



**FEDERATION EUROPEENNE DES MEDECINS SALARIES
EUROPEAN FEDERATION OF SALARIED DOCTORS**

**Registered Office/Siège
Social :**
39, rue Victor Massé
F-75009 Paris/France

<http://www.fems.net>

Presidency:
Dr. Claude Wetzel
Hôpitaux Universitaires
F-67098 Strasbourg/France
Tel +33 3 88 12 70 75 ou 76
GSM +33 6 60 55 56 16
Fax +33 3 88 12 70 74
claudewetzel@chru-strasbourg.fr

Permanent Secretariat:
Rue Guimard 15
B-1040 Brussels/Belgium
Tel. + 32 2 280 46 80
Fax + 32 2 280 47 80
e-mail: info@fems.net

Date:	03/10/2009	Document:	F09-118 EN
Title/ Titre:	Draft Minutes of the FEMS General Assembly, 2-3 October 2009 Montecatini Terme / Italy		
Author/Auteur:	Bojan Popovic		

**Friday 02/10/2009 09:00 – 17:00
Saturday 03/10/2009 09:00 – 13:00
Grand Hotel Vittoria
Viale della Libertà, 2/A, I-51016 Montecatini Terme (Pistoia)**

1) Introduction (C Wetzel)

The President opened the session by thanking the SNR Board, our Italian hosts: Francesco Lucà National Secretary, Giuseppe Bellandi SNR Congress' President and Mayor of Montecatini, Anna-Maria Canevari and Ilan Rosenberg.

C. Wetzel welcomes Lukas Velez, new delegate for LOK-SCL (CZ) and Gerd Hoffman, liaison officer for UEMS. The new President-elect Joao De Deus represents AEMH.

Apologies from Maurizio dal Maso (I), Milan Kubek (CZ), Arda Saygili (TU) and Bojidar Nanev (BU), recently nominated Minister of Health in Bulgaria.

2) Roll call (B Popovic)

See list of presence.

3) Approval of the Programme and Agenda (C Wetzel)

F09-073

F09-080 EN

C. Wetzel made a brief presentation of the Agenda.

B. Popovic presented the Board proposal to split point 23 into 7 sub-points in order to have separate elections for each position:

1. President
2. First Vice-President
3. Second Vice-President
4. Secretary General
5. Treasurer
6. Deputy Secretary General
7. Auditors

J. De Deus and L. Stärker supported the proposed sub-points.

Conclusion: the Agenda with the proposed sub-points to point 23 were unanimously approved.

4) Approval of the Minutes of the last GA (Brussels 12/13 June 2009) F09-074 EN
Tasks & Decisions F09-075 EN
(B. Popovic)

The Brussels June 2009 minutes was unanimously approved.

Tasks and decisions follow-up:

The tasks and decisions Brussels 2009 were unanimously approved.

5) Minutes of the Board meetings (for information)

Brussels June 2009 Board minutes were presented and accepted for information.

F09-066 EN

6) EMOs meetings' reports

a) 1st Joint EMO Meeting, minutes

F09-081 EN

F09-097 EN

C. Wetzel reported of the meeting.

J. Brodeur: it is the first step but he wondered how long it would take to make the next step.

J. De Deus: it is an important first step, more couldn't be done.

b) CPME meetings, 12-13 June 2008 (no attendance)

7) Submission of documents for approval to the GA

a) Collaboration Agreement AEMH-FEMS to be presented at the upcoming EMO Presidents' Committee

F09-049 REV2

B. Popovic explained the draft to be presented to the joint EMO committee and dilemmas.

L. Stärker: ÖÄ supports the Cooperation Agreement because it's a non-sense to have different organizations covering the same issues. Maybe it would be easier to make an agreement only with 2 or 3 organizations.

Hoffman (UEMS): they have not seen the proposal yet, but UEMS is looking forward to a kind an organizations' alliance.

