



CPME 2010/011 EN

TITLE / TITRE

Draft minutes of the CPME Board meeting, Winchester, October 2009

AUTHOR / AUTEUR

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CONCERNING / CONCERNE

All delegates

PURPOSE / OBJET

Decision

DATE

24/10/2009

KEYWORDS / MOTS CLEFS

Minutes

Draft minutes of the CPME Board meeting

Winchester College, New Hall

Saturday 24 October 2009

8h30 - 16h00

**Dr Rys, European Commission, DG SANCO,
Director of Public health and Risk Assessment**

“ Growing Health Policy in the EU - How best we can work together ”

8h30 – 9h30

Dr Rys addressed CPME Board on the growing importance of the Health Policy at EU level and on how CPME can continue to cooperate with the European Commission.

First of all, Dr Rys congratulated CPME on its 50th anniversary and was glad to be invited to the celebratory dinner which took place the previous evening in the College of Winchester. He underlined that CPME is a historic key player in public health at EU level and he celebrated the long lasting cooperation with the EU Institutions since the early days. The Commission considers CPME as a special stakeholder and wishes CPME continues to be a strong interlocutor and looks forward an ever more fruitful cooperation. He especially thanked CPME for the recent cooperation on patient safety, on the cross border directive and on the health workforce.

Dr Rys congratulated his friend, Dr Radziwill, as he will be President CPME as from 1 January 2010 and explained how he first met him during the meetings of the students' solidarity in the eighties in Poland. They also worked together when Dr Rys was Health minister in Poland.

Dr Rys expressed his hope that the Lisbon treaty will continue to shape the way towards a meaningful role for the EU in Public Health.

He addressed some of the biggest health challenges facing the EU such as the ageing of society and health workforce, the impact of the economic crisis, the health inequalities, health threats (pandemics, crisis management), etc. All these challenges leave a large place for cooperation with stakeholders, which he considers vital for a good health policy.

Among other areas of cooperation, he mentioned innovation and HTA as successful introduction of new technologies depends on professionals' involvement and commitment; but also the cross-border challenge and the centers of reference.

He finally underlined the imperative need to anticipate and respond to future needs of health systems.

An open discussion followed with CPME Board, raising questions as different as the empowerment of the patient, the role of the doctor, the Swedish compromise on cross border care, the migration of the health doctors from Eastern European countries to the West, the European Working Time Directive or also the relationship between DG SANCO and other DGs.

The full presentation is available at:

http://cpme.dyndns.org:591/database/2009/Presentation/24102009_Rys_CPME_Winchester.pdf

1. Roll call of Board Members

SG Tiddens-Engwirda

Bulgaria, Greece and Latvia were absent.

2. Procedural matters

SG Tiddens-Engwirda

2.1. Verification of the power of decision of the Board

Verification of credentials

Since all countries present and represented had paid their contribution fees, they were eligible to vote. Board members were informed that neither Bulgaria nor Latvia have paid their contribution fees for the second half of 2009.

Since 24 members were present, the quorum was met and the required $\frac{3}{4}$ majority was therefore 18 votes.

2.2. Election of tellers

Dr Jensen (Denmark) and Dr Brenan (Ireland) were elected as tellers.

3. Approval of the agenda

CPME 2009/162 FINAL

The proposed changes to the statutes were brought ahead of the proposed changes to the Rules of Procedure by the Executive Committee, who stressed that the failure to change the positions of France, Spain and Italy to resign from CPME was not reason enough to remove the proposed statute changes.

Dr Jensen expressed concerns about the discrepancy between what was decided at the June Board meeting (as expressed in the minutes of the meeting) and the agenda of the October Board meeting. These concerns were echoed by other delegations present.

However, according to Dr Radziwill, the proposed changes set out in the agenda were not only made in response to the demands of France, Spain and Italy, but also in order to make CPME more efficient. Some members supported this statement. The President elect also highlighted that other EU-wide professional bodies are changing their voting system, namely by departing from the one country = 1 vote system in order to adopt a system of weighted voting.

