



**ASSOCIATION EUROPÉENNE DES MÉDECINS DES HÔPITAUX  
EUROPEAN ASSOCIATION OF SENIOR HOSPITAL PHYSICIANS  
EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE  
EUROPESE VERENIGING VAN STAFARTSEN  
DEN EUROPÆISKE OVERLÆGEFORENING  
ΕΥΡΩ ΑΙΚΟΣΙΙΕΥΛΛΟΓΟΓΟΣ ΔΙΕΥΟΥΝΤΩΝ ΝΟΣΟΚΟΜΕΙΩΝ  
ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI  
DEN EUROPEISKE OVERLEGEFORENING  
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES  
ASOCIACIÓN EUROPEA DE MÉDICOS DE HOSPITALES  
EUROPEISKA ÖVERLÄKARFÖRENINGEN  
EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVINIKOV**

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**Minutes of the AEMH-Plenary Meeting  
Berlin, 6-7 September 2002**

Chairman : Dr. Lies, President

Participants: see records of attendance  
partly, guest speaker Dr. von Boetticher, MEP

Minutes : Brigitte Jencik, Secretary

Opening: 6<sup>th</sup> September 2002, 9.00 am  
7<sup>th</sup> September 2002, 8.40 am

Adjourned: 6<sup>th</sup> September 2002, 4.15 pm  
7<sup>th</sup> September 2002, 1.30 pm

## **1. Addresses of welcome by the AEMH-President, Dr. Lies, and the German host, Prof. Hoffmann**

The AEMH-President, Dr. Lies, opened the meeting and wished all the delegates welcome. He thanked the German Delegation for their invitation to host this meeting in the Old New capital of Germany and thanked Prof. Hoffmann for his presence. The President also thanked the European deputy Dr. von Boetticher for coming and then especially welcomed those attending the AEMH Plenary meeting for the first time, i.e. the Secretary General of the CPME, Mrs Tiddens-Engwirda and the Vice-President Dr. Nunes, the President of PWG, Dr. Tiainen, and the new delegates, Prof. Spath from Austria, Dr. Aggernaes from Danmark, Dr. Eikvar from Norway, Dr. Costa from Portugal, Dr. Dragula and Dr. Pasztor from the Slovak Medical Chamber. The President also welcomed Dr. Bertrand President of the FEMS.

Prof. Hoffmann in his welcome speech reminded the close links of the VLK to the AEMH not only because of supporting the AEMH Secretariat for over 10 years. Nevertheless he expressed the high expectations the VLK has towards the AEMH; i.e. to make the voice of the hospital physicians heard in Brussels, to defend their role in the political debates in order to avoid that medical problems will be taken over by politicians. Moreover, he emphasized that it is mandatory to keep up the qualification and training level to ensure a common standard of the medical profession in Europe. He closed with the forceful appeal “Allons enfants de l’Europe”.

The President gave the floor to the special guest, Dr. von Boetticher, Member of the European Parliament, who stated that the social policy in Europe is still in its infancy and within the frame of the Amsterdam treaty 99 the European Union can only supplement national decisions as the main responsibility and control over health services is in the hands of the member states governments. He appealed for more Europe in the health care system, Europe has to reach in the long run a minimum standard of health care in all European countries. In 2003 the public health programme will be implemented focusing on three priorities : 1) Improving health information and knowledge, 2) Responding rapidly to health threats, 3) Improve the health status through health promotion and prevention. Until 2006 312 million € are made available to achieve these goals. He summarized that in health politics there is a lot of “Europe”, but in the health care system it is only the begin but the principle of free movement increases the need for it.

## 2. Nomination of the Heads of Delegations

Austria	- Prof. Spath	Luxemburg	- Dr. Lies
Belgium	- Dr. Godts	Norway	- Dr. Eikvar
Denmark	- Dr. Aggernaes	Portugal	- Dr. Moreira da Silva
France	- Prof. Degos	Slovenia	- Dr. Bitenc
Germany	- Prof. Nolte	Spain	- Dr. Lopez Pena
Greece	- Dr. Antypas	Sweden	- Dr. Sandberg
Italy	- Dr. Bianco	Switzerland	- Dr. Guisan

## 3. Approval of the Minutes of the 53<sup>rd</sup> Plenary Meeting in Oslo (AEMH 01/050)

The Minutes were approved unanimously.

## 4. President's Report

The President presented his report (see document AEMH 02/038) and reported about the relationship of the Independent Associated Organisations with the CPME, which has found a new impulse in the brainstorming meeting in Salzburg, where new cooperation models have been studied.

