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<th>AEMH 14-062</th>
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<tr>
<td>Title:</td>
<td>Draft minutes 70th AEMH Board Committee meeting Budapest, 15 November 2014</td>
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<td>Author:</td>
<td>AEMH European Liaison Office</td>
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<td>AEMH Members of the Board</td>
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Draft Agenda
70th AEMH Board meeting
15 November 2014, 16:00 -19:00

Venue: Marriott Hotel, View B Room (mezzanine/conference floor)
Apáczai Csere János utca 4, 1052 Budapest

1. Welcome
João De Deus welcomed the participants and introduced Tilde Broch Østborg (EJD), who had been invited to discuss the issue of the joint AEMH/FEMS/EJD general assembly in Vienna (7-9 May 2015).

2. Approval of the Agenda
João De Deus suggested adding the joint GA in Vienna as the first point to be addressed together with the EJD representative. The agenda was unanimously approved with this change.

Together with the EJD representative, the members of the AEMH board agreed on the following provisional schedule of events, to be reconfirmed with FEMS and the Austrian local organizers.

Concerning the first session of the joint General Assembly, it was suggested that all the three organisations identify one policy issue of common interest. Consequently, it was established they draft a common statement on the European Working Time Directive, to be distributed to the delegates for comments prior to the Vienna meeting and which will be further adopted in the first common session of the GA. The drafting work will be carried out by a small taskforce comprising one representative from each organisation.
Vlad Tica insisted on a result-oriented action.
In point of results and follow-up of this common action, João De Deus pointed out that this common statement could be used to lobby the national members of the European Parliament in order to maintain the current version of the EWTD.
It was also agreed that European institutions should be present in the General Assembly (mainly representatives from the European Commission and/or the European Parliament) as well as from other European organisations whose activity and actions may be of interest to the work of AEMH/EJD/FEMS (i.e. EPSU).

4. Approval of the Minutes of the 69th AEMH Board Meeting
The minutes were unanimously approved.

5. President’s Report
   a) AEMH Activity Report 2014
   b) President’s Report
João De Deus quickly commented on the activities mentioned in the AEHM Activity Report 2014 and further mentioned his participation in the FEMS as well as in the EMOs meetings in Paris and in the UEMS meeting in Granada.

Vlad Tica: the necessity to have a common activity with the EC / meeting with Commissioner Borg / delegation of a specific activity from the EC; one example being obtaining a EC recommendation of a minimal percentage of the GDP for health.

6. **1st Vice-President’s Report, Thomas Zilling**
   a) CPME Working Group, 20 June, Brussels
   b) EAAD meeting, 23 September, Brussels
   c) **UEMS council meeting, 17-18 October, Granada**

7. **3rd Vice-President’s Report, Vlad Tica**
   **UEMS Council meeting Brussels, 12 April 2014**
   AEMH activities report presented at the meeting

   Proposal to take a stand on the UEMS MJC (Multidisciplinary Joint Committee) on “Clinical Skills Training and Assessment – and NASCE (Network of Accredited Clinical Skills Centres in Europa)” **NASCE Statutes, NASCE Process of Accreditation and Application for Accreditation**

8. **EMO Collaboration**
   a) FEMS Conference and GA, 10-11 October
   b) EMO Presidents Committee Paris, 12 October
   c) CPD Conference, Luxembourg, December 2015 (to be confirmed)

   João De Deus updated on EMOs collaboration under point 5 (for points 8.a and 8.b) and invited Thomas Zilling to provide updates on point 8.c.

Thomas Zilling informed the members of the board about a development that was decided during the EMOs meeting in Paris. Thus, since all EMOs are concerned about the new Directive on CPD, they agreed to tackle the issue further during a conference organised in December 2015, in Luxembourg (under the Luxembourg presidency of the European Union). A taskforce was set up to provide guidelines as to the organisation of the conference; this taskforce includes Thomas Zilling (AEMH), Katrin Fjeldsted (CPME) and Claude Schummer (EANA). During its first meeting, the previous day, it established that Thomas Zilling drafts a consensus statement to be adopted at the conference.

Hrvoje Sobat suggested that the next AEMH board meeting should be held in Luxembourg, before/after the conference so that all members of the board may also attend the conference.
Vlad Tica congratulated Thomas Zilling for this achievement and proposed that a representative of UEMS should be invited to be part of this taskforce. He offered to get in contact with UEMS in this respect.

Thomas Zilling said he had already approached Edwin Borman (UEMS) to participate in the taskforce. Once he drafted the concept paper, he would send it to Edwin Borman. Thomas Zilling insisted all EMOs should support this conference, otherwise it has no value.

9. European Policy Adviser’s Activity Report
   by European Policy Adviser, Catherine Hartmann

Catherine Hartmann was excused for the Board meeting. There were no questions/comments on the report she sent to the Board members.

10. Update on European Affairs
    by European Policy Adviser, Catherine Hartmann

The board members decided that a different approach to the tackling of European affairs should be adopted. Thus, the services of Ms Catherine Hartmann will no longer be needed, the lobbying and European related actions being undertaken by AEMH president and vice-presidents.

