

## UEMS Section of Occupational Medicine

Minutes of the Meeting on 24<sup>th</sup> October 1998  
at the UEMS Office, Avenue de la Couronne, Brussels, 2pm

Attendees:	Dr Tom <b>McMahon</b>	Ireland (Chairman)
	Dr Ewan <b>Macdonald</b>	UK (Secretary/Treasurer)
	Dr Gunnar <b>Ahlborg</b>	Sweden
	Dr Vlasta <b>Deckovic-Vukres</b>	Croatia
	Dr Jadranka <b>Mustajbegovic</b>	Croatia
	Dr Helene <b>Economou</b>	Greece
	Dr George <b>Stamatopoulos</b>	Greece
	Dr Luc <b>Quaeghebeur</b>	Belgium
	Dr Haldun <b>Sirer</b>	Turkey
	Dr Blaise <b>Thorens</b>	Switzerland ✓
	Dr Sven <b>Viskum</b>	Denmark
	Dr Knut <b>Skyberg</b>	Norway
	Dr Anne <b>Birkeland</b>	Norway

1	<u><b>Apologies:</b></u>	Prof Kaj <b>Husman</b>	Finland
		Dr Paavo <b>Jappinen</b>	Finland
		Dr Zora <b>Gruden</b>	Slovenia
		Dr Piet <b>Kroon</b>	Netherlands representative

No apologies have been received from Italy, Spain or Portugal. Germany had been invited as observers. Concerns were raised by the meeting at the lack of representations of the Southern European countries and the Secretary undertook to write to the absentees to encourage attendance at future meetings and enquire whether there were any obstructions to so doing. The Secretary also agreed to obtain an up to date list of country nominations from the UEMS Secretariat.

2 **Minutes of last meeting**  
The notes of the meeting with Commissioner Flynn were approved.

3 **Matters Arising**

- 3.1 Correspondence in relation to training time in occupational medicine had taken place and this was still four years for occupational medicine. This led to a discussion on equivalence as there are inconsistencies in occupational medicine specialist training across Europe.
- 3.2 German representation. Dr McMahon had spoken to Dr Tiller, President of one of the German associations, who had agreed to attend the meeting as a German observer, as Germany had not yet agreed a national approach.
- 3.3 It had been agreed that all members would write to their local relevant politicians, e.g. members of the European Parliament, leading trade unionists and EU legislators. Ewan Macdonald and Tom McMahon had actively sought contacts in their countries. Attendees agreed to make the appropriate contacts. Discussion took place about the purpose of such contacts and it was agreed that views expressed in the Commissioner Flynn paper (attached to these Minutes) including the Charter of the Section should be communicated to interested parties in the country and the main purpose of communication was to establish networks and possible avenues for influence in due course. **ACTION ALL**
- 3.4 Multi disciplinary Services – Danish Report  
Sven Viskum discussed this report and informed the meeting that it had not been agreed by the employers representatives. It was unlikely to go much further within the European context at this stage.

3.5 Greek Situation.

The Secretary had written to the Greek Minister of Health, Minister of Labour and to Dr Aresini in DG 5 as well as up through UEMS channels on the subject of the independence of occupational physicians practising in Greece. As yet no reply had been received other than an acknowledgement from the Greek Medical organisation.

## 4 Chairman's Report

- 4.1 A meeting had been held with Commissioner Flynn and a delegation from UEMS consisting of Tom McMahon, Kaj Husman, together with Joe Kearns from the Standing Committee of Doctors. The delegation was well received and the Commissioner was clearly well briefed on the organisation and individuals attending. He was particularly concerned that the profession was speaking with one voice and was assured that ENSOP and EASOM shared our views as he did not want more than one knocking on his door. He listened to our representations on the problems of work-related ill health, inequalities of access, competent occupational medicine advice, the impact of occupational ill health on the public health across Europe. He agreed to a follow up meeting.

Tom McMahon, President of the Section reviewed the meeting which had taken place on Thursday evening with Commissioner Flynn and which had been attended also by Prof Raphael Masschelein, President of EASOM (European Association of Schools of Occupational Medicine) and Dr Jacques van der Vliet, President of ENSOP (European Network of Societies of Occupational Physicians) and Ewan Macdonald, Secretary. It was reported that Commissioner Flynn received the delegation positively. He spent considerable time discussing in detail the extent to which EASOM and ENSOP Boards had agreed the Glasgow Concordat, which is the agreement between UEMS, EASOM and ENSOP. He seemed particularly concerned about this point. He also appeared to be more cautious than he was in the previous meeting, explaining that the Commission did not normally consult with professional bodies or groups. The normal lines of communication were with social partners in countries. He suggested that liaison with advisory committees in countries of social partners was important. The delegation got the impression that he had had some slightly more negative briefing from his civil servants. However, he suggested continuing the dialogue with a further meeting with Tom McMahon, possibly in Dublin, to be arranged. It was agreed that Tom McMahon would write formally to the President of ENSOP and EASOM, asking them to formalise the Glasgow Concordat in order to reassure Commissioner Flynn this indeed had been discussed within both organisations.