Since several members argued that new documents could not be added to the agenda as such short notice, the Executive Committee reminded the fact that the document was already on the agenda of the General Assembly, it was not a new document as it had been largely discussed during the previous months.

It was finally agreed that the first agenda item under point 8 "Proposed changes to the Rules of Procedures", which was recently added by the Executive Committee, should remain on the final agenda. The agenda was therefore approved.

In addition, It was agreed to add a point under agenda item 13 at the request of the Slovenian Medical Chamber

4. Approval of the minutes of the Board meeting

June 2009, Brussels

[CPME 2009/150](#)

The minutes were approved as such.

5. CPME President's report

will follow

Dr Wilks

Dr Wilks reported on the Expert conference on alcohol and health held in Stockholm, 21-22 September, where marketing, pricing and advertising of alcoholic drinks were discussed.

Dr Wilks attended the epSOS assessment meeting. At the end of a busy first year, the project is now looking at rolling out pilots to test the interoperability of e-prescribing and patient summary sharing across borders. Pilots will be carried in 12 Member states.

The President further reported on two EMEA meetings he attended, the first one on drugs authorization in Duchenne Muscular Dystrophy and the second one on patients information.

The main theme of EHFG 2009, where Dr Wilks took part as a speaker and panelist in 4 sessions, was the impact of the financial crisis on health. The topic of health inequalities and the importance of social determinants of health were also strongly emphasized.

Dr Wilks mentioned the launch of the Prescription for a healthy planet, which is on the Prevention Subcommittee agenda for support and co-signature.

Finally, Dr Wilks referred to the WMA meeting in Delhi and to the statements approved there on task shifting and on climate change.

Dr Wilks concluded his presentation by highlighting the fact that it was his last President's report. He received a standing ovation from the audience.

Dr Lies thanked Dr Wilks for his work and also informed Board members that it would be his last meeting as President of AEMH. He took this opportunity work collaboratively with other European Medical Organisations and also to give young doctors a voice.

6. CPME Secretary General's report

SG Tiddens-Engwirda

CPME List of activities

CPME Subcommittee tables

[CPME 2009/055 updated](#)
[CPME Info 145-2009](#)

Secretary General Mrs Tiddens-Engwirda told members that she was open for any questions they may have and invited them to consult the up-to-date activities tables that were stored on the CPME USB stick distributed the night before.

7. Minutes of the Executive Committee

May, June 2009
July 2009
September 2009

[CPME 2009/156](#)
[CPME 2009/171](#)
tabled

The minutes were accepted.

8. Internal affairs :

Proposed changes to the Rules of Procedures
And the consequent changes to the Statutes

Proposed changes to the Statutes
as forwarded by the Board in June 2009

[CPME 2009/123](#)

Executive Committee Proposal

[CPME 2009/ 174](#)
[CPME 2009/175](#)

WG "Future" conclusions (8-9 July 2009)

[CPME 2009/154](#)

Further to the debate that took place under point 3 on the agenda, Dr Wilks acknowledged that some members were reluctant to agree to discuss during this Board meeting the proposal for Statutes changes as forwarded by the Board in June 2009 CPME 2009/123. As this was however agreed, the Executive Committee presented the proposal.

A debate took place on weighted vote. Several members expressed their views that the weighted vote proposal as prepared by the Strategy WG and recommended by the Executive Committee was a fair proposal and a win-win compromise, There was a general consensus that CPME needs to take decisions that are for the best of CPME members. At the same time, some members underlined that if the bigger countries believe they will be better represented with weighted vote, it is imperative to take their views into account as CPME wants all its members to feel at ease within the organisation.

Dr Balzan expressed the concern of smaller countries that, once this well-balanced weighted vote proposal will be adopted, bigger countries will be able to change again the voting system and introduce a much stronger weighted vote. A system of veto (e.g. of 6 countries) was presented as a solution to such a concern.

