



**ASSOCIATION EUROPÉENNE DES MÉDECINS DES HÔPITAUX  
EUROPEAN ASSOCIATION OF SENIOR HOSPITAL PHYSICIANS  
EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE  
EUROPESE VERENIGING VAN STAFARTSEN  
DEN EUROPÆISKE OVERLÆGEFORENING  
ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΔΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ  
ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI  
DEN EUROPEISKE OVERLEGEFORENING  
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES  
ASOCIACIÓN EUROPEA DE MÉDICOS DE HOSPITALES  
EUROPEISKA ÖVERLÄKARFÖRENINGEN  
EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVNIKOV  
EUROPSKA ASOCIACIA NEMOCNICNÝCH LEKAROV  
EUROPSKA UDRUGA BOLNIČKIH LIJEČNIKA  
ЕВРОПЕЙСКА АСОЦИАЦИЯ НА СТАРШИТЕ БОЛНИЧНИ ЛЕКАРИ**

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## **Report from the UEMS council meeting in Copenhagen 9-11 October 2008**

By Thomas Zilling liaison officer for AEMH

Edwin Borman from Great Brittan, chairman of the UEMS CME-CPD Working Group had a tough start at the UEMS meeting in Copenhagen. Due to late arrival at Kastrup Airport he missed both first days board meeting and the working group he was supposed to chair. In his plays Hannu Halila now past president had to chair his working group.

The working group on CME-CPD started to discuss the need for a questionnaire on CME-CPD. Hannu Halila thought there were too many questionnaires to answer. He also was eager to see the results of the AEMH enquire which will give a good update on the current situation in most EU countries. Dr Helios Pardell agreed that there is no need for a questionnaire at the moment but that it is important to describe how the different systems of mandatory CME and recertification works in those countries where this system is applied. It seems as people claim mandatory systems which obviously is non functioning. There was a report on the work of the on going Rome-group with the item to produce a glossary for terms in CME/CPD between US and Europe. Finally the future work and chairmanship of the working group was discussed. However, no decisions were taken in the absence of the chairman.

The UEMS has at the moment the following working groups; CME-CPD, e-health, Future Structure of the UEMS, postgraduate Training, Quality in Patient Care, Specialist Practice in current Health Systems.

The council meeting started with the discussion on the accounts and vote for draft budget for 2009 and a new contribution key. There was some criticism regarding travelling costs of some board members and this critics was expressed by the UK delegation; -The UEMS Treasurer is called on, by the UEMS Board, to provide greater transparency regarding the UEMS budget and Accounts, by providing explanatory written comments for financial entries, and access to greater detail regarding these financial figures.

UEMS president Zlatko Fras commented during his report on the work particularly done in the UEMS working groups. It is not always so efficient which is a problem. To make the work of the organization more efficient Fras proposed an action plan for 2009 and an enlarged executive committee. Finally summarizing with the words –However beautiful in the strategy, look sometimes on the results. At the end of his report he welcomed Lithuania who was adopted as a full member of the board and now all three Baltic countries are members.

During the report of the working groups it was quite clear that in many of the groups the activity is very low. A problem shared with other organizations.

The elections for a new enlarged executive were dramatic. Edwin Borman from the UK was nominated for three different posts, secretary general, treasurer and vice-president. However he was not elected to any of the posts. The presidency was up to vote and Zlatko Fras was challenged by Dr Jörg-Andreas Rüggeberg from Germany. Zlatko Fras won with the votes 18 to 11. Regarding the post for Secretary General Bernhard Maillet remained on the post with the votes 24 to 5 against Edwin Borman. Also at the post as treasurer dr Borman was unsuccessful and lost 12 to 17 in advantage for the new treasurer Giorgio Berchicci from Italy. The following vice presidents were elected; Dr Ricard Gutierrez, Dr Romuald Krajewski, Dr Zoltan Magyari and Kari Pylkkänen.

At the UEMS meeting there is translation between English and French- This was not an issue that was questioned or discussed. This meeting opened by a so called Discussion Forum entitled; The proposed EU Directive on cross-border care.



**UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES  
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**Action Plan for 2009**

*Adopted by the UEMS Council in Copenhagen on 10<sup>th</sup> October 2008*

Key Area	Objectives	Time	Help	Responsible
KA 1. POLITICAL SIGNIFICANCE	- Development of lobbying, public relations and expert-knowledge to provide sound background for evidence-based policy-making	2009	No	Exec, Secretariat
KA 2. HARMONIZATION of POSTGRADUATE MEDICAL TRAINING IN EUROPE	- Establishment of the cycle for setting standards for PGMST - Having up-to-date review about the PGMST programmes in European countries - Consultations on harmonization of PGMST to other European bodies - European examinations and Fellowships	Spring 2009	No	Exec, Secretariat, WG PGT
KA 3. COORDINATION of CME / CPD IN EUROPE	- Define and disseminate the general standards for CME/CPD activities and for granting credit points - Define the feasible and consensually agreed procedure for granting the credit points for CME/CPD activities in Europe	2008- 2009	No	Exec, EACCME (+Task Force), WG Quality in Patient Care, WG CME/CPD
KA 3.	- Establish the central web-based database of CME/CPD activities - Having up-to-date review on the CME/CPD situation in European countries	2009- 2010	Yes	Secretariat
KA 5. DATA ANALYSIS	- Define & perform the 1 <sup>st</sup> pan-European Survey	2008- 2009	No	WG on Specialist Practice
KA 7. LEADERSHIP AND MANAGEMENT	- Management Structure - Personnel	2008	Yes	Exec, Secretariat
KA 8. MARKETING, IDENTITY AND ENHANCED FINANCIAL STABILITY	- Define the potential public / commercial bodies - Define the ways of communicating with such bodies - Assure appropriate structure for communication and marketing	2009 (06)	Yes	Exec, Secretariat
KA 8.	- Define financial resources besides membership fees	2009 (06)	Yes	Exec, Secretariat
KA 9. CORPORATE IDENTITY	- Analysis of the current UEMS image - Developing a plan to improve the UEMS already established corporate identity	2008 – 2009 (06)	Yes	Exec, Secretariat, WG Future Structure
KA 9.	- Improving the existing UEMS external corporate identity – visual image	2008 – 2009 (12)	Yes	Exec, Secretariat
KA 9.	- Improving UEMS corporate communication – increasing awareness of the organization	2008-2011	Yes (partly)	Exec, Council, S&B, EACCME, EACPGSMT, WG Future Structure, Sec.