B. Popovic: when choosing the title, he chose the term "agreement" since It is less binding and therefore less binding than e.g. "Contract" or "Treaty". When drafting a document, its wise to foresee that it could be applied to more members in the future. However, this does not prevent several organizations that wish so, to conclude further and more specific agreements.

b) ESICM Vienna Declaration on Patients' Safety

F 09-083 EN

(see point 21 of the agenda)

Wetzel: each sub-specialty wants to be able to participate in the intensive care field, but too much fragmentation is not appropriate because we have to provide consistent directives.

Hoffman: a multiple joint Committee now covers intensive care medicine.

DE Deus: the document lacks the human resources aspect, e.g. nurses requirements.

Doctors' correct working conditions are an important part of patients' safety. But generally, for him the text is acceptable.

L. Stärker: we have to mention the responsibilities of the hospital owners and administration.

D. Rea: the patient's safety is not just a problem of doctors, but of the whole society.

K. Kvalteni: the staff requirements are very important.

8) Financial Reports (art. 8 of the Statutes):

- a) Current financial operations
- b) Provisional budget 2010
- c) Proposition on the annual fee (art. 10, alinea 4 of the Statutes)

F09-084 EN FR

C. Wetzel presented the points. Since FEMS has no financial problems anymore, we can dedicate more money for marketing purposes (FEMS marketing flyers, CD/DVD for new MEPs, provision for Press Agency services). The Board proposes the fee to be increased by inflation rate only, from the present 0,54 do 0,56 € per member per year.

The provisional budget and the fee increase were adopted unanimously.

9) FEMS President's activities (art. 6 of the Statutes)**F09-100 EN / FR**

C. Wetzel had his presentation.

I. Pasini: the Board has been much more active than before, but it is sad that despite that the working conditions have not improved. However, we succeeded in keeping the EWTD unchanged.

C. Wetzel: it is true that in some countries (e.g. Croatia) the conditions maybe have not improved. But in his opinion, in all FEMS countries the conditions have improved significantly. C. Wetzel was there to assist the member organizations in their respective countries (Poland, Czech Rep., Slovenia, etc.). It may be true that the rich countries “pump” the doctors out from poor countries, but when Croatia is concerned, it is up to the Croatian government to increase the means for the healthcare and HLS must show more efforts.

C. Amaya, V. Costa: thanked the delegations and Board members for a good work.

D. Rea: FEMS has been very efficient during the last mandate. It’s not just EWTD, but also other topics that were worked on, are every important (demography, migrations, cross-border healthcare, etc...). The Directives that we work on, do not depend on the differences between the countries, EWTD is applicable to Czech Rep., Poland, etc... the same as to France.

10) ED 2003/88 (EWTD)

- a) Composition of the EMPL Committee of the newly elected EP
- b) State of affairs and next steps

F09-093**F09-072****F09-077**

C. Wetzel presented the document, no further discussion.

11) ED on patients' rights in Cross-border healthcare

- a) Composition of the ENVI Committee of the newly elected EP
- b) Opinion of the chair of the ENVI Committee
- c) Swedish Presidency compromise proposal

F09-092**F09-085****CPME Info 159-2009**

No discussion.

12) Recognition of non-EU diplomas (S. Dalkilic, P. Trujillo, B. Popovic)

Draft of a FEMS policy statement, state of progress

B.Popovic said that the problem has been identified: the status of a 3rd country diploma as well as specialization certificate holders is confused, as the same diploma or certificate is recognized by one EU and not by the others. The current EU regulation is not satisfactory, the Hochsman case being among the rare ones and regulating only one specific situation (GPs). B.Popovic, S.Dalkilic, P.Trujillo and C.Wetzel will meet in Paris and prepare a proposition for the next GA.

C. Wetzel: he will prepare a survey on numerus clausus in Europe (gate-keeper for access to medical schools).

I. Pasini: there are universities in Croatia for foreign students from richer countries, but they don’t stay in Croatia, they return to their home countries.

B. Popovic: if the public money finances the education, one cannot say that the student owes to work in the country that paid the study. Until 1 or 2 years ago, the trainees in Slovenia compensate their institution for the training costs.

