



**UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES  
EUROPEAN UNION OF MEDICAL SPECIALISTS**

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**UEMS 2009 / 10** FINAL

## **MEETINGS OF THE BOARD & COUNCIL**

### **FINAL AGENDA**

*Meetings to be held at the “Maison des Associations Internationales” in Brussels  
(Address of the day: MAI – Rue Washington,40 – BE-1050 Brussels)*

*on*

***Friday 24<sup>th</sup> and Saturday 25<sup>th</sup> April 2009***

#### **WORKING GROUPS**

*Friday 24<sup>th</sup> April 2009 (15.00 to 18.00)*

The following working groups will meet:

***CME-CPD***

***e-Health***

***Future Structure of the UEMS***

***Postgraduate Training***

***Quality in Patient Care***

***Specialist Practice in current Health Systems***

*Supporting documents are to follow*

#### **OPENING RECEPTION**

## **THE EUROPEAN ACCREDITATION COUNCIL FOR POSTGRADUATE TRAINING**

*Friday 24<sup>th</sup> April 2009 (from 19.00 on)*

## BOARD MEETING

**Restricted to the Heads of Delegation of UEMS Full Members only**

*Saturday 25<sup>th</sup> April 2009 (9.00 to 9.30)*

1. **Accounts of revenues and expenses for 2008 \*\*** *To follow: UEMS 2009/11*  
**UEMS assets** *To follow: UEMS 2009/11 – Annex I*  
**Explanatory note on the accounts** *To follow: UEMS 2009/11 – Annex II*

Dr Berchicci

The Spring Board Meeting is the occasion for members to examine the annual accounts of revenues and expenses of the organisation for the previous year. The UEMS financial situation for this period is summarised in UEMS 2009/11 and its annexes.

*Presentation of UEMS 2009/11 and annexes*

*Discussion*

**Vote**

2. **Budget for 2009 and new contribution key** *UEMS 2008/35*

*UEMS 2008/36*

Dr Berchicci

The documents UEMS 2008/35 & 36, setting out the proposed budget as well as the contribution key for 2009, were already approved at the Board Meeting in Copenhagen. However, there was a need to finalise the calculation of the definitive contribution key for financial purposes. To that end, National Member Associations are again requested to provide evidence on the accuracy of their national population of medical specialists according to Eurostat.

*Discussion*

3. **Internal auditors' report**

Each year the financial management of UEMS is subject to the auditors' scrutiny.

*Presentation of the auditors' report*

*Discussion*

4. **Election of new internal auditors \*\***

Internal auditors have the responsibility to review and report on the financial management of the organisation. Prof. Twomey (IE) and Dr. Van Calster (BE) were initially nominated in 2005 and re-confirmed in 2007 as internal auditors for a period of 2 years and should therefore be replaced.

*Proposal for new internal auditors*

**Vote**

*From 9.30am to 10.00am – Coffee break*  
***Items in italic with \*\* require a vote or a decision.***

**COUNCIL MEETING**

**Two Delegates per National Member Association**

*Saturday 25<sup>th</sup> April 2009 (10.00 to 17.30)*

- 1. Welcome – the President – Dr Zlatko Fras**  
**Introduction of new delegates**  
**Approval of the Agenda**
  
- 2. Approval of the Reports on the Board & Council Meetings held on 10-11.10.2008 in Copenhagen** *UEMS 2008/50*

**Matter arising from the Meeting**

**Letter from the Union of Bulgarian Medical Societies** *Doc – UBMS*  
*Doc – Executive's response*

The Union of Bulgarian Medical Societies has sent a letter of complaint to the UEMS Executive, raising a number of concerns as regards the application of the Rules of Procedure during the last Council Meeting held in Copenhagen. The UBMS has explicitly requested this letter to be circulated among all UEMS Member Organisations. For the sake of clarity, the response of the UEMS Executive is also circulated.

*Discussion*

- 3. Annual Report from the Secretary-General** *UEMS 2009/01*  
Dr Maillet

As usual, the UEMS Secretary-General will present his annual report.

*Presentation of UEMS 2009/01*

*Discussion*

- 4. Report from the President on the implementation of the UEMS Action plan for 2009** *UEMS 2008/38*  
Dr Fras

Further to the adoption of the UEMS Strategy, the Enlarged Executive, through its President, elaborated the priorities for the first year of the Action Plan in order to achieve the first concrete results. This Action Plan was adopted at the last Council Meeting in Copenhagen. A progress report will be given on its implementation.