11. Med-e-Tel
    Collaboration with the International Society for Telemedecine and eHealth (ISfTeH), Memorandum of Understanding Draft
    European Commission Green Paper on mobile health (“mHealth”)

It was decided that Dr Raymond Lies follow the issue in view of signing of the memorandum of cooperation with ISfTeH.

12. AEMH Office
    a) Brussels office – virtual/Domus Medica/CPME office
       UEMS questionnaire
       No decision was made as far as moving to the Domus Medica premises as no price concrete financial proposal had been made by UEMS. The unanimous decision of the board was that AEMH would only move if financial as well as technical conditions are suitable and comparable to what the organization currently has.
    b) AEMH website and webhosting
       AEMH webhosting costs have been increasing lately. The board members decided that it may be necessary to explore a webhosting solution that is more appropriate to the actual use needs of the members and, if possible, more economical.
    c) AEMH Communication strategy
       Diana Voicu suggested that, in order to increase its visibility towards its members as well as to the European stakeholders (i.e. Brussels-based European media, European Institutions, other European organisations), AEMH should decide upon a communication strategy that should clearly state its key-messages and target audiences. Among the means to achieve its communication targets, the production of a quarterly online newsletter was decided. One
issue should, for instance, contain all the country reports presented at the General Assembly, thus offering a complete picture of the European hospital doctors for the European media and institutions. Potential contacts with the European Brussels-based media should be also explored in view of increasing the AEMH visibility.

13. Financial Reports by AEMH-treasurer Dr. Sobat
   a) Treasurer’s report
   b) Provisional budget 2015

Hrvoje Sobat insisted that no final financial results are available, since the financial year is not yet finished. However, as far as the interim financial results, AEMH has a stable and good situation. Concerning the savings situation, as the interests in banks across Europe are decreasing, the board members should potentially explore further investment options for the AEMH. The AEMH treasurer also informed on the situation of the Slovenian Medical Chamber, as the Slovenian member was the only one not to pay its fee for the current year. Following recent contacts with them, they sent assurances that the fee would be paid as soon as possible.

14. AEMH Conference 2015 – Clinical Leadership

In point of speakers for the conference, Joao De Deus suggested one speaker from EJD, one from FEEMS, 2-3 speakers from Austria, Prof. Enrique Martinez (professor of clinical leadership in one Portuguese medical school, responsible for the IT in the national Portuguese health system – i.e. electronic records, electronic prescriptions, medical results, etc.)

Thomas Zilling recommended Melvin Samson and Mia von Knorring (from Karolinska Universitetssjukhuset); also, he suggested approaching VLK (Germany) to have a suggestion for a possible speaker presenting the German view).

Since AEMH conference are usually the starting point for a statement, Joao De Deus said that a common statement should be preferably presented before the conference and suggested that Vlad Tica should define the exact topics to be addressed by the speakers.

Vlad Tica asked the board members about the expectations AEMH has over this conference, over what AEMH wishes to achieve. Is it clinical management or leadership?

Thomas Zilling insisted that one key message of the conference should be that politicians stay away from the healthcare system. He said that the idea of the conference should be both about management and leadership.

Joao De Deus reminded that AEMH already has a statement on doctors’ involvement in hospital management. Clinical leadership, nevertheless, addresses a different level; it is about leading a hospital, the units, the teams; doctors should know how to lead a team, how to be the head of a department, how to be a clinical director or the director of the emergency team. The question raises about how to teach clinical leadership to doctors.

Thomas Zilling said that this is all part of CPD, otherwise it is about CME.
Vlad Tica suggested organizing the conference in slots of 30 minutes (i.e. 7 slots x 30 minutes – a 20-minute presentation followed by a 10-minute discussion); one slot should be a roundtable of the speakers; the purpose of the roundtable should be that the speakers should motivate why AEMH should be interested in clinical leadership. Information on AEMH should be sent to the speakers prior to the conference; since AEMH has the statement, would it be possible for the speakers to produce a common statement about AEMH and clinical leadership? This statement should be further addressed in the working group on Clinical Leadership, organized during the General Assembly. The WG may work on this statement to amend it.

The topics to be addressed by the speakers should be: what is clinical leadership (from different perspectives); a definition of clinical leadership, clinical leadership at the different levels; qualities necessary to the clinical leader; how to become a clinical leader.

He concluded that there should be 6 speakers (covering one slot each), 1 slot for the roundtable and 1 slot for discussion. He will draft the list of speakers and circulate it among the board members so s to have the final list of speakers and topics in the following two weeks.

He also pointed out that it is a good idea to start from something, as AEMH does not start from scratch in this topic. Maybe, for instance, a “fight” should be staged between Joao De Deus and Raymond Lies, so as to trigger further the debate.

Hrvoje Sobat suggested that the Austrian organizers should advertise this conference so as to reach a large audience. Also, some sponsors may be also targeted.

