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ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΔΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ
ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI
DEN EUROPEISKE OVERLEGEFORENING
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ΕΒΡΟΠΕΪΣΚΑ ΑΣΟΪΑΪΑΝ Α ΣΤΑΡΣΗΤΕ ΒΟΛΝΗΧΝΗ ΛΕΚΑΡΗ
ASOCIAȚIA EUROPEANĂ A MEDICILOR DIN SPITALE**

Document :	AEMH 18-022
Title:	National Report France
Author :	CNOM, Prof Claude-François Degos
Purpose :	Information
Distribution :	AEMH Member Delegations
Date :	30 May 2018

FRENCH MEDICAL COUNCIL NATIONAL REPORT

LISBON 8 - 9 JUNE 2018

In France, we live a time of multiple reforms – perhaps have you hear about our President, Emmanuel MACRON, who attacks political, financial, administrative topics but also medical subjects.

Excuse my very, very bad English, so, I'll be as short as possible in my national report.

First, the current situation for medical students:

Firstly, we are making new programs in order to have more professional training, more practical education and less theoretical courses: i.e. less hospital presence and more training course with private practitioner, less weight for fundamental sciences in the first year final exam of medical studies.

In the other hand, we have modified the third cycle (last years of the degree course) in order to have more progressive responsibilities for obtaining the speciality during 'internat' (the residency) and we have introduced annual evaluations by multiple choices tests.

Second, for medical practice:

We try to give more autonomy for each speciality with specific 'filière' of education only into the speciality. Previously, the 'intern' (resident) makes his own specialist degree by training periods often during 6 months in several hospital departments into services in the main speciality but also in similar specialities (for instance neurology and imagery or vascular diseases).

Always within the framework of autonomy, all aspects of each speciality (that means: clinical practice, private one and hospital one, teaching function, university college, scientific societies, representative and trade union offices) are now gathered together into one organization 'le Conseil national de spécialité' (CNS) = National Council for specialty. Each CNS is able to discuss with governmental authority, to make programs for students, to prepare speciality cursus and obligatory skills.

The new legislation should permit to change speciality during professional life in a soft way than before with an adapted training taking into consideration previous practice.

We have, in France changed geographical administrative structures: up till now we were 23 regions and, to day, only 12 carving up with bigger distances.

Medical professional organisations have a duty to adapt to new conditions and it is an issue regarding the meetings of our disciplinary courts.