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Minutes of the 43rd AEMH-Board meeting,
29 October 2005 in Luxembourg

Venue: Kirchberg Hospital, Luxembourg

Participants: President Dr Raymond Lies
1st Vice-President Prof Hartmut Nolte
Treasurer Dr Rolf Kirschner
2nd Vice-President Dr Thomas Zilling
3rd Vice-President Dr Joao De Deus
Secretary General Brigitte Jencik

The President welcomed the participants in Luxembourg and opened the session. Evoking the meeting of the evening before with the Secretary General of the A.M.M.D. and future President of the CPME, Dr Daniel Mart, the President expressed his satisfaction about the useful discussions especially in the context of the future of the European Medical Organisations.

One of the objectives of this board meeting was to brainstorm on new working methods, which to the wish of the President should result in an increase of the inputs from the other members of the board in representation and working affairs.

1. Approval of the Agenda
   Dr Zilling requested to include a report on the meeting of 23 September of the CPME working group on CPD, which he attended.

2. Approval of the Minutes of the 42nd Board Meeting in Athens 12 May 2005
   Dr Kirschner asked to amend point 7 AEMH Conference 2005, line 3: “Norwegian Medical Association” into Norwegian Association of Senior Hospital Physicians. At this occasion the members of the Board recalled the successful conference on CPD and unanimously appreciated the generosity of the Norwegian Association of Senior Hospital Physicians, which enabled Dr Hans Asbjørn Holm to be the main speaker at this conference.
   Document AEMH 05/052 was approved with the quoted amendment.

3. President’s Report
   In addition to his written report, the President stressed once more that the collaboration with FEMS does not mean any projects of a future merge. He furthermore commented the patient safety conference and the subsequent documents issued by the stakeholders as very patient oriented. He informed the board that he has been nominated the special advisor for patient safety for hospital doctors of Luxembourg and will attend as such the Patient Safety Summit organised end of November by the UK Presidency. But of course he will also represent the AEMH.
Concerning the stakeholder position paper he pointed out that it can only contain recommendations, as health is of national competence. Nevertheless, he believes that it can help to make things change. The general appreciation of the Board on the document was that it is by far too lengthy. The Board agreed on the input of the AEMH on CPD as follows: “An appropriate funding of CPD is an pre-requisite for a successful patient safety outcome”.

On the future of the European Medical Organisations Dr Lies pinpointed the role of the CPME to make the view of the National Medical Associations visible.

Concerning the changes to the statutes he is in favour of including a procedure which will allow decisions to be taken besides the plenary meeting.

Following Dr Lies’ call for comments on his written and verbal report, Dr de Deus suggested to invite the President of HOPE to the AEMH Conference in Bratislava.

Dr Zilling wondered whether the EuroPharmaco publication reaches hospital physicians and thus whether it could be the right support for publishing AEMH policy paper. B. Jencik will investigate the circulation.

4. **Secretary/ Secretary General’s Report** AEMH 05/057

Brigitte Jencik referred to her written report and expressed some concerns in respect to the organisation of the next AEMH conference in Bratislava as she had to draft the programme and did not get much support from the leaders of the working groups, who should normally take up the different subjects.

Dr Kirschner questioned her on the type of meetings she attends in Brussels. B Jencik reported that due to a lack of policy papers and statements she rather attends meeting addressing a large public than round tables where all participants have to express their views. Furthermore she commented on her additional activity to run the FEMS secretariat, which is supposed to take one hour per day.

The workload is naturally increased before the general assemblies and might be conflicting with the AEMH activity if the meetings of both organisations are scheduled at a short interval. She also expressed concerns as to the internal turbulences due to personal conflicts within the management of FEMS.

This introduced the following topic on the agenda.

5. **Collaboration with FEMS**

Dr de Deus represented the AEMH at the two last FEMS meetings. He reported from the meeting in Ischia where the delegations of FEMS expressed skepticism concerning the future of the EMOs. He stated that not all members of FEMS are trade unions. The assembly approved the proposal of the AEMH concerning secretarial services. FEMS established a working group to revise the statutes. There is a division inside the organization which amplified even at the General assembly in Varna. As a result the election for a new President could not take place. Dr Bertrand carries on the mandate until the next general assembly. FEMS has shown interest in participating in two AEMH working groups, i.e. Management and Labour Conditions and Quality Programmes in Hospitals.
6. AEMH Working Groups 2005
The Board welcomed the initiative to gather the members of the working group present at the CPME meeting in Stockholm. Besides the President and the Secretary General 8 AEMH delegates confirmed their participation. The members of the Board approved the document AEMH 05/061 as an input from the Board to the WG “The Future of EMOs”.

