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FEMS General Assembly

Friday 31 May 09:00 – 17:00
Saturday 1 June 2019 09:00 – 13.00

Venue: Grand Hotel Oriente, Via Diaz, 44 - 80134 Naples

1. Introduction and welcome (João de Deus, FEMS President)

João de Deus welcomed the delegates and thanked to the Italian hosts for their efforts in hosting the FEMS GA. He further welcomed the new FEMS delegates and the representatives of the EMOs.

PART I: procedural issues

2. Roll call / right to vote (B. Popovic)

Participants list

[**F19-019**](#)

Bojan Popovic took note of the majority of the delegation present and declared a valid general assembly.

3. Approval of the agenda

EMOs agenda point was rescheduled for the first day, after the first coffee break. The agenda unanimously was approved with this change.

4. Calls for emergencies to be discussed by the GA on the request of the Delegations

João de Deus invited the delegates to submit to the plenary any national emergencies where FEMS could be of assistance.

5. Approval of the minutes of the last FEMS GA (Brussels, September 2018)

[**F18-064**](#)

The minutes were unanimously approved.

6. Minutes of the last board meeting (for information)

F19-003

PART II: Reports on Current FEMS Programmes and Activities and Strategy Follow-up

7. FEMS President activity report (João de Deus)

João de Deus informed on his participation in the 3rd world forum of the doctors' trade unions (September 2018, Lisbon); he was also present in the EAHM congress where he delivered a presentation on doctors' involvement in hospital management; he attended the congress of the Portuguese Medical Association, the AEMH meeting in Oslo (May 2019), the CPME meetings in Geneva and Malta as well as the President' Committee Meeting, the CEOM and UEMS general assemblies. He informed that UEMS plans to revise the Luxembourg declaration of CME/CPD and present the revised version in the autumn.

8. Reports on Adopted FEMS Programmes and Activities

[**F17-042**](#)

1. continue and enhance the survey concerning working conditions, (K. Keijzer)

[F17-067](#)

Christiaan Keijzer – we have developed several survey on working conditions, working time and salaries; the board also discussed the issue and recommended to centralize all these questionnaires and use the White Book agenda to prepare new surveys on these topics. We need to reorganise all this data that we have been gathering; there is quite some new data from 2017/2018, the same as a lot of data is already previously available but we have to transfer that to the White book – we will discuss in the working groups this afternoon how to reorganise this data. We will equally decide on the use of a software, currently managed in the Netherlands so that the secretariat in Brussels will have access to the information/data collected and manage the questionnaire issue in a centralised manner.

João de Deus: our questionnaires are often a mixture of topics, that is why we have to be careful when we design them to make sure we cover just one specific topic and require specific information – we have the White Book agenda to organise all this information accordingly.

2. be in touch with AEMH concerning the development of the clinical leadership, (J. de Deus),

João de Deus: AEMH has been developing a project on providing an European certification on Clinical leadership in cooperation with UEMS; they are now finalizing the ETRs, as it's the case for the other UEMS specialities. The certification of the CL will be made in 2 ways – 1. Those who are already leaders (they have to demonstrate by their CV and their leadership skills + a project on how to manage a department); 2. For young doctors – they have a certain number of training hours and then get evaluated for their leadership skills. FEMS has been interested to cooperate with AEMH and UEMS in this project since its beginning.

Bernard Maillet: this is a very good example of EMOs cooperation resulting in common projects. AEMH has started to build upon the UEMS ETR structure and both organisations are now involved in the development of the project.

Fabio Pinto: this is an important project as in many countries, sometimes due to economic constraints, there is no awareness that one needs specific skills in order to be appointed as a leader and that it is doctors that need to be appointed as clinical leaders. We need to highlight the skills and requirements needed for such leaders.

João de Deus: the idea is to list these CL requirements and establish a pool of doctors in the different countries from which stakeholders can they can pick up their leaders.