It was proposed to follow the example of UEMO, who agreed to use weighted vote during 2 years as a trial, and to then decide, in 2 years time, to continue or not with this system.

Dr Lemye, who has been rapporteur of the reflection group on weighted vote in 2006-2007, reminded this was a very old issue, extensively discussed during the last 4 years and he expressed his concern that a decision needs to be taken in order to avoid discussing it forever.

Nevertheless, several members felt uncomfortable with taking any decision during this meeting, as they were convinced they would not need to do so and therefore did not discuss it beforehand with their NMAs.

A vote took place on delaying the decision on weighted vote to a future Board meeting. This proposal was carried.

Dr Wilks then introduced the proposal on changes to the Rules of Procedures, as discussed during the WG “Future”, as presented in the document CPME 2009/174 which was circulated in time, 3 weeks ahead of the meeting.

The majority of the members welcomed the proposal and agreed it would be good to reassess these decisions in 3-4 years time.

The Board went through the different changes to the Rules of Procedures’ articles and discussed them.

In article 11.4, it was agreed that the Vice President should supervise but not coordinate the work of the WG and Rapporteur. Therefore, art. 11.4 was amended to read: “the Vice-Presidents supervise the coordination between the Working Groups” instead of “supervise and coordinate the WGs”

The Executive Committee explained that these proposed changes to the Rules of Procedures would imply a slight change in the Statutes. This change was presented in CPME 2009/175.

The Board warmly thanked the legal advisors Mrs Annabel Seeböhm and Wojciech Idaszak for all their work and efforts in assisting very efficiently CPME in these proposals for changes to the Statutes and Rules of Procedures.

The proposed changes (including the CPME 2009/174 as amended in art. 11.4 and on CPME 2009/175) were adopted and forwarded to the General Assembly for approval.

9. Financial matters

9.1 information on the first 8 months 2009

tabled

Dr Lemye presented the current state of financial affairs. In his opinion, it is likely that spending will be less than what has been budgeted. As a result, there could be between 20,000 and 30,000 in savings.

9.2 2010 Budget

Letter from treasurer and treasurer elect

[CPME 2009/176](#)

[CPME 2009/178](#)

Dr Lemye reminded members that in 2010 CPME will have to cope with the loss in contribution fees from France, Spain and Italy, which represented a third of CPME’s total contribution fees. According to the legal advice received by CPME, they are obliged to pay their fees for the first semester of 2009. However, Dr Lemye advises against taking legal action as the legal costs would be high and proceedings would most likely be lengthy.

The 2010 Budget Proposal has thus been prepared taking into account there will be no contribution from France, Spain, Italy, Portugal and Slovenia.

In light of the new financial context, Dr Lemye suggests raising the contribution fees by only 5%. It should be possible for CPME to maintain its activities through a series of cost containment measures such as cancelling the costs of the external auditor (as

advised by the Executive Committee), limiting the costs of the legal advisor, saving money on salary costs, cancelling all interpretation costs, making savings on travel costs (namely by only reimbursing the travel costs of the President and of the Secretary General). In addition, representation costs will be kept to a strict minimum and there will only be two annual meetings. Several of the Executive Committee meetings will be replaced by e-group meetings and the Sub-Committee structure will be replaced by Working Groups. In order to further save on costs, it could also be envisaged to purchase an office space.

Generally speaking, the proposed budget was well received. However, several members expressed concerns about some of the measures proposed, especially as regards the rationing of reimbursement of travel costs, which was perceived as being particularly harsh on small countries. There was also a call for CPME to tap more into the legal expertise of members in order to benefit from existing expertise and to contain costs. The Executive Committee emphasized this was already done with the legal advisors of Germany and Poland, who provided very efficient legal assistance to CPME on the proposals for changes to the Statutes and Rules of Procedures.

