



UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES SECTION FOR PSYCHIATRY

AUTUMN MEETING

Friday, 17 October 2008 – Ghent, Belgium
APPROVED minutes

1. Present

1. Prof Jacek Bomba – **Poland** – Polish Psychiatric Association
2. Dr Andrew Brittlebank – **United Kingdom** – Royal College of Psychiatrists
3. Dr Brendan Cassidy – **Ireland** – Irish Medical Organisation
4. Dr Homayon Chaudhry – **Switzerland** – PWG¹
1. Prof Can Cimilli – **Turkey** – Psychiatric Association of Turkey
5. Dr Tsvi Fischel – **Israel** – Israeli Psychiatric Association
6. Dr Elisabete Fradique – **Portugal** – Portuguese Medical Association
7. Prof George Garyfallos – **Greece** – Hellenic Psychiatric Association
8. Dr Dan Georgescu – **Switzerland** – Swiss Society of Psychiatry and Psychotherapy
9. Prof Manuel Gómez-Beneyto – **Spain** – Spanish Association of Neuropsychiatry
10. Prof Edvard Hauff – **Norway** – Norwegian Medical Association
11. Prof Marc Hermans – **Belgium** – Belgian Association of Neurologists and Psychiatrists
12. Prof Paul Hodiarnont – **Netherlands** – Dutch Psychiatric Association; **Vice-President, European Board of Psychiatry**
2. Prof Fritz Hohagen – **Germany** – German Society of Psychiatry, Psychotherapy & Neurology
13. Dr Torsten Jacobsen – **Denmark** – Danish Psychiatric Association
14. Prof Lars Jacobsson – **Sweden** – Swedish Psychiatric Association
15. Prof Blanka Kores-Plesničar – **Slovenia** – Medical Chamber of Slovenia
16. Dr Astrid Kubli Bauer – **Switzerland** – Swiss Society of Psychiatry and Psychotherapy
17. Dr Andreas Landsnes – **Norway** – Norwegian Psychiatric Association
18. Prof Nils Lindefors – **Sweden** – Swedish Psychiatric Association
19. Dr Lucien Manuceau – **France** – French Association of Psychiatrists
20. Dr Françoise Matthys – **Belgium** – Belgian Association of Neurologists and Psychiatrists
21. Dr Brigitte Mauthner – **Austria** – Austrian Medical Chamber
22. Dr Lucie Motlova – **Czech Republic** – Czech Psychiatric Association
23. Dr Alexander Nawka – **Czech Republic** – EFPT
24. Dr Kajsa Norström – **Sweden** – EFPT²; **President**
25. Dr Izu Nwachukwu – **Ireland** – EFPT (*invited guest*)
26. Dr Serefnur Öztürk – **Turkey** – Turkish Neurological Society
27. Dr Eva Pálová – **Slovakia** – Slovak Psychiatric Association; **Section Vice-President**
28. Dr Kari Pylkkänen – **Finland** – Finnish Psychiatric Association; **Section President**
29. Dr Joseph Saliba – **Malta** – Medical Association of Malta / Maltese Association of Specialists in Psychiatry; **Honorary Secretary, Section and Board of Psychiatry**
30. Prof Henning Sass – **Germany** – EPA³
31. Dr Christina Schaff – **Germany** – UEMS Section of Child and Adolescent Psychiatry
32. Dr James Strachan – **UK** – Royal College of Psychiatrists; **President, European Board of Psychiatry**
33. Dr Roelof ten Doesschate – **Netherlands** – Dutch Psychiatric Association; **Treasurer**
34. Prof László Tringer – **Hungary** – Hungarian Psychiatric Association
35. Dr Roland Urban – **Germany** – Professional Association of German Psychiatrists
36. Dr Andreas Zachariadis – **Greece** – Hellenic Psychiatric Association
37. Mrs Joanna Carroll – **UK** – Royal College Psychiatrists; **Administrative Secretary**

2. Apologies

3. Dr Slađana Iveziæ, **Croatia** – Croatian Medical Association, Society for Clinical Psychiatry
4. Prof Jyrki Korkeila, **Finland** – Finnish Psychiatric Association
5. Dr Andres Lehtmets, **Estonia** – Estonian Psychiatric Association
6. Prof Gerhard Lenz, **Austria** – Austrian Association for Psychiatry & Psychotherapy
7. Dr Amit Malik – **UK** – EFPT, President-elect
8. Dr Jørgen Nystrup, **Denmark** – Danish Psychiatric Association
9. Dr James O'Boyle, **Ireland** – Irish Psychiatric Training Committee
10. Dr Lívia Vavrušová, **Slovakia** – Slovak Psychiatric Association
11. Prof Slavko Ziherl, **Slovenia** – Psychiatric Association of Slovenia, Medical Chamber of Slovenia; **Vice-President, European Board of Psychiatry**