Tom McMahon reviewed the discussions he had had with the Standing Committee of European Doctors who, with Joe Kearns and Jacques van der Vliet's help had eventually been supportive of the Section's initiative in contacting the Commissioner.

He confirmed that he had met a senior member of the Social Committee, Mrs Bernie Malone from Ireland, about occupational medicine and health in Europe. The impression gained was that Mrs Malone did not have great understanding of occupational health.

### 4.2 Continuing Medical Education (CME)

The President discussed the UEMS Charter documents and in particular that of continuing medical education. The practices in the various countries represented at the meeting were reviewed. **Croatia:** Croatia have a voluntary system but require points to maintain the license to practices. You need to gain 20 points. It involves 7 days training per year, which is paid by the social security.



**Sweden:** no compulsory system for CME and they have two types of occupational medicine specialists: the occupational health doctors and the clinic based specialists in occupational and environmental medicine. They have no log book system. They are having some discussion within the country about the possibility of developing one specialty.

**Greece:** they have recently established a system of 20 hours per year.

**Switzerland:** they are implementing a compulsory system for all specialties. The minimum is 80 hours, of which 50 hours is external and 30 hours can be individual. Each specialty is building its own programme. A record has to be kept of the programme. ✓

**France:** 35 hours are required per annum and there is recertification every 5 years.

**Turkey:** there is no provision for CME and there are only 4 specialists in the country.

**Norway:** there is no compulsory CME but a system has been developed for general practitioners.

**Belgium:** There is no compulsory system.

**Denmark:** Systems are being established at this time in Denmark.

In general discussion it was agreed there was a need to set up a sub-group to produce a paper on CME in Occupational Medicine. The sub-group will be led by Sven Viskum, from Denmark and either Jadranka Mustajbegovic or Vlasta Deckovic-Vukres from Croatia and Ewan Macdonald.

## 5 **Secretary's Report**

5.1. Ewan Macdonald reviewed the correspondence. No further response had been received from Dr Manfredi, the junior doctor on the Permanent Working Group. There had been discussion with various contacts in Germany about German representation.

5.2. Ewan Macdonald had attended, as a Member, the meeting of the European Association of Schools of Occupational Medicine at Linz on September 11<sup>th</sup> 1998. A major topic of discussion had been the core competencies required in the training of occupational physicians. He reported that the proceedings of the Conference he had organised in Glasgow in April 1997 had been published and were available for the sum of £20 (including postage), purchased from his office at the University of Glasgow. At the EASOM General Assembly it had been agreed that EASOM should work closely with the UEMS Section and ENSOP.

## 6 **Finance and Subscription**

The Secretary/Treasurer reported that the only countries who had paid their UEMS Section subscription were Switzerland, Croatia, Greece, Norway and France Turkey??. Fifty per cent of the subscription had been received from Ireland (from the Faculty of Occupational Medicine). No subscriptions had been received from other countries. The Secretary/Treasurer explained that the not inconsiderable secretarial work had been absorbed within his office at the University but that this could not be sustained. The balance sheet of income and expenditure is attached to the minutes. The President asked the Secretary to write to all UEMS members asking for subscriptions to be paid before the end of the year. The subscription for 1999 would be determined at the first meeting in 1999.

## 7 **Future Strategy**

The President, Dr McMahon, led a discussion on how the Section could best influence the EU. He would be having a further meeting with Commissioner Flynn. The meeting agreed that there would need to be close co-operation with EASOM and ENSOP and that observers from EASOM and ENSOP should be invited to UEMS Section meetings. The minutes of the UEMS section would be circulated to EASOM and ENSOP routinely.

The UEMS combined its charter document on CME, Training, Quality Assurance and Charter for the Visitation of Training Centres into one booklet published for the 40<sup>th</sup>

Anniversary. The Secretary undertook to obtain copies of these to circulate to all members.

#### **ACTION SECRETARY**

Some of the longer established sections established boards on a sub-group of the Section. These Boards were active in determining training, visiting training centres and, in some circumstances, establishing European wide examinations. However, they tended to occur in sub-specialties who were not otherwise consistently represented in their countries. The Secretary informed the meeting that he had been part of a WHO workshop on quality assurance in occupational health and that this European Report would be published shortly. He felt that this Report provides useful European guidelines and that therefore the Section would not need to think of producing the same.

The President proposed that the next initiative of the Section would be to review CME activities in the various countries and make recommendations to the Section.

The President asked all members to undertake the actions agreed within the minutes of the previous meeting, i.e. to establish local networks with relevant members of the European Parliament and social partners so that they could be influenced on issues relating to occupational medicine.

#### **8 Any Other Business**

The President pointed out that under the rules of procedure of the two delegates from each country, one should be appointed for a four year period and the other for two years.

He pointed out that as the Section was new the rules of procedure required that the Secretary/Treasurer should be re-elected after two years and he proposed re-election of Dr Ewan Macdonald and this was agreed with the meeting. He asked the Secretary to circulate the rules of procedure to the membership.

APPENDIX 3

#### **9 Date of Next Meeting**