## 5. Financial Report

- Treasurer's Report 2001 (AEMH 02/018) presented by the AEMH-Treasurer Dr Kirschner. The report raised no comments.
- Closing of account 2001 (AEMH 02/014)  
Dr. Kirschner presented the Closing of accounts 2001. The Closing of accounts raised no questions.
- Internal Auditor's Report (AEMH 02/015) by Dr. Godts, read by Dr. Kirschner.

The President asked for the discharge of the 2001 Report, the assembly did so by a unanimous vote.

### - Budget 2003

The Budget for 2003 (AEMH 02/019) was drafted with 3 alternatives and the Treasurer explained the consequences of each. He reminded the Assembly the reasons of decreased income, i.e. less contribution fees due to the resigning of the Netherlands delegation, the decrease of VLK's financial aid, and the rent of office space.

**Alternative 1** being the status quo, would mean a deficit of 19,383 €.

**Alternative 2** projects a higher income by a raise of 10% of the contribution fees and a higher interest rate on the saving account. This budget shows a deficit of still 10,898 €.

**Alternative 3** with an increase of 15% on the contribution fees and savings on translation facilities in the plenary meeting, the budget could come to an almost break even point.

The Board's decision had been to involve democratically all delegations in the debate and to choose what is best for the future work of the AEMH.

The President asked for vote on the three options, which resulted in a majority of 9 votes in favour of alternative 2, i.e. membership increase of 10 %. Despite this vote, some delegations needed to revert to their national delegation. It was therefore decided that all delegations should firmly confirm the decision of the plenary by e-mail within one month.

Dr. Kirschner reported that he is looking for a new and more equitable contribution keys, and compared those from UEMS and UEMO, which would result in increases for some and decreases for other delegations.

The financial guidelines were changed to update on the new situation of the Secretariat in Brussels.

The 40<sup>th</sup> anniversary of the AEMH has not been budgeted and therefore it will be combined with the 56<sup>th</sup> Plenary Meeting in Copenhagen . External aids have to be found to make this a special event.

The President called on all delegates to use their relations and influences to find sponsors.

## **6. Statutes**

The President reminded the delegates the reason of the necessity of changes to the statutes. He also reported from recent changes on first draft of statutes recommended by the Ministry of Justice, which were mostly based on different wordings and did not change the fundamental sense. Additionally it was proposed to extend the vote by correspondence granted to the Board also the plenary. The plenary assembly approved these changes unanimously.

## **Presentation of the Slovakian Medical Chamber**

Dr. Pasztor, Vice-President of the Slovakian Medical Chamber, presented the situation in his country. In Slovakia membership in the Slovakian Medical Chamber is mandatory for physicians. The Slovak Republic has a typical state health care, there are 80 public hospitals against 2 private. On the other hand 99 % of the primary care physicians are in the private sector. There are 18.000 physicians in Slovakia., from which 8.000 in the private sector. Slovakia has two other medical associations, with voluntary membership, there is the Slovak Association of Hospitals and the Association of Private Physicians (President Dr. Pasztor).

## **7. Working groups:**

Presentations:

### **CME/CPD**

Dr. Zilling reported (see document AEMH 02/037) about the work of the working group formed by the Swedish and the Portuguese delegation. He asked the Secretariat for an inquiry to the other delegations on the topic. There is probably no consensus if CME/CPD should be voluntary or mandatory. But whilst the UEMS is more favouring the American system based on points, the AEMH should focus on what is best for the hospital and for the patient.

Dr. Zilling furthermore expressed his will to continue the work and to prepare statements on revalidation / recertification and invited other delegations to join the working group.

### **Regulation of on call duties according to the judgment of the European Court of Justice.**

Prof. Nolte presented a summary (distributed in Berlin) from the questionnaire he had sent to all delegations showing that although the regulation cannot be ignored, the financial and human resources to implement it are not provided.

The President asked Prof. Nolte to draft a statement which comments the consequences and necessary measures of the European Court decision. Prof. Nolte together with Dr. Eikvar/ Sweden and Dr. Tiainen/ PWG would work out a statement to be presented at the end of the meeting. Dr. Bertrand/ FEMS supported the initiative.

### **Accreditation**

Prof. Degos did not present a written report as he did not get sufficient responses from the other delegations. He instead commented the situation of hospital accreditation in France where all hospitals will have to proceed to an assessment procedure by end of 2002. Hospitals work out a self-assessment, which is evaluated by assessors from a special organization, the ANAES.

The President pointed out that it is the responsibility of the AEMH to avoid a one level accreditation putting health care quality at the same level as administrative problems. Dr. Tinning subscribed to this view and added to focus more on medical treatment and education.

The working group is re-conducted and Prof. Degos will resend the questionnaire.

