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EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE
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DEN EUROPÆISKE OVERLÆGEFORENING
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ЕВРОПЕЙСКА АСОЦИАЦИЯ НА СТАРШИТЕ БОЛНИЧНИ ЛЕКАРИ**

Document :	AEMH 07-016
Title:	National Report Norway
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Purpose :	Information
Distribution :	AEMH Member Delegations, Participants at the 60th AEMH Plenary Meeting
Date :	19 March 2007



NORSK OVERLEGEFORENING

- yrkesforening i Den norske lægeforening

The Norwegian Association of Senior Hospital Physicians (OF)

Health Politics and Economy.

The economic situation for Norwegian health care institutions continues to deteriorate. Most institutions have large budget deficits in spite of the Government's focus on balanced budgets and efforts to reduce public health care expenditure. The new National Health Plan is closely linked to the national budget (made public simultaneously), and Of is concerned that this new plan places increased emphasis on productivity and effectiveness to the point where this becomes detrimental to the quality of our health services.

The reorganisation of our hospitals continues, in a bid to reduce costs and duplication of services the two largest health regions will be merged in July of this year. If this merger proves to be a successful move remains to be seen.

Hospital management.

A major concern for Of continues to be the medical management of our hospitals. We place a great deal of effort and time into encouraging senior physicians to take leading roles in the management of departments, clinics and hospitals. We do this through lectures and meetings organised by our leadership group, and also through our network of experienced leaders mentioned in last years report. In addition, Of has succeeded in placing medical leadership on the agenda of the Norwegian Medical Association, and as a result of this we expect to see a "national medical leadership committee" formed in 2007.

Negotiations, and a strike!

Yet again we failed to reach an agreement with our counterpart NAVO concerning our wages and working conditions. This time we actually ended up in a situation where we found that our only course of action was to go on strike. This was a well prepared strike, and contrary to what many of us believed beforehand, we were actually allowed to use this strike as a legal means of forcing NAVO back into further negotiations with us. The result is a mixture of centrally guaranteed minimum wages and an added possibility of local negotiations. We are still not in a position to judge quite what the end result of this negotiation/strike is in economic terms, but we believe that our members are satisfied. In addition, this prolonged period of negotiations followed by the strike has helped to strengthen the NMA.

As a result of the negotiations, NMA and NAVO have agreed to form a working group tasked with reviewing hospital physicians working hours. NAVO wishes to gain more influence over our work schedules whereas we are deeply sceptical, as we are concerned that NAVO wishes to extend our hospitals' normal opening hours by moving physicians work schedules accordingly.