J.P. Zerbib: the issue of numerus clausus is not an easy one and it may take more years to find a satisfactory decision.

I. Pasini: it's logical that a host country verifies the initial study programs.

13) Labour conditions of European Hospital Physicians (FEMS/C. Amaya & AEMH/M. Sanchez-Garcia)

Survey on-going. C.Amaya did not receive all responses and there are even differences between responses of different associations from the same country.

[AEMH 08-054 EN](#) = [F08-079 EN](#)

[F09-012 EN + FR](#)

14) Privatization in European Healthcare (D Réa) [F07-061 EN](#) [F08-053 EN](#)

D.Rea: the privatization is not an imminent danger. But on the micro-level there are some initiatives. A privatization in a Swedish hospital will be studied by the working group, the same as the private management of a hospital trust in Germany (Röhn Klinikum).

15) eHealth (Y. Boudart, I. Rosenberg)

Draft of a FEMS policy statement, state of progress

SNR: the radiologist feel very much the problem of different rules on e-health, so they have some experience in this field, including the knowledge of the situation in different countries. SNR believes this topic should be a FEMS issue, where SNR is ready to cooperate.

H. Mayer: in Austria, the government is studying the problem whether e-health should be obligatory for all patients or not. They are concerned with data protection.

C. Wetzel: electronic data are not definitely protected. In Brussels, a chip card was introduced where all medical data would be stored. But the patient can erase the data he/she wants so the doctor is never sure whether all data are stored or not.

G. Hoffman: UEMS has already adopted the final document on this issue.

D. Rea: you cannot oppose the development, but three problems arise:

- loss of medical secrecy
- the question of service providers
- the problem of interpretation

J. Brodeur: sometimes the e-health is just an excuse to reduce the costs by sending the images to China or India.

I. Rosenberg: in SNR they have a program of training their own doctors instead of sending pictures out.

B. Popovic: the data protection is not just the issue of e-health, the e-health imposes only more specific questions on data protection as well as data loss (examples: recent cases in Great Britain of a hard disk loss). Apart from that, with e-health the time dedicated to the patient is shorter. Thirdly, the older doctors are simply not used to work with IT.

D. Rea: doctor's secrecy is not only about limiting the access to data, but also the danger of exporting data to large companies which are interested for them.

L. Stärker emphasized the danger of a big brother. Not only are the older doctors used to IT, but also it is even truer for the patients who are predominantly older persons. There is a question of forwarding the data to their relatives.

16) Commission's Green Paper for Healthcare Workforce in EU (C Wetzel)

C. Wetzel presented the Green Paper. Wetzel thinks that the problem of Healthcare workforce cannot be hidden by the excuse of the subsidiarity and he thinks this topic should be discussed on the EU level as well. The Commission will rapidly publish the answers of the Consultation launched in December 2008.

FEMS will support the PWG's initiatives on medical demography and HC workforce surveys.

17) EU Health Policy Forum

- a) Presentation F09-087 EN
- b) Call for expression of interest in membership
- c) Application Form (interest for FEMS ?)

C.Wetzel proposes the FEMS to send the application form to the EC. There is no membership fee.
Conclusion: Wetzel's proposal was adopted unanimously.

18) Pandemic A flu (H1N1)

- a) State of affairs F09-090 EN FR
- b) Roundtable on the situation in each country
 - Vaccination of health professionals, general trends

C.Wetzel wanted to have the opinion of other delegates.

J.P.Zerbib: probably there are 300.000 patients with the new pandemic, probably more, of whom 30 have died. It seems that the seasonal influenza is not less dangerous than the pandemic A. However, a combination of the seasonal influenza and the virus A could be more dangerous.

19) Brief oral informations on national Healthcare situation, since the last FEMS GA, Brussels 12/13 June 2009

Each delegation exposed rapidly the national situation.

20) FEMS enlargement

- a) SNR Application for full membership F09-076 EN

The representatives of SNR had a brief presentation. They have 3000 members.

