



**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 DE HOSPITALES
ASOCIACIÓN EUROPEA DE MÉDICOS DE HOSPITALES
EUROPEISKA ÖVERLÄKARFÖRENINGEN
EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVINIKOV
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Report from the AEMH-Liaison officer to the CPME

Dr. Raymond Lies

**The CPME met after the last AEMH Plenary Meeting on
20-21st September 2002 in Brussels
25-26th October in Salzburg and
28-29th March 2003 in Brussels
and shortly before the 56th AEMH Plenary meeting
29th-30th August 2003 (not reported here).**

This is short summary of the multiple activities of the CPME does not pretend to be exhaustive. Please do not hesitate to ask the secretariat for Reports, Policy statements or any other document and further information.

SUBCOMMITTEES

The CPME started in September 2002 as a trial a new working organisation by having its 4 Sub-Committees in parallel sessions in pairs with reduced interpretation facilities. This is subject to some controversial reactions from the CPME Member delegations and the structure will be evaluated in the September 2003 meeting. A strong argument in favor being a considerable cost saving by reducing from 3 to 2 days.

Medical Training, continuing professional development and quality improvement

The subcommittee continues its work on quality assurance focusing on guidelines on CME/CPD and strategies to implement the guidelines. The CPME supports the documents from WFME (World Federation of Medical Education) on standards for undergraduate medical education and the International Guidelines on postgraduate Medical Education.

The Board adopted a statement on the safeguard of accepted high educational standards.

The virtual working group on funding of CME/CPD (Dr. Zilling representing the AEMH) is preparing a policy paper.

Ethics and professional codes

Concerning the Commission's proposal for a Directive on setting standards of quality and safety for the donation, procurement, testing, processing, storage and distribution of human tissues and cells on quality of tissues and cells, the CPME approves the report of MEP Liese which takes into consideration the ethical concerns. The CPME adopted a Policy statement on this issue.

A document covering the storage and use of organs is in preparation .

Other document adopted concerned the problems of refugee doctors

Preventive medicine and environment

This subcommittee proposed statements to the CPME Board on Tobacco, Drinking water, noise pollution and a plan to combat drugs. All were adopted unanimously.

Health care, social security, health economics and pharmaceutical industry

Following the different judgment of the European Court of Justice the subcommittee drafted a policy statement on free movement of patients “When is a treatment sufficiently tried and tested”, which has been unanimously adopted.

The subcommittee initiated an action programme for increasing competence of health care personnel and the capability of health care providers to adequately deal with patients safety issues.

The CPME pleads for Patients safety/clinical risk management to be incorporated in the public health programme and for reporting systems standards to be incorporated in national accreditation.

In the aim of a survey on patient safety a questionnaire has been circulated and patients organizations have been contacted in order to explore collaborative actions.

WORKS IN PROGRESS AND GENERAL TOPICS

The CPME has considerably increased its lobbying activities and has reinforced its position as the medical consulting body for the European Institutions. President Dr. Brettenthaler and the CPME Secretary General Mrs Tiddens-Engwirda take each opportunity to exert influence on EU Policy and represent the medical point of view.

Recognition of diplomas and Professional Recognition

Following the joint statement signed by the CPME and the Associated Organisations the CPME President was invited at a European Parliament Hearing to present the viewpoint of the medical profession on the draft Directive on recognition of professional qualifications., i.e.

- satisfaction with the current sectoral system and a clear separation from the general system;
- opposition to divide the medical profession where only 17 benefit from automatic recognition, and the 35 others fall under the general system, posing a serious inhibition on the free movement of doctors;
- general practice to be considered as specialty;
- part-time training should not be considered as an exception but as a normal possibility offered to doctors.

In total 408 amendments to the initial proposal have been tabled from which many take into account the amendments the CPME has put forward. The next meeting of the Legal Committee of the European Parliament is planned for September 11, 2003.

European Convention

In drafting a position statement on “the future of the EU and reform of the treaties” the CPME made proposals to the European Convention in order to ensure that public health would be a social objective in the new European constitution. The CPME called upon the Convention to recognize the equal access to high quality health care as a fundamental right. The concern about the lack of Public health in the draft treaty was taken up by several MEPs .

High Level Reflection Group

The CPME has been invited to join the High Level Reflection Group on patient mobility consisting of 14 ministers, Commissioners Byrne and Diamantopoulos and 5 other European organisations. The CPME is taking part in one of the 4 working groups.

Elections

The General Assembly elected the President and Executive Committee for the term 2004/2005. Dr. Grewin/ Sweden was elected unanimously. Re-elected as Vice-presidents are Dr. Nunes/ Portugal, Dr. Poulsen/ Denmark, newly elected is Dr. Lemye/ Belgium and Prof. Vilmar/ Germany. Dr. Mart/ Luxembourg is elected treasurer and Dr. Fjelstedt is re-elected internal auditor.

Finance

The CPME ended the year 2002 with a surplus of 15,000 € and foresees for 2003 a surplus of 80,000 €.

The CPME is working on a new contribution key applicable from 2004 when the 10 candidate countries will join the CPME as full members. A draft has been presented by the treasurer taking into account the GDP and the number of doctors of each country and will be finalized in the September 2003 meeting.

Steering Committee

The CPME and the Associated Organisations meet prior to the CPME subcommittee and Board meetings and once more in January. The initial group CPME, FEMS, UEMO, UEMS, CEOM and AEMH has been joined by the EANA (European Working group of Practitioners and Specialists in Free Practice) who obtained the status of Associated Organisation. The Steering Committee will establish a working group on Patient Safety.