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<td>Draft Minutes 70th Plenary Meeting, Luxembourg, 5-6 May 2017</td>
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70th AEMH-Plenary Meeting, Luxembourg

Venue: Hotel Parc Belair, 111 Avenue du Dix Septembre, 2551 Luxembourg

DRAFT AGENDA

FRIDAY 5 May 2017

9:00 – 13.00 AEMH Plenary session; 10:30 – 11:00 Coffee break

1. Welcome addresses
   João de Deus welcomed the AEMH delegates to the plenary meeting. He thanked AMMD for hosting the AEMH meeting. Raymond Lies further welcomed the participants to Luxembourg. He excused Alain Schmit (AMMD president) for not being present, due to talks under way at the ministry of health concerning the new hospital law.

2. Roll Call of Heads of Delegations
   João de Deus made the roll call of the heads of delegations and welcomed the new delegates.

3. Approval of the Agenda
   João de Deus proposed a change in the agenda, namely holding the elections on Saturday (point 7 postponed to Saturday); also, he suggested adding to point 7, elections for the position of internal auditor.
   The agenda was unanimously approved with these changes.

4. Approval of the Minutes of the 69th Plenary Meeting Naples
   The minutes were unanimously approved.

5. President’s Report
   a) President’s Report
   b) AEMH Activity Report 2016
   c) List of AEMH Documents 2016

   João de Deus talked about the activities and events he attended since the previous AEMH general assembly in Naples. Thus, he informed on his attendance of a conference on healthcare systems in Central and Eastern Europe (Bucharest, October 2016), where, together with Vlad Tica, delivered presentations. In November 2016, he was invited by UEMS to present the AEMH view on CME/CPD, within the framework of a conference organised in Amsterdam (https://www.uems.eu/news-and-events/news/news-more/cme-cpd-conference). He pointed out the change of perspective with UEMS, in point of considering also other activities as CME/CPD. In December 2016 he attended the Presidents Committee meeting in Paris, where CPME presented a report on their attendance of the CEN meetings. CPME had initially accepted to be part of CEN, but, since the doctors’ position was not taken into consideration, with CEN blocking all input coming from doctors, CPME decided to withdraw from this body, as otherwise it may have been considered as supportive of CEN actions. The presidents of the EMOs have written a letter to
the European Commission. The EC replied that is not taking into consideration CEN documents; nevertheless, CEN is going on with its work. Therefore, in the presidents committee meeting in Vilnius, a decision to act at two levels was taken: 1. to ask the national medical associations to act at the national level to block CEN actions and 2. To act at the European level, as EMOs, to the same end. Also in Paris, presidents discussed the consequences of Brexit and the recognition of doctors’ diploma between EU and USA (topic brought up by EMSA).

João de Deus informed further of his attendance of the CPME meeting in Vilnius (April 2017) and the Presidents’ Committee meeting as well as the UEMS council in Tel Aviv (April 2017). He used the latter visit to speak to the UEMS secretary general about the AEMH project on establishing the European Board on Clinical Leadership.

Bernard Maillet raised his concerns about CEN, since they continue to function, despite any action taken by the national governments or the EMOs.

Vlad Tica inquired about the response of the Commissioner to the EMOs letter. 

Bernard Maillet commented that, despite the Commissioner’s answer, he was not sure that the Commission is really against CEN as the EC may see the activity of CEN as overcoming the principle of subsidiarity.

6. AEMH Involvement 2016 - 2017


Raymond Lies reported on the events he attended on behalf of the AEMH. The EC, together with the national health authorities and other healthcare stakeholders are trying to counteract and prevent the overuse and the misuse of antibiotics at the European level, which, apart from its implications at the level of health, also has a significant economic impact. This initiative has led to the organisation of the European Antibiotic Awareness Day (in November each year) as well as to various other preparatory meetings. A large discussion on the use of antibiotics has been developed – especially among the different stakeholders (i.e. doctors, nurses, hospitals, veterinarians, etc.). But, since healthcare is not part of the EU regulated policy, the EC can only provide recommendations to the Member States as well as to various stakeholders in Europe.