### **Management and Budgetisation**

Dr. Guisan apologized not having a report. He plans to elaborate a questionnaire and recalled the objective, which is to share the responsibility of management and budgeting of European hospitals on a parity basis according to Doctor's medical competences and not let solely business managers handle the matter. Economical views are not always compatible with quality health care.

Dr. Bitenc warned against the trend noticed all over Europe whereas hospitals are considered like an industry and therefore puts the professional autonomy in danger.

### **Risk Management**

Dr. Wedin presented her and Dr. Larsen's thoughts (AEMH 02/047) and remarked that the ambition of the WG is to bring out statements in the future and invited other delegations to join the group for a broader European overview. Dr Wedin concluded her presentation with the words: Whenever there is a mistake or failure, rather ask "What and Why and not Who".

Dr. Aggernaes would like to see accreditation of hospitals and CPD linked to this topic and become the main responsibilities of the AEMH and thereby make the AEMH the defender of best health care for the patients.

### **AEMH EU-Enlargement**

Prof. Nolte made a short comment on the report distributed. He welcomed the Slovakian observers and further contacts will be made in the enlargement process.

### **Integral Care Programme for Sick Physicians - P.A.I.M.M.**

Dr. Sanchez-Garcia made a presentation about this programme which was set up in Spain in order to provide comprehensive care for physicians suffering above all from mental and addiction problems, thus ensuring that they receive the necessary treatment and can, consequently, practice medicine in optimum conditions.

(Documents distributed)

### **Conclusion**

The President expressed his satisfaction about the work and spirit of the Working Groups and his firm conviction that they are well alive.

### **Professional Recognition**

This topic gave the opportunity to show how future collaboration AO/CPME should be. The result was the common statement (CP 2002/069). The SG of the CPME, Mrs Tiddens-Engwirda stated that the lobbying efforts and consultation with other regulated professions concerned by the European Directive represents 75 % of the CPME work at the moment. Both statements (CPME/ AO and 7 regulated professions) were favourably received by the Commission due to the argument that the new directive is counterproductive for the migration of doctors.

## **8. Reports of the delegates to the Associated Organisation**

**CPME** – President Dr. Lies (see document AEMH 02/044)

Mrs Tiddens-Engwirda added that the CPME is also active in the review of the pharmaceutical legislation. Tobacco remains a main topic. Danish and Greek ministers of health have been visited by the CPME to prepare a conference on

enlargement, in which the CPME will get involved. Moreover, members of the EU Commission will take part in future CPME meetings.

Dr. Nunes added that in the future health matters should be handled more and more on a community level and therefore a strong unified medical organization is needed in Brussels where all expertise's are represented.

**FEMS-Dr. Morresi (see document AEMH 02/043)**

Dr. Morresi reported about the working methods of the FEMS which is based on continuity with 25 items on the agendas carried forward to the two annual meetings.

Dr. Bertrand/ President of FEMS added that FEMS works with questionnaires and spends a lot of time on this. He particularly mentioned 3 items where a co-operation with AEMH would be valuable. 1. A comparison of doctor's salaries to equivalent other professions, 2. A study of the work load in different hospital functions, 3. The female participation in the medical work force. To broaden the range of replies, Dr. Bertrand would appreciate if AEMH-delegations of countries where FEMS has no representation would answer these questionnaires.

**UEMS- Dr. Zilling**

Dr. Zilling attended the Management Council of the UEMS in March, see his report AEMH 02/041. He reported about the imminent elections of the President and Secretary General and the difficulties that some of their working groups experienced.

**EFMA/WHO – Prof. Nolte**

Please revert to Prof. Nolte's report of the meeting of the European Forum of Medical Association distributed in Berlin. It refers to the annual meeting that took place in Vienna in April, which was attended by 100 delegates from 34 countries from which many Eastern European countries.

**PWG**

As unfortunately no delegate could attend PWG's meeting in the past year, the President gave the floor to the PWG President, Dr. Tiainen, who pointed out that this was the first time PWG attended an AEMH meeting. But as Senior Doctors set the framework for the future work of Junior doctors, this collaboration should definitely be continued. The main topics of the PWG's work are working conditions including working time, training, work force numbers, medical demography. PWG's has edited a Policy statement for Integration of non-EU doctors.



## UEMO

There is no liaison officer appointed to attend UEMO meetings. The President reported about discussions with the UEMO President Dr. Fabian to share the office space within the CPME premises. He also indicated that UEMO lobbying effort had been fruitful and that General Practice has become a specialty.

## 9. National Reports

The President proposed to summarize the National Report as they have been distributed in advance. The delegations agreed on this proposal and gave a summary of their national report.

