

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 ZDRAVINIKOV **EUROPSKA ASOCIACIA NEMOCNICNÝCH LEKAROV** EUROPSKA UDRUGA BOLNIČKIH LIJEČNIKA ЕВРОПЕЙСКА АСОЦИАЦИЯ НА СТАРШИТЕ БОЛНИЧНИ ЛЕКАРИ ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE

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# Minutes of the meeting of EMOs Presidents - Paris

2 December 2010

#### Participants:

Pr. Claude DEGOS	AEMH
Brigitte JENCIK	AEMH
Dr. Zlatko FRAS	UEMS
Dr. Bernard MAILLET	UEMS
Dr. Pedro NUNES	CEOM
Marie COLEGRAVE-JUGE	CEOM
Dr. Frank Ulrich MONTGOMERY	CPME
Dr. Claude WETZEL	FEMS
Dr. Enrico REGINATO	FEMS

Dr. Bernardo BOLLEN-PINTO PWG: excused

#### Observers:

Dr. Michel LEGMANN CNOM Dr. Xavier DEAU CNOM

### 1. Opening by Dr. Legmann and Dr. Nuñes

The meeting, which was chaired by Dr. NUNES, President of CEOM, began at 16:15 p.m.

Dr. Michel LEGMANN, President of the Conseil National de l'Ordre des Médecins (CNOM) welcomed the Presidents attending the meeting. He presented the CNOM and, in particular, explained its involvement in the EMOs via two o: the European Council of Medical Orders (CEOM) and the European Association of Hospital Physicians (AEMH).

He reminded the meeting that the CEOM had been formed at the initiative of France many years ago and that this body, which would meet the next day on 3 December in Paris, works mainly in the areas of ethics and deontology as well as the general organisation of medicine in Europe (regulatory bodies). Dr. LEGMANN emphasised that France does not have any special ambitions vis-à-vis the other countries which are members of the CEOM even if, by tradition, it acts as the organisation's secretariat.

Dr. LEGMANN, in the same way as other European delegations to the CEOM, informed the meeting that he is in favour of European countries having a common language vis-à-vis the supervisory authorities and that, accordingly, he would welcome any initiative intended to enhance cooperation and coordination. Accordingly, he declared that he is in favour of the creation of a DOMUS MEDICA.

#### 2. Procedural matters:

Election of the chairman and rapporteur

Dr. NUNES provided the meeting with a general policy report. First of all, he referred to the continuation of previous meetings and he reminded the meeting that he participates in EMOs meetings as President of the CEOM.

Marie COLEGRAVE-JUGE, CEOM Secretariat, was appointed rapporteur for the meeting.

#### 3. Approval of the agenda and the minutes

Dr. NUNES began by submitting the minutes of the previous meeting in Amsterdam to participants for their approval. The minutes were approved without discussion.

### 4. Follow up of the Amsterdam meeting:

#### A. Common position on task shifting

As regards **task shifting**, the major concern remains patient safety and, to that end, the medical aspect must take precedence over questions concerning health costs and dealing with the demographic crisis of doctors. It can only involve the delegation of tasks and not a transfer of competences and this inter-professional cooperation is only acceptable if, on the one hand, it is useful and, on the other hand, it ensures patient safety. Dr. NUNES proposed that a joint motion should be drawn up.

A detailed discussion ensued, during which:

- Dr. LEGMANN declared that he agreed with the opinion of Dr. NUNES. He reminded the meeting that despite the risks of a serious demographic crisis of doctors in France and notwithstanding the proposal by academics that certain competences should be transferred, the political authorities had agreed, as a result of the Order's action, that in the future reference would be made only to the delegation of tasks. He reminded participants of the problem of responsibility for treatment and, in particular, that the paramedical professions were very reluctant to assume such responsibilities.
- Following the lead of Dr. LEGMANN, Dr. MONTGOMERY reminded the meeting that doctors have tasks which are reserved for them, but which they can delegate, while remaining responsible for the indication and quality of treatment. He rejected the term substitution which has been used in Germany. He emphasised that some tasks which are not the responsibility of doctors could easily be taken over by others: administrative tasks in particular. In this regard Dr. LEGMANN reminded the meeting that he had proposed the creation of a new medico-administrative profession.
- Dr. MAILLET explained that in Belgium, there are two types of training, one of which is intended for doctors who come to Belgium for training but do not practice there subsequently. It is essentially scientific training.
- Dr. NUNES requested that types of treatment should be prioritised with a view to precluding the delegation of treatments. He pointed out that this is a subject which is also of interest to the World Medical Association.
- Professor DEGOS explained that several people can be responsible for the same treatment. If the doctor remains, as a result of delegation, responsible, the fact nevertheless remains that the person carrying out the treatment has a technical responsibility. There is therefore a twofold responsibility for each treatment.
- Dr. NUNES reminded the meeting that doctors who want to delegate treatment must satisfy themselves regarding the competence of the person carrying out the medical treatment. He also reminded participants that it is fundamental to train doctors as well as the paramedical professions in accordance with the needs of the location where they will practice and that it is not reasonable to organise training where the degree of specialisation cannot be exported because of the inadequacies of local infrastructures.
- Professor DEGOS reminded the meeting that, in particular in hospitals, it is possible that the authorities may impose on doctors, depending on availability, staff that may be competent but are not chosen by the delegating doctor. It is indispensable that delegating doctors accept the delegation of tasks only for someone that they alone have chosen.

Dr. WETZEL reminded the meeting that at the Ministerial Conference at La Hulpe on 9-10 September 2010, the question of skill mixes had been widely discussed, with in particular the question of the creation of new professions. There would appear however to be a risk for patient safety. He emphasised that co-responsibility and other subjects are not dealt with in these texts.

The meeting's reference documents: for **AEMH 047**, for **UEMS 2009-14** and for **CPME 10.128 FIN** were examined by the participants but no decision regarding the preparation of a common position was taken.

Dr. MONTGOMERY considers that, because of this convergence, a joint document is not necessary. Joint EMO documents are necessary only if there is a difference in order to achieve a consensus acceptable to all the EMOs.

### B. Common positions on professional recognition and EWTD

The Directive on the recognition of professional qualifications was discussed briefly. The Berlin statement, adopted in October by 26 medical competent authorities from 24 EEA countries (the Informal Network of Competent Authorities for Doctors) was examined and approved by the participants.

The working time directive will undoubtedly be revisited in 2011. Dr. WETZEL and Dr. MONTGOMERY will monitor closely any changes and will keep the various EMOs informed of developments.

### C. CEOM proposal for a 2<sup>nd</sup> motion on patient information

The CEOM has drawn up a proposal on patient information by the pharmaceutical industry. This will need to be reworked when the European Commission prepares its new text. The objective is to protect public safety and health.

## D. ECAMSQ presentation by Dr. FRAS

Please read the attached synthesis.

#### E. Domus Medica

Dr. FRAS presented the possibility of **purchasing a DOMUS MEDICA**, namely a three-storey building with two meeting rooms in Brussels, which would cost between 2 and 2.5 million Euros. Each EMO could contribute according to its use of the premises.

The meeting was closed at 18:30 p.m.

The next meeting is scheduled for March 29, 2011 in Ljubljana and will be hosted by the Slovenian Domus Medica.

Professor C.F. DEGOS for the AEMH Miss M. COLEGRAVE-JUGE for the CEOM