



**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 ΙΑΤΡΩΝ 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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AEMH-President's Report (2)

Dr Raymond Lies

External collaboration

Health Services directive

It has to be pointed out that Health services (organisation and funding) are the competence of member states and it were the actions of patients and the rulings of the European Court of Justice and not the EU Commission that had put the issue on the agenda.

The lobbying actions of the medical profession have been successful in excluding health services from the General Service Directive, the so-called Bolkestein Directive.

Having achieved this, the issue has also changed hands from the Internal Market Directorate to DG SANCO, which launched a Public Consultation. To respond to this consultation the CPME established a working group in which I participated on behalf of the AEMH and so did the other EMOs demonstrating the "one voice" of the medical profession. The Commission is now in the process to analyze the 260 replies they have received from Governmental and non-governmental organisations, The Commission has to clarify its own competence in the health sector. The push for legal certainty, common standards on services quality and equal access, information and citizen empowerment and European centres of excellence are just a few of the issues in this context.

The outcome will be most probably a draft of a directive, which will be presented by the end of 2007.

HOPE

HOPE invites health care organisations to bi-annual meetings. Doctors are represented by CPME, UEMS, UEMO, FEMS and AEMH. Patients safety is one of the main topic the group deals with. HOPE organized a visit to Denmark 24 January 2007. The meeting was hosted by the Danish Regions and also attended by the national Board of Health and the Danish Patient Safety Society. The AEMH was represented by Marianne Rex Sorensen, Deputy Managing Director from the Danish Medical Association. The aim was to study the Danish no-blame-reporting-system.

The last HOPE meeting took place 7 February 2007 and the participants agreed on the following follow-up :

1. Prepare joint statement with aim to have ministers agreeing to set up a no blame reporting system at national level.
2. Develop further ideas to set up a European Institution for Patient Safety run by the professions
3. Document the economic value of Patient Safety

These points will be on the agenda of the WG of the plenary meeting in Vienna and the outcome will give an input to the next HOPE meeting which is scheduled for 6 June 2007.

Patients' Rights Conference

The Active Citizenship Network held a conference 29 March 2007 in the European Parliament with the support of several members of parliaments from the ALDE (Alliance of Liberals and Democrats for Europe) and the PSE (Socialists) Group, of which several physicians. The group launched the "European Patients' Rights Day" in Brussels and a petition campaign on patients' rights. Main aim of the conference was to raise awareness for the lack of guarantees for patients' rights in European legislation. The event emphasised the need for a broader approach to patients' rights to enable their implementation across the EU regardless of the ownership of medical

facilities, national social security ²schemes, organisation and management of national health systems or whether medical treatment is provided in the home country or another Member State.

I attended the event as the AEMH had approved in the last plenary meeting to support the action of the Active Citizenship Network and their “European Charter of Patients’ Rights », setting forth fourteen rights to be respected by health care providers. These rights are grounded in the European Charter of fundamental rights and therefore must be protected at the national as well as the EU level. ACN presented a report on the concrete implementation of these fourteen rights to the Commission in January 2007, in order to provide a more accurate picture of the actual conditions regarding citizens’ access to health care. This monitoring exercise was executed in cooperation with civic organizations from 15 Member States of the European Union.

Internal topics

- **Financing**

In my report of the beginning of the year presented at the Board meeting I advocated that the financial situation of the AEMH can only be secured by finding a sustainable income from external sources. This is only possible if we can provide a service in return which needs of course commitment and engagement of at least some of us. I committed in the last Board meeting together with the treasurer and the secretary general to draft a proposal for a sponsorship frame in order to promote the newly constructed website and our yearly conference for marketing purposes to banks, insurance companies, pharma industry, etc. the AEMH Treasurer estimated the additional needed income at € 10,000, but the target is to reach € 15,000.

Here attached is the promotional letter which in the meantime has been drafted and sent to some renowned firms. The first result was a 1000 € grant from an architect office. In return a link to their website has been integrated in the AEMH website. In a bigger scale I could lay contact to PricewaterhouseCoopers who showed interest in a long-term cooperation arrangement. I have been invited to present the AEMH in internal international conference, which PwC organises in May in Prague. I hope to be able to submit a proposal to you after this meeting. There I’ll have the opportunity to meet PwC representatives from EU, Eastern EU and Africa.

In the meantime, I encourage all of you to undertake initiatives in this field and to feel free to use the letter to contact your own relations.

- **Main objectives of this Presidency**

1. Stabilize and improve the financial situation of the AEMH
2. Reinforce the links with CPME, the FEMS and the other EMO’S in order to highlight the problems in the EU hospital sector (participation in work-groups of the CPME f.ex.)
3. Elaboration of an action plan together with the board and the Plenary to assure this for the mandate 2007-2009



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AEMH Partnership Proposal

The AEMH is a not-for-profit organisation under Belgian law representing 250,000 Senior Hospital Physicians in 17 European countries.

The AEMH studies the conditions for the practice of the medical profession in hospitals, the forms of organisation of hospital health care in the various countries, the modalities for cooperation with other members of the hospital community as well as the possibilities for improving the care and treatment of patients in the hospitals. The AEMH works in the interest of mutual information on all aspects of the hospital system in Europe and the dissemination of proposals to improve the hospital system at European level.

In this regard the AEMH organizes in the context of its Plenary meeting a yearly Conference, which is covered by the local medias, on topics such as

- Risk Management/ Patients safety, Madrid 2004
- Continuing Professional Development , Athens 2005
- Hospital Management, Bratislava 2006
- European Hospitals evolving into Centres of Excellence, Vienna 2007.

Furthermore, the AEMH is in the process of reconstructing its website in order to provide to its members a more interactive platform to exchange experiences of best practice and to express to its visitors a comprehensive standpoint on contemporary health topics.

In this perspective, the Members of the AEMH Board have unanimously agreed to enlarge its communication tools to other organizations and/or companies wishing to participate in health related European policy debates.

We therefore have the pleasure of offering a partnership to companies of international renown like yours by giving them the opportunity to approach hospital physicians of National Medical Associations in 17 different European countries and other stakeholders involved in hospital related topics.

As a member-driven organization the AEMH is accountable to its members, therefore the AEMH Board is anxious to provide a fundament to ensure a sustainable conduct of its activities. We therefore privilege long-term partnerships of minimum 2 -3 years to be re-conducted rather than sporadic actions.

We here below list some examples of joint venture which we think beneficial for the AEMH, its partners and its audience, but we are open-minded about any other proposal of collaboration serving our objectives to the benefit of hospital doctors and hospital patients.

Proposals:

1. Insertion of your logo on the home page of the AEMH website www.aemh.org with link to your own website;
2. Insertion of your logo on the home page of the AEMH website www.aemh.org and banner advertising;
3. Distribution of information material at the AEMH Conference;
4. Insertion of your logo and banner advertising in the publication of the AEMH Conference;
5. A 15 minutes lecture at the AEMH Conference, referenced in the conference publication.

We hope that we have caught your interest and look forward to your comments within the scope of the above.

Yours sincerely,

Dr Raymond Lies
AEMH-President

Brigitte Jencik
AEMH-Secretary General