

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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## 62<sup>nd</sup> AEMH-Plenary Meeting, Brussels/ Belgium

Venue: Hotel "Progress", Rue du Progrès 9, B-1210 Brussels/ Belgium

#### AGENDA

Friday, 8 May 2009

## 9:00 Opening

#### 1. Addresses of Welcome

The President opened the session by explaining the circumstances of change of venue, which was initially Sofia. He thanked the ABSyM for hosting the meeting in Brussels. He wished all delegates welcomed, especially those attending the first time: Ms Colegrave-Juge (France), Dr Claude Braun (Luxembourg), Dr Solberg (Norway), Mr Dobnikar (Slovenia), Dr Gerolymatos (Greece) and Ms van de Wijngaart (EMSA) Mr Kuiper and Mr Bever from ABSyM.

## 2. Approval of the Agenda

**AEMH 09-018** 

The agenda was unanimously approved.

### 3. Roll Call of Heads of Delegations

**AEMH 09-042** 

The following proxies were attributed: Germany Prof. Nolte written proxy to Mr Norden, Luxembourg Dr Lies to Dr Braun, Dr Cuénoud had apologized for later arrival.

## 4. Approval of the Minutes of the 61<sup>st</sup> Plenary Meeting in Zagreb

**AEMH 08-052** 

> Dr Esteves requested to correct the spelling of his name.

The minutes were approved without any other changes.

## **5. Financial Matters** by AEMH-treasurer Dr. Sobat

## 5. 1. Financial Report 2008

a. External Auditor's Report/ Closing of accounts 2007	AEMH 09-003
Auditor's Notes	AEMH 09-012
h Treasurer's Report of Year 2008	ΔFMH 09-036

AEMH-treasurer Dr Sobat expressed his pleasure to present a positive report, which allows to free time for the essential matters of the organization. He asked the Norwegian delegation to convey our regards and thanks to his predecessor Dr Rolf Kirschner, whose policy allowed this result.

Bank account showed a surplus as a consequence of the once-off contribution.

€ 15630 savings cover the deficit of the year before. It is not a total success, as according to recommendations of the auditors AEMH should have savings for one-year operation. He advocated to maintain the contribution increase of 5 % per year.

Expenditures have been kept in line with the budget.

Concerning 2009, FEMS contribution will be increased in 2009 as the secretarial workload has increased. The change of venue for this plenary meeting obliged to introduce a meeting package. Collaboration with our sponsor will continue. BASF provided information and gave a financial contribution.

- > Dr Wedin welcomed the initiative to introduce the meeting package. She pleads to continue this procedure.
- > Dr Sobat agreed that this participation fee will facilitate to find future hosts to organize AEMH meetings. He questioned whether it should be a rule for the future.
- > Dr Refsum supported the proposal, which is in line with Dr Kirschner's proposals.

- > Dr Buzgo advocated that this measure should be part of the budget and as such adopted yearly.
- ➤ Mr Norden questioned whether the meeting package goes per delegation or per delegates.
- ➤ B. Jencik clarified that it is per delegate and covers meeting room, half-board and accommodation, one dinner.
- ➤ Prof Degos agreed on the package but doubted that it can be part of the budget as most expenses are unknown in advance.
- > Dr de Deus announced that in 2010 Portugal will propose a programme and pay. He favours that the measure remains optional and not mandatory.
- c. Internal Auditor's Report on accounts 2008 by Dr Morresi

**AEMH 09-022** 

- > Dr Morresi informed the new delegates that the task of the internal auditor is to make sure that all the activities are in compliance with the statutes and that the objectives and ethical principles are applied. He expressed his appreciation on the work of the board in difficult times, who succeeded to get back to a normal financial situation.
- d. Approval on Discharging the Board on Financial Report 2008

  The General Assembly approved unanimously the discharge of the Board on the accounts 2008.

