



UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES

EUROPEAN BOARD OF PSYCHIATRY

APPROVED Minutes of the 21st meeting of the European Board of Psychiatry held in Limassol, Cyprus on 3rd May 2003.

1. Present

Dr A Argyriou - Cyprus - Cyprus Psychiatric Association
Dr J Beezhold - United Kingdom - EFPT
Prof M Gómez-Beneyto - Spain - Asociación Española de Neuropsiquiatria
Dr E Hagemo - Norway - Norwegian Medical Association
Dr T L Hansen - Denmark - Danish Psychiatric Association
Prof E Hauff - Norway - Norwegian Medical Association
Prof P Hodiamont - the Netherlands - Dutch Psychiatric Association
Prof M Hrdlička - Czech Republic - Czech Psychiatric Association
Dr S Ivezić - Croatia - Croatian Medical Association, Society for Clinical Psychiatry
Prof C Katona - United Kingdom - Royal College of Psychiatrists
Assoc. Prof N Lindefors - Sweden - Swedish Psychiatric Association
Dr A Lindhardt - Denmark - Danish Psychiatric Association
Dr V Martin - Belgium - Belge Professionelles des Neurologues et Psychiatres
Dr D Mathis - France - European Federation of Psychiatric Trainees
Dr K Pylkkänen - Finland - Finnish Psychiatric Association
Dr J Saliba - Malta - Maltese Association of Specialists in Psychiatry/Medical Association of Malta
Prof W J Schudel - The Netherlands - Dutch 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

In attendance:

Mrs J E Carroll - United Kingdom - Royal College Psychiatrists
Dr L Küey - Turkey - World Psychiatric Association
Dr Chris Messis - Cyprus - Cyprus Psychiatric Association

2. Apologies

Prof. J Bomba - Poland - Polish Psychiatric Association
Dr B Cassidy - Republic of Ireland - Permanent Working Group
Prof P M Furlan - Italy - Italian Psychiatric Association
Prof F Hohagen - Germany - Gesellschaft für Psychiatrie, Psychotherapie und Nervenheilkunde
Prof P König - Austria - Österreichische Gesellschaft für Psychiatrie und Psychotherapie
Dr A Kubli Bauer - Switzerland - Société Suisse de Psychiatrie et Psychothérapie
Prof I Namysłowska - Poland - Polish Psychiatric Association
Dr M Musalek - Austria - Association of European Psychiatrists
Dr J O'Boyle - Ireland - Irish Psychiatric Training Committee
Dr E Pálová - Slovakia - Slovak Psychiatric Association
Dr B Parsons - Ireland - Permanent Working Group
Prof A Rabavilas - Greece - Hellenic Psychiatric Association
Dr M Roca Bennasar - Spain - Sociedad Española de Psiquiatria
Dr W Rutz - Denmark - World Health Organisation
Prof R K R Salokangas - Finland - Finnish Psychiatric Association
Dr R Urban - Germany - Berufsverband Deutscher Nerven Ärzte (BVDN)
Dr P Varandas - Portugal - Portuguese Medical Association
Dr Livia Vavrusová - Slovak Republic - Slovak Psychiatric Association
Dr G Zarotti - Switzerland - Swiss Society of Psychiatry and Psychotherapy
Assoc. Prof S Zihel - Slovenia - Psychiatric Association of Slovenia, Medical Chamber of Slovenia

The meeting opened with a short presentation of a butterfly flower crest, a symbol of psyche, of the Cyprus Psychiatric Association by Dr Argyris Argyriou (Cyprus) who welcomed the delegates to Cyprus and expressed his hope for a pleasant and successful meeting. Prof Manuel Gómez-Beneyto (Spain), President of the Board, thanked Dr Argyriou and opened the meeting.

3. To receive and approve the minutes of the last meeting

The minutes were approved as the correct record of the proceedings subject to one minor amendment.

4. Matters arising from the minutes

There were none.

5. Chapter 6 of the Charter of Training – the review

Prof Gómez-Beneyto opened the discussion on the Charter and invited comments from the delegates on a page-by-page basis.

Following a lengthy and detailed discussion the following amendments were agreed:

Dr Roelof ten Doesschate (the Netherlands) would redraft Article 1 to avoid the repetition of items that were specified in greater details in Articles 3 and 4.

Point 1.2 - The words "or schemes" should be added to read: "The standard for recognition of training institutions or schemes and teachers...", and in the last sentence: "... at each training institution or scheme."

Point 2.1 - The words "or an EU recognised equivalent" should be added to read: "Candidates for training should have completed the study of medicine at one of the universities of the EU or associated countries or an EU recognised equivalent." It was noted that the current version included a numerical error whereby para 2.2 occurred twice. This should be corrected. For the purpose of the minutes the corrected numbering would be used for reference.

