

CLINICAL LEADERSHIP – OSLO MEETING

1. MAY, 9, MORNING MEETING

a) Presentation Prof Riedel (same as during the Conference) + Q&A

Suggestions:

- do research on the subject & publish (prof Riedel)
 - include research in the ETR (Karin)
- b) discussion on the reasons for which a doctor would want to participate in the Academy of CL; Prof Riedel + Theo will write by end June and send to us for feedback
1. AEMH reputation: USP (unique selling point); publications; credit points for the courses
 2. Compatibility with master/MBA programs; special subjects, like social ethics; combining theory with practice (different countries' experience)
- c) Decision to discuss in the WG ETR, without “Content of training and learning outcome” and “Training requirements for training institutions” – for the moment = AEMH CLA
- d) Next meeting – connected with the next AEMG Board meeting
- e) Objective – presentation of ETR to the UEMS Council, in October
- f) Issues to be solved (not discussed):
1. CL board

competencies, ROP

Membership (clinical activity)

- a. 3-5 AEMH (one = chair decided by them) -> application -> Board -> Plenary
- b. 2 External experts (by invitation)

Virtual meetings, 1/y in person

Resources: networking, reimbursement, secretarial w

Report to AEMH

2. CONFERENCE

The Conference went well, the program was well structured.

The presenters complied well to the subjects and to the allocated time.

Time and subject management went well.

Some presenters had interesting questions right after the presentation, as they finished earlier than the allocated time.

At the end, there was an interesting, animated discussion.

Conclusions from the discussion of the Conference

WHO:

Begin training early (addressing **students / residents**) and continuous

Recognised as one of / member of the team

HOW:

Create the **right environment** / working conditions

Help to find **pleasure, personal fulfilment** / recruitment criterion

Maybe a recruitment criterion for being a physician

Find the right **motivation** (difficult from the financial one, sometimes)

- Recognize leaders /
- Rebranding CL Academy: Not accountability, but change, inspiring people
- **European variety** – adapt but also take advantage from the diversity and ideas/knowledge exchange
- Define special **field skills**: general compliance, economic, etc – Prof Reidel promised to send us his view on this.

3. CL WG

ETR

I. TRAINING REQUIREMENTS FOR TRAINEES

1. Content of training and learning outcome
 - a. Theoretical knowledge
 - b. Practical and clinical skills
 - c. Competences
2. Organisation of training
 - a. Schedule of training
200 credits/hours with a minimum of 40 / section
 - c. Curriculum of training

1	Leading position / experience Leadership of medico-social accomplished projects Innovation within a team framework
2	Economic-managerial training / education Relevant specific medical legal/regulations relevant education
3	Communication training / education

- Formal CL training / education
 - Relevant conferences/congresses/work-shops, etc.
- c. Assessment and evaluation
- CLA Board assess the diploma / certificate / activity / accept UEMS credits
 - CLA Board assess the personal curriculum
 - Project of management of a medical department/project
- d. Governance
- AEMH, collaborating with FEMS, EJD, universities; UEMS support

Ask UEMS if it is necessary to fill-in all the relevant ETR sections or accept to collaborate on the basis of a text entitled “AEMH Clinical Leadership Certification”.

- If neither acceptable by UEMS, CLWG AEMH will fill-in the ETR template, by July, 15.

TRAINING REQUIREMENTS FOR SENIOR DOCTORS WITH CLINICAL LEADERSHIP EXPERIENCE (FELLOWSHIP)

Competencies required

A CL Fellowship applies to doctors who has completed their general professional training as a physician and have experience as clinical leaders to become recognised by the European Academy of Clinical Leadership.

1. CONTENT OF TRAINING AND LEARNING OUTCOME

DEMONSTRATING PERSONAL QUALITIES

Doctors showing effective leadership need to draw upon their values, strengths and abilities to deliver high standards of care. This requires doctors to demonstrate competence in:

A) Technical-professional skills

- **Professional course**

Relevance of the experience acquired, training and type of functions performed.

- **Continuing personal development**

Participation in CPD activities, experience and feedback.

B) Time of Practicing

- **Developing self awareness**

By being aware of their own values, principles, and assumptions and being able to learn from experiences.

- **Acting with integrity**

By behaving in an open, honest and ethical manner.

C) Education activities as trainer

- **Training activities**

In medical internships and other training and medical education courses attended and given.

- **Managing yourself**

By organising and managing themselves while taking account of the needs and priorities of others

LEADERSHIP SKILLS

Doctors show leadership by working with others in teams and networks to deliver and improve services. This requires doctors to demonstrate competence in:

- **Experience, capacity and ability to manage teams**

Working within teams, building and maintaining relationships by listening, supporting others, gaining trust and showing understanding

- **Experience, capacity and ability to manage services**

Developing networks by working in partnership with patients, carers, service users and their representatives and colleagues within and across systems to deliver and improve services

- **Experience, capacity and ability to manage organisations**

Encouraging contribution by creating an environment where others have the opportunity to contribute.

2. ASSESSMENT

a) Project of management of a medical department

• MANAGING SERVICES

Doctors showing effective leadership are focused on the success of the organisation(s) in which they work. This requires doctors to demonstrate competence:

- **Planning** by actively contributing to plans to achieve service goals
- **Managing resources** by knowing what resources are available and using their influence to ensure that resources are used efficiently and safely, and reflect the diversity of needs.
- **Managing people** by providing direction, reviewing performance, motivating others and promoting equality and diversity.
- **Managing performance** by holding themselves and others accountable for service outcomes.

• IMPROVING SERVICES

Doctors showing effective leadership make a real difference to people's health by delivering high quality services and by developing improvements to service. This requires doctors to demonstrate competence:

- **Ensuring patient safety** by assessing and managing risk to patients associated with service developments balancing economic consideration with the need for patient safety
- **Critically evaluating** by being able to think analytically, conceptually and to identify where services can be improved, working individually or as part of a team
- **Encouraging improvement and innovation** by creating a climate of continuous service improvement
- **Facilitating transformation** by actively contributing to change processes that lead to improving healthcare.

• SETTING DIRECTION

Doctors showing effective leadership contribute to the strategy and aspirations of the organisation and act in a manner consistent with its values. This requires doctors to demonstrate competence in:

- **Identifying the contexts for change** by being aware of the range of factors to be taken into account
- **Applying knowledge and evidence** by gathering information to produce an evidence-based challenge to systems and processes in order to identify opportunities for service improvements
- **Making decisions** using their values, and the evidence, to make good decisions
- **Evaluating impact** by measuring and evaluating outcomes, taking corrective action where necessary and by being held to account for their decisions

b) CV Evaluation

Demonstrating personal qualities	Technical-professional skills	0-2
	Time of Practicing	0-1
	Education activities as trainer	0-1
Leadership skills	Experience, capacity and ability to manage teams	0-2
	Experience, capacity and ability to manage services	0-2
	Experience, capacity and ability to manage organisations	0-2
Total		10

After the discussion in the plenary May, 11, send to all delegations.

- Feedback until June, 15.
- Integration of new info by CLA Board – deadline July, 15.