#### 5.2. Prevision 2009

- a. additional income (potential sponsor)
  - >Dr Sobat affirmed that ethical considerations are kept in mind when accepting sponsorship. PwC forecasts possible common events, both sides are interested in the decision of drawing conclusion of their data. Future collaboration was agreed, sponsorship continues and AEMH can play a major role in their research. Concerning BASF, only information was given and nothing has been decided on further collaboration.
  - ➤Dr Lies invites every delegate to come with proposals. He pointed out that PwC is not just to be seen as a sponsor but in a give-and-take situation.
- b. unforeseen costs Brussels meeting ("Meeting package")
- c. New Financial Guidelines 2009

**AEMH 09-025** 

- >Mr Norden disagreed with including the meeting package in the guidelines. This year was an exceptional situation. Do not make the exception a rule. Otherwise this is to be seen as an additional contribution.
- ➤Dr Wedin agrees on flexibility, but it should become a rule.
- >Dr Sobat believes that the introduction in the guidelines is important for delegates to get reimbursed.
- >Dr Sanchez-Garcia is also in favour of the new rule as it allows all countries to host a plenary meeting.
- >Dr Costa advocates that the application of a meeting package should always be in consultation with the board.

# The amendments to the financial guidelines were adopted by majority, with one vote against (Germany).

#### 5.3. Draft Budget Year 2010 for approval

a. initial draft AEMH 09-008

Dr Sobat explained the circumstances which needed a redraft of the budget. The resignation of Denmark would result in a deficit of 2700 € and on the other hand the proposal of B. Jencik to work freelance, which would give a surplus.

b. potential savings (The future of the AEMH European Secretariat) for information, Secretary General's Report 2008 to the Board

AEMH 09-033 AEMH 09-002 ▶B Jencik a physical address is mandatory for a registered office.

>Dr Wetzel agreed to the proposal. In view of a future common EMO secretariat.

>Prof Chatel found the proposal interesting, certainly from a financial point of view. Nevertheless, he is in favour to rather increase the financial means than making savings on physical presence.

>Dr Wedin advocated that physical presence at meetings is important not in the office.

>Prof Degos warned on hasty decisions. We have to place the decision within the context of the relation with all other organizations. We should wait and see the outcome of the joint EMO meeting.

>Dr Lies agreed that this internal decision is not meant to put further pressure on the CPME but shows other opportunities. Anyway, close physical presence does not necessarily mean close collaboration.

➤ Dr Sanchez-Garcia agrees with modernizing our working methods. AEMH is in a dynamic with FEMS and both are the pioneers in means of collaboration and we have to make a step further.

>Dr Wetzel agreed that the common project is a confederation of EMOs in a Domus Medica. CPME has not the overarching responsibility. He has no objections to the new working methods.

>De Deus agreed that a confederation with a common secretariat is the aim. His doubts of loosing information by not being present in the CPME office were put aside.

>Dr Morresi reminded the workload and believes that we should not rush.

➤ Prof Degos reminded the changes in all organisations and pleads for keeping the physical address which does not prevent new working methods.

>Mr Norden expressed that as long as legal obligations are fulfilled as to the physical address, the reorganisation is a challenge and he has no fear for the quality of work.

>Dr Lies resumed the discussion. The working method of the secretariat is an internal problem, the office in Brussels is another aspect. Presence in Brussels in the perspective of collaboration with EMOs remains important.

# The proposal of Brigitte Jencik to work free-lance from a "virtual office" as from 2010 by keeping the office space Rue Guimard was unanimously adopted.

c. new draft (resignation of Denmark, future secretariat)

> Dr Sobat presented the revised budget with the two changes (Denmark, Secretariat) taken into account. The reduced charges for the secretariat result also in a decrease of FFMS contribution.

#### The plenary assembly approved the revised budget unanimously.

## 6. President's Report

**AEMH 09-001** 

Letter of Resignation of the Danish Medical Association from the AEMH Reply AEMH-President to the DMA

AEMH 09-027 AEMH 09-028

> Dr Lies gave the example of the EWTD for good collaboration amongst EMOs, which united in the demonstration in Strasbourg. The common meeting in June will be an opportunity to lay new rules of collaboration in respect of the independence of each organisation. On internal matters, he thanked Dr Kirschner for his work in the past. He analyzed the collaboration with PricewaterhouseCoopers and invited delegates to take part in the work.