Point 2.3 - A comment from the EFPT should be added to read: "Part-time training should be possible in every EU member state and should be facilitated by general regulations."

Point 2.4 - Paragraph 2 should read: "Training should cover general adult psychiatry, old age psychiatry, psychiatric aspects of substance misuse, developmental psychiatry (child and adolescent psychiatry, learning difficulties and mental handicap) and forensic psychiatry."

Point 2.6 - It should read: "Clinical supervision should be available on a daily basis. In addition to the clinical and psychotherapy supervision, individual educational supervision ..."

A new paragraph, subtitled 'Funding', should be added to read: "2.10 All mandatory components of training should be fully funded by the training scheme."

Point 3.2 - The first sentence in the second paragraph should read: "These institutions should provide activities including in-patient care and outpatient (community) training and possibilities..."

Point 3.3 - The second paragraph should include a reference to the newly developed assessment questionnaire to read: "...There should be recognition visits in accordance with the Charter on Visitation of Training Centres (UEMS Management Council, October 1997) utilising the European Board of Psychiatry Training Scheme Assessment Form."

Point 4.1 - It was agreed that the second paragraph should be removed except for the first sentence which would be moved to the end of Point 4.2. The reference to requirements for psychotherapy teachers and training would be moved to the revised psychotherapy appendix (appendix 2).

Point 5.1 - It should read: "Trainees will build up experience in psychiatry on the one hand by following theoretical courses and by study of basic and clinical sciences and on the other hand by being involved in the treatment of sufficient number and variety of hospital and community patients and ..."

Appendix 1 should be re-numbered and an additional item regarding diversity inserted. It should read as follows:

- I. Scientific basis of psychiatry: biological, social and psychological aspects.
- II. Psychopathology. Examination of a psychiatric patient. Diagnosis and classification. Psychological tests and laboratory investigations.
- III. Specific disorders and syndromes.
- IV. Child and adolescent psychiatry. Mental handicap. Psychiatric aspects of substance misuse. Old age psychiatry.
- V. Diversity in psychiatry: gender, cultural and ethnic aspects, disability, sexual orientation.
- VI. Legal, ethical and human rights issues in psychiatry.
- VII. Psychotherapies. Psychopharmacology and other biological treatments. Multidimensional clinical management. Community psychiatry. Social psychiatric interventions.
- VIII. Research methodology. Psychiatric epidemiology of mental disorders. Psychiatric aspects of Public Health and prevention.
- IX. Medical informatics and telemedicine.
- X. Leadership, administration, management and economics.

APPENDIX 2 - It would be re-written in full following the final report of the Working Group on Psychotherapy.

APPENDIX 3 - The last sentence in this paragraph should read: "It is necessary to gain experience in evaluation of treatment programmes and community services including working with diverse populations. The co-ordinator of the training programme in community psychiatry should be a psychiatrist with at least five years experience in community psychiatry and social interventions."

APPENDIX 5 (renumbered 6 due to "Old Age Psychiatry" appendix being transferred up to become appendix5) - Training in Leadership and Management - should be added as proposed by the Swedish Psychiatric Association, and would read:

"Training in clinical leadership should be offered at all levels of the psychiatric organisation at inpatient (emergency services and short-, medium- and long-stay services), outpatient, and community levels. Leadership skills involve presenting and discussing facts, goals and methods, and their purposeful differentiation and integration. These skills also encompass how to motivate patients and team members, how to plan treatment, and how to delegate, supervise and evaluate the treatment process during a clinical round and in team meetings. Management training involves planning, organising, administration and budget management at various levels."

APPENDIX 6 (renumbered 7) - Point 1 under 'All Other Clinical Training' should be moved to point 1 under 'Compulsory Elements of Training' and the subtitle "Setting" should be changed to "Areas". It should read:

I. COMPULSORY ELEMENTS OF TRAINING

1. Areas (Adult, Old Age, Psychiatry of Substance Misuse, Developmental Psychiatry, Forensic, Administrative)

Comments about the use of logbook in trainee evaluation included a statement from Prof Cornelius Katona (UK) who said that in the UK logbooks were commonly used as part of the doctor's appraisal and it would be difficult to sustain this recommendation. Dr Julian Beezhold (EFPT, UK) said that the EFPT position was not to support the change to the use of logbook for assessment at present but trainees recognised that it might have to be changed in the future. The issue would be further discussed by the EFPT.

APPENDIX 6 (renumbered 5) - Old Age Psychiatry should be moved up before Appendix 5 which would be renumbered appendix 6 thus renumbering all the intervening appendices.

APPENDIX 8 - The Protected Hour paragraph should be amended. The sentence on trainee's confidentiality should read: "The content of supervision is protected by professional confidentiality."

APPENDIX 9 - A new appendix on "Quality Assurance in Specialist Training in Psychiatry" would be included listing the nine bulleted points included in the 1st revision draft, April 2003 (B2-05/03).

