



# The Newsletter of European Medical Specialists

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## Summary

Confronted with the difficulty to adapt training to the Bologna requirements, the UEMS Section of oro-maxillo-facial surgery developed a model combining the Masters in Medicine and Dentistry. p.3

In view of the 50<sup>th</sup> Anniversary of UEMS in 2008, the UEMS Executive calls on the delegates to contribute to the event. p.4

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## 2007 - A year full of projects

2006 is already far away and many projects are underway or appear on the horizon.

The UEMS contribution to the Commission's consultation on **patient mobility and cross-border care** concentrated the whole Executive's attention in December and January. A particular tribute must be paid to the UEMS Sections & Boards for their constructive comments and enthusiastic support. The European Commission is now expected to release a formal initiative later this year after having examined all the stakeholders' responses. The UEMS Executive trusts that a similar inclusive collaboration with health professionals will be pursued along the future legislative process.

Together with the issue of health services, the entry into force of the **Professional Qualifications Directive** in October this year will undoubtedly be the other major European dossier on which the UEMS will be very active. The work of update to the medical specialties' denomination and length of training is in force and the Specialist Sections which haven't responded yet are kindly invited to do so as quickly as possible.

The **EACCME** (European Accreditation Council for CME), as one of the cornerstones of our organisation, will also be at the centre of the Executive's activities.

As you know, the UEMS is about to celebrate its 50<sup>th</sup> Anniversary next

year. (See on page 4) In view of this exceptional event, the Executive launched a new working group in charge of finding ways to improve the UEMS overall functioning. At the same time, a considerable effort is in force to further elaborate a **General Strategy** for the years to come which will serve as a basis for concrete action plans in the fields of interest to European specialists.

These are only some of the main items in force or in sight for 2007, others will feature in the next issues of this Newsletter. **The support from the whole UEMS constituency is badly needed to achieve success in these issues in the interest of European Colleagues.**

## Bulgaria & Romania make the EU 27!

On 1<sup>st</sup> January 2007, Bulgaria and Romania became the 26<sup>th</sup> and 27<sup>th</sup> member countries of the EU. As a consequence, these two countries endorsed the EU legislation, including

the provisions regulating the free movement of health professionals.

On 1<sup>st</sup> January, Bulgaria and Romania took EU Membership from 25 to 27 Member States. Consequently, EU regulations

are now fully applied to citizens from these countries. Holders of qualifications from these Member States must hence be recognised in other EU countries. A specific Di-

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## Internal Market - Infringement proceedings

### Austria & Belgium - Free movement of students

The European Commission recently sent "letters of formal notice" to Austrian and Belgian authorities with regard to restrictions of access to their higher education systems by holders of secondary education diplomas from other Member States. Austria and Belgium will have two months to reply to the Commission.

Austria - The Commission's action follows up a judgement of the European Court of Justice from July 2005. The Austrian legislation was considered by the ECJ to be discriminatory against holders of secondary diplomas from other Member States since they were refused access to Austrian higher education under the same conditions as holders of the equivalent Austrian diploma (Article

12, 149, 150 of the EC Treaty).

Following the Court's decision, Austria amended the relevant Universities Act in July 2005 to abide the Court's decision but re-established restrictions one year later (June 2006). This amendment imposed quotas on study places, including medical and dental studies till the end of 2007.

The Commission's letter of formal notice, based on Article 228 of the Treaties, indicates that Austria has still not complied with the ECJ ruling and invites accordingly Austria to submit its observations.

Belgium - The Parliament of the Communauté française adopted, in June 2006 a decree, by which it introduced, for a certain number of medical studies, a quota

of 70 % for students who have their residency in Belgium.

With its letter of formal notice, the European Commission indicates that this system has discriminatory effect on the EU nationals not residing in Belgium and that Belgium failed to justify the introduction of this system.

Further to a previous ECJ ruling in July 2004, former discriminations applied in Belgium had to be abolished.

The new decree adopted in 2006 by the Communauté française, and which entered into force for the academic year 2006-2007, was considered to be a new infringement. The Commission's letter of formal notice is based on Article 226 of the Treaties and invites Belgium to contribute its comments to the Commission.

### Ireland - Voluntary Health Insurance

The European Commission recently decided to send Ireland a formal request to submit its observations on the continued legality of the exemption of the Irish Voluntary Health Insurance Board (VHI) from certain EU rules on non-life insurance.

This follows a complaint

to the Commission alleging that the VHI is unlawfully pursuing insurance activities without being subject to the First Non-Life Insurance Directive. The Commission's request takes the form of a "letter of formal notice", the first stage of infringement procedure under Article

226 of the EC Treaty. Ireland is asked to send its reply within one month. Depending on the analysis of this reply, the Commission will decide whether or not to issue a "reasoned opinion" formally calling on the Irish Government to amend the relevant legislation.

*European Commission's action against alleged discriminations in Austrian and Belgian higher education systems.*

*The European Commission requests further clarity on the Irish system of Voluntary Health Insurance*

## Oro-Maxillo-Facial Surgery & Bologna The 'BaMaMaMa' Model as a solution

Following an initial meeting on 20 August 2005, extensive research undertaken by Dr. Dr. Wolfgang Busch has revealed that there is significant resistance to the application of the Bologna principles to medicine and dentistry. The recommendations of a number of major professional organisations have been that statutory requirements for training established by individual States would not be fulfilled by application of the Bachelor / Master principles.

