic system of recognition and exchange of CME credits at the European level and provide for basic criteria of quality control and assessment.

UEMS Council also decided at its October meeting in Munich to amend the method for collection of assessment fees for organisers so as to unify the process and ensure the fees for the S&B involved. At the November EACCME Advisory Council meeting, several national authorities proposed establishing the same system between UEMS-EACCME and national authorities.

10. **UEMS website**

Many improvements were brought to UEMS website. It has also considered incorporating a specific portal for S&B and setting up a database in the “Members only” area.

Progress was made in the everyday management and update of information the site.

11. **Newsletter**

Newsletters have been issued on a regular basis since September 2004 and are sent to

- the Presidents and Secretaries of UEMS Sections and Boards;
the national member associations and heads of delegation;
EU institutions’ officials (MEP’s and Commission’s officials);
Other stakeholders (NGO’s, etc.);
Interested individuals on personal application.

As this newsletter provides various and broad information on EU news but above all on UEMS and its activities, it is asked to all recipients to distribute it widely. From different sources, it appeared that this initiative has been greatly appreciated both inside and outside of our organisation. For recall, this newsletter is open to any input of common interest from UEMS member associations and S&B.

12. Secretariat

Progresses were made in terms of infrastructure: the office was partly refurbished. New IT devices and software will soon help in better organising the work and service with regard to UEMS members and EACCME.

Dr. Bernard Maillet Frédéric Destrebecq
Secretary-General European Affairs Director & Assistant to SG