APPENDIX 10 - The Glossary. The definition of Cognitive/behavioural approach should remain unchanged except for the word 'notion' which should be replaced with 'recognition'.

It was agreed that the Charter would be put on the agenda for the meeting in Berlin where it was hoped the document would be approved. No substantial corrections would be allowed and any further comments should be forwarded to Dr Roelof ten Doesschate (the Netherlands).

ACTION

- o Dr ten Doesschate to insert the changes into the Charter and email it to Mrs Carroll
- o Mrs Carroll to circulate the Charter to all delegates for final comments before the Autumn meeting.

6. European survey of specialist training in psychiatry - draft questionnaire

At its last meeting the Board decided that it was important to monitor the progress of harmonisation of training in member states. It was agreed to adapt the questionnaire developed by Prof Fritz Hohagen (Germany) for the use by the Board to reflect its recommendations and requirements. Prof Hohagen submitted a translated version but due to unforeseen circumstances he could not attend the meeting. The item would be put on the agenda for further discussion at the meeting in Berlin.

ACTION: Mrs Carroll to put the questionnaire on the agenda for the Autumn meeting.

7. Exchange visits to training schemes in the Netherlands and the UK

Prof Willem Schudel (the Netherlands) and Dr James Strachan (UK) submitted a report on their recent exchange visits to training schemes in the UK and the Netherlands. Both visits were used to test the recently approved Training Scheme Assessment Questionnaire. It worked very well and should now be distributed to all presidents of national associations. Prof Gómez-Beneyto agreed to write a letter encouraging national associations to work towards setting up training schemes and organising assessment visits as recommended by the UEMS using the tool provided by the Board. The Board should now offer UEMS approval of national accreditation schemes to individual countries which followed the Board's recommendations. The new website of the Section and Board would be a useful tool to disseminate this information. The item would be put on the agenda for the next meeting as the subject required more discussion regarding practical arrangements. Dr Strachan and Prof Schudel's report would be submitted for publication in a professional journal. It would also appear on the UEMS website.

ACTION

- o Mrs Carroll to put the issue of implementation strategy for approval of national schemes on the agenda for the Autumn meeting.
- o Dr Strachan and Prof Schudel to submit their report for publication.
- o Mrs Carroll to publish the report on the Section and Board website.
- o Prof Gómez-Beneyto to draft a letter to Presidents.

8. Reports from the Trainees

(a) The European Federation for Psychiatric Trainees (EFPT)

Dr Dominique Mathis (France), EFPT President, reported that the next European Forum for the Trainees would be held in Paris the following week and the main theme for the meeting was the European exchange programme. Each national delegate had been asked to prepare a poster session on the topic. The EFPT was also working on the satisfaction questionnaire which, when completed, would be circulated to all trainees in the countries represented on the EFPT to elicit their views and levels of satisfaction with various aspects of their training.

The EFPT currently had delegates from 15 countries: Austria, Belgium, Denmark, Finland, France, Germany, Greece, Ireland, Italy, the Netherlands, Norway, Romania, Spain, Turkey and the UK. Dr Mathis asked the UEMS

delegates whose countries were not yet represented on the EFPT to encourage their national associations for trainee psychiatrists to join.

Dr Mathis announced the establishment of the World Association of Psychiatric Trainees, a project in which the EFPT was very much involved. Dr Beezhold said that the WAPT was an 'email-based' association of about 180 trainees from around the world. Their inaugural meeting would take place on 17 May in San Francisco where a constitution and a leadership structure would be agreed.

Prof Gómez-Beneyto thanked Dr Mathis and Dr Beezhold for their report.

(b) The Permanent Working Group for all European Junior Doctors

There was no report due to Dr Brian Parson's (Ireland) absence.

9. News from the delegates' countries

Prof Levent Küey (Turkey) reported that his association was organising a congress on training to launch the national curriculum for training in psychiatry approved by the Turkish national authority. The congress would be attended by representatives from EFPT, WPA, AEP and UEMS. A report would be published after the congress.

10. Collaboration with other organisations

Prof Gómez-Beneyto reported on a WHO meeting for the European region in Madrid where UEMS was invited to give a presentation on harmonisation of training and the CPD. It was attended by the Spanish Minister for Health and about 60-70 experts on mental health from the region. It proved a very successful and informative meeting which raised the UEMS profile in Europe and particularly in Spain.

11. Reports from the Working Groups

(a) Recruitment and Retention

Prof Katona reported that the Working Group had decided that it was necessary to survey the situation across Europe in terms of recruitment and retention, to identify adverse influences to entry and retention in psychiatry and then to prepare a strategy to improve the situation. A brief questionnaire would be sent out to all delegates as an initial 'brainstorm', the results of which would be used to prepare a detailed questionnaire examining the extent of and reasons for European problems with recruitment and retention in psychiatry. The detailed questionnaire should be prepared in time for the Berlin meeting. The results of that survey should be distributed in time for the meeting in Edinburgh in April 2004 and the draft report prepared for the Zagreb meeting the following October.

