



**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 ZDRAVINIKOV
EUROPSKA ASOCIACIA NEMOCNÍČNÝCH LEKAROV
EUROPSKA UDRUGA BOLNIČKIH LIJEČNIKA
ΕΒΡΟΠΕΪΣΚΑ ΑΣΟCΙΑCΙΑ ΝΑ ΣΤΑΡΣΗΤΕ ΒΟΛΝΗCΗΝΗ ΛΕΚΑΡΗ
ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

Document :	AEMH 14-055
Title:	Clinical Leadership Workshop Results
Author :	Prof. Vlad Tica
Purpose :	Information
Distribution :	AEMH Member Delegations
Date :	21-05-2014

Clinical Leadership

WS

1. CL relevance
2. Difficulties - European perspective
3. The path to CL - AEMH Strategy
4. AEMH Conference 2015



Clinical Leadership

WS

1. Framework
2. CL relevance
3. Difficulties - European perspective
4. The path to CL - AEMH Strategy
5. AEMH Conference 2015



11 / 16 Countries

1.	Dietter Kolle	A	9.	Raymond Lies	L
2.	Hrvoje Sobat	Cr	10.	José Santos	P
3.	Anja Mitchell	DK	11.	Vlad Tica	RO
4.	Claude-T Degos	F	12.	Lars Nevander	SW
5.	Erich Theo Merholz	D	13.	Pierre-Francois Cuenoud	CH
6.	Hans-Joechen Stolpmann	D			
7.	Costas Livadas	Gr	14.	Katrin Fjeldsted	CPME
8.	Costas Koumakis	Gr	15.	Cristian Keiser	NL



Clinical Leadership

WS



Clinical Leadership

WS



Clinical Leadership

WS

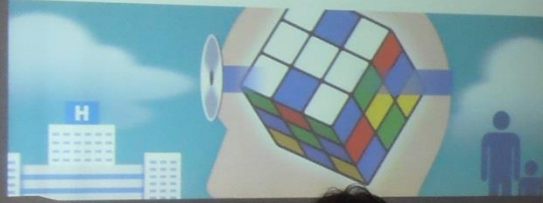


Clinical Leadership

WS

Clinical Leadership Work-Shop

1. CL relevance
2. Difficulties - European perspective
3. The path to CL - AEMH Strategy
4. AEMH Conference 2015



1. Framework

- **Medical** Clinical (**Hospital & beyond**) Leadership
- Leader \neq Manager
- **Complex**, with **specificities**: Hospital / Dept / Frontline
- **Strategy** - participation in the strategic decisions
- Impact on the **whole activity** related to care



2. Relevance

- **Leadership shifting** to economists, layers (D) / nurses (H, DK, SW, psychiatry, GP) !medical experience.
Allocation of resources without consultation with physicians
- **Responsibility**
- **Knowledge**
- Improved **outcome**



3. Difficulties

- **Beliefs**: more adapted for Department Leadership than for Hospital / Frontline
- Director – appointed by the **political power**
- Medical Director – appointed by the **management** - obedience
- Low **interest** (far from patients)
- No (formal) **training**



4. Possible Solutions

- **D**: Hospital CEO (economist) + Elected Medical Director + Head of Nursing
- **F**: Manager + President of the Medical Council
- **NL**: Medical Board
- **Encouragement / recognition / motivation; Image**
- **Training** – Med School, political awareness / astuteness, economic
- **Political lobbying**
- (Transparent) **Data** on CL
- **Privatization** – non-profit centers



4. Possible Solutions

- **Chairs of Depts. = physicians**
- Leaders / Chairs / Medical Director – collegially **elected**
- **Law Regulations / Labor agreement:**
 - Medical (Director) Leaders – clear **JD**
 - Medical Board – **impact on Hospital decisions** / Director position (NL)



4. AEMH Conference 2015

Goals

- Regaining / strengthening the **capability** / position in Hospital CL
- **Better care** / better **outcomes**
- **Patient centered** / patient rights
- **Statement**



4. AEMH Conference 2015

- **Evidence sent** upfront
- **Survey**
- Draft **Declaration**
- **Interactive** / discussions



Subjects

- Difficulties
- Complexity of Hospital Governance (\neq points of view); role of hospital physicians
- Implementation / Adaptation to the foreseeable **hospital evolution**
- How to implement at the **national level**
- **Practical solutions**



Clinical Leadership



Conference 2015 - May, 7-9



Clinical Leadership



Conference 2015 - May, 7-9



Clinical Leadership



Conference 2015 - May, 7-9

Start
here.