Christiaan Keijzer: we have to pay attention to 2 issues: in Scandinavian countries, heads of departments are not necessarily doctors and/or nurses. We have to see how we can tackle this issue via our cooperation with the other EMOs, since Scandinavian countries are not members in FEMS. Secondly, as seen in the in the Netherlands, especially in academic hospitals, well established doctors do not always make such a good job as heads departments; a national programme of clinical

leadership has emerged in order to deal with this issue and we have to take into account such national initiatives when dealing with an European training programme on clinical leadership.

3. promote the visibility of FEMS (B. Popovic)

1. meeting FEMS/EPSU – DG Employment

[F19-004](#)

Bojan Popovic – this was a consequence of our conference in Brussels – see the meeting report attached.

One of the problem I see and that we should be aware of is how to communicate with the European Commission, particularly with DG employment; they are quite open to communicate but require specific and clear information; we have to be precise in our requirements, whether it is a problem of implementation or of the legislation and whether all this is of the competence of DG Employment. The questions raised may not be subject to subsidiarity, otherwise they do not tackle them. The door is open, but we should go there well prepared. FEMS was considered seriously because we have data from more countries. They want to see how active we are, whether we publish our results or studies. Meetings should be well prepared. EWTD is not a problem in itself, but rather its interpretation and implementation in the countries. The Commission is unlikely to present a modification of the Directive in the near future.

João de Deus – we should remain in close contact with DG Employment and try in the context of the WG on working time to have a pretty exact picture of what is happening in the FEMS member countries concerning working time (i.e. if the EWTD is implemented in the right way or not, how is the opt out and the compensatory rest, how the on-call duty and the stand-by duty are considered and paid).

Reinhart Waneck inquired whether Marburger Bund may reconsider FEMS membership.

Bojan Popovic said that during the meeting with DG Employment, the representative of Marburger Bund saw how FEMS was perceived by the EC and that it deals similar issues but at a larger scale; furthermore, they were only presenting German-related issues while FEMS was presenting Europe wide issues, so the Commission was more interested to hear FEMS cases.

Lukas Stärker – we need to go with concrete examples and facts to the Commission. We should focus on the question of implementing the EWTD in the member states and not on changing the directive. There are two cases of the ECJ of this year that may be interesting to address: one – how to control the working time in a duration period and second – the documentation of the working time so that the work-life balance remains a balance. I can approach Marburger Bund but we need to show them the advantages that would be brought by a potential membership to FEMS.

João de Deus asked the delegates to propose potential topics for a future meeting with DG Employment that may be organised after the elections.

Renata Culinovic-Caic suggested the issue of the handover time – this is considered as a free of charge period in Croatia; for instance, in 40 years of work – at least half an hour at the doctor's expenses, this makes 7 months of unpaid work.

Bojan Popovic gave the example of Slovenia where, following a Supreme Court ruling quoting the European Directive, handover time is considered as working time. We can explore if this is a pan-European issue and, if so, put it forth to the Commission. He also suggested discussing the issue of migration, which is completely uncovered by the Commission, and where FEMS can bring a documented input.

2. secretary general visit to Croatia

[F19-018](#)

Bojan Popovic informed on his meeting as presented in his report. His visit to Croatia is a sample of what FEMS can do at the national level, following the studies and work undertaken during the various conferences and general assemblies (i.e. Malaga conference).

Renata Culinovic-Caic informed that the situation in Croatia worsened; the Croatian trade union has contacted the prime minister a 3rd time, without any success. We have colleagues that have over 1,000 working hours overtime. There is not any discussion on the working time of doctors. We have more than 600 court rulings in favour of doctors on the 1st level and more than 200 verdicts favourable at the 2nd level. Everybody is waiting for the Supreme Court ruling expected beginning of June. There is much pressure on the Supreme Court against doctors. The minister already tried to influence court rulings within Croatia, at 1st and 2nd level, although he tries to look like he is supportive of doctors.

João de Deus said this is a case to be brought to the Commission as this is a clear instance of the violation of the EWTD.

Bojan Popovic also inquired about a formerly planned visit to the Italian minister of health – are the Italian delegates still interested in having this meeting?

