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<td>Minutes of the 52nd AEMH Board Meeting 15 November 2008, Pinneberg / Germany</td>
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<td>Author:</td>
<td>AEMH European Secretariat</td>
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Draft Minutes  
52nd AEMH-Board meeting  
15 November 2008

9:00 – 14:45

Venue: Hotel Cap Polonio  
Fahltskamp 48 - D-25421 Pinneberg

Participants:  
AEMH_President, Dr Raymond Lies  
1er Vice-President, Prof Hartmut Nolte  
Treasurer, Dr Hrovje Sobat  
2nd Vice-President, Dr Thomas Zilling  
3rd Vice-President, Dr Joao de Deus  
Secretary General, Brigitte Jencik

The President opened the session by thanking 1st Vice-President Prof Hartmut Nolte for the invitation to Pinneberg and the organisation of the board meeting and the social events. This is the last board meeting of Hartmut Nolte after a service of 11 years in the executive body of the AEMH and 14 years as delegate of the German delegation.

1. Approval of the Agenda  

   Dr Thomas Zilling requested to add the common EMO meeting in June 2009. This topic will be discussed at point 4. The agenda was approved unanimously.

2. Approval of the Minutes of the 51st Board Meeting in Brussels 1 May 2008.

   The minutes were approved unanimously.

3. President’s Report (to be distributed)  


   CPME – EMO: In the presentation of the report, the President reported from the last CPME meeting in London, which was the first meeting without France, Spain and Italy, since the three countries have resigned. This situation led to a general reflection on the future of all EMOs. In Brussels the situation is also known. The CPME president always refers to the statutes, when it comes to the relation CPME and ‘other EMOS’. CPME’s failures is based on wanting to take the lead on all subjects.

   Sponsorship: Concerning the relation to PricewaterhouseCoopers, the president reported from a meeting he had with the Luxembourgish representative of PwC, who confirmed that the company is willing to continue collaboration. Wim Oosterom, former head of the health research institute of PwC left the company, but the new leader agrees on a continuity. The details of collaboration in their new research topic have to be defined. Participation in the AEMH conference will depend on the topic  
   The proposal to accept sponsorship from a cleaning firm has to be rejected.

   EWTD: The President will attend a meeting with MEPs on 19 November, organized by FEMS, which took the lead as representative of salaried doctors. AEMH has to consider also the difficulties that hospitals face with insufficient manpower to implement the directive.

   Directive on Patients’ rights: The president fears that the current bad economical situation will have an influence.
Green Paper: The final official document is not yet released, but the AEMH has to be prepared to give an input on the topic.

4. **The Future of European Medical Associations**
   a) AEMH Statement of the 2005 Board, revised by the AEMH ad-hoc WG, but not adopted by the plenary
   b) AEMH-FEMS common letter to EMO Presidents
   c) Letters from other EMOs (UEMS, UEMO, PWG)
   d) CPME Strategy Working Group

- João de Deus distributed the letter of resignation from the CPME of the Portuguese Medical Organisation and explained the reasons. Portugal considers the sub-committees and the working methods of the CPME as not very efficient. The focus is too much put on ethics and prevention. The way to treat the other EMOs gave an additional impulse to resign. Portugal is member in all European Medical Organisations. 50% of all contributions go to the CPME, the other 50% are shared by all others. A 10% increase will be applied for 2009, but in the future the shortfall of 1/3 of the income, caused by the resignation of France, Spain and Italy, will need a further increase as no reduction of the expenditures have been proposed. Subcommittees must change and involve the other organisations. Portugal will remain active member in 2009 in order to give an input in the CPME strategy working group on the future. If their voice will not be heard, they will increase work and commit more intensively in the other organisations and leave definitely the CPME.
- The President reported on the common declaration drafted by all medical organisations and which at the and was released by the CPME with the unfortunate expression “CPME and the other European Medical Organisations”. All these “other organisations” protested in the same terms. AEMH and FEMS did in a common letter.

The document drafted in 2005 gave already some commitments of the AEMH but the situation has changed, so that it has become obsolete in many respects.

- The President proposed to unite all organisations in a confederation in which all specificities are respected. The CPME must include these specificities in their sub-committees. The Domus Medica should be established on the collaboration pattern as applied by the AEMH and FEMS, which increases efficiency and reduces costs.
- Thomas Zilling insisted on the urgency to address these requests in a position paper. He reasoned that the problems of dissidence are not limited to the CPME, but also concerns the PWG, as Sweden and Norway have left PWG. Also Denmark wants the CPME as sole European medical organisation and considers of leaving the PWG, AEMH membership could so far be preserved.
- Raymond Lies considers the expression “speak with one voice” as a slogan, diversity has to be respected and should be expressed as the problems remain.
- Hartmut Nolte contested the sole representation by CPME, which restricts membership to one organisation per country. Only a confederation can pretend this representativity.
- Hrovje Sobat requested a sub-committee or working group for hospital matters and one for general practitioners. The UEMS should be responsible only for medical but not political concerns.
- The president committed to draft together with Brigitte Jencik a position paper within a week’s time.