ACTION

- Mrs Carroll to distribute the brief questionnaire within four weeks of the meeting.
- The Working Group to prepare the detailed questionnaire on the basis of the results of the brief one.

(b) Undergraduate Teaching

Prof Katona pointed out that the draft protocol on attitudes to psychiatry was distributed with the agenda papers. The Working Group had introduced some minor modifications including a clarification on the distribution of the questionnaire. The questionnaire would be distributed to the members of the working group who should then identify one medical school in their country and arrange to collect data from the first and last-year students.

ACTION: Mrs Carroll to distribute the protocol to the working group.

(c) CME

In Prof Peter König's (Austria) absence Prof Katona reported that the Working Group made some further amendments to the report on CME. Due to the time constraints which prevented further discussion the report could not be approved during the meeting. It was agreed that it would be distributed to all delegates for comments immediately after the meeting. Any final amendments would be introduced and the document would be presented in Vienna at the CME Task Force meeting in June as a semi-approved report. The final version would be approved in Berlin.

ACTION: Mrs Carroll to distribute the report to all delegates.

(d) Psychotherapy

Dr Anne Lindhardt reported that the Working Group concentrated on Appendix II to Chapter 6 of the Charter on Training which outlined requirements for psychotherapy training. The report emphasised the recommendation that psychotherapy was an integral part of psychiatric training and gave details of skills and knowledge that trainees in psychotherapy should achieve as well as the essential content of psychotherapy training. It was agreed that the report would be circulated to all delegates by email for comments. Those would be incorporated in the final report which would be approved in Berlin and then incorporated into the Charter.

ACTION: Mrs Carroll to distribute the report to all delegates.

12. Any other business

A letter dated April 15th addressed to the President of the Section from the presidents of two French psychiatric associations (SPF and AFP) was tabled at the meeting as it was received too late to be included in the agenda for the meeting. Due to a lack of time during the meeting of the Section the previous day, it was given room for a brief discussion with an exchange of viewpoints after a presentation from Dr Sontag.

(a) Dr Harald Sontag (France)

Dr Sontag gave a brief presentation on the system of psychiatric and medical associations and unions in France in relation to the French position in the Management Council. All psychiatric associations in France (8 in total) form the Confederation of French Medical Unions (CSMF) which was represented in the Management Council of the UEMS. Dr Sontag said that the French position on harmonisation in Europe should no longer be the main priority for UEMS. 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.

Dr Anne Lindhardt (Denmark) replied that harmonisation of training remained the main aim for the UEMS and the only way to achieve this was by influencing the national psychiatric associations. It was important to remember that delegates represented their own associations and it was up to national associations how active they wished to be in advocating the UEMS cause. The Section and Board were not an independent organisation and had no mandate to get involved in political issues.

This view was supported by other delegates. It had been suggested, however, that if the Section and Board wanted to get political the delegates would either have to consult with their national associations to get their approval of this significant change or obtain the approval of the Management Council.

Dr Kari Pylkkänen (Finland) explained that there was a discrepancy between the positions of the European Commission and the UEMS on harmonisation. The UEMS did not regard harmonisation as completed, especially in the light of the European Union expansion.

However the matter was felt to be of great significance and deserved an informed discussion when the position of the national associations had been clarified. Therefore it was decided that the matter would be put on the Section agenda for the next meeting in Berlin. Dr Lindhardt asked Dr Sontag to submit a written proposal on how the matter should be handled. She also asked the delegates to take up this issue with their national associations and bring the feedback to the next meeting.

ACTION

- Mrs Carroll to put the item on the agenda for the Autumn meeting.
- Dr Sontag to submit a written proposal on political lobbying.
- All delegates to discuss political lobbying with their associations.

(b) Dr Anne Lindhardt

Dr Lindhardt informed the delegates that, in the light of the imminent enlargement of the European Union and the expected rise in delegate numbers in the Section and Board, the Officers would like to suggest that an additional position of a Vice-President of the Board be created. The proposal would be put in writing and circulated to the delegates prior to the next meeting.

ACTION: The Officers to draft the proposal for the new Vice-President in time for the Autumn meeting.
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Prof Gómez-Beneyto thanked all the delegates for attending the meeting and for their excellent work and apologised for the busy agenda which did not allow for as much discussion on certain issues as would have been preferred. He also thanked Dr Argyriou for an excellent organisation of the meeting and Mrs Carroll for her contribution to the work of the Section and Board.

13. Date of next meeting

9-11 October 2003 - Berlin, Germany

1-3 April 2004 - Edinburgh, Scotland

7-9 October 2004 - Zagreb, Croatia