

ASSOCIATION EUROPÉENNE DES MÉDECINS DES HÔPITAUX EUROPEAN ASSOCIATION OF SENIOR HOSPITAL PHYSICIANS EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE EUROPESE VERENIGING VAN STAFARTSEN DEN EUROPÆISKE OVERLÆGEFORENING EYPΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΔΤΡΩΝ ΔΙΕΥΘΎΝΤΩΝ ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI DEN EUROPEISKE OVERLEGEFORENING ASSOCIAÇAO EUROPEIA DOS MÉDICOS HOSPITALARES ASOCIACIÓN EUROPEA DE MÉDICOS DE HOSPITALES EUROPEISKA ÖVERLÄKARFÖRENINGEN EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVINIKOV EUROPSKA ASOCIACIA NEMOCNICNÝCH LEKAROV EUROPSKA UDRUGA BOLNIČKIH LIJEČNIKA EBPOΠΕЙСКА АСОЦИАЦИЯ НА СТАРШИТЕ БОЛНИЧНИ ЛЕКАРИ

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Vienna, 20-21 April, 2007 Report of the Spanish Delegation

Since our last meeting in Bratislava in April 2006, a constant feature has characterised the development of events relating to health and to hospital doctors in Spain: working conditions of hospital doctors in Spain are getting more and more different, particularly with relation to retirement age, salaries and professional career.

On the other hand, although recently Spain was a country with a high percentage of unemployed doctors (more than 25%), at present, as a result of the health authorities' carelessness, it has become a country with a severe deficit of doctors. In my opinion, this is due to three factors:

- Reduction of mandatory retirement age to 65.
- Low salaries.
- Emigration.

Reduction of retirement age to 65 is strictly implemented in some Autonomous Communities like Catalonia, Extremadura, Asturias, Andalucia and Aragon, causing an important deficit of doctors, particularly in some specialties such as anaesthesia, general surgery, ophthalmology, etc. The immediate consequence has been the need to import urgently doctors from South American and East European countries.

Low salaries have caused a reduction in the number of applications to Medical Schools, and for the first time in Spain specialist training available places exceed demand.

Recently, the Spanish Health Ministry has published a report on medical demography in Spain. In spite of the lack of reliable data, it is the first serious attempt to know the need for doctors in Spain.

The Spanish Medical Association is quite concerned about this situation, because health authorities can try to speed up the process of "producing" doctors. Therefore, we have requested the Ministry of Education and the Ministry of Health to maintain the present Numerus Clausus and to require a minimum grade point average for Medical Schools, so that only the best are admitted. According to our data, the problem in Spain is not the lack of doctors but the deficient geographical and specialities distribution.

Finally, emigration to other European countries in search of better working conditions is becoming a real problem that must be taken into account.

Just when specialized training places have not been totally filled for the first time in Spain, a Training Doctors (MIR) movement is developing, and it may become a national problem.

Once again, the particular Spanish territorial distribution (17 Autonomous Communities with almost full health competences), the lack of clear guidelines established by the Ministry of Health that should be mandatory for the Autonomous Communities, and the absolute inability of the National Health System Interterritorial Commission, the National Health System coordination body, have lead training doctors (MIR) to consider the possibility of a national strike due to their working conditions.

Each Autonomous Community is trying to solve this problem by improving the basic working conditions required by law, although each on its own, so that training doctors in certain Autonomous Communities are demanding improvement in their working conditions, as they are worse than others.

Nevertheless, there are also positive aspects in the Spanish health system.

On the 29th March, the Spanish Medical License Card was presented in the Spanish Senate Palace.

This is a project of the Spanish Medical Association to certify doctors' identity, as much in the physical as in the digital world. It is based in the electronic signature technology and the digital certification systems.

Medical License Card is a requirement in this new information technology era. Its main purpose is to provide proof of the doctor's identity. Besides, it also brings about other benefits as much for doctors as for the public, and it is a qualitative step forward in electronic health.

A) The need to provide proof of the doctor's identity:

At present, security provided by information and communication technologies has become an essential element of health strategies.

New health informatics uses such as electronic prescription, shared clinical history, living will access, are new professional backgrounds, as much as important challenges to be able to carry out our tasks and achieve our goals.

This initiative is an important modernization effort, in order to adapt medical profession to the information technologies and achieve confidence in electronic communications with the Administration and with health system users, by favouring information systems interoperability.

B) Benefits for doctors:

- 1) It certifies card holder's identity as a doctor, his/her degrees and capacities, by introducing digital certification and electronic signature.
- 2) It guarantees safe access to electronic communication applications for professional practice, activity, such as electronic prescription, computerized clinical history, living will, and the possibility to safely share information with other professionals.
- 3) It allows identification of Spanish Licensed Doctors in all European Union countries and in the United States of America. Moreover, with this new medical identification, licensed doctors will have access to a series of added value services.

C) Benefit for the public:

- 1) It guarantees universal access to health services outside the patient's residence, and it can speed procedures that now require personal attendance.
- 2) It guarantees professional data reliability, avoiding identity theft and particularly professional infiltration and confidential information access security.
- 3) It offers a higher level of patients' confidence in the health system and the doctor-patient relationship.
- 4) Confidence is closely related with personal rights such as security, identification, authentication, privacy and confidentiality.

In that regard, we consider professional electronic certification critical to develop reliable digital services.

D) A qualitative step forward in electronic health:

The new medical identification is a new step forward to provide higher quality services and to improve professional practice conditions and patients' rights protection.

This project represents a clear example of information society progress implementation within the health system.

This new development represents a qualitative step forward in the development of health services computerization.

If the Spanish Medical License Card is interesting for AEMH delegations, I have prepared a presentation I can give you, if our President gives me a few minutes.