At a second meeting on January 21, 2006, the Workgroup agreed that for oro-maxillo-facial surgery it would be difficult to define for each State a programme of training complying with the principles but that in the event of the Bologna Process being imposed by the European Union a framework should be prepared. Such a frame-

work would require three basic rules to be applied.

The Bachelor phase of education and training should provide a common trunk for medicine and dentistry.

There would be a necessity for triple Master degrees to allow for completion of undergraduate training in medicine and dentistry (including acquisition of basic essential technical skills) and specialist training in oro-maxillo-facial surgery.

Training in oro-maxillo-facial surgery should be conceived in such a way that it is open to individuals regardless of whether they have a foundation of medical bachelor & master or dental bachelor & master.

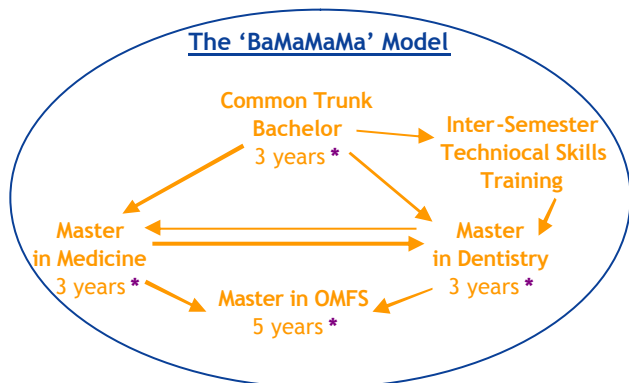
The outline framework may be summarised in the following diagram which was presented in a more refined form to

### BACKGROUND

*Oro-Maxillo-Facial is that Speciality concerned with the history-taking, examination, prevention, treatment and rehabilitation of the congenital and acquired pathologic conditions of the cranium, the face, the neck, the mouth and the jaws. Acquired conditions can result form disease, tumour, trauma, degeneration and ageing.*

*OMF surgery represents a speciality of surgery which ideally requires qualifications in medicine and dentistry. As such, double qualification is formally required in 9 EC nations and in an formal or informal way obtained by many specialist in 12 other nations. This dental background prior to specialist training leads to problems unique to this speciality, what the Bologna process is concerned.*

the meeting of the Section in Hamburg on March 26, 2006.



*\* Stated number of years is indicative only as it is recommended that courses be competency assessed thereby allowing some to 'fast track' while others may require longer to successfully complete training.*

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rective was adopted in December 2006 (2006/100/EC) to provide for the basic requirements in terms of denominations and lengths of training for the different medical specialties.

Furthermore, EU Institutions have now inte-

grated Bulgarian and Romanian representatives: 35 MEPs from Romania and 18 from Bulgaria joined the European Parliament, and two new European Commissioners entered the Commission's College.

This enlargement will naturally also be applied within the UEMS Struc-

ture with Bulgaria and Romania being upgraded to the status of Full Members at the next Council Meeting. The Executive of UEMS would like to welcome specialist colleagues from these countries and wishes them all the best of luck as Full Members within the organisation.





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*The European Union of Medical Specialists (UEMS) is the oldest medical organisation in Europe and will celebrate its 50th anniversary in 2008. With a current membership of 34 countries, it is the representative organisation of the National Associations of Medical Specialists in the European Union and beyond.*

*Its structure consists of a Council responsible for and working through, 37 Specialist Sections, each with its own European Board, addressing training in the Specialty and incorporating representatives from academia (Societies, Colleges and Universities). An Executive comprising the President, the Secretary-General, the Liaison Officer, and the Treasurer, is responsible for the routine functioning of the organisation.*

*UEMS is representative of over 1.6 million specialists in all the different specialties. It also has strong links and relations with European Institutions (Commission and Parliament), the other independent European Medical Organisations (e.g. CPME, PWG, UEMO) and the European Medical & Scientific Societies.*

*By its agreed documents, UEMS sets standards for high quality healthcare practice that are transmitted to the Authorities and Institutions of the EU and the National Medical Associations stimulating and encouraging them to implement its recommendations.*

*The UEMS established the extremely important European Accreditation Council for CME (EACCME®) in 2000, which facilitates the exchange of CME credits within the European Union, its associated countries and the United States. These are achieved by virtue of common memoranda of agreement on mutual recognition reached between UEMS, the National Accreditation Authorities and the American Medical Association.*

***If you have any views with regard to the issues covered in this Newsletter, do not hesitate to contact the Secretariat of UEMS.***

## Meetings 2007

### Council

Brussels - 10 March  
Bratislava - 12-13 Oct.

### Sections & Boards

Brussels - 26 May

### EACCME Advisory Council

Brussels - 24 Nov.

## The UEMS, almost 50!

As you are aware, the UEMS will celebrate its 50<sup>th</sup> Anniversary next year.

At its last meeting in Brussels, the UEMS Executive agreed to convene an extraordinary meeting of the Sections & Boards and Council as well as a major Conference focussing on the past, current and future issues of interest to medical specialists in Europe.

An exhibition will also be set up in order to



showcase the History of the organisation. The UEMS Secretariat has naturally conserved archives and records along the years. The Executive would though like to request every delegate to report on any documentation relating to his/her national organisation and/or Specialist

Section that could feature in such an exhibition.

The Executive will make every effort in order for this celebration to be up to the successes achieved so far by the UEMS and calls on everyone's involvement to make it grandiose.