He gave a short overview of the 11 years of presidency. He thanked the VLK for having hosted the AEMH and having financially supported the organization. The move to Brussels

was a challenge. He commended SG Brigitte Jencik for her commitment and praised the collaboration with FEMS.

For the future he hopes that regional considerations will never overshadow the discussion in the AEMH.

- > Prof Degos recognized the efforts of the president always to defend the organisation in a diplomatic, consensual manner in internal and external matters. He explained the position of France in the conflict with the CPME and doubted that the CPME has its place within a confederation. He proposed to reflect on a title of honorary president. Applause by the delegations.
- > Dr Sanchez-Garcia expressed thanks for the commitment and he proposed to grant as award the AEMH Aesculap medal.
- > Dr Morresi resumed his tribute: small country, big doctor, big president.

## 7. 1. The Floor to Associated European Medical Organisations

- -FEMS-President Dr Claude Wetzel presented the activities of his organization within the political context. Concerning the future of EMOs he vividly defended the idea of creating a confederation and a Domus Medica, with or without the CPME.
- -EMSA: President Hanneke van der Wijngaart Their assembly has also approved the establishment of a confederation.

## 7.2. Reports from Meetings of Associated European Medical Organisations

-EFMA/WHO: Dr Buzgo/DrWeber

- **AEMH 09-047**
- > Dr Weber presented the written report on the two workshops, on primary care and on migration of physicians.
- -PWG (2008 Autumn meeting)
- ➤ Dr Marie Wedin gave a report from the November meeting in Talinn. 21 countries were represented, Denmark and Sweden had resigned recently, considering the work insufficient. The future of EMOs was discussed in a working group. They reflected on whether join the Domus Medica of EMOs or joint the UEMS. No decision was taken. Her personal view is that as junior doctors have a short career and therefore cannot gain experience in running the organization, this is taken over by the secretariat. Denmark and Sweden want young doctors to be represented in a sub-committee of the CPME.
- -UEMS (2008 Autumn meeting): Dr Thomas Zilling

- **AEMH 08-058**
- > Dr Zilling presented his written report from the October meeting where the UEMS presented an action plan, in which the other EMOs are never mentioned.
- $\gt$  Dr Lies recognized the importance of the UEMS in size and representativity and that we need to keep the contact.

## 8. Future of European Medical Organisations

- AEMH-FEMS Proposal for the establishment of a **Confederation of European Doctors**➤ The President explained that the idea of a confederation was received positively by all EMOs and that all have a role a play.

The President asked the plenary to confirm their approval on the common document AEMH and FEMS on the subject.

Document AEMH 08-064 was unanimously adopted.

## - 1<sup>st</sup> Joint EMO meeting 11 June 2009, purpose and objective

- European Medical Organisations united in a **Domus Medica**Only in the perspective of a confederation and real collaboration the discussion on the domus medica is a subject.

## 9. Working Groups - No Parallel sessions

**AEMH 08-063** 

> Dr Zilling advocates that it is important for the AEMH to take a stand on training besides the UEMS. Especially quality assurance and quality control are topics for AEMH. He elaborated bullet points based on the enquiry the delegations answered. The discussions on the different points demonstrated the differences in the European countries. All points were discussed extensively and voted separately.

The revised document will be proposed for approval under point 11 of the agenda.