Dr Lies emphasized the fact that he was the only representatives of the physicians – as prescribers of antibiotics – in the Stockholm meeting. There, the concept of “prudent use” of antibiotics was put forth as key to the recommendations proposed. He rather suggested the “correct use” instead. The final document will be presented in November 2017, but, he argued, the use of it is unclear, given that it can only be very general and very theoretical, as opposed to the existing medical guidelines that are used by physicians in their daily work.
The issue of patients presenting multi-resistant bacteria (i.e. multi-resistant tuberculosis) and travelling to Europe from other countries was raised (Josef Weber, Raymond Lies, João de Deus) – this makes even more important the work of the European Commission as to preparing alert mechanisms for the different European countries. The same goes for the viral infections (i.e. with measles) being “imported” from other countries, combined with lower levels of vaccination (João de Deus)

Constantinos Livadas also raised the issue of the 60,000 refugees currently hosted in Greece, as part of the overall refugee crisis in Europe.

- EU Health Policy Platform meeting

Hrvoje Sobat informed about his attendance of the meeting of the EU Health Policy platform (5 December 2016). The Platform (https://webgate.ec.europa.eu/hpf/) is a newly developed online tool by the European Commission aimed at getting together various stakeholders in the health field so as to advance debates on various issues of concern; twice a year, 3-4 organisations will be picked up to lead thematic networks and produce statements on the issues they have put forth, which, in the near future, will constitute the basis for various green or white papers of the European Commission. The issue he proposed in the name of AEMH on the occasion of this first meeting of the platform was “Litigation claims – Defensive Medicine – Safety risk from unnecessary examinations”. Since the proposal did not get enough votes, it did not lead to the establishment of a thematic network; nevertheless, the Commission suggested the setup of a dedicated area in the platform for debate on the topic; given that AEMH is itself a platform of debate, there was no point in creating another debate area; instead, the reopening of the working group on patient safety with AEMH was the option that seemed more suitable.

João de Deus suggested cooperating with other EMOs in the debate (i.e. CPME, which also deals with defensive medicine).

Claude Degos said that the AEMH speciality is the hospital and the hospital view, therefore the association we should be focusing on delivering an opinion based on our speciality. All in the attempt of not overlapping on the work of the other EMOs, as eventually there is a risk that all of them concentrate on the same issues.

João de Deus pointed out that this was one reason behind the opening of the working group on clinical leadership, in the attempt that AEMH focuses on its specific field of expertise.

Raymond Lies commented that, given the ICT communication means, the association should develop a different way of working and functioning; the two-day annual meeting becomes obsolete and rather inefficient as most of the times a rapid reaction is needed to matters occurring daily.

- Med-e-Tel Conference of the International Society for Telemedicine & eHealth, 5-7 April 2017 Luxembourg (Dr Raymond Lies)

Raymond Lies reminded that AEMH has a MoU with Med-e-Tel (since 2014). The Memorandum was produced in the idea of having a better contact with the international developments occurring in the field of e-health. Each year, Dr Lies attended this international conference, where he is constantly asked about the AEMH position on the matter. He therefore recommended that he is further accompanied by some
other representative of the association, possibly with more expertise in the e-health area so as to cover the huge panel provided within the conference/exhibition.

- Meeting with EU Commissioner for Health, Dr Vytenis Andriukaitis, 31 May 2017, Brussels

João de Deus informed about his attendance of a meeting with the EU health commissioner, as part of a joint FEMS-AEMH delegation. He encouraged the delegates to give/send him their ideas and messages that they want to be transmitted to the commissioner.

Vlad Tica suggested asking the commissioner for a means of compensating for the subsidiarity principle in healthcare and further setting up a minimum standard of care across the EU.

