Approved Minutes of the 25th meeting of the UEMS Section of Psychiatry held in Berlin, Germany, on 10th October 2003.

1. Present
Dr A Argyriou – Cyprus - Cyprus Psychiatric Association
Dr J Beezhold – United Kingdom - European Federation of Psychiatric Trainees
Dr B Cassidy – Republic of Ireland – Irish Medical Organisation/Irish Psychiatric Training Committee
Prof P M Furlan – Italy – Italian Psychiatric Association
Prof M Gómez-Beneyto – Spain – Asociación Española de Neuropsiquiatria
Dr T L Hansen – Denmark - Danish Psychiatric Association
Prof E Hauff – Norway - Norwegian Medical Association
Prof P Hodiamont – the Netherlands – Dutch Psychiatric Association
Prof F Hohagen – Germany – Gesellschaft für Psychiatrie, Psychotherapie und Nervenheilkunde
Dr S Ivezia – Croatia - Croatian Medical Association, Society for Clinical Psychiatry
Prof. M Joukamaa – Finland - Finnish Psychiatric Association
Prof C Katona – United Kingdom – Royal College of Psychiatrists
Prof P König – Austria - Österreichische Gesellschaft für Psychiatrie und Psychotherapie
Prof. B Kores Plesničar – Slovenia - Psychiatric Association of Slovenia, Medical Chamber of Slovenia
Dr A Lindhardt – Denmark - Danish Psychiatric Association
Dr D Mathis – France – European Federation of Psychiatric Trainees
Dr F Matthys – Belgium - Belgian Professional Association of Neurologists and Psychiatrists
Dr M Merlo – Switzerland - Swiss Society of Psychiatry and Psychotherapy
Dr M Musalek – Austria – Association of European Psychiatrists
Prof. S Ojpordsojen – Norway - Norwegian Psychiatric Association
Dr B Parsons – Ireland – Permanent Working Group of European Junior Doctors
Dr K Pylkkänen – Finland - Finnish Psychiatric Association
Dr J Saliba – Malta - Maltese Association of Specialists in Psychiatry/Medical Association of Malta
Prof R K R Salokangas – Finland - Finnish Psychiatric Association
Dr H Sontag – France – Association Francaise de Psychiatres
Dr J Strachan – United Kingdom – Royal College of Psychiatrists
Dr K-O Svärd – Sweden – Swedish Psychiatric Association
Dr R ten Doesschate – The Netherlands – Dutch Psychiatric Association
Prof. L Tringer – Hungary - Hungarian Psychiatric Association
Dr I Tuma – Czech Republic - Psychiatric Association of the Czech Medical Society
Dr R Urban – Germany – Berufsverband Deutscher Nerven Ärzte (BVDN)
Dr A Utinäns – Latvia – Latvian Association of Psychodynamic Psychiatry, Psychosomatic Medicine and Psychotherapy
Dr P Varandas – Portugal – Portuguese Medical Association
Assoc. Prof S Ziferl – Slovenia - Psychiatric Association of Slovenia, Medical Chamber of Slovenia
Mrs J E Carroll – United Kingdom – Royal College Psychiatrists

2. Apologies
Prof. J Bomba – Poland - Polish Psychiatric Association
Prof. M Hrdlicka – Czech Republic - Psychiatric Association of the Czech Medical Society
Dr A Kubli Bauer – Switzerland – Swiss Society of Psychiatry and Psychotherapy
Prof. L Küey – Turkey - Psychiatric Association of Turkey
Assoc. Prof N Lindefors – Sweden – Swedish Psychiatric Association
Dr V Martin – Belgium - Belgian Professional Association of Neurologists and Psychiatrists
Dr J O’Boyle – Ireland – Irish Psychiatric Training Committee
Dr G Zarotti – Switzerland - Swiss Society of Psychiatry and Psychotherapy

Dr Anne Lindhardt (Denmark), the President of the Section of Psychiatry, welcomed the delegates to Berlin and thanked Dr Roland Urban and Prof Fritz Hohagen for inviting the delegates to Germany. Dr Lindhardt especially welcomed the new members – Prof. Matti Joukamaa from...
Finnish Psychiatric Association who would be succeeding Prof Salokangas; **Prof Blanka Kores Plesničar** from Slovenia who joined Prof Slavko Zihertl as a second delegate from the Psychiatric Association of Slovenia; **Dr Marc Merlo** from Switzerland who temporarily represented the Swiss Society of Psychiatry and Psychotherapy until new permanent delegates would be appointed to replace Dr Kubli Bauer and Prof Gianni Zarotti.

