



EUROPEAN UNION OF GENERAL PRACTITIONERS

Alment Praktiserende Lægers Europæiske Organisation – UEMO
European Union of General Practitioners – UEMO
Europäische Vereinigung der Allgemeinärzte – UEMO
Union Européenne des Médecins Omnipraticiens – UEMO
Unione Europea dei Medici di Medicina Generale – UEMO
Europese Huisartsen Vereniging - UEMO
Unión Europea de Médicos Generalistas – UEMO
Uniao Europeia de Clinicos Gerais – UEMO
Euroopan Yleislääkärjärjestö – UEMO
Europeiska Allmänläkarorganisationen – UEMO



UEMO 2003/031

Report from the UEMS Management Council in Stockholm on 18-19 October 2002

1. The UEMS is also disturbed by that the KPL royalties are considerably lower than expected. Also, a 2002 version of the UEMS compendium was not distributed despite the fact that it already existed.
2. The French delegation presented a paper on how to increase UEMS influence on the European institutions. The proposed new way would be to associate the UEMS with the ESC (the Economic and Social Committee has is an official consultative body with the EU). In order to be able to join it would be necessary to become a member of CEPLIS (European Council of the Liberal Professions), which has clies ties with the ESC. The UEMS gathers about 1 million specialist physicians and is the biggest European Medical organisation.
The Management Council has noted the different opinions put forward by various repretations.: there are concerns about the potential for huge amounts of red-tape, but the issue needs discussing further, since the trend amongst governments generally is towards reducing the influence of professional organisations.
3. The Management Council elected Dr Hannu Halila (Finland) to its new President.
4. Cooperation between the European Medical Organisations. A meeting was held in Salzburg on 28 August 2002 in order to improve cooperation and communication between the different organisations. Two models were presented: Model A – cooperation under the umbrella of CPME; Model B – the Concern model without presidential statutes of each organisation. A third model was presented at the meeting and this included cooperation of the UEMS-UEMO-CPME-PWG only.
5. The proposal for a directive on the mutual recognition of professional qualifications intended to replace 93/16/EC. The UEMS wishes to maintain the free movement of diplomas without lowering standards of quality. The UEMS is concerned about
 - The lack of interest to include quality related issues into the new directive
 - The possibility to practice a medical specialty for 16 weeks in another member country without registering in that country
 - The division of specialties in two:

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- automatic recognition of those that are common in all member countries
- recognition of the other specialties on a case by case basis by the national authorities.

UEMS Management Council Meeting in Brussels on 22 March 2003

1. The UEMS note that fact that the EU has very little interest in harmonising and improving quality in health care when elaborating European legislation. The EU is concentrating on the free movement of persons and services. The UEMS has decided to stress the importance of maintaining good relations with SANCO and also participates in the European Health Forum.
2. The UEMS Managment Council has redefined the role of the UEMS on the European level to be based on research in quality. It has also further outlined its relations with the CPME – it is necessary that the representation of the medical profession on the European level is unified. The UEMS also regrets the UEMO decision not to participate in the EACCME as there is a great demand of accreditation within general practice and until now the EACCME has not accepted put its label on any activities in general practice. It does not consider that it is possible to maintain this position taking into account the increasing demand.
3. EACCME.
 - Increased amount of work, particularly since CPD has become compulsory in an increasing number of countries.
 - Accreditation of long distance training (via the Internet)
 - Recognition of mutual credit hours between the EACCME and AMA
 - EACCME does not accredit directly but relies on the developed national accreditation systems that exist in Europe. It merely supervises the accreditation of CPD and the credits on the European level. Also, it does not take over the national accreditation systems and does not consitute any additional bureaucratic burden.
4. With regard to the national reports the Finnish representative explained a new piece of legislation which would allow nurses to become doctors in accordance with a short training programme. In Germany the nurses has asked for the same thing. In Poland this system was created after the WWII but had shown that the system lead to a decreasing quality in medicine. In the view of the UEMS this kind of training does not correspond to the European directive on medical training, in fact one does not find the 7.500 hours and the six years of studies. In addition, there is no equal treatment between the classical training system and the new one. In the end, quality cannot be guaranteed. The UEMS takes a firm stand against this state contolled intrusion in the medical profession and intends to put pressure on the governments before they take it any furter.

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 27 March 2003

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