João de Deus pointed out that subsidiarity as well as inequalities in working conditions and remuneration of doctors across Europe are already on the agenda of the meeting as proposed by FEMS. These inequalities lead to significant immigration of doctors among the EU countries, causing imbalances and impacting on the care provision and further on the patient safety. He further said he would present the commissioner the AEMH view on task shifting that also eventually affects patient safety.

Anthony Bertrand suggested the issue of the lack of doctors in some European countries should be considered together with the issue of doctors’ migration by the Commission.

Constantinos Livadas suggested that there should be clear rules regulating the brain drain from the South and East of Europe to the North. Doctors are trained using national resources. By leaving to work in different country, they deplete their home country of significant resources that were used for their training (both in the medical school and further in the hospital, for obtaining the medical speciality).

João de Deus agreed doctors’ migration is a very important issue to be addressed. If in the EU context of free circulation of people it may be difficult to act, he suggested approaching and raising awareness at the level of national governemnts on the issue of brain drain of doctors, who appear to be the profession that records the highest level of migration across Europe. The governments should understand that if they do not provide decent working conditons to doctors in their own countries, they would be confronted with serious problems in the future. Governments should understand that they should perceive healthcare as an investment and not as an expense.

Vlad Tica added that along the model of the European Working Time Directive, the Commission should consider a Directive on working conditions of doctors. AEMH can be one of the stakeholders engaged in such an effort.

Constantinos Koumakis said that Europe should aim for a stronger integration in healthcare, otherwise the risk of having more and more medical deserts across the continent will increase.

João de Deus agreed that more directives are needed at the EU level to harmonize healthcare across Europe.
Claude Degos said that having too specific regulations at the EU level may limit doctors daily work and research, so one also should be aware of this aspect.

Raymond Lies pointed out that the delegation meeting the commissioner should be careful when discussing with him, as he is a politician that will certainly try to pass the ball onto the national governments.

Sergio Bovenga highlighted the problem of the many Italian medical graduates that cannot obtain specialisation after graduation, as this is only granted in university hospitals.

João de Deus agreed to present this issue also to the EU Commissioner.

- 4th European Hospital Conference (in cooperation with HOPE and EAHM), 16 November 2017, Dusseldorf, Germany

João de Deus informed on the organisation of the European Hospital Conference, which AEMH does every two years together with HOPE and EAHM.

Raymond Lies attended a first preparatory meeting in February. He further informed that the topic of the conference will be chances and challenges of e-health, in line with the AEMH annual conference that preceded the General Assembly. He gave an overview on the draft programme of the conference and invited the delegates to join and also take the opportunity to visit the Medica fair organised on the same occasion in Dusseldorf, probably the largest medical fair in the world.

He proposed to revise the paper of Professor Hesselius (1995) in point of updating it to the current developments, send it for comments to the AEMH board, which, in turn, will send it to all AEMH delegates and further present it in the framework of the conference.

- European Board on Clinical Leadership – updates and further action

João de Deus underlined the fact that each European medical organisation should focus on a field of activity in which it holds maximum expertise. Since doctors are natural leaders, as they need to take decisions on many occasions, it turns out clinical leadership is a skill of doctors. It is in this respect that the AEMH board had proposed in the General Assembly in Naples to explore the possibilities of setting up a board on Clinical Leadership along the UEMS model. He further said AEMH should take advantage of the technical experience of UEMS in establishing this initiative, therefore he had contacted UEMS to have a meeting with their secretary general in order to discuss this as well as the potential means of cooperating with UEMS in the framework of this project. A working group involving representatives of AEMH, UEMS as well as university stakeholders will be aimed at in the beginning to organise the next steps.

Bernard Maillet said that this is a good example of cooperation between EMOs. He advised starting the process by drafting the ETRs (European Training Requirements) for the Clinical Leadership. Eventually, this can lead to obtaining a diploma in Clinical Leadership that will be granted by both organisations.
7. **AEMH organisational matters**

- Request for membership termination – Denmark
  
  (for information to the AEMH members)

- Elections according to AEMH statutes
  
  “Executive Committee and Board: Any physician of the Plenary Assembly still actively working in hospitals is eligible to be appointed to the administrative organs of the AEMH.”
  
  o Elections for 2nd and 3rd vice-presidents (term 2018-2019)

Stefano Reggiani was appointed for a 3-year mandate as internal auditor.

