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ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI
DEN EUROPEISKE OVERLEGEFORENING
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES
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TO THE AEMH MEETING IN ATHENS MAY 2005

Danish National Report 2005

New administrative structure in Denmark (population: 5.4 million)

The general election in Denmark in February 2005 resulted in a new 4 year period for the right wing Government and the two largest parties the Conservative and the Liberals still have the majority of seats in Parliament together with the same supporting party – Dansk Folke Parti.

Thus the proposal for a revised structure of the administration in Denmark, which the government proposed before the general election, will still be the basis for a future reform on Jan. 2007.

The main theme for the health care area in this reform is that the present 14 counties will be replaced by 5 regions, which will have the hospital area as their main task. The number of authorities involved will be reduced significantly (previously 14 counties and the Copenhagen Hospital Corporation took care of this task). Furthermore, the municipalities will play a much larger role in the health care area than previously.

The change will have a significant impact on the Danish health care and hospital sector. However, at present, it is difficult to predict the consequences 100 per cent.

The collective bargaining

The collective bargaining in the public labour market has now been completed and will be in force for a new three year period – i.e. from 1.4.2005 to 31.3.2008.

The general results of the bargaining, which are valid for all public employees, will secure a salary increase in the three year period so that the real wage for public employees in Denmark is secured. This was one of the main demands from the employees to the bargaining and it is considered a success that this has now been achieved.

DMA Membership and Organizational Structure



About 94% (21.856 members in total) of the doctors authorized to practice in Denmark are members of the DMA as well as one of the three craft organization subdivisions. The task of the subdivisions - each within its own area of concern - is to look after the members' professional and financial interests.

The membership of the Association of Junior Hospital Doctors (8700 members) (which, it should be noted, does not refer to age, but rather to hospital training positions beneath the senior, "end

position" level) includes hospital house officers (interns) and registrars (residents), senior registrars and staff specialists as well as doctors appointed as university lecturers or to other non-permanent subordinate positions such as an amanuensis/trainee in general practice.

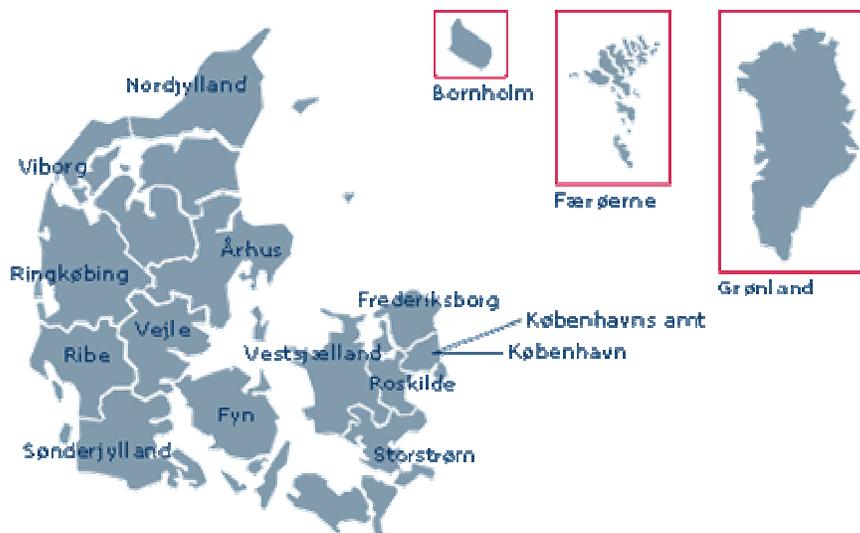
Membership in the Organization of General Practitioners (4714 members) in Denmark includes those doctors engaged in general practice for the social security or who in some other way have general practice as their principal occupation such as occupational health doctors outside the public health system and nursing home doctors.

The Association of Medical Specialists includes senior hospital doctors (7850 members) (consultants, heads of department and medical directors of hospital), specialists with their own private practice in or outside of the hospital and other doctors who are neither junior doctors nor GPs - such as public health doctors. Under the aegis of the Specialist Association, there are 26 "mono-specialist" organizations, one for each of the specialities recognized in Denmark. In addition, senior hospital doctors or doctors employed in the civil service also become members of the Danish Association of Senior Hospital Physicians (4104 members) (Overlægeforeningen) which was established in 1992 as an amalgamation of previously existing organizations.

Local Branch Associations

With certain exceptions, a DMA member must also enroll in the local DMA branch association in the geographical area within which they carry out their principal occupation. In all, there are 17 such local associations - one for each of the 14 Danish counties, one for Copenhagen, one for the Faroe Islands and one for Greenland.

The task of these local branches is to look after the medical profession's interests vis-à-vis the local authorities, the city and County Councils and, on the whole, to coordinate the professions' interests within the local sphere. The local branches, however, are not involved in contract negotiations, which are handled only by the three craft associations.



Contract negotiations

Every third year, the respective craft organizations renegotiate the terms and conditions of their contracts with the public authorities.

Any agreement or contract of a comprehensive nature may be considered in a special committee composed of representatives of all three craft organizations and the Danish Medical Association itself and before it can come into force must be approved by the Executive Council of the Danish Medical Association (the umbrella body).