## 9.2 Accreditation of Hospitals and Centres of Excellence

- > Dr De Deus corrected the title, which is Accreditation of Hospitals, centres of excellence is just one part, which was adopted last year. The first part was accreditation based on quality and safety. This year's document is the third part on the organizational standards.
- > Dr Wedin doubted the aim of the documents.
- > The purpose of the document is to plead for the involvement of doctors in the process of accreditation. Such as UEMS is involved in accreditation of training, AEMH should get involved in accreditation of hospitals.
- > Prof Degos wonders of the implementation of the text. It is a political document without technical tools, it is a charter and a commitment for doctors to strive for higher quality.
- > Dr Sanchez-Garcia reported on collaboration with the Joint Commission of a Spanish organization for accreditation of Spanish hospitals.
- > Prof Degos: in France hospitals have to pass an accreditation process by the High Authority of Health.
- > Dr Bertrand fears that in Belgium accreditation procedures would lead to a ranking of health institutions. He is rather in favour of a high supervisory authority.
- > Dr Morresi added that in Lombardy the accreditation process has changed the mentality of the hospital staff and quality criteria have become an incentive.
- > Prof Chatel feared that the idea behind the document is wishful thinking but without any tool and objective criteria he wondered what can be achieved.
- > Dr Wedin volunteered to contributed to a redraft of parts of the text, which will be presented under point 11 of the agenda.

#### 9.3 Healthcare across Borders

- Green Paper European Workforce for Health

**FEMS 08-109** 

- HOPE Position on the Green Paper

**AEMH 09-040** 

> Dr Sobat explained the background and presented reference documents, amongst which a position of HOPE. They support the directive and advocate the independence of each member state. They want reliable indicators for the exchange of information.

He also mentioned the position of HCPCB which support patients safety, the exchange of information, and advocate the need for working licenses for doctors going abroad.

- Definition of "Hospital Care" in the context of the European Directive
   on Crossborder Healthcare

  AEMH 09-038
- > Dr Sobat enumerated the reasons for the directive based on the problems patients faced with quality of care, waiting lists and reimbursements. Hospital care is the most important case in crossborder healthcare. He opened the floor to discuss the definition of hospital care. The delegates discussed the text of the commission and proposed amendments. Final text under point 11 of the agenda.

## 9.4 Privatisation of Healthcare

Chair: Dr Raymond Lies

Presentation Healthcast Project PricewaterhouseCoopers

**AEMH 09-043** 

> Dr Lies referred to the presentation given by PwC during the conference and explained that the purpose is collaboration with PwC by giving the expertise of AEMH and hereby influence healthcare policy, as PwC is often consulted by ministries of health. It was decided to circulate a list on which each delegations give the name of experts to be communicated to PwC.

**AEMH 08-054** 

Presentation of the outcome of the survey: Dr Manuel Sanchez-Garcia

**Labour Conditions of European Hospital Physicians** 

➤ Dr Sanchez-Garcia explained the update of the survey started in the year 2000. FEMS has agreed to participate. He regretted that some countries have not answered the questionnaire yet. He went through the different questions of the study. He stressed them to do so to allow him to draft conclusions.

The President requested the plenary to accept an additional item to the agenda, i.e. "Application of the College of Physicians of Romania" as full member".

The plenary approved to add the item to the agenda.

The president read the application letter, which was sent together with the statutes. The **plenary assembly approved in principal to accept Romania as full member** with nevertheless the request to the legal advisers present at the meeting, i.e. Mrs Signe Gerd Blindheim and Mr Brane Dobnikar to study thoroughly the statutes.

## 10. National Reports

9.5

-Presentation of the highlights from the written reports by each delegation

AUSTRIA: Prof. Spath presented the written report AEMH 09-026. No new health reform, savings, reduction of VAT on medicines, the new minister's intention to strengthen autonomous management by physicians and the electronic health care records involving physicians, were the positive topics which he highlighted.

BELGIUM: Dr Bertrand commented document AEMH 09-024 which did not report on changes, still turmoils, nothing positive, medical demography is critical in Belgium.

CROATIA: Dr Sobat highlighted the report AEMH 09-032 and informed that there are no unemployed doctors and that even a lack of doctors is predictable. Croatia has introduced the DRG system.

FRANCE: Prof Degos gave some explanation on the report AEMH 09-039 on the French lwa, called "loi Bachelot", which foresees that the hospital governance gives full power to the hospital director.