Bojan Popovic asked for the agreement to use the photos of the delegates. Vote - unanimously approved.

9. FEMS-AEMH Coordinated Cooperation (CoCo)

1. Handling of congruent contents of AEMH and FEMS (L. Staerker)

Lukas Stärker said that the issue is twofold: one the one hand, there is the issue of cooperating with AEMH. We had a common board meeting in March this year where the issue of handling congruent contents was tackled. The aim is to speak with one voice on one topic, without duplicating work. We will only be efficient if we deal each of us with specific topics. We should decide which are the topics dealt with by each EMO. Hospital doctors, for instance, should be a topic of AEMH, the same as Clinical Leadership; FEMS should deal with working conditions and working time. The second aspect is to organise parallel works, i.e. common AEMH-FEMS meeting (see following point).

2. Common meetings AEMH-FEMS (L. Staerker)

Lukas Stärker proposed to make a common FEMS/AEMH meeting every 2 years. There is a difference between the structures of the General Assemblies so we have to make a decision and vote to have this organised as of next year 2020. AEMH is supporting the proposal.

João de Deus also pointed out the potential economic advantages that common meetings may imply.

Vote – proposal unanimously approved.

Part III – Planning, Financial and Statutory Issues, Other Internal Affairs

10. Reports on Emerging Affairs not included into Programmes

a) EPHA GA and elections - June 2019

Jean-Paul Zerbib recommended to continue working with EPHA and try and enter the board at some point in the future. It is an association dealing with public health at the European level so doctors should clearly be included in the board.

Serdar Dalkilic also recommended continuing working with EPHA, even if not as board members, as it is quite enriching for FEMS to work with other healthcare professional from such a large membership as EPHA.

b) Board proposal concerning GA translation

[F19-014](#)

Jean-Paul Zerbib presented his proposal stressing this comes from his analysis of the FEMS accounts as he has taken over the treasurer position.

João de Deus suggested making a first experience in Riga and make an informed decision after this experience/meeting. He emphasized it is not a decision to stop the translation but to make an experience.

Vote: 2 votes against; 3 abstentions; the decision is to organise the Riga GA without no translation and then evaluate how to proceed next.

Fabio Pinto – we should include the evaluation on the agenda of the Riga GA.

c) Action Day 2019

Claude Wetzel reminded this was an initiative organized at the proposal of the former FEMS president, Enrico Reginato and warned that it may have a different impact from country to country (i.e. in France, it was not very effective).

Alessandra Spedicato suggested making a short video where each of the FEMS delegates can present herself/himself, like that we show the others what FEMS is.

Paulo Simoes said the Action Day was a good idea at first, but it got more and more difficult to have a good reaction over the years.

Jean-Paul Zerbib suggested acting in a different manner, since the Action Day did not prove very efficient; for instance, organize a street protest during the FEMS GA in Zagreb to protest against the lack of remuneration for overtime of Croatian doctors and which should also be popularised via the social media. Or manifest in

Brussels in front of the European institutions, like that FEMS becomes more visible and enhance its militant image as defender of doctors' rights across Europe.

Laurent Heyers : we need to enhance our visibility via modern social media in order to become more known to our national members as well as other national/international instances.

João de Deus – the challenge is to think of having a different approach so as to increase FEMS visibility at the national/international level and show FEMS commitment towards defending doctors' interests across Europe.

Claude Wetzel suggested to establish a working group on communication (5 persons maximum), with a responsible specialised in social media and produce a proposal for the Riga GA.

Arancha Albesa gave the example of the Spanish union that hired a specialist in communication/social media, further producing a strong media impact.

Hylke Warners - we need to think on the goals to achieve and then channel to reach those goals; the action day was too general. We need to think who do we want to reach and with what message and then act accordingly. This a job for a professional.

João de Deus concluded suggesting FEMS creating a working group and getting help from a professional to improve the communication strategy of FEMS; the working group: Bojan Popovic (coordinator), Laurent Heyers, Jean-Paul Zerbib, Alessandra Spedicato.