Although some members said that an external auditor was compulsory in their country, Dr Lemye stressed that this is not the case in Belgium. In his opinion, an accountant, treasurer and internal auditor should be sufficient. Although the travel costs of the vice-Presidents will not be reimbursed, this should not result in an excessive financial burden for members concerned because there will be fewer Executive Committee meetings in the future and there will only be two General Assembly meetings. He concluded by saying that the 5% increase is very minor given the fact that CPME has incurred the loss of a third of its income.

The delegation from the United Kingdom reported about the difficult discussions held within the British Medical Associations concerning the raise of CPME contribution. The BMA is cutting all its expenses at national level and therefore cannot support increasing expenses at EU level. The BMA therefore decided to vote against this 5% increase. Dr John however reassured the Board that, whatever the decision of the Board, the BMA would respect the democratic decision.

The 2010 budget was carried.

10. Subcommittee activities: Report and approval of the statements of the Subcommittees

screened

10.1. Report and approval of the statements of the Public health, prevention and environment subcommittee

10.1.1 Report

10.1.2 Adoption of policies

Dr van der Vliet referred to his report and presented the policies approved by the Subcommittee

The subcommittee recommended the Prescription for a healthy planet (CPME 156-2009) to be co-signed by the Board. This was carried.

A discussion paper on vitamin D (CPME 2009/179) was presented and after a brief discussion adopted and it was agreed to forward it to the board for adoption. This document was also adopted by the Board.

10.2. Report and approval of the statements of the Organisation of health care, social security and health economics subcommittee

- 10.2.1 Report
- 10.2.2 Adoption of policies

There were no documents for decision put forward during the Sub-Committee meeting. However, there were several fruitful discussions on the topics that were set out in the agenda.

10.3. Report and approval of the statements of the Ethics and professional codes subcommittee

- 10.3.1 Report
- 10.3.2 Adoption of policies

Use of genetic information outside the health services CPME 2009/170 REV1 was discussed and amended by the Subcommittee before it was approved and forwarded to the Board for adoption. The new title of the document is "Use of health-related genetic information outside the health services". This document was adopted by the Board.

The Ethics Subcommittee agreed with the Healthcare Subcommittee that the topics of inequalities in health and e-Health should each be tackled within one single WG so that ethical matters will not be considered separately.

The Subcommittee also proposes to the Board to settle 2 WGs for a limited period of time on the topics of "Fair and ethical trade in medical goods" and on "Are doctors allowed to conscientious objection?".

10.4. Report and approval of the statements of the Medical training, continuing professional development and quality improvement subcommittee

- 10.4.1 Report
- 10.4.2 Adoption of policies

There were no documents for decision put forward during the Sub-Committee meeting. However, there was a recommendation that CPME write to the national bodies on behalf of members, sending a copy of the CPME statement on Assessment of quality of international medical graduates (IMG) from outside the EU in the European Union, and inviting replies from national bodies. This recommendation was adopted by the Board.

11. Presidents' Committee October 2009

Mr Martins reported orally on the Presidents' Committee meeting held on 22 October in Winchester. There was further reflection and discussion about the FEMS/AEMH proposal. In addition, there was an exchange of information between EMOs. Several common topics were identified, including: cross-border healthcare, EWTD, the qualifications directive, etc. There is an agreement now that the Presidents' Committee should meet three times per year and that the EMOs will be represented by two people. The next Presidents' Committee meeting will take place in Portugal, where the CEOM meeting will be taking place.

12. International calendar

[CPME 2009/031 updated October](#)

Board members were invited to consult the international calendar and also to inform CPME about any upcoming event that they wish to add.

13. Any other business

Dr Kalan, from the Slovenian Medical Chamber, presented CPME **document 2009/193** (to which two very slight editorial comments were made). Several members expressed support to send a letter to Medical Chambers in order to support them. The Board also supported the motion and agreed that a letter will be drafted along the lines of the document CPME 2009/193 and sent to the Slovenian Health Minister.

14. Next meeting

The dates of the 2010 CPME meetings will be decided according to the meeting dates of other European Medical Organisations. They will be circulated shortly among CPME members.

15. Closing of meeting