Theo Merholz was unanimously elected as 2nd Vice President (term 2018-2019). Sergio Bovenga was unanimously elected as 3rd Vice President (term 2018-2019).

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**13:00 – 14:00 Lunch break**

**14:00 – 17:00 Common Working Groups; 15:30 – 16:00 Coffee Break**

1. Working group on Clinical Leadership
   Chair – Vlad Tica

2. Working group on Patient Safety
   Chair – Hrvoje Sobat

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**Saturday 6 May 2017**

**9:00 -13:00 AEMH Plenary Session; 10:30 – 11:00 Coffee break**

8. **Financial Matters** by AEMH-treasurer Dr Sobat

   
   a. Closing of accounts 2016
   b. Treasurer’s Report of Year 2016
   c. Internal Auditor’s Report on accounts 2016
   e. Draft Budget Year 2018 for approval

Hrvoje Sobat informed that all fees were eventually collected for 2016 and he thanked the delegations for their payments. He presented a positive balance sheet. AEMH reached a significant surplus in 2016 which enables the association to discuss further projects and initiative in full confidence and security.

He thanked the Portuguese Medical Association for taking charge of part of the expenses of the AEMH president as well as to the Italian delegation for the generous support in hosting the 2016 General Assembly.
João de Deus submitted to vote the discharge of board for 2016. The board was further unanimously discharged for the 2016 accounts.

The 2018 budget was next unanimously approved.


João de Deus, Vlad Tica, Theo Merholz and Bernard Maillet were appointed in the core working group on Clinical Leadership that will organize further the development of this project. Two more external experts will be appointed by the members of the working group. By the next plenary, the working group will report to the plenary on:
- The Clinical Leadership board competencies
- ROP
- Content of the AEMH web section on CL
- Candidates’ competencies
- Curriculum (ETR)
- Examination organisation
- Assessment, appointment of the jury.

The plenary unanimously voted on the component of the working group and its tasks.


Based on the report presentation, João de Deus suggested that Hrvoje Sobat produced an AEMH statement on defensive medicine that will be sent to the member delegation by email for approval. When the statement is endorsed within the AEMH, it will be also sent to the other EMOs.

11. Reports and Documents for adoption and decision
   a) Internal Documents from Working Groups
   b) External Documents from other Organisations

12. European Agenda Updates - AEMH Newsletter

13. National Reports

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The delegates present reported on the situation in their countries. The Austrian delegation was not present but sent a report before the meeting.

A specific request by the Croatian Medical Chamber for the AEMH to join CPME and EJD in supporting the junior doctors’ right to free mobility was approved by the plenary. A letter would be drafted by the AEMH president in the respect.

14. European Medical Organisations

a) The Floor to European Medical Organisations or Reports from Liaison Officers
   - CPME: \[AEMH 17-039\]
   - FEMS
   - UEMS: \[AEMH 17-040\]

b) Reports from last EMO’s Presidents’ Committees

c) International EMOs’ Calendar

Bernard Maillet informed on the activities of CPME and UEMS (see the attached documents).

15. Dates and Venues of the next meetings

   - Invitation open for the organisation of AEMH 71\textsuperscript{th} Plenary Meeting 2018

João de Deus invited in the name of the Portuguese Medical Association for the organisation of the 2018 AEMH General Assembly in Lisbon, Portugal. Since it would be a 3\textsuperscript{rd} Joint Meeting with FEMS, the host partner (FEMS members) will be SIM – Sindicato Independente dos Medicos. Further details as well as the final dates will be communicated after the FEMS GA (14-15 May 2017).

13:00 – 14:00 Lunch