*Presentation of UEMS 2008/38*

*Discussion*

## 5. Working Groups

*Reports to be received on meetings held on the day before from:*

- 5.1. CME-CPD** Dr Borman  
*Discussion*
- 5.2. e-Health** Prof. Twomey & Prof. Pattynama  
*Discussion*
- 5.3. Future Structure of the UEMS** Dr Brenning & Mr Holzgruber  
*Discussion*
- 5.4. Postgraduate Training** Dr Hjelmqvist & Prof. Akyol  
*Discussion*
- 5.5. Quality of Patient Care** Dr Hofmann & Dr Berchicci  
*Discussion*
- 5.6. Specialist Practice in current Health Systems** Dr Rueggeberg & Dr Dumeix  
*Discussion*

## 6. European Accreditation Councils

### 6.1. EAC for Continuing Medical Education (EACCME)

#### 6.1.1. Report on the Meeting of the Advisory Council on 22.11.2008 *UEMS 2008/52*

The Meeting of the UEMS Advisory Council on CME, held in November 2008, was an opportunity for participants to discuss issues relating to the EACCME's practical processes.

*Report – Presentation of UEMS 2008/52*

*Discussion*

#### 6.1.2. EACCME Progress Report

*To follow: UEMS 2009/02*

Many developments occurred in the field of the EACCME during 2008, particularly as regards the practical process with the new online application form, new agreements with S&B and other Accreditation Boards. Much work is also currently underway, notably in the areas of harmonisation between countries and specialties and marketing of the whole system. Another piece of work for 2009 will be the implementation of the accreditation of e-learning materials further to the adoption of guidelines and criteria in October 2008.

*Report – Presentation of UEMS 2009/02*

*Discussion*

### 6.1.3. EACCME Taskforce

In order to foster progress in the topics mentioned above, a taskforce was set up in 2006 to bring together representatives of the key actors in the field of European accreditation. A progress report will be given on the meeting held in the morning before the S&B Meeting in February.

*Report & Discussion*

### 6.1.4. Awareness raising & “Marketing”

As outlined in the UEMS Action Plan, a particular effort will be made to increase awareness of European doctors in regard to the EACCME and the UEMS in general. For this purpose, the UEMS National Member Associations and S&B will be asked to contribute by further promoting European and international accreditation through the EACCME at the international events in which they take part.

*Discussion*

## 6.2. EAC for Postgraduate Training

On the basis of the UEMS Strategy and Action Plan and further to activities undertaken, particularly through CESMA, it was decided to establish a European Accreditation Council for Postgraduate Training (EACPGT). A report and presentation will be given on the preparatory work notably focused on the use of an electronic platform.

*Report & Presentation*

*Discussion*

## 7. European Issues

*Because of the length of the proposed agenda, several of these issues will only be presented for information depending also on their latest developments.*

### 7.1. Patient’s Rights in Cross-Border Healthcare

*COM(2008)414*

*UEMS 2008/55*

The draft Directive on Patients’ Rights in Cross-Border Healthcare is currently under discussion in the European Parliament and Council. So far, the MEP John Bowis, when releasing his draft report, has proposed some important changes to the original text. While this report was seen to be globally positive to the UEMS interests, further amendments were felt to be needed by the UEMS Executive. So far, the Executive has succeeded to convince some eminent MEPs to suggest important provisions which should be included in the text:

- Maintaining professional mobility within the scope of the directive
- Establishing European-wide standards for healthcare providers
- Guaranteeing quality and safety in the use of eHealth and Telemedicine
- Increasing stakeholders involvement

The discussions are now proceeding under the Czech Presidency of the EU Council whilst the Parliament is expected to give its opinion in a first reading before the June election.

In view this of, an increased effort will be needed to make sure the UEMS recommendations are duly taken into consideration.

*Discussion*

## 7.2. Green Paper on European Workforce for Health

COM(2008)725

UEMS 2009/05

UEMS 2009/07

The European Commission has recently launched a Green Paper on healthcare workers and the challenges that the profession currently faces. The text points to issues such as:

- Increasing ageing population in Europe
- Need of constant training and education to adapt to new technologies
- Worrying consequences of mobility, i.e. brain drain
- The shortage of healthcare workers
- Appearance of new diseases and infections

The consultation process closes on 31<sup>st</sup> March 2009.

The UEMS Executive agreed to make sure that the correct provisions are adopted in a view to ensure that the medical profession prerogatives are taken into consideration. In doing so, a consultation of the UEMS constituent bodies was launched in order to gather views for consideration and to elaborate the UEMS contribution to the consultation.

As a matter of fact, the main concerns expressed involve items such as continuous medical education and training, notably in view to facilitate the integration and use of new technologies, and guarantee, at the same time, the quality of the education through the creation of general standards and the proper assessment of training centres.

Other relevant issues encompass the mobility of healthcare workers and the need to assure that incoming staff holds proper qualifications to practice within Europe.

Further actions and provisions to attract students to medical and nursing professions in order to avoid a possible shortage of healthcare providers in the coming years, were also called for.

*Discussion*

## 7.3. Working Time

2004/209/COD

This Directive (2003/88/EC) is currently being revised by EU Institutions further to ECJ rulings and potential infringements against EU Member States.