¹ Permanent Working Group for Junior Doctors

² European Federation of Psychiatric Trainees

³ European Psychiatric Association (formerly Association of European Psychiatrists)

The Section President welcomed the delegates to the meeting and extended a special welcome to Prof van Calster, member of the Belgian Association of Neurologists and Psychiatrists, executive member on the UEMS council, also representing the UEMS Section of Neurologists. Prof van Calster thanked the Section for allowing him to participate in the meeting and expressed a wish for the two sections to collaborate.

Dr Christa Schaff informed the delegates that she had been appointed a permanent delegate of the CAP Section. Dr Schaff invited the Section to send a representative to their next meeting which would be held in Budapest on 21 and 22 August 2009. The CAP Section was keen to collaborate with the Adult Psychiatry Section and saw the participation at meetings as an opportunity to compare work in similar areas, such as the development of a logbook for trainees, ethics in psychiatry, common trunk competencies for CAP and Adult Psychiatry. The CAP Section would be particularly interested in exploring the possibility of developing a joint working group on patients' transition from adolescent to adult services.

The officers agreed to discuss this suggestion at their meeting but it was pointed out that hitherto the cooperation between the sections was limited to the exchange of minutes and sending delegates to each other's meetings.

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

The minutes of the Section's autumn meeting held in Copenhagen, Denmark, on 25 April 2008, were approved as the correct record of the proceedings with one amendment.

4. Matters arising from the minutes not covered by this agenda

a. Feedback relating to the paper on depression and suicide

There was no further information on this matter.

b. Report on reciprocal representation with the EPA

European psychiatry was currently represented by several organisations, often competing for influence and duplicating their work, which could potentially impede cooperation, harmonisation of training and development of services.

Dr Sass reported that the EPA's main focus was to organise conferences and educational workshops. It held around 15 congresses a year which in turn offered some 50 CME courses. The EPA also offered specially tailored programmes of courses commissioned to national specifications. Other areas of work included the development of European guidelines and establishing the European research network.

EPA had also established a platform for leaders of national psychiatric associations to promote collaboration and would formally invite the UEMS to join the platform.

It would be helpful to clarify roles with UEMS producing quality assurance, service provision and specialist training guidelines and the EPA focused on providing educational courses.

c. WHO survey of mental health in Europe

Prof. Gómez-Beneyto attended the launch of the WHO report on mental health in London on 10 October, World Mental Health Day 2008. The report, *Policies and practices for mental health in Europe*, available on the WHO Europe website, mapped out significant differences in mental health services and practice throughout Europe. The report was the culmination of the data gathering project co-funded by the European Commission following the Mental Health Declaration signed by all EU states in Helsinki in 2005. The WHO Regional Office for Europe has been mandated to produce comparative data on the state of mental health services in its region, with the aim of support in the development and implementation of best policy and practice.

ACTION: The link to be published on the website and circulated to all delegates ✓
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d. Relations with patients, carers and allied professional groups in Europe

Prof. Gómez-Beneyto indicated that WHO, in its report, supported the right of users and their carers to be actively involved in service development and in their own treatment. There was also some evidence that services improved with patient involvement.

The delegates agreed that representative user and carer organisations in Europe should be identified and invited to cooperate. The EFPT was already in collaboration with EUFAMI (European Federation of Associations of Families of People with Mental Illness). GAMIAN

(Global Alliance of Mental Illness Advocacy Networks) would also potentially be a useful collaborative partner.

It was noted that professions allied to psychiatry should also be considered as collaborative partners, however it would be difficult to identify representative organisations on a European level.

One possible area of collaboration would be to invite user/carer organisation written feedback on selected Section and Board reports, e.g. the competence based training. However, it was not felt to be appropriate to invite direct representation at future meetings.

Action: Officers to write to EUFAMI & GAMIAN ✓

5. Financial matters

a. Subscriptions update

Dr Cassidy presented the up to date subscriptions data which showed that Cyprus had not paid for 6 years, Iceland had never paid (but also never attended meetings), Italy had not paid for 2 years, and Lithuania and Malta had not yet paid in the current year.

b. Budget 2009

Dr Cassidy reported that higher expenses were planned for 2009, due to the increase in the meeting organiser's grant and higher secretarial costs. The income from EACCME was not included in the budget as it was unpredictable. The Section received €5000 in 2007 and €8000 to date in 2008. The UEMS subscriptions members would be requested to pay in 2009 would remain at the same level. The grant for organisers would be increased by a further 10% effective immediately.