Dr Lindhardt gave a brief outline of the Section and Board’s structure and their activities for the benefit of the new members.

The membership of the Section and Board comprised full and associate members and a number of observer organisations. The main activities of both the Section and Board revolved around producing consensus statements and recommendations on various aspects of psychiatric training and psychiatric service provision, training requirements and quality assurance of training. The work was usually based on the knowledge gained from surveys. In accordance with the working pattern of the UEMS negotiation and consensus was the only constructive way of working and, until recently, it had not been questioned.

During the course of the summer the Officers of the Section and Board had received correspondence from the French and Belgian delegation accusing them of undemocratic practices because voting had rarely been used. It was important to remember that the Section and Board did not have any executive powers and no political voice of their own. However, it was clear that the Section and Board had a great impact on the development of psychiatric training and the delivering of psychiatric services in many European countries through mutual consensus.

Dr Lindhardt reminded the delegates that the Section and Board had grown significantly in the last years. Thus the working pattern of preparing decisions through work in working groups before plenary discussions was felt to be useful as the size of the plenary assembly hindered effective discussions.

The President, quoting from the UEMS Statutes, reminded the delegates that one of the statutory aims of the UEMS when it was set up in 1958 was to ensure the free movement of medical doctors within the EU countries through harmonisation of training to ensure quality standards of service provision. The statutory objectives also allowed making political representation to European Union authorities on issues affecting medical profession as well as undertaking any action which would advance the UEMS primary aim of promoting medical specialist training, high standards of medical practice and free movement of specialists.

The issue of political lobbying had been brought up by the French delegation at the last Section meeting in Limassol. However, it had not been clear at the time whether the Section, being fully dependent on the Management Council, could ever get involved in political lobbying. Also it was stressed that members were acting as delegates from national Associations with no individual power except what was clarified with member associations. Time constraints in Limassol had prevented a wider discussion and the item was put on the agenda for the current meeting.

Another important issue that had emerged over the summer was the question of translating documents into languages other than English. The President reminded the delegates that it had been agreed in the past that it was not financially viable to allocate funds for translations which would be of little merit as all delegates were required to have the knowledge of English.

3. **To receive and approve the minutes of the last meeting**
   The minutes were approved as the correct record of the proceedings.

4. **Matters arising from the minutes**
   There were none.

5. **Officers’ Elections**
   The President reiterated the main issues regarding the elections. Due to an oversight in the past the term of office for the current President had lapsed and all the Officers of the Section were now up for election. However, according to the Rules of Procedure the Secretary and the Treasurer could be re-elected for a further period of four years whereas the President could only be re-elected after the interval of four years. However, to ensure the staggering of terms between the President and the Secretary as stipulated in the Rules of Procedure, permission from the Management Council had been sought, and granted, to extend the current President’s term of office by a further two
years if such was the wish of the delegates. This proposal had been circulated to all delegates and no objections nor new nominations for the President’s office had been received.

All the other officers of the Section, i.e. two Vice-Presidents, Secretary and Treasurer were to be elected during the meeting. In the light of the imminent enlargement of the European Union and the expected rise in delegate numbers in the Section and Board, it had been proposed that the Executive Committee (Bureau of Officers) be enlarged by abolishing the current arrangement, whereby the President of the Section was the Vice-President of the Board and vice versa. The proposal had been circulated to all delegates prior to the meeting and had not been contested, thus the Section and the Board would henceforth have two Vice-Presidents each and each Officer, with the exception of the Secretary and the Treasurer, would hold one office only.

To avoid the problems with staggering currently experienced by the Section it had been agreed to elect the second Vice-President of the Board during the current elections.

The President outlined the ambiguity in the Rules of Procedure regarding the terms of office for the Officers as well as the delegates and said that in the light of unclear procedures the French delegation suggested postponing the elections until the next meeting in Edinburgh in April 2004.