Concerning the common **EMO meeting in June 2009** it had been decided already last year, that the AEMH will not change its annual meeting calendar and hold its plenary meeting in May in Sofia. In connection with the CPME June meeting the so called “Joint EMO meeting”, is now an enlarged Presidents’ committee, enlarged by the members of the respective executive committees/ boards of all EMOs and the president of the CPME sub-committees. UEMO, FEMS and PWG will also hold their general assemblies. UEMS and AEMH will not. AEMH has too many delegates in common with CPME that it would be impossible for them to attend both meetings. The common EMO meeting with the boards will take place **Thursday afternoon 12 June 2009**, a common dinner Friday evening 13 June.
5. **Reports from other EMOs Meetings**
   UEMS Liaison officer Dr Thomas Zilling, Report
   - Thomas Zilling commented his report. He expressed his surprise on the UEMS working group on CME/CPD, which he attended and which only 4 persons. The topic recertification/revalidation he proposed was received with big interest. He furthermore commented on the elections and the non-election of Edwin Borman.

6. **Core Values, Aims, Means and Action Plan 2008**
   Define actions and actions plan, time table
   While looking through the action plan, it was decided that the document as a whole is very theoretical and thus a basis for action to be performed as soon as possible and on an on-going basis. Coordination and follow-up underlay to the AEMH Board.
   - Hrvoje Sobat advocated that the AEMH’s should not consider itself as a small organisation, it should increase its influence in the future, hospital care is increasingly important, patients more and more go to the hospital, not only for emergency but also for consultations, as they trust in the efficiency of multidisciplinarity in hospitals.
   The improvement of the AEMH website allowing forum discussions for the working groups will be investigated in means of investment by the treasurer and Brigitte Jencik.

7. **Finances**
   a) **Interim Report on accounts 2008**
      - Hrvoje Sobat presented the accounts as to September 2008 and expressed his satisfaction to the predictable positive balance for 2008, which is mainly due to the one-off contribution and the sponsorship of PricewaterhouseCoopers.
   b) **Draft Budget 2009**
      - Hrvoje Sobat commented the budget approved by the plenary in Zagreb, which does not take into account neither potential sponsorship, nor the costs for interpretation.
   c) **Interpretation in Plenary Meeting Sofia 2009 and further**
      i) Resolution adopted in Zagreb
      ii) Interpreters’ Proposals
      In respect to the resolution, the board decided to maintain interpretation for the next meeting, but with local interpreters. English, French, Spanish, Italian into English and French. In order to reduce this financial burden, the interpreters will have to be locals and engaged for 1 ½ days.
      iii) Reflection on changing the contribution key including interpretation costs as an option,
      It was decided not to change the current contributions as they are the basis for the 5 % increase approved by the plenary in 2007 for the following 5 years.

8. **Follow-up on Plenary Meeting Zagreb**
   Decisions and Tasks of the 61st Plenary Meeting
   Minutes of the 61st Plenary Meeting
   The Board stated that the decisions and tasks approved by the plenary have been implemented.

9. **Working Groups - Follow-up**
   a) **Training (Dr Thomas Zilling)**
      **Document on Pre- per and postgraduate Training**
      Thomas Zilling presented the document including a new AEMH position on the Bologna Process, which is quite opposite to the former. The presentation underpins first the position with bullet points and is followed by the outcome of the inquiry. The decision is to send out the document to the AEMH delegations with the request to check the data of the inquiry and to comment on the text.
   b) **Accreditation (Dr Joao de Deus):**
      European Hospitals evolving into Centres of Excellence
Joao de Deus hospital explained that this document explained the position of AEMH on hospital accreditation based on quality and safety and the hospital development into centres of excellence. Hospital organizational standards as part of accreditation will be subject of a document, which will be presented to next year’s plenary. This will finalize the position of the AEMH on hospital accreditation.

c) Healthcare across Borders and the consequences on Risk Management and Patient Safety (Dr Hrvoje Sobat):
Report Plenary meeting Zagreb

Hrvoje Sobat reported that no activity has been conducted.

d) AEMH Conference 2009 Sofia 7 May 2009,
The Board agreed on the title “Privatisation of Hospitals”.
- Raymond Lies agreed to act as coordinator for the conference. Local speakers will be invited to report on the Bulgarian situation. The private hospital of the Japanese Tokuda corporation can be an example, but should not be the only.
- Thomas Zilling will try to invite the Swedish owner of hospitals in the UK.
- Hartmut Nolte will also invite owners of German private clinics.
- Joao de Deus looks for an expert from Portugal.

The objective is to expose and oppose the situation from several countries. It should also be born in mind that speakers should attend on their own expenses or at the least expenses for the AEMH.

10. Next Board Meeting
Proposal for common meetings as to AEMH 08-004 FIN:
Meeting with FEMS Board (24 January 2009 in Paris Roissy CDG airport)
The members of the board are in favour of holding a common meeting, but with an internal and a common part, meaning that the “fly in-fly out” principal in one day seems not realistic. Considering this, Brussels seems to be a better alternative.
The proposal for a common meeting first has to be submitted to FEMS’ board members before any further consideration.

11. Miscellaneous

Improvement of the website. Discussed under point 6.

The President closed the session at 14:45.