



UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES

SECTION FOR PSYCHIATRY EUROPEAN BOARD OF PSYCHIATRY



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ANNUAL REPORT

2003

During 2003, there were 18 full members which were either the EU or EFTA member states comprising Austria, Belgium, Denmark, Finland, France, Germany, Greece, Iceland, Ireland, Italy, Luxembourg, Netherlands, Norway, Portugal, Spain, Sweden, Switzerland and UK. In addition, there were 12 associate members, i.e. EU candidate states comprising Cyprus, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Malta, Poland, Romania, Slovakia, Slovenia and Turkey. There are also 6 observers, i.e. Croatia, EFPT, WHO, WPA, AEP and PWG. The Israel Psychiatric Association is being invited to join as an observer state. The Section and Board of Psychiatry hold their meetings in Spring and Autumn. The 2003 meetings were held in Limassol, Cyprus and Berlin, Germany.

The work of the Section and Board

The Section and Board of Psychiatry do most of their work through working groups which report to the plenary meeting. During 2003, all the reports issued by the Section and Board to date were reviewed with the view to deciding on further action and to establishing future priorities.

The following reports produced to date were reviewed with recommendations for future action:

- Psychiatrists practising in Europe
- Training in psychotherapy as part of training in psychiatry
- Postgraduate exchange in psychiatric training
- Rotation in psychiatric training
- Part-time training
- Consultation and liaison psychiatry and psychosomatic medicine
- Continuing medical education
- Social and community psychiatry
- Recommendations on quality assurance
- Biological psychiatry
- Old age psychiatry
- Mental health legislation in Europe 1998
- Standards in specialist psychiatric care
- Quality assurance in psychiatric training
- Supervision in psychiatry
- Training scheme assessment form

The importance of the working groups was emphasised, but equally the need to regulate the process of setting them up. Therefore, proposals for new working groups will be put forward in writing outlining the aim, membership, timetable, working methods and expected outcome. Final reports and recommendations will not be seen as the end products, and each working group should establish a strategy for implementation methods and monitoring. To achieve this all delegates should work closely with their national associations.

Task Force and collaboration with other organisations

A Task Force, consisting of UEMS, AEP, WHO and WPA representation, was set up in 2001 in order to further the collaboration in Europe in terms of joint meetings with European leaders in psychiatry and to develop guidelines on how CME should be developed at a European level. Dr Anne Lindhardt (Denmark), President of the Section, and Prof Manuel Gómez-Beneyto (Spain), President of the

Board, represent the UEMS Section and Board of Psychiatry on this Task Force. Meetings for European leaders of Psychiatry were held in connection with the WPA conference in Vienna in June. The topic was the development of psychotherapy as a part of psychiatry. Further meetings were planned for 2004.

With regard to CME, information collected on how this is organised in each of the European countries has shown great diversity.

The possibility of setting up a European body for CME accreditation in collaboration with the EACCME is being investigated. However several differences have to be addressed on subjects as prospective versus retrospective CME; collecting credits for attendance versus a more proactive peer regulated approach; and finally CME for multidisciplinary teams.

CME is in some areas largely influenced by the interest of the pharmaceutical industry and other organisations keen to make profit from charging for CME accreditation. Therefore, the Task Force should perhaps, concentrate on the principles of good CME practice. It should collaborate with the EACCME and should be supported and influenced by the Section's principles.

It has been proposed to draft a mutual agreement on CME whereby, all CME activities approved by European national authorities and meeting specific quality standards, would be recognised by the signatory states. Prof Gómez-Beneyto was asked to draft European Quality Standards which has now been circulated. In the first instance, national psychiatric associations will be approached. Prof Mario Maj, member of the AEP Board, has proposed an interim acting CME accreditation committee, until all national associations sign up to the mutual agreement.

Section and Board Website

A website (<http://www.uemspychiatry.org/>) has been set up, partly on the recommendation of the Management Council, because of an extremely heavy workload of the staff updating the main UEMS site causing severe delays in publishing reports and other information submitted by Sections and Boards. Our website has two parts: Section and Board, each including a sub-page for reports and for the officers. There are also four sub-pages that include: annual reports; membership; meetings and links to national associations.

Work in progress during 2003

The following work is currently in progress:

- Profile of a Psychiatrist

This profile is intended to provide a clear definition of a psychiatrist not only to other medical professionals but also to politicians, decision makers and the general public. The draft report is divided into the following three sections: the psychiatrist as a medical doctor; competencies and European challenges.

- Review of Chapter 6 of the Charter of Training

This has been coordinated by Prof Gómez-Beneyto and Dr Roelof ten Doesschate (Netherlands). The revised Chapter 6 of the Charter was approved at the Berlin Autumn meeting 2003.

- European survey of specialist training in psychiatry - draft questionnaire

The Board has recognised the importance of monitoring the progress of harmonisation of training in member states. A questionnaire developed by Prof Fritz Hohagen (Germany) for the use in Germany has been re-drafted to reflect UEMS recommendations for European countries and successfully piloted in Germany and the Netherlands. The questionnaire has now been approved and circulated to national institutions. The results will enable individual training schemes to compare their performance with other institutions in their country.

- Exchange visits to training schemes in the Netherlands and the UK

Prof Willem Schudel (the Netherlands) and Dr James Strachan (UK) have submitted a report on their recent exchange visits to training schemes in the UK and the Netherlands to test the recently

approved Training Scheme Assessment Questionnaire. The questionnaire has now been distributed to all presidents of national associations and submitted for publication.