11. Financial Reports - art. 8 of the Statutes (Jean-Paul Zerbib):

- a) Treasurer report
- b) FEMS accounts at 31.12.2018 [F19-005](#)
- c) Internal auditor report [F19-024](#)

Jean-Paul Zerbib thanked Paulo Simoes and Enrico Reginato for leaving FEMS a sound financial situation. Incomes are at a lower level meaning bigger savings. He raised the question of the unpaying members – a decision should be taken by the GA. The fees remain unchanged for the following year. Accounts unanimously approved – the board is discharged for the financial year 2018.

Friday 14.00-17.00 Working Groups

Working group on *European doctors' salaries* (chair João de Deus)

Working group *Sharing solutions and ideas to overcome working time issues* (chair Alessandra Spedicato) [F19-028](#)

12. Strategy Follow-up, Plan for Programmes 2018 – by strategic goals 2017-2021: [F17-043](#)

(call for programmes sent, new proposals should be inserted under the relevant strategic point)

1. Improving working conditions for doctors in all European States – updates from the working group (Arda Saygili/Paulo Simoes/Claude Wetzel/Fabio Pinto)

Fabio Pinto - We are in a stand-by point. Our proposal is to launch a survey – to include 5 themes: physicians working area, quality of care, patient safety and risk management, continuing professional development, detection and caring programs and age of retirement of doctors. We will prepare the new document before Riga to be included in the agenda.

2. implementing compensatory period without exceptions (Alessandra Spedicato):

- Stand-by duty – current organization in FEMS countries

[F19-017](#)

Alessandra Spedicato presented the findings of the survey.

3. implementing minimum doctor's salary across EU at 2 average EU salaries, corrected by PPP – FEMS conference on inequalities in doctors' working conditions and remuneration across Europe – updates - report of the working group – CFSMR/LAD, presentation of the further steps to be taken [F18-019](#)

João de Deus/Hylke Warners: this is a topic to be treated by the WG on salaries.

Denis Păduraru informed that the doctors' salaries were significantly increased in Romania. Increasing the salaries did not stop the emigration but somehow slowed down the process. It is not only salaries, but also the working conditions that count for the decision to leave the country and work abroad.

Bojan Popovic expressed his concern as FEMS based its research on the idea that increasing the salaries will reverse doctors' immigration.

Hylke Warners: this is a process requiring some time, we won't see any results before several years.

4. ensuring there is no reduction of incomes or bonuses due to the reduction of working time down to 48 hours, (Harald Mayer/Jean-Paul Zerbib): presentation of the further steps to be taken

Jean-Paul Zerbib: we have received a number of responses; the real the problem is how to respect the 48h rule, as in reality this is not observed. We have to change our questionnaire to adapt it to this situation.

Bojan Popovic: the issue is how is it achieved. How does it work? I don't believe it's automatic. The only country that achieved that was Austria, by increasing the basic salary.

5. professional fault to be excluded from criminal codes in all European states, (updates from the working group Enrico Reginato/Christiaan Keijzer, Claude Wetzel): ideas for further steps

Claude Wetzel recalled a first meeting on the topic in Genova in 2016; we changed a bit the WG, Christiaan Keijzer asked me to coordinate the group and we added Quirino Piacevoli and Bernard Maillet; we will prepare a proposal of a questionnaire on the issue. We will prepare a proposal to have the results by the common meeting with AEMH. The scope of this working group is just to have a definition of the legal system in force in the countries.

Bojan Popovic – we have already researched the different systems and we have produced the presentations on how the systems work. We would like to see the dynamics of it. Is there an increase in the peaceful settlements or less criminal charges? Our goal is to raise the awareness across Europe and next to measure our efficiency.

6. restriction of trainee's liability for refund of expenses to max. 24 months, (Bulgarian Medical Association/Cyprus Turkish Medical Association) : plan for further steps [F19-030](#)

Ahmet Ozant presented the results of the survey.