The EU Council adopted a common position in June 2008 whereby:

- Weekly working time should not exceed 48 hours, with an opt-out possibility to work till 60 or 65 hours per week;
- The inactive part of on-call should not be counted as working time;
- Compensatory leave should be taken with "reasonable delay".

Further to this, the European Parliament adopted an amended version of the text which ruled that:

- The opt-out clause should lapse three years after the reformed directive enters into force;
- The full period of on-call time, including the inactive period, should be counted as working time;
- Compensatory rest periods should be granted at the end of the working period.

Discussions are currently underway in the framework of the conciliation procedure in order to find an acceptable compromise between the 3 EU Institutions. The deadline for achieving a compromise agreement in conciliation closes in mid-April.

*Discussion*

## 7.4. Recognition of Professional Qualifications

The directive on the recognition of professional qualifications (2005/36/EC) was adopted in October 2005 and entered into use two years later.

Several requests were received from UEMS Sections & Boards and/or Multidisciplinary Joint Committees to update or incorporate medical specialities according to the modern standards of medical practice. Opportunities will hence be sought to propose to the Commission a comprehensive review of the provisions of the directive notably in view of its projected revision in 2012. For this purpose, efforts must be pursued in order to provide evidence-based requests to update and revise this piece of legislation.

At the same time, requests are being addressed by the Commission as regards the medical specialties of “medical oncology” and “medical / clinical genetics”. The UEMS Executive and Secretariat have been liaising with the relevant scientific societies in order to better coordinate efforts and achieve the recognition of these new specialisms.

*Discussion*

## 7.5. e-Health and EC Communication on Telemedicine

COM(2008)689

The EC Communication on Telemedicine was released by the European Commission in the course of Summer 2008. For the purpose of the document, Telemedicine referred to 2 specific cases, i.e. telemonitoring and teleradiology. Nevertheless, its aim is to cover the whole spectrum of medical activities and encourage Member States to facilitate the penetration and use of e-application by the healthcare profession, namely through:

- Building confidence in and acceptance of telemedicine services
- Bringing legal clarity
- Solving technical issues and facilitating market development

The Commission also proposed a series of actions (10) to be undertaken by Member States, possibly with the Commission in order to achieve these goals.

Through the UEMS working group on e-health, there is a clear potential to further raise awareness among all UEMS S&B and national member associations with regard to this particular topic, which is likely to penetrate all fields of medicine in the near future. Accountability and security of confidential patient data are major concerns. For that purpose, a short report will also be given on the e-Health High Level Conference held in Prague from 18<sup>th</sup> to 20<sup>th</sup> February, and particularly on the issue of legal clarity in the use of e-Health and Telemedicine.

*Discussion*

## **7.6. Health Information for all by 2015 \*\***

*To follow: Doc – BMA-HIFA*

“HIFA2015 is a global campaign that brings together more than 1000 professionals from over 100 countries, committed to a common goal: ‘By 2015, every person worldwide will have access to an informed healthcare provider.’ During 2008, the BMA has been the official sponsor of HIFA2015.

“EU-trained doctors are among the best trained in the world. Throughout their careers, they are able to access the very latest health information, research and resources for professional development. This gives them an unrivalled perspective on how to equip health workers with the basic information they need to relieve suffering, improve quality of life and prevent premature deaths.”

For that purpose, the UEMS and its constituency are called to join that campaign.

*This item was proposed by the British Medical Association. Further information can be sought to Mr Martin Carroll ([mcarroll@bma.org.uk](mailto:mcarroll@bma.org.uk)).*

*Discussion*

**Vote**

## **7.7. European Partnership on Neglected Diseases (EPoND) \*\***

*To follow: Doc – BMA-EPoND*

In relation to the fight against neglected diseases, and particularly in connection to the establishment of G-FINDER by the George Institute for International Health, the European Partnership on Neglected Diseases (EPoND), a new e-mail forum for discussion of neglected diseases amongst European medical associations, was launched under: <http://www.dgroups.org/groups/epond/>

The UEMS was invited to join the EPoND as it was recognised the potential to play a vital role in dramatically reducing the burden of neglected diseases.

*This item was proposed by the British Medical Association. Further information can be sought to Mr Martin Carroll ([mcarroll@bma.org.uk](mailto:mcarroll@bma.org.uk)).*

*Discussion*

**Vote**

## **8. Specialist issues**

### **8.1. Meeting with the Presidents and Secretaries of the UEMS Sections and Boards (held in Brussels on 21.02.2009)**

*UEMS 2009/13*

*Report from the Executive*

*Discussion*

## 8.2. Report from the Sections' Delegates

In order to improve the contacts between UEMS S&B and Council, the Sections were divided in three groups which can each delegate two representatives to Council in order to report on the questions dealt with at S&B level.