During discussion concerns were raised that postponing elections on the basis that the current Section Presidency had lapsed would effectively incapacitate the Section for the next six months and would only prolong the period of uncertainty regarding the validity of the Officers. It was also perceived as unfair to deny associate members, who constituted almost half of the current membership, the right to vote in the elections. To achieve consensus, the main modus operandi of the Section, it was imperative that all delegates were treated equally. However, it was ultimately concluded that, to be in conformity with the Rules of Procedure, Associate Members could not vote and Accession Countries could not do so either until the actual date of accession, i.e. May 2004.

It was also noted that underlying issues, e.g. political lobbying and the lack of clear electoral procedures for the Section, should be addressed during the current meeting to avoid a further discord within the Section membership.

Dr Pylkkänen (Finland), the Management Council member, clarified the Rule of Procedure for the Management Council (MC). Delegates elected as Officers of the Management Council were regarded as supranational, i.e. to avoid the issues of vested interests they no longer represented their national associations which were therefore entitled to send an additional representative. Whether that rule should be applied to the election of Section and Board Officers was, according to Dr Pylkkänen, a matter in which the Section and Board of Psychiatry might wish to consult the Executive Committee of the MC.

It was agreed by a majority vote of full members (11 members were for, Belgium and France were against, Portugal abstained) to proceed with the election of Officers at the current meeting on condition that if after clarification with the Management Council of UEMS it was not confirmed that delegates might hold office or represent their countries beyond twelve years, the situation would have to be rectified at the next meeting after clarification.

The Election Committee was selected with the following membership: Prof Raimo Salokangas (Finland) (chair), Dr Brendan Cassidy (Ireland) and Prof Stein Opjordsmoen.

The results of elections:
Section President – Dr Anne Lindhardt, Denmark, (uncontested)
Section Vice-Presidents – Dr James Strachan, UK, (11/15 votes), Dr Kari Pylkkänen, Finland (8/15 votes), (Dr Peter König, with 6/15 votes was not elected.)
Board Vice-President – Prof Slavko Zihel, Slovenia (7/15 votes)
(Prof. Cornelius Katona, with 6/15 votes was not elected.)
The Secretary – Dr Joseph Saliba, Malta, (uncontested)
The Treasurer – Dr Roelof ten Doesschate, the Netherlands, (uncontested)

ACTION: The Officers to send a letter to the Management Council to clarify the issue of their term of office

6. **Extending the role and functions of the UEMS Section and Board – Mechanisms for reaching decisions**
Dr Harald Sontag (France) began his presentation by reporting that during a recent meeting of French representatives to all UEMS specialist Sections concerns had been raised about the way the sections functioned and their role in Europe. The French delegates agreed that the main objective of UEMS, i.e. harmonisation of training to form a basis for specialist qualification equivalence and free movement of medical specialists had not been handled very effectively by the specialist sections and European boards. Their recommendations were ignored both by national governments and professional institutions as could be demonstrated by the lack of consensus on common work between European universities.

The UEMS also failed to succeed in accomplishing the other main objective, i.e. the defence of the profession with was largely due to the incompatible differences between the public and private sectors of medicine in many European countries. Dr Sontag reported that at its meeting in Stockholm in March 2002 the French delegation to the Management Council presented a proposal to change the structure of the UEMS which was approved by a vast majority. However, as no further action had been taken since then the French delegation withdrew from the Management Council by suspending their subscription.

Dr Sontag went on to point out several flaws in the way the Section and Board of Psychiatry worked, i.e. the focus on harmonisation of training neglecting the defence of the profession issue as not relevant to the Section and Board and the lack of impact on national health policies, universities or decision makers often unaware of the existence of the Section for Psychiatry. The French delegation’s dissatisfaction with the Section and Board was further exacerbated by recent disproportionately high subscription increases which did not seem to be justifiable.

The Section and Board should consider the implications of the treaty of Nice signed in 2000 for the medical profession. Under its provisions health care had been given the same status as other professions, i.e. a mere service provider, and many specialist qualifications were not recognised as equivalent. This stemmed from the European Commission’s drive to remove any remaining obstacles to free movement of professionals in Europe with no regard for the unique condition of the profession. It was, therefore, vital that the UEMS entered the political debate at this juncture to prevent health care professionals from becoming isolated. If the UEMS failed to reorganise its operating mode it would lose its raison d’être.