Bojan Popovic: I suggest to use this data and prepare a FEMS policy position and discuss it in Riga.

João de Deus: this issue is connected to working conditions.

Alessandra Spedicato: EJD made a statements 2 years ago – following the situation of the Croatian colleagues, maybe we can contact them and see their position.

Bojan Popovic – CTMA needs to connect with EJD, they have a perfectly logical position. We have to coordinate this policy work with EJD and to have a common position.

7. minimum 6,9% GDP public sources expenditure for healthcare, [F17-085](#)
plan for the further steps according to the conclusions of the Brussels conference

No updates for the time being.

8. finding and promote best bargaining practices and to implement separate bargaining for the doctors, (Bojan Popovic) – conference follow-up

Bojan Popovic: no more surveys needed, it is time to work on concrete cases; Croatia is one of them; if there are any other cases, please let us know.

13. Statutory issues

- a) Establishing an official FEMS branch / independent entity in Brussels – updates

Jean-Paul Zerbib will go to the Prefecture of Paris to ask for a legal copy of the FEMS statutes, needed in order to open an official FEMS branch in Brussels.

14. Next FEMS Meetings

- a) 3 – 5 October 2019, Riga, Latvia – information and updates

Jean-Paul Zerbib informed on the latest organisational details for the GA in Riga. The choice for Latvia was due to the fact that Paris is a rather expensive meeting destination. In Riga the GA will be organised at the Pullman hotel.

- b) FEMS spring GA 2020 – call for invitations

Lukas Stärker - common meeting with AEMH – Kitzbühel, Tyrol/Austria; [Hotel Schloss Lehenberg](#), 7-9 May 2020. Airports nearby - Innsbruck / Munich.

- c) Autumn 2020 – Renata Culinovic-Caic invited the FEMS delegates to Zagreb in the name of HLS (24-26 September 2020) for the FEMS autumn GA.

Part IV: Emergencies, European Affairs, National Affairs

15. Discussion and Decisions on Emergencies

- Strategies for a better involvement of FEMS members in FEMS activities (A. Spedicato)

Alessandra Spedicato thanked the delegates for your contribution to the FEMS conference on Thursday; the results will be used to try to influence the Italian government

Selma Gungor informed on the situation of the Turkish doctors.

[F19-036](#)

João de Deus suggested writing a letter of support from FEMS; Selma Gungor also suggested the national associations to send letters of support.

Quirino Piacevoli suggested sending the letter to the Turkish government as well to the EU institutions to create awareness at a higher governmental level.

Selma Gungor recommended the letter to be sent to the Ministry of Health and the Ministry of Justice.

José Santos reminded that EMOs have already sent a letter/statement to the Turkish government earlier this year, but with no results.

Claude Wetzel suggested writing to the secretary general of Council of Europe, since Turkey is not a member of the EU; CoU is leading authority of the Court of Human Rights.

Enrico Reginato suggested not mentioning in the letter the request from the FEMS Turkish delegation, for fear of potential retaliation at the national level.

Bojan Popovic – we have to be aware that the document, once sent to the Turkish authorities, it will be subject to the Turkish national legislation. He further wondered of the use of such a document/attempt, which proved useful in the past and which may also create problems for the Turkish delegates.

Selma Gungor said there was an effect of the previous letter, since the sentence given in the case was minimum. Also, such initiatives encourages Turkish doctors in point of international solidarity.

16. Reports and Documents for adoption and decision

a) Internal Documents from Working Groups

WG on Working time:

Alessandra Spedicato: the working group prepared some questions that could give us further data on call time / stand by time, which will be sent out to the delegates.

WG on Salaries:

[F19-035](#)

João de Deus presented the results of the working group. The grid with the salaries will need to be filled in by all delegates. Delegates are kindly requested to send out the official salary tables valid at their national level, besides fulfilling the grid. All this data will be further analysed by the economist of the Portuguese National Association and a real comparison among the countries will be performed. An additional questionnaire will be sent out further about how much money a head of department makes more (by holding this position), if the duties are included in the time schedule and how it works for the GPs and family doctors.

b) External Documents from other Organisations

- Proportionality Directive – [CPME briefing](#)

Lukas Stärker emphasized this directive is an example of bad action from the part of the European Union, as it complicates and damages things for the healthcare sector at the national level.