*Reports & Discussion*

## 8.3. CESMA

The Council for European Specialist Medical Assessments was convened at the initiative of several UEMS Specialist Sections in a view to discuss and exchange experience on the organisation of Examinations and Assessments at the European level. This group started operating in 2006.

The last meeting of CESMA was held in Brussels on 28<sup>th</sup> March 2009.

*Discussion*

## 8.4. Documents for endorsement \*\*

### 8.4.1. Syllabus of Paediatric Surgery \*\*

*Doc – S.Paed.Surg*

The UEMS Section of Paediatric Surgery developed its training curriculum and requested to have it officially endorsed by the UEMS. For this purpose, it was presented to the assembly of Sections & Boards.

*Further to the approval by the S&B representatives at their meeting on 21.02.2009, it is now put forward to this next UEMS Council meeting for adoption.*

*Presentation & Discussion*

**Vote**

### 8.4.2. Training Programme in Clinical Genetics \*\*

*Doc – MJC.Clin.Gen*

The UEMS Multidisciplinary Joint Committee on Clinical Genetics recently adopted its training programme and requested to have it officially endorsed by the UEMS. For this purpose, it was presented to the assembly of Sections & Boards.

*Further to the approval by the S&B representatives at their meeting on 21.02.2009, it is now put forward to the next UEMS Council meeting for adoption.*

*Presentation & Discussion*

**Vote**

### 8.4.3. European Curriculum in Emergency Medicine \*\*

*Doc – MJC.Em.Med*

The UEMS Multidisciplinary Joint Committee on Emergency Medicine recently adopted its European Curriculum and requested to have it officially endorsed by the UEMS. For this purpose, it was presented to the assembly of Sections & Boards.

*Further to the approval by the S&B representatives at their meeting on 21.02.2009, it is now put forward to the next UEMS Council meeting for adoption.*

*Presentation & Discussion*

**Vote**

#### **8.4.4. Request to establish a division of Interventional Radiology \*\*** Doc – S.Radio

A formal request was received by the UEMS Section of Radiology to establish a division on Interventional Radiology.

This proposal was submitted for endorsement to the assembly of Sections & Boards.

*Further to the approval by the S&B representatives at their meeting on 21.02.2009, it is now put forward to the next UEMS Council meeting for adoption.*

*Presentation & Discussion*

**Vote**

#### **8.4.5. Request to establish a division of Surgical Head and Neck/Oral Oncology\*\***

Doc – S.OMFS

A formal request was received by the UEMS Section of Oro-Maxillo-Facial Surgery to establish a division on Surgical Head and Neck/Oral Oncology.

*This item was proposed by Prof. Maurice Mommaerts (S.Oro-Maxillo Facial Surgery)*

*Presentation & Discussion*

**Vote**

#### **8.4.6. European Definition of the Medical Act \*\***

UEMS 2009/14

A request was received from GBS-VBS (Belgium) to amend the definition as follows:

*“The medical act encompasses all the professional actions, e.g. scientific, teaching, training and educational, **organisational**, clinical and medico-technical steps, performed to promote health and functioning, prevent diseases, provide diagnostic or therapeutic and rehabilitative care to patients, individuals, groups or communities in the framework of the respect of ethical and deontological values. It 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.”*

*Discussion*

**Vote**

### **9. Procedural matters \*\***

#### **9.1. Membership – Armenia \*\***

UEMS 2009/08

A request to become a Member of the UEMS has been received from the Armenian Medical Chamber.

*Discussion*

**Vote**

**9.2. Membership – Serbia \*\***

*UEMS 2008/42*

A request to become a Member of the UEMS has been received from the Serbian Medical Chamber. After discussion, clarification needed to be sought as regards the exact standing of doctors originating from Kosovo. Decision is pending on this issue being clarified.

*Discussion*

**Vote**

**9.3. Membership – Iceland**

*To follow: UEMS 2009/09*

The Icelandic Medical Association has presented its resignation from the UEMS.

*Discussion*

**9.4. Proposal to amend the Rules of Procedure \*\***

*UEMS 2009/12*

According to a long-standing position, formal amendments to the UEMS ROP should be endorsed. This amendment is in order to officially recognise the denomination of UEMS entities and sub-entities and introduce the notion of “Division” instead of Subsection.

**See the document UEMS 2009/12 attached**

*Discussion*

**Vote**

**10. Treasury**

A report is to be given on the decisions taken by the Board.

*Discussion*

**11. European Medical Organisations**

**Report from the representatives of the European Medical Organisations present**

*Discussion*

**12. Any other business**

**13. Next Meetings**

- October 2009: Council, Istanbul, Turkey
- October 2010: Council, Prague, Czech Republic
- October 2012: Council, Paris, France

***Items in italic with \*\* require a vote or a decision.***