GERMANY: in absence of the German delegation, Dr Lies referred to the written report AEMH 09-031 and invited the delegates to sent possible questions to Prof Nolte.

GREECE: Dr Gerolymatos presented the written report AEMH 09-050 and reported on a new law, which improves doctors' working conditions, implying the recruitment of 2000 and more physicians in university hospitals.

ITALY: Dr Morresi explained the representation of doctors in Italy in different trade unions and scientific associations. Last year they launched a campaign to find a single voice, such as a confederation. Italy has no more a ministry of health, health matters fall under social affairs. Recently a vice-minister for health has been appointed. Doctors have been insulted and called "lazy" and "butchers".

Le FNOMCEO heas reelected Dr Bianco as president, but in the rest of the board there are many changes and general practionors have strengthened their position. Concerning the CPME strategy, the FnomCeo is tired of waiting for an acceptable solution.

LUXEMBOURG: Dr Braun presented the report AEMH 09-044; Financing of healthcare and crosborder healthcare are main concerns in Luxembourg. A new hospital plan was adopted,

which defines 3 hospital regions. The trend is towards hospital concentration, centres of excellence.

NORWAY: Dr Refsum resumed the report AEMH 09-041 of Norway, especially on the request to doctors for flexibility to cover all regional hospitals. A new healthcare reform is in the pipelinge. Doctors involvement in the management is encouraged, but education is lacking.

PORTUGAL/ Dr de Deus gave highlights of the report AEMH 09-045 on post-graduate training, the medical career, the paradigm change, the refusal of recertification, the fight against systemativ replacement by generic drugs and the shortage of doctors.

SLOVAKIA: Dr Buzgo focused on a few topics of the written report AEMH 09-051. the average salary of doctors is very low (729 Euros), many doctors have several contracts and perform many duties to improve their income.

Personal standards will come into force this year. E-learning will be introduced shortly.

SLOVENIA: Mr Dobnikar gave some highlights. 10 years of shortage of doctors have resulted in 50% of the average number of doctors in the EU. Hospital doctors have succeeded last year to increase their salaries. This year due to the crisis, hospital budgets have been reduced. A healthcare reform plans to ban compulsory membership in the medical chamber and take away the autonomy of doctors. One positive aspect: the chamber, the societies and the trade union try to unite in a domus medica.

SPAIN : Dr Sanchez-Garcia presente document AEMH 09-029 on the situation on Spain, where nurses get more and more empowered. Also worrying is that pharmacists make diagnosis. Only doctors should have the prescription right.

Spain has no unemployed doctors and no shortage of doctors.

A new law is planned allowing abortion until 22 weeks and abortion possible at 16 years.

Some delegates pleaded to make the subject of pharmacists prescribing drugs a topic of the next conference. AEMH should work out a resolution that pharmacists cannot replace doctors in making diagnosis.

SWEDEN: Dr Wedin reported on the situation in Sweden (AEMH 09-046). Life expectancy is on the rise. Hospitals are the week point of the healthcare system, resulting in long waiting lists. Patients are empowered to choose their health center. It is seen as move towards privatisation.

SWITZERLAND: Dr Cuédoud highlighted 4 topics from the report AEMH 09-048: hospital financing by DRG, small hospital structures which disappear, quality control and data protection. He also reported on call centers of the insurance companies advising the patient to consult or not.

#### 11. Reports and Documents for adoption and decision

## 11.1 Internal from working groups

WG 1) Pre- per- und Postgraduate Medical Training

Chair: Dr Thomas Zilling

The plenary adopted the revised document AEMH 08-063 and its 5 Bullet points.

## WG 2) Accreditation of Hospitals

Chair: Dr Joao de Deus

Compilation, quality, centres of excellence, organizational standards

Although **the plenary adopted the revised AEMH 09-034**, Dr Wedin proposed to re-write parts of the document. Dr de Deus accepted the proposal. The changes will be editorial and thus not influence the decision of the plenary on the adopted document.