João de Deus informed that the FEMS board decided not to invite the Metges of Catalunya for the Naples GA since no decision in this point had been taken at the previous GA in Brussels.

17. Country and Organization Reports

Austria OAK / VLKO	F19-010 F19-023	Netherlands LAD	F19-016
Belgium/GBS-VBS		Poland OZZL	F19-026
Bulgaria/BgMA		Portugal/Ordem dos Medicos/FNAM/SIM	F19-033 EN F19-033 FR
Croatia/ HLS	F19-025	Romania/CFSMR	F19-011
Cyprus/CTMA	F19-031	Slovenia / FIDES	F19-020
Czech Republic/LOK-SCL	F19-022	Spain/CESM	F19-012
France/FPS/UNMS/	F19-013 F19-027 EN F19-027 FR	Turkey/ Istanbul Medical Chamber	F19-029
Italy/ANAAO/AAROI/SNR	F19-021		

Austria – besides the national report, a particular situation had recently occurred – the government resigned, elections will be held in September; Lukas Stärker expressed his concern that this development will impact on the pace of the current reforms.

Belgium – a report will be prepared for the next meeting.

Croatian report – Renata Culinovic Caic – what I want to ask from FEMS is to send a strong message to our government that there are European laws, and institutions that can hold them responsible.

Bojan Popovic – we cannot put pressure on the Supreme Court as the government did; we cannot act their way; we have to wait for the decision of the supreme court and eventually go higher – European Court of Justice. 2nd issue – collective bargaining – we cannot go to ILO with half a page – I need detailed information to prepare a case for the ILO. Otherwise, it will only be a declarative position.

João de Deus – Bojan Popovic may prepare a statement in point – FEMS is supporting the Croatian trade union.

18. European Medical Organisations

a) The Floor to European Medical Organisations or Reports from Liaison Officers

- AEMH : Dr Sergio Bovenga

He encouraged EMOs collaboration and gave the example of the AEMH Clinical Leadership project. Another themes requiring such a cooperation are the doctors' working conditions and preventing violence against doctors. We all have to cooperate to make sure that the Commission issues the appropriate regulations to be implemented in all member states. Last but not least, the matter of how to defend fair universal and accessible health services for all also requires common attention by the EMOs.

- CEOM: Dr Jose Santos

[F19-037](#)

- CPME: Dr Christiaan Keijzer

[F19-038](#)

- EJD: Dr Kitty Mohan

Dr Kitty Mohan informed on the EJD activity; thus, they held their GA in Edinburgh, several topics discussed, among which digital health and its impact on the curricula, violence against doctors, burn-out; EJD is also working on the issues of flexible working and postgraduate training. The next meeting is scheduled for Berlin, beginning of November, where there will be a large discussion on the implementation of the EWTD. Elections will also be held for a new EJD board. EJD will be keen to work with FEMS on the issue of payment for leaving one's residency (which FEMS already brought to the attention of DG Employment). Our Latvian colleagues will also organize a conference on free movement and in particular on this issue of payment for leaving training program in November this year.

- UEMS : Dr Bernard Maillet

Dr Maillet informed on the last two UEMS meetings in 2018 (Marrakech and Brussels), where the main discussions are postgraduate training and CME/CPD (mainly on ETRs; since the only requirement in the PQ European directive is the length of training, UEMS believes this is a rather simplistic view and that competences should also be included in the debate, with the ETRs being considered as an introduction to the competences); next meetings in October/London to highlight that BMA remains a full member of UEMS. UEMS will also organize a new conference on CME/CPD in Sevilla/Spain next spring.

N.B.: participation in votes requires the payment of the contribution of 2018 (article 12a of the Statutes).