Dr Sontag named a few organisations that might be useful to the UEMS and the Section and Board if they decided to undertake political lobbying as a tool to defend the profession, i.e. the European Economic and Social Committee (an advisory body ensuring that the various economic and social interest groups – employers, trade unions, farmers, consumers, etc. – are represented in the institutional framework of the European Union) and the European Council of the Independent Professions (an international association for scientific purposes under Belgian law providing information and co-ordination and defending the interests of the liberal professions), both of which could provide an effective platform for the civilian dialogue.

Dr Sontag concluded his speech by saying that if the UEMS and the Section and Board wished to retain their position of a professional organisation influencing health care issues in Europe they must change their attitude to political lobbying and participate in an active and effective defence of the profession. Without those changes the French delegation would find it difficult to justify its participation in UEMS activities.

The President thanked Dr Sontag for his presentation and invited comments from delegates. The delegates agreed that Dr Sontag raised important issues but said decisions could not be made without consultation with national associations. Differences of opinions were noted regarding harmonisation. It was important to remember that with the advent of EU enlargement the question of harmonisation of training and quality assurance of service provision remained a valid focus for the Section and Board.

In the discussion that followed members on the whole disagreed with the opinion that the work of UEMS had been useless and the importance of promoting training standards all over Europe was stressed, as most countries had been following standards in revision of training programmes. Also the importance of the task force between UEMS, WPA, WHO and AEP was mentioned.

It was agreed that the delegates would discuss the issue with their national associations and feedback at the next meeting.
7. **Reorganisation of the Section and Board’s meetings and working patterns**

This item was deferred to the next meeting of the Section due to time constraints.

**ACTION:** Reorganisation of the Section and Board’s meetings and working patterns to be placed on the agenda for the meeting in Edinburgh

8. **Financial matters**

   a) **Account 2002 Report**

   The Treasurer, Dr Roelof ten Doesschate, submitted an annual account of the Section’s finances for 2002. The account showed a working loss of €676.00 caused by greater than estimated secretarial expenses and additional VAT charge and higher than estimated incidental expenses as a result of depreciation of doubtful debtors.

   b) **Budget 2004**

   Dr ten Doesschate presented the budget for 2004 for the Section’s approval. He explained the total amount budgeted for 2004 was only €200 higher than in 2002. The reason for this was an increase in secretarial expenses which must now include the VAT and higher travelling costs for the Officers’ attending CME Task Force meetings as well as the usual meetings in Brussels. The subscriptions would have to be raised by about 2% to meet the Section and Board’s expenses.

   Prof Furlan (Italy) asked for a further explanation of the sharing out key which he would need to take back to his association to justify the high subscription increase. Dr ten Doesschate explained that the sharing out key was established by the UEMS in Brussels. The sharing out key was based on the following points: the number of psychiatrists, the population, the distance, the language, the BMP. As there was no translation in French in the Section of Psychiatry, Dr ten Doesschate had written twice to the Management Council if this could have effect on the sharing out key, but did not yet receive an answer. The budget was approved.

9. **Report from the CME Task Force**

   This item was deferred until the Board meeting the following day to be discussed under item 10 – collaboration with other organisations.

10. **Reports from the Working Groups**

   a) **CME**

   Prof Peter König (Austria) reported that the final draft of the report had been submitted at the meeting in Limassol and after several amendments had been circulated to all delegates with the agenda papers. The report was revised to reflect the recent changes in attitudes to CME throughout Europe and to correspond with the CME Task Force line of work. It was hoped that the report would be approved at the current meeting. The delegates had no further comments and the report was approved.

   **ACTION:** Joanna Carroll to circulate the approved report to all delegates for circulation within their organisations. The report to be placed on the Section and Board website.

   b) **Mental Health Services**

   Dr Saliba reported that he had not been able to make much progress as the task of collecting quantitative data on mental health services on a national level was beyond the Section’s resources. The questionnaire would have to be re-drafted substantially if the Section wished to proceed with this project. However the working group had not been able to meet due to commitments of the members to other working groups. It was agreed that the working group would not meet on this occasion. Members of working groups that had completed their tasks were invited to join Dr Saliba’s group.

   c) **Profile of a Psychiatrist**

   Dr Karl-Otto Svärd (Sweden) informed the delegates that the working group would now be chaired by Dr Torben Lindskov Hansen (Denmark). The group tabled their first draft of the report. It was divided into the following three sections: a psychiatrist as a medical doctor, competencies and European challenges. Comments from delegates underlined the importance of focusing the report on those aspects of the role of a psychiatrist that were unique to the profession and distinguished it from other medical or mental health professionals. It was important to find an effective balance between generic aspects of practising medicine and specific qualities required of a psychiatrist. The draft would be further amended and circulated within the working group for comments and a final
version would be presented at the meeting in Edinburgh. Any further comments from delegates should be forwarded to Dr Hansen over the next few months.