Transfer of accounts had been effected from the Netherlands to Ireland and the new account opened in Ireland allowed online facilities, such as an online account management, money transfer and credit card service. This required the delegates present to authorise the officers to sign a resolution on their behalf. This was agreed and the budget approved.

A recommendation was raised for the formal adoption of a fee for dinner guests who were non-delegate, to ease the financial demand on hosts. This was agreed. The new arrangements would be detailed on the attendance form and payment requested in advance of the meeting.

Action: Amend the attendance form accordingly ✓

c. Income from the EACCME

Prof Hodiamont reported that the number of applications received from the EACCME for assessment had significantly decreased which might have been a result of the changes to the website. The EACCME were planning to introduce accreditation for e-learning.

6. Working Groups' matters

a. Proposal for a new working group – observer status

Prof Hauff submitted a proposal on how to improve cooperation with allied professions and with psychiatric organisations from countries outside the EU. It was agreed that the UEMS should, where appropriate, share its expertise and offer educational outreach to non-EU countries. It was noted that the UEMS was not necessarily the most appropriate organisation to undertake this task. Delegates were reminded that the Section's website was a useful portal to our activities.

Prof Hodiamont, in liaison with Prof Hauff, agreed to prepare a draft policy proposal in place of setting up a new working group.

ACTION: Prof Hodiamont & Prof Hauff to prepare draft policy on collaboration with observers ✓

b. Proposal for a new working group - review of the psychotherapy report

Dr Mauthner presented her proposal on setting up a new working group to review the current situation in Europe regarding psychotherapy training. The proposal was approved.

Prof Gómez-Beneyto recommended this new working group should liaise closely with the working group on core competences to avoid unnecessary duplication and to coordinate the

competences in psychotherapy. The new working group on psychotherapy would first meet in Budapest.

c. Private Practice – report for discussion

Dr Pylkkänen reported that some comments from national associations had gone astray. He recommended the draft paper, circulated with the agenda, should be discussed at the plenary meeting rather than in the working group. Dr Urban reported that the working group was intending to further revise the paper and that the input from the general discussion would be very helpful.

The feedback to date on the paper was that it was well received by the Hungarian Psychiatric Association. The paper also received positive feedback from Sweden, Finland, Germany, Switzerland, Belgium and France. However, the Royal College of Psychiatrists did not feel able at this stage to endorse the paper as its scientific basis was questioned and its purpose and intended audience unclear. Issues of accountability and quality assurance of private service provision should also be addressed. Ireland agreed with UK's concerns. Spain also rejected the paper. The Spanish association did not support the view that one model of service provision would be acceptable to the whole of Europe. The Slovak Psychiatric Association felt the paper could possibly undermine the full development of services in post-communist countries if seen as the only possible mode of service delivery.

It was agreed that the paper should be further revised in view of the above comments and circulated once more for further consultation with national associations.

ACTION: WG to revise the paper and circulate for further consultation ✓

7. Membership matters

a. New EU member states – Bulgaria and Romania

The Section continued to experience difficulties in identifying representative psychiatric associations in Bulgaria and Romania. Prof Tringer confirmed he was in contact with the (French speaking) President of the Romanian Psychiatric Association but had not received reply.

Prof Hauff also confirmed that his efforts with Bulgaria had not been successful. He would pursue this further.

Both countries were members of the UEMS council and Dr Maillet agreed to approach their delegates.

ACTION: Dr Maillet to approach Bulgaria and Romania reps in Council

8. UEMS Council Matters

Dr Maillet informed the delegates that the UEMS was the largest medical organisation in Europe representing all clinical specialties. The position of the UEMS was strong and it continued to operate effectively.

The Council last meeting was held in Copenhagen on 11 October where they discussed e-health, postgraduate training and the future structure of the UEMS. Dr. Maillet reported the results of the UEMS elections held during the meeting. The new Executive committee included:

President: Dr Zlatko Fras (Slovenia)

Secretary General: Dr. Bernard Maillet (Belgium)

Treasurer: Dr. Giorgio Berchicci (Italy)

Liaison Officer: Dr Gerd Hoffmann (Germany)

Vice Presidents: Dr Richard Gutierrez (Spain), Dr. Romuald Krajewski (Poland), Dr Zoltan Magyari (Hungary) and Dr. Kari Pylkkänen (Finland)

The Council also endorsed the report of the Section of Psychiatry on Compulsory Treatment in community.