### WG 3) Healthcare across Borders

Chair: Dr Hrvoje Sobat

- > Dr Esteves complained that last year's WG did not continue.
- > The president explained the reason of no parallel sessions and that instead an up-to-date topic needed to be taken up.

## The amended text of AEMH 09-038 FIN was adopted unanimously.

### WG 4) Privatisation / Healthcast PwC

Chair: Dr Raymond Lies

- > There has been no tome to make a summary of the conference. He will do this after analyze of the different presentations and then draw up conclusions.
- > He invited the delegates to volunteer for the participation in PricewaterhouseCoopers healthcast.

# 11.2 External HIFA 2015 (Health Information 2015) for adoption

**AEMH 09-023** 

➤ Brigitte Jencik explained the background. BMA and CPME have committed and called other organizations to do the same (access to health information for all by 2015).

## The plenary supported unanimously the initiative.

#### 12. Elections as the AEMH Statutes

The President stated that from 17 delegations, 15 were present or represented and thus the plenary could validly proceed to the election separately and in secret ballot.

- **President, term 2010-2012** (member of the Executive Committee) Application of Dr Joao de Deus

**AEMH 09-030** 

- > Dr de Deus gave a presentation and reminded the objectives and aims of the AEMH and called all member delegations to actively participate in the achievement. Externally he trusts in a fruitful cooperation with other EMOs, especially with FEMS in order to contribute to a strong voice of EU doctors within a confederation. He called on the cooperation of all delegations, the board and the SG.
  - He thanked the Portuguese Medical Association and colleagues for supporting his candidature and Dr Raymond Lies for the work of the past 12 years, whose example he will endeavour to follow.

As no other candidature was presented, the President proposed election by acclamation. No opposition was expressed and **the plenary assembly elected Dr de Deus for the term 2010-2012 as new President** with applause.

Dr de Deus being the 1<sup>st</sup> Vice-president, his election implied to elect a new 1<sup>st</sup> Vice-President for the term 2010-2012.

- Election for 1<sup>st</sup> Vice-President (member of the executive committee)
- > Dr Wedin proposed the candidature of Dr Buzgo from Slovakia.

- Dr Sanchez-Garcia proposed Prof Degos from France. The proposal was seconded by Dr Morresi.
- > Prof Degos insisted to explain that he is active in a private hospital now.
- > Dr Buzgo withdrew his candidature with respect to Prof. Degos and asked to be candidate for 3<sup>rd</sup> Vice-President.
- > Dr Wedin proposed the candidature of Dr Refsum from Norway

Election was processed in secret ballot.

## Prof Degos was elected by 9 votes as 1<sup>st</sup> Vice-President for the term 2010-2012; 6 votes for Dr Refsum.

Prof. Degos expressed his thanks to Dr Buzgo and to the delegates.

- **3<sup>rd</sup> Vice-President**, replacement Dr Kirschner elected for the term 2009-2010 (member of the Board).
- > Dr Buzgo confirmed his candidature.
- > Dr Wedin proposed Dr Refsum's candidature.

**Dr Buzgo was elected by 10 votes as 3<sup>rd</sup> Vice-President for the term 2009-2010.** He thanked the delegates for the confidence.

#### 13. Dates and Venues of the next meetings

- Joint Meeting of all European Medical Organisations (Boards, Executive Committees only) 11 June 2009 in Brussels
- 63<sup>rd</sup> AEMH Plenary Meeting 2010, Lisbon/ Portugal on invitation of the Ordem Dos Medicos, dates to be confirmed
- 64<sup>th</sup> AEMH Plenary Meeting 2011, call for invitations
- Dr Cuénoud conveyed the invitation of the Swiss delegation to hold the plenary in 2011 in Switzerland.
- The invitation was received with applause.

### 14. Miscellaneous

- > The President invited the delegates to think of new working groups for the future.
- > Dr Wetzel conveyed the congratulations of FEMS to the new elected members of the board.

## 13.00

The President thanked the interpreters and the technician, the staff of ABSyM and closed the 62<sup>nd</sup> AEMH-Plenary Meeting.