**ACTION: J Carroll to circulate the draft report to members of the working group**

d) **Psychotherapy**  
Dr Anne Lindhardt reported that her group had finished work on the report and the final version was tabled at the meeting. In addition, a list of recommendations on the practice of psychotherapy was also tabled and would be added to the main report to complete the document. Following discussion, several amendments to this list were suggested and would be incorporated. The working group also suggested that the definition of ‘psychodynamic approach’ in the Training Charter should be replaced with the proposed definition of ‘psychodynamic psychiatry’. The report would be proof-read to correct the language and would be circulated to all delegates shortly after the meeting. It was hoped that the report would be approved at the Spring meeting in Edinburgh in April 2004.

**ACTION: J Carroll to proof-read the report and circulate to delegates**

e) **Recruitment and Retention**  
Prof Cornelius Katona (UK) submitted a summary of the results of the brief survey carried out by his working group on recruitment and retention issues in the delegates’ countries. The results showed that more work needed to be done. Before conducting a more detailed survey as planned the working group would like to review the existing work on causes of problems with recruitment and retention carried out by other European bodies. This could be achieved by allocating this piece of work as a research project to a senior student doing a Masters course in psychiatry. There was also scope for a more detailed interview-based review of career aspirations of consultants and senior trainees. This ambitious plan of action would, however, require a source of funding. If that was achievable the ultimate aim would be to develop a recruitment and retention strategy that many European countries would find very useful.

Prof Katona said that as his term of office was coming to an end the working group needed a new chair who would be able to carry forward this important work. Prof Slavko Zihelr agreed to take on the role of the chair of this working group. The group also needed to increase its membership.

11. **Feedback from delegates**  
This item would be taken jointly with the same item on the Board’s agenda the following day.

12. **UEMS Matters**  
a) **UEMS Management Council**  
Dr Kari Pylkkänen had nothing to report as the Management Council had not met since the last meeting of the Section and Board. Their next meeting would be held next week so he would have more to say at the Spring meeting in Edinburgh.

b) **UEMS Child and Adolescent Psychiatry and Psychotherapy Section**  
Dr Harald Sontag was not present to report.

c) **Any other UEMS matters**  
There were none.

13. **Collaboration with psychiatric organisations in Europe**  
This item would be taken jointly with the same item on the Board’s agenda the following day.

14. **Website update**  
Mrs Joanna Carroll (UK), Administrative Secretary to the Section and Board, informed the delegates the new website was up and running. It had been agreed at the previous meeting in Limassol that the names and email addresses of all delegates should be available on line. A permission form had been circulated to all delegates but only two had been returned. It was agreed that the form should be circulated again and delegates were urged to return it as soon as possible. Mrs Carroll also asked the delegates to ask their organisations to install a link from their websites to the Section website. To date none had been installed.
**ACTION:**
- Mrs Carroll to re-circulate the website permission form
- Delegates to arrange links between their organisational websites and the Section website

15. **Data Protection Act and the Membership List update**
Mrs Carroll reminded the delegates that the Membership List only included the names of those delegates who had signed the Data Protection Act statement thus expressing their agreement to have their personal contact details published for the benefit of other delegates. It was emphasised that the List was only available to the members of the Section and Board of Psychiatry.

16. **Any other business**
Prof Gómez-Beneyto suggested that the Section and Board should draft its own rule of procedure for Officers elections as the rule of procedure for the UEMS Management Council were not detailed enough and not always applied to the circumstances of the Section and Board.

**ACTION:** The Officers to draft Rules of Procedures for elections

17. **Date of next meeting**
- 1-3 April 2004 – Edinburgh, Scotland
- 7-9 October 2004 – Zagreb, Croatia
- April 2005 – Turin, Italy
- October 2005 – Bratislava, Slovakia