-AEMH Conference 2006 “Hospital Management based on Quality and Safety”.
Concerning the involvement of all WGs in the AEMH Conference 2006, Dr de Deus firstly expressed his concern on the too big number of topics, which was refuted by Dr Kirschner and Dr Zilling, but they stressed that for each topic a responsible has to be named. The overall lead inheres nevertheless to Dr de Deus. 
The sequence of the Conference should be from 14:00 – 18:00 granting each topic ½ hour and one hour for panel discussion.
As already proposed at the plenary meeting in Athens, external speakers from the hospital sector should be invited. The proposals from the Board were as follows:
-Hospital Budgets: HOPE (Dr Lies will talk to the President of HOPE, Prof. Edwards) and one other speaker (to be found by Dr Guisan).
-Quality programmes: the Slovak Medical Chamber had shown an interest to cover this topic.
-Implication of Doctors in Management: maybe the Royal College of Physicians (Dr Lies will meet the President Prof Dame Carol Black in London).
-Labour Conditions of Doctors: Dr de Deus proposed a Portugal Labour Union and the German “Marburger Bund”. Prof. Nolte agreed to contact Dr Montgomery.
-Training of hospital staff: maybe the RCP and Dr Zilling.
-Patient Safety: possible speakers could be EFPIA on “medication routines”, and the nurses. (Brigitte Jencik in charge to contact the latter).
Patient Safety should be the thread of all presentations and the final panel discussion should focus on this.
Hopefully all speakers will cover their own expenses. The nurses might be an exception, which the AEMH has to cope with.

- Report from the meeting of the CPME working group on CPD by the AEMH-representative Dr Zilling. The meeting was called in preparation of the CPME conference on CPD which will deal with the legal aspects of CPD. The date has not yet been set but might be the second half of 2006 under the auspices of the Finnish presidency. Dr Zilling will chair one of the workshops, so will Dr Maillet, SG of the UEMS. Dr Zilling worried about some convergences of views with the UEMS. He is impatient to receive the written report from the CPME.

7. Finances
Dr Kirschner gave a short summary of the interim report on the accounts 2005 established by the accountants. He stated that the expenditures are very much in line with the expectations. He furthermore welcomed the change of accounts to Luxembourg for the financial aspects although communication with the bank is now less easy for him.
The bank fees being unusually high which is due to the bank fees occurring at the transfers of the membership fees, the accountants will be asked to indicate the real amount credited on the account and not the one invoiced.

8. **Brainstorming**
This topic had been developed throughout the meeting and had resulted in the
- new methods for the meeting of the working groups
- new organisation of the AEMH Conference
- increased activities of the President
- increased involvement of members of the board
- a change of sequence of the next plenary
- new contacts, new collaboration opportunities (HOPE, Royal College of Physicians).
The involvement of AEMH delegates in CPME sub-committee should be promoted.
Dr de Deus volunteered to act as liaison officer at the UEMS and other AOs meetings in the event that no other delegate is available, as he is attended most of the meetings as national delegate.

9. 59th AEMH Plenary Meeting in Bratislava
After discussion the members of the Board made the decision to change the sequence of the next plenary meeting as follows:
Friday morning : organisational matters
Friday afternoon : parallel sessions of the working groups, national reports,
Saturday morning : reports from the working groups and adoption of documents, elections.

Dr Kirschner presented the draft budget of the Slovakian Medical Chamber and praised the extensive evaluation. As the budget does not attribute the costs to one or the other party, B. Jencik was asked to give indications to the Slovakian Medical Chamber based on the customs of the past years.

9. **Next Board Meeting**
Dr Kirschner considered a Board meeting in January unnecessary which was refuted by B. Jencik who argued that many events are on the agenda in November which might need decisions to be taken. In this respect the Saturday 28 January 2006 was retained as a preliminary date to be confirmed according to the circumstances. B. Jencik informed that the same date was predefined for a meeting of a FEMS working group in Brussels.

10. **Miscellaneous**
No other topics were brought forward and the President closed the session.