- Austria	AEMH 02/020	- Luxemburg	AEMH 02/027
- Belgium	AEMH 02/021	- Norway	AEMH 02/028
- Denmark	AEMH 02/022	- Portugal	AEMH 02/029
- France	AEMH 02/023	- Slovenia	AEMH 02/030
- Germany	AEMH 02/024	- Spain	AEMH 02/031
- Greece	AEMH 02/025	- Sweden	AEMH 02/032
- Italy	AEMH 02/026	- Switzerland	AEMH 02/033

## 10. Elections

**Elections of the AEMH-Board** as to § 8 of the AEMH Statutes in secret ballot and individually.

For the time of the election the President proposed Dr. Tinning to chair the meeting, which was accepted unanimously by the assembly.

Dr. Tinning asked for the assistance of Dr. Bitenc/ Slovenia in this task.

Dr. Tinning reminded the rules of procedures as described in the AEMH statutes.

### a. President for the term **2004-2006**

The Swedish delegation proposed the candidature of Dr. Lies. Dr. Lies was elected unanimously. He accepted the election and thanked the assembly for entrusting him with a 3<sup>rd</sup> term of presidency. His aim is to work more closely with the CPME and the AOs with more intervention in the EU institutions. He will work out a programme, whose achievement he sees as his commitment.

### b. 1<sup>st</sup> Vice-President for the term 2003-2005

The Norwegian delegation proposed Prof. Nolte. Prof. Nolte was elected unanimously. He accepted the election and thanked the assembly.

### c. 2<sup>nd</sup> Vice-President for the term 2003-2004

The Swedish delegation proposed Prof. Degos. Prof. Degos was elected unanimously. He accepted the election and thanked the assembly.

### d. 3<sup>rd</sup> Vice-President for the term 2003-2004

The Norwegian delegation proposed Dr. Morresi. Other candidate presented by Greece : Dr. Antypas. Dr. Morresi was elected with 13 votes against 1. Dr. Morresi accepted the election and thanked the assembly.

### **Elections and confirmation of AEMH-delegates to the Associated Organisations 2003-2004**

**CPME** – The AEMH President is traditionally representing the AEMH in CPME meetings. This was confirmed by a unanimous vote by the delegations.

**FEMS**- candidate Dr. Morresi. Dr. Morresi was confirmed in his function.

**UEMS** – Dr. Zilling was re-elected unanimously.

**EFMA/WHO** - Prof. Nolte was re-elected unanimously.

#### **PWG**

According to the decision made in the plenary meeting in Oslo the delegation where the PWG meeting is organised sends a delegate. Dr. Tiainen invited Dr. Guisan from the Switzerland to their next meeting in Berne in November. Dr. Guisan accepted with thanks. The spring meeting in Austria will be attended by Prof. Spath.

#### **UEMO**

The AEMH did not send a delegate to UEMO meetings in the past due to cost saving reasons. The next UEMO meeting taking place in Florence, Dr. Morresi proposed to delegate Dr. Reginato from Florence. This proposal was accepted and applauded.

### **11. Dates and Venues of the next Plenary and Board meetings**

The proposal of the AEMH-board to change the calendar of meeting was supported by the delegations as long as collision with the meetings of the other European Medical Organisations is avoided.

The 1<sup>st</sup> Board meeting will take place in the second half of January. April/ May the Plenary meeting will take place.

This new schedule will be implemented from 2004, the date of the 56<sup>th</sup> Plenary meeting will remain unchanged, i.e. 5-6<sup>th</sup> September in Copenhagen. Dr. Aggernaes invited all delegates in the name of the Danish delegation to Copenhagen. She will look into the possibility to combine the plenary meeting with a working seminar for the special event of the 40<sup>th</sup> AEMH-Anniversary.

The Spanish delegation invites in Spring 2004 to the 57<sup>th</sup> AEMH-Plenary meeting.

## **12. Miscellaneous**

### **AEMH-Statement**

Prof. Nolte presented the final version of the Statement on Regulation of on call duties, which was adopted unanimously.

### **World Market Research Center**

The President reported from his contacts with WMRC. The members of the Board had approved a collaboration and so the President will join the advisory panel of WMRC.

### **Integral Care Programme for Sick Physicians**

Dr. Sanchez-Garcia proposed to include the document in the next Newsletter, as well as the document on Working conditions of hospital physicians.

### **Membership Application**

Dr. Pasztor and Dr. Dragula were mandated by the Slovakian Medical Chamber to apply for AEMH membership. The vote of the assembly to accept the Slovakian delegation as a full member was unanimous.

The meeting was closed at 1.30 p.m.

Dr. Raymond Lies  
President

Prof. Dr. Hartmut Nolte  
First Vice President