President: Dr. Zlatko Fras  
Treasurer: Dr. Vincent Lamy

Secretary General: Dr. Bernard Maillet  
Liaison Officer: Dr. Gerd Hofmann

## APPENDIX

### KA1 – POLITICAL SIGNIFANCE

**Objective:**

- Development of lobbying, public relations and expert-knowledge to provide sound background for evidence-based policy-making

**Action:**

- Move forward and raise awareness on issues of concern for the constituency in the fields of:
  - Directive on the recognition of professional qualifications (Directive 2005/36/EC)
  - Electromagnetic fields (Directive 2004/40/EC)
  - Patient mobility (COM(2008)414-415)
  - eHealth
  - Healthcare workforce management

**Deadline:** 2009

**Outside help:** None

**Responsible persons:** Executive; Secretariat

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### KA2 – HARMONIZATION of POSTGRADUATE MEDICAL TRAINING IN EUROPE

**Objective:**

- Establishment of the cycle for setting standards for PGMST
- Having up-to-date review about the PGMST programmes in European countries
- Consultations on harmonization of PGMST to other European bodies
- European examinations and Fellowships

**Action:**

- Establishment of the EACPGMST (European Advisory Council for Postgraduate Medical Training)
- Office staff support (1/2 FTE)

**Deadline:** Spring 2009

**Outside help:** None

**Responsible persons:** Executive; Secretariat; working group on Postgraduate Training

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## **KA3 – COORDINATION of CME/CPD in EUROPE**

### **Objective:**

- Define and disseminate the general standards for CME/CPD activities and for granting credit points
- Define the feasible and consensually agreed procedure for granting the credit points for CME/CPD activities in Europe

### **Action:**

- appointment of the Governance Body to the EACCME
- detailed survey + publication on existing CME/CPD systems

**Deadline:** 2008-2009

**Outside help:** None

**Responsible persons:** Executive; EACCME (+ Taskforce)

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## **KA3 – COORDINATION of CME/CPD in EUROPE**

### **Objective:**

- Establish the central web-based database of CME/CPD activities
- Having up-to-date review on the CME/CPD situation in European countries

### **Action:**

- development of the software
- Office staff support (1/2 FTE)

**Deadline:** 2009-2010

**Outside help:** Yes (IT specialists)

**Responsible persons:** Secretariat

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## **KA5 – ANALYSIS of DATA RELATED to the PRACTICE of MEDICAL SPECIALISTS**

**Objective:**

- Define and perform the first pan-European survey

**Action:**

- Define and perform the first pan-European survey

**Deadline:** 2008-2009

**Outside help:** None

**Responsible persons:** Working Group on Specialist Practice

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## **KA7 – LEADERSHIP and MANAGEMENT**

**Objective:**

- Management structure
- Personnel

**Action:**

- Clear and detailed analysis of the existing management structure (SWOT analysis)
- proposal for improved management structure
- improvement in internal communication strategies and tools (membership database and updated website)
- transparent allocation of tasks of the Office staff
- possible new employments (min. 1 FTE permanent + 2-3 supporting (stagiaires?))

**Deadline:** 2008

**Outside help:** Yes (external advisor for review & consultation)

**Responsible persons:** Executive; Secretariat

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## **KA8 – MARKETING, IDENTITY and ENHANCED FINANCIAL STABILITY**

### **Objective:**

- Define the potential publics
- Define the ways of communicating with publics
- Assure appropriate structure for communication and marketing

### **Action:**

- comprehensive analysis and plan for communication & PR

**Deadline:** 2009 (06)

**Outside help:** Yes (external consultation agency)

**Responsible persons:** Executive; Secretariat

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## **KA8 – MARKETING, IDENTITY and ENHANCED FINANCIAL STABILITY**

### **Objective:**

- Define financial resources beside membership fees

### **Action:**

- Analysis document

**Deadline:** 2009 (06)

**Outside help:** Yes (external consultation agency)

**Responsible persons:** Executive; Secretariat

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## KA9 – CORPORATE IDENTITY

### Objective:

- Analysis of the current UEMS image
- Developing a plan to improve the UEMS already established corporate identity

### Action:

- Analysis document

**Deadline:** 2008-2009 (06)

**Outside help:** Yes (external consultation agency)

**Responsible persons:** Executive; Secretariat

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## KA9 – CORPORATE IDENTITY

### Objective:

- Improving the UEMS external corporate identity – visual image

### Action:

- New design of complete visual image of the organisation

**Deadline:** 2008-2009 (12)

**Outside help:** Yes

**Responsible persons:** Executive; Secretariat

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## **KA9 – CORPORATE IDENTITY**

### **Objective:**

- Improving UEMS corporate communication – increasing awareness of the organisation

### **Action:**

- communication with various publics
- articles in National Medical Journals
- communication to every single medical specialist in Europe (internet)

**Deadline:** 2008-2011

**Outside help:** Yes (partly)

**Responsible persons:** Executive; Council; Sections & Boards; EACCME; EACPGSMT; Secretariat