Below is the schedule and the speakers discussed:

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<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Speaker(s)</th>
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<tbody>
<tr>
<td>14:00 – 14:10</td>
<td>Launch</td>
<td>VT</td>
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<tr>
<td>14:10 - 14:30</td>
<td><strong>What?</strong> Difference management / leadership</td>
<td>J de Deus + R Lies</td>
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<td>14:30 – 14:50</td>
<td><strong>Why</strong> CL – for dr, patients, society</td>
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<tr>
<td>14:50 – 15:10</td>
<td><strong>Who?</strong> Qualities necessary for CL</td>
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<tr>
<td>15:10 – 15:30</td>
<td><strong>Who?</strong> CL at different levels</td>
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<tr>
<td>15:30 – 16:00</td>
<td>Discussions</td>
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<tr>
<td>16:00 – 16:30</td>
<td>Coffee / Tea break</td>
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<tr>
<td>16:30 – 16:50</td>
<td><strong>How?</strong> How to become a good CLeader. The path to CL</td>
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<tr>
<td>16:50 – 17:10</td>
<td><strong>How?</strong> Communication with patients – soft skills</td>
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<td>17:10 – 17:30</td>
<td>The <strong>EU situation</strong>; good and bad lessons</td>
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<td>17:30 – 18:00</td>
<td>Discussions, round table, take-home messages</td>
<td>All</td>
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7 **Speakers** to be chosen out of 14 (we can accommodate 8 if we reduce by 10 minutes each the first slot of discussions and the coffee break):

1. AEMH: J de Deus + R Lies
2. FEMS
3. EJD
4. Austrian Association
5. Austrian Association
6. Prof. Enrique Martínes (Joao): Professor of Clinical Leadership, in one Portuguese medical school, responsible for the IT in the national Portuguese health system – i.e. electronic records, electronic prescriptions, medical results, etc. responsible for the IT in the Health National System)
7. Melvin Samson (Thomas) (gastroenterologist, from Karolinska Universitetssjukhuset)
8. Mia von Knorring (Thomas) (psychologist from Karolinska Universitetssjukhuset). She is a full time researcher and defended her thesis in 2012 entitled “The manager role in relation to the medical profession”. Even though the title includes the word “manager”, there is evidence of research on leadership on a lower level in the Swedish healthcare system. Background: Managers and physicians have two important roles in healthcare organisations. However, several studies have identified problems in the manager–physician relationship and more knowledge is needed to improve the situation.
9. Stefan Lindgren (Thomas) (Professor in Medicine and Gastroenterology at Lund University in Sweden, President of the World Federation for Medical Education. He could speak about training in clinical leadership during medical studies and during specialist training)
10. Dr Ellen Kuhlmann (Thomas) (former nurse from Germany. She has been guest professor at several university’s; Aarhus, Bath in UK, McMaster in Canada, Norwegian Social Research (NOVA), and Kaohsiung Medical University, Institute of Gender Studies, Taiwan. Here thesis is entitled; Modernising Health Care: Reinventing Professions, the State and the Public. She might be very provocative to us but here research is interesting.)
11. Professor Christer Sandahl (Thomas) (psychiatrist and have done a lot of research on the field of Clinical leadership)
12. Swedish military who has created a special training program called Understanding Group and Leader (UGL) (Thomas)
13. Germany VLK
14. Leadership speaker

15. 67th AEMH Plenary Meeting Minutes

16. International meeting Calendar

<table>
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<tr>
<th>Date</th>
<th>Event</th>
<th>Attendance AEMH</th>
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<tr>
<td>14-15/11/2014</td>
<td>Budapest (Hungary)</td>
<td>CPME Board and GA</td>
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<td>7-9 May 2015</td>
<td>Vienna (Austria)</td>
<td>AEMH-FEMS Joint Meeting</td>
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<td>8-9 May 2015</td>
<td>Vienna (Austria)</td>
<td>EJD Spring Meeting 2015</td>
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<tr>
<td>10-11/04/2015</td>
<td>Brussels (Belgium)</td>
<td>UEMS General Assembly</td>
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<tr>
<td>22-23/05/2015</td>
<td>Reykjavik (Iceland)</td>
<td>CPME Working Groups, Board and GA</td>
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<td>2015 Norway</td>
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<td>EJD Autumn Meeting 2015</td>
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<tr>
<td>9-10/10/2015</td>
<td>Krakow (Poland)</td>
<td>FEMS Board and GA</td>
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<tr>
<td>16-17/10/2015</td>
<td>Warsaw (Poland)</td>
<td>UEMS General Assembly</td>
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17. **Next Board Meeting**: 14 February 2015, Florence, Italy
The next board meeting is to be held in Florence, jointly with the FEMS board as follows: half-day for the AEMH matters and the other half for common matters between AEMH and FEMS.

18. **Any other business**
AEMH Board suggested the creation of a Standing Committee/Advisory that should advise on AEMH policy, involvement in projects and cooperation with other EMOs. The proposal was to be further discussed at the next board meeting.