



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 Yleislääkärijärjestö – UEMO
Europeiska Allmänläkarorganisationen – UEMO



UEMO 2003/042

UEMO Lobbying

Goals for the Presidency

In most countries General Practitioners form the base in health care. Through their close contact with patients, politicians and other decision-makers, the General Practitioner are important experts in influencing and lobbying on public health matters.

When the Swedish Presidency presented its goals for presidency prior to being elected autumn 2001, it presented four goals which it considered to be vital for the UEMO the next coming years. Those goals were:

- Work towards permanent Brussels office
- Increase UEMO visibility
- CPME – Umbrella organisation for the medical profession in Europe
- Increase the role of UEMO Vice-Presidents within the scope of the UEMO Statutes

Cooperation with other European Medical Organisations

In August 2002, the European medical associations initiated discussions lead to the development of a paper according to which the CPME would be the umbrella organisation for the medical profession as a whole. Within this organisation, the so called cooperation model, the identity and independance of the different organisations would be maintained. The cooperation model involves a small adaptation of existing working practice between the CPME and AOs.

The cooperation is important in order to reach the common goal of one voice for doctors in Europe as often as possible and the different organisations agree to cooperate and coordinate their activities for the benefit of the whole European medical profession. This is also to avoid duplication of work and to streamline common positions. However, it is important to stress

that the cooperation model recognises the responsibility of each of the individual organisations.

In order to improve the coordination, the Presidents of the European Medical Associations shall meet regularly under the chairmanship of the CPME. The meetings must, however, not interfere with the autonomy of the individual organisations. Furthermore, the CPME will open up their subcommittee meetings to members of the other medical organisations. The European Medical Organisations will thus be given a right to put forward proposals to the subcommittees.

An office in Brussels

Another goal, is the realisation of the Domus Medica in Brussels gathering all European medical organisations under one roof. A single office will improve cooperation and enables the use of the collected competence existing within the European medical organisation. A common office is also the cheapest option for all different European medical associations to be represented in Brussels. This solution has already attracted the AEMH and the EMSA to move to the CPME premises. For the UEMO such a move would be particularly beneficial, as we do not have any permanent office in Brussels.

The UEMO finances currently clearly prevent the establishment of an exclusive UEMO-office in Brussels. Instead we need to cooperate in order to share costs. Therefore, the Presidency remains convinced that we need to rent office space in the CPME offices. The reasons for this are the following:

During the first year and a half of this Presidency, apart from our own knowledge about Brussels and decision-making, we have had to rely on the most generous help from the CPME staff. Fortunately the UEMO has good contacts with the staff of the CPME. We have frequent contacts with each other, particularly as far as lobbying actions are concerned. This guarantees that we get the most out of our efforts. However, the CPME is the umbrella organisation which means that their priorities lay with the general issues where the UEMO will have and want to take care of the specific issues for GPs. Although as much as possible should be done by means of joint efforts, it is also necessary that the UEMO has its own eyes and ears in Brussels as well. Therefore it is necessary to have our own premises, our own archives etc.

So far we have relied on the kindness of the CPME, however, we think it is only fair if the UEMO also takes some financial responsibility towards the CPME. This would officially establish the cooperation and would also mean that our work is today partly depending on them and we cannot rely only on our excellent working relationship with the CPME staff and their good will. Paying a monthly rent to the CPME would guarantee that it is a matter of give and take.

We believe that efficient UEMO lobbying should, in order to be credible, be performed by GPs themselves backed up by other experts within the organisation.

Costs for an office in Brussels

For the cost of €15,000 the UEMO would not only get the right to use CPME Office space but also to rely on the expertise from the CPME staff. The cost for expertise will be approximately 25 % of a normal CPME staff salary, however, it will not be limited to a specific person, but to the general competence existing within the CPME office.

Proposal to the UEMO General Assembly

- To mandate the Presidency to hire space and manpower in the CPME office for a trial period of three years after which this cooperation will be evaluated.

UEMO Presidency
14 April 2003