Conclusion: SNR was unanimously accepted for a full membership.

- b) GBS Application for full membership F09-096 FR

The representative of GBS presented their candidature. They have 3000 members, but only 1000 of them are salaried.

Conclusion: GBS was unanimously accepted for a full membership.

- c) Romania interest in future membership F09-088 EN

C.Wetzel presented the paper. Romanian Federation of physicians. They could not come this time, probably due to financial problems. Probably their application for observers will be on the agenda of Lyon.

21) Upcoming EMOs meetings

- a) UEMS Council meeting, 16-17 October in Istanbul (TU)
- b) EMO Presidents' Committee 22 October 2009 in Winchester (UK)
- c) CPME Sub-committees, Board and GA 23-24 October 2009 in Winchester (UK)
- d) UEMO GA, 13-14 November in Budapest (HU)

22) Upcoming other meetings

ESICM (European Society of Intensive Care Medicine) 11 October 2009 in Vienna (A).

23) Elections for a new 2009-2012 FEMS Board (3 years mandate)**Compilation of candidatures****F09-078**

Two tellers were appointed: A.M. Canevari (I) and A. MAES (B).

No delegation asked for weighted votes.

Results: 476 total votes Majority = 239 votes

President

SNPHAR : Dr Claude Wetzel 416 positive votes (87,4%) 60 blank votes

1st Vice-President

CESM : Dr Carlos Amaya 420 positive votes (88,2%)

CIMO : Dr **Vincenzo Costa 0**

ANAAO : Dr **Enrico Reginato 0**

Austrian Medical Chamber : Dr **Harald Mayer 56**

2nd Vice-President **1 blank vote**

CIMO : Dr **Vincenzo Costa 75**

ANAAO : Dr Enrico Reginato 259 positive votes (54,4%)

OZZL : Dr **Ryszard Kijak 70**

Austrian Medical Chamber : Dr **Harald Mayer 71**

Treasurer

CIMO : Dr **Vincenzo Costa 98**

SIM : Dr Paulo Simoes 378

Secretary General

FIDES : Dr Bojan Popovic 416

CIMO : Dr Vincenzo Costa 60

Deputy Secretary General

7 non-valid votes 112 blank votes

OZZL : Dr Ryszard Kijak 357

Internal Auditors

Pr Dr Reinhart Waneck: blank 45+102= 147 **Positive votes: 329**

Dr Serdar Dalkilic: blank 45+77=122 **Positive votes 354**

24) Next FEMS General Assemblies

- Lyon (F), 14-15 May 2010 (Jean-Paul Zerbib, Paul Chauvot)
- Istanbul (TU), 1-2 October 2010 (Arda Saygili)
- Barcelona (E), 13-14 May 2011 (Carlos Amaya)
- Wien (A), 7-8 October 2011 (Reinhart Waneck)

25) Next FEMS Board meetings (for information):

- a) Paris (F), 30 January 2010, 10:00-17:00
- b) Lyon (F), 13 May 2010, 16:00-19:00
- c) Istanbul (TU), 30 September 2010, 16:00-19:00
- d) Paris (F), 29 January 2011, 10:00-17:00
- e) Barcelona (E), 12 May 2011, 16:00-19:00
- f) Wien (A), 6 October 2011, 16:00-19:00
- g) Paris (F), 28 January 2012, 10:00-17:00

26) International EMOs' Calendar

[CPME 2009/031 EN](#)

No discussion.

27) Any other business

None.

At 11 a.m. the President C. Wetzel thanked the interpreters and technicians and closed the session.

He invited the FEMS delegates to take part in the common organized FEMS/SNR Roundtable **"European Healthcare Services: present and future"**.

Participants: C Bibollino chairman (SNR), F. Lucà SNR National Secretary, C. Wetzel FEMS President, Mrs. Branca Italian Health Undersecretary, G. Perera HOSPEEM Secretary General, G. Bellandi (SNR), I. Rosenberg (SNR) and Anna-Maria Canevari (SNR).