- Implementation strategy for approval of national training schemes

Dr James Strachan has also submitted a working paper proposing a strategy of implementation for approval of national training schemes. The Board's strategy for implementation of the national approval of training scheme will entail approving the country's arrangements for auditing of training and not the actual psychiatric training schemes.

- Recruitment and Retention

This Working Group chaired by Prof Katona (UK) surveyed the situation across Europe, so as to identify adverse influences to recruitment and retention in psychiatry and to prepare a strategy to improve the situation. The results show that more work needs to be done. Since Prof Katona's term of office has ended, Prof Slavko Zihel (Slovenia) will chair the working group.

- Undergraduate Teaching

This working group, also chaired by Prof Katona, drafted a questionnaire on attitudes to psychiatry. Delegates will identify one medical school for collection of data from first and last-year students. The working group is being merged with that on recruitment and retention as their areas of work are inter-linked.

- CME

Prof Peter König (Austria) reported on the final draft of this report in Limassol and the report was approved in Berlin.

- Psychotherapy

The Working Group chaired by Dr Lindhardt has concentrated on Appendix II to Chapter 6 of the Charter on Training, outlining the requirements for psychotherapy training. This report has now been completed.

- Mental Health Services Profile

This working group chaired by Dr Joseph Saliba (Malta) has drafted and piloted a survey questionnaire on mental health services. The piloting results have indicated that although the questionnaire is comprehensive and provides a useful data set for comparing services quantitatively, however for most countries, compiling such statistics at national level is impossible. The questionnaire has been modified to reduce the quantitative data and allow more scope for qualitative description.

Report from Trainees

Dr Dominique Mathis (France), past President of the European Federation for Psychiatric Trainees has reported that the EFPT now has delegates from 16 countries meeting regularly. A main theme has been the exchange of trainees between different European countries. The EFPT has been involved in creating the World Association of Young Psychiatrists and Trainees (WAYPT) and the setting up of the Association of New European Psychiatrists (ANEP), for newly qualified specialists.

Section and Board enlargement, terms of office and officers' elections

In the light of the imminent enlargement of the European Union and the expected rise in delegate numbers in the Section and Board, the Section and Board Presidents will thus no longer act as Vice-Presidents to each other and the number of Vice-Presidents has been increased to four, two for the Section and two for the Board. Henceforth, only the offices of Secretary and Treasurer will be shared by Section and Board.

Due to an ambiguity about when the Section and Board were officially established, the term of office for the current Section President had lapsed. Furthermore, all the officers of the Section were now up for election. Although, according to the Rules of Procedures, the President could only be re-elected after the interval of four years, however, so as to establish staggering of terms between the President and the Secretary (as stipulated in the Rules of Procedures), approval was obtained from

the Management Council and from the delegates to extend the current President's term of office by a further two years. All the other officers of the Section, i.e. two Vice-Presidents, Secretary and Treasurer were to be elected during the Berlin Autumn meeting.

The French delegation questioned the decision and suggested postponing the elections until the Edinburgh meeting in April 2004. However, concern was expressed that this would incapacitate the Section for the next six months. It was agreed by a majority vote of full members (11 members for; Belgium and France against; Portugal abstained), to proceed with the election of officers subject to clarification with the Management Council of UEMS and rectification at the next meeting if necessary. The results of elections were as follows: Section President - Dr Anne Lindhardt (Denmark); Section Vice-Presidents - Dr James Strachan (UK) and Dr Kari Pykkänen (Finland); Board Vice-President - Dr Slavko Zihel (Slovenia); Secretary - Dr Joseph Saliba (Malta); Treasurer - Dr Roelof ten Doesschate (the Netherlands).

French concerns

At the Limassol Spring meeting, Dr Harald Sontag (France) gave a brief presentation on the system of psychiatric and medical associations and unions in France in relation to the Management Council. All psychiatric associations in France (8 in total) form part of the Confederation of French Medical Unions (CSMF) which was represented in the Management Council of the UEMS. The French position is that harmonisation in Europe has been achieved and the UEMS should now concentrate on establishing its position as a consultative body either to the Council of Europe or to the European Parliament. This would give the UEMS a more direct influence to promote the case for mental health in Europe.

This view was discussed, but it was felt that, if the Section and Board intended to become political, delegates would have to consult with their national associations for approval of this significant change and the Section and Board would need to obtain the approval of the Management Council. Dr Kari Pykkänen (Finland), the Finnish delegate to the UEMS Management Council, explained that there was a discrepancy on the issue of harmonisation since UEMS does not regard harmonisation as completed, especially in the light of the European Union expansion. Further discussion of the matter was deferred to the Berlin Autumn meeting.

Subsequently, the Section and Board received correspondence from the French and Belgian delegations questioning the way the Section and Board were working. The issue of translating documents was raised since the French delegation was required to pay 10% more for translations which were not taking place. It had been agreed in the past that it was neither financially viable nor necessary to fund translations since all delegates speak English. This discussion was brought to the Berlin Autumn Meeting as it was a matter of concern for France in all Section and Boards in UEMS. The difference of understanding regarding the main objectives of UEMS was underlined, as France stressed the issue of defending the profession.

At the Berlin Autumn meeting, Dr Sontag reported 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. France also felt that the UEMS failed to accomplish its other main objective -defending the profession - an issue particularly important in those European countries which, like France, were struggling with incompatible differences between public and private sectors of medicine.

Finally, Dr Sontag contended that if the UEMS and the Section and Board wished to retain their position as 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. Otherwise, the French delegation would find it difficult to justify their participation in UEMS activities.

2004 meetings

1 -3 April, Edinburgh, UK

7 - 9 October, Zagreb, Croatia