9. Improving the corporate identity of the Section of Psychiatry

Dr Pylkkänen briefly outlined his proposal for improving the corporate identity of the Section. It was suggested that the Union of European Psychiatrists' or 'the European Union of Psychiatrists' better promoted our aims and objectives as an organisation concerned with the interests of psychiatrists as medical specialists.

10. Task force – UEMS/AEP/WHO/WPA

Dr Pylkkänen gave a brief report from the meeting of the UEMS/EPA/WHO/WPA task force which took place during the EPA congress in Nice. The focus of the meeting was not clear and discussions centred around the future of this group and its effectiveness. No definitive conclusions were reached.

11. Standing Committee on CME

Prof Hodiamont reported that since the introduction of the new online application and assessment procedures the number of applications received by the evaluating committee had significantly declined and the assessment process itself had deteriorated as assessors had no opportunity for discussion. New accrediting bodies joining the field of CME might also be a contributing factor. Dr Maillet assured the members of the evaluating Committee that new passwords would be issued if requested in writing from the EACCME secretariat. Work on developing a discussion forum was in progress.

12. Brief feedback from delegates on professional, training or service matters

Delegates gave brief summaries of their national news.

13. Administrative issues

Ms Carroll reported that her position at the Royal College of Psychiatrists was about to change and she would have to relinquish her international role to take on the development of national recruitment system for psychiatry in England. It was likely that the College would appoint someone else to take on the UEMS support after the spring 2009 meeting.

Dr Pylkkänen thanked Ms Carroll on behalf of the officers and delegates for her work and support to the Section and Board over the years.

14. Any other business

Dr Georgescu, on behalf of the Section, attended the European Summit on age related diseases held in Poland in September 2008. The main objective was to discuss and agree the European 'silver' paper on the future of research, prevention and clinical aspects of age related diseases. Dr Georgescu had raised concerns that the paper which did not mention mental health issues in old age. Agreement could not be reached and the paper would be further consulted although the Section of Psychiatry would not be part of the consultation process as a result of a tight time frame for this.

Dr Lucien Manuceau and Dr Arnaud Crochette were confirmed as the only currently recognised representatives of the French Psychiatric Association at the start of the meeting.

15. Dates and venues of future meetings

23-25 April 2009 – Budapest, Hungary
15-17 October 2009 – Ljubljana, Slovenia
April 2010 – Stockholm, Sweden
October 2010 – to be confirmed
April 2011 – Tallinn, Estonia

16. Reports from the Working Groups

a. Membership of observers

Dr Strachan presented a draft paper which summarised current thinking on meeting membership and attendance arrangements. It was agreed that organisations with voting rights could have up to two delegates attending meetings. Host associations were requested not to invite guests to attend business meetings of the Section and Board. Instead Presidents

and other relevant persons could preferably be invited to evening events. Delegates who wished to bring a guest to dinner would be requested to pay a contribution fee.

The paper was agreed and would be circulated to all delegates and also placed on the Section and Board website for reference.

Action: Paper to be published on the website ✓

b. **Stigma**

Prof Hohagen reported that this was a complex area that required careful consideration of various types of discrimination, the role of doctors, both positive and negative and ways to counter stigmatisation amongst patients, professionals and general public through educational and public information activities.

The group was hoping to present the preliminary report in Budapest. The final version should be approved in October 2009. It would then be submitted for endorsement to UEMS Council.

c. **Old Age Psychiatry**

This working group did not meet on this occasion.

d. **Biology in Psychiatry**

Prof Lindefors presented an outline of the report which aimed to review the previous report approved in April 2000. The working group was hoping to present the first draft of the final report in Budapest.

e. **Liaison**

Dr Georgescu reported that the working group had completed the draft report taking into account the feedback received so far. The main adverse comment raised during consultation was the length of the paper which would now be addressed. The revised version would be circulated for final comments hopefully with the view to final approval the paper in Budapest.

f. **Private practice**

Dr Urban reported that the working group discussed the feedback received and agreed to address the issues raised. The revised version would be circulated again for further feedback and consultation with national associations with the view to final approval of the paper in Budapest.

g. **Psychotherapy**

Dr Mauthner reported that and three other delegates had expressed interest in this group. At its first meeting it agreed to again carry out a UEMS survey of psychotherapy.