UEMS Section of Occupational Medicine

MINUTES

Brussels Meeting 31 March 2001 10:00 a.m.

1. Apologies

Participants:

Marcri-Andre Boillat
Marc Bregliano
Ole Carstensen
Vlasta Deckovic-Vukres
Kaj Husman
Reinhard Jäger (Secretary)
Jacques de Laval
Ewan Macdonald (Chairman)
Tom McMahon
Luc Quaeghebeur
Ema Saeadura Leite
Consol Serra
Haldun Sirer
Knut Skyberg
Andy Slovak (Treasurer)
Metka Terzan
Jacques van der Vliet

Apologies:

Gunnar Ahlberg
Paavo Jappinen
David Sherson
George Stamatopoulo
Blaise Thorens

Switzerland
France
Denmark
Croatia
Austria
Sweden
United Kingdom
Ireland (until 11.30 am)
Belgium
Portugal
Spain
Turkey
Norway
United Kingdom
Slovenia
Netherlands

2. Welcome

Tom McMahon as outgoing president welcomed all participants and thanked them for coming. Especially he welcomed Kaj Husman, who is convalescent after his accident, and Jacques van der Vliet, President of ENSOP. Tom passed the chair to the newly elected President, Ewan Macdonald.

Ewan Macdonald recalled the foundation of the UEMS-Section for Occupational Medicine in 1997, and warmly thanked Tom MacMahon, who was the first president and "father of the section", for all he has done. He also reviewed the achievements of the last years, including the production of CME guidelines, the contribution to the WHO publications on core competencies, and quality management of occupational health and safety services. He also reviewed the meeting with the EU Commissioner Flynn of DG V, and reminded the section that one of the most important tasks for the section is to influence the legislation at EU level. He also welcomed all participants, especially Kaj Husman, and Andy Slovak as treasurer and Reinhard Jäger as secretary.
3. **Minutes of last meeting** (Dublin 21 Oct 2000)

The minutes were agreed with the correction of the names. A mailing list will be sent to all members of the section.

Tom McMahon remarked that the slides concerning the presentation of Dr Twoomey, President of UEMS, had not yet arrived. He will mail them to the secretary to circulate them (in power point format).

4. **Matters arising**

   a) UEMS compendium entry
   Tom MacMahon reviewed the paper on "Occupational Medicine" which will be the contribution of the section of OccMed on the website of UEMS. This was unanimously agreed by the participants.

   b) Redraft Chapter 6
   (UEMS Charter on requirements of training in OccMed). Ole Carstensen reported that two Danish colleagues are working on the redraft, and it will be presented at the next meeting Oct 2001.
   Kaj Husman discussed the EU-legislation which requires a 4 years education in Occupational Medicine. He observed the name of our speciality “Occ.Medicine” was a bit oldfashioned and he would prefer “Occ.Health”.
   Ewan Macdonald reviewed the formal problems in changing the name of a speciality. However, he agreed that the terminology used in Occupational Health and Safety was “dinosaurish”.

   c) Proposed Delphi survey
   Andy Slovak proposed a survey to investigate
   - the different points of view of OccMed&Health and the different interests of members
   - where people are today and where they want to be in the future.
   He will create a draft, which will be circulated, and members were asked for feedback. After that an official paper will be sent out.

   d) Certification of OHS
   Ewan Macdonald identified quality assurance as an important issue for the future, also for the protection of the profession. UEMS should work out recommendations, he suggested.
   Short reports were received about the situation in Norway and the experiences in the Netherlands and Denmark.
Luc Quaeghebeur described the situation in Belgium, where a re-certification of OHS is obligatory every 5 years. There is an additional certification of the employees working in the services. Only recommendations exist for the certification of the physicians.

Jacques de Laval reported about the Swedish situation: the certification is voluntary, which causes very different situations in companies and distorts competition. He warned against too much bureaucracy and too detailed recommendations.

Ema Seadura Leite informed the section that in Portugal there is certification of the OHS, but not any individual specialist.

Marc Bregliano noted that there were differences between certification and quality assurance.

Ewan Macdonald stated that in his opinion also non-medical members of OHS should be certificated, and our UEMS-section should have a position to these questions.

Knut Skyberg will produce a draft paper concerning UEMS recommendations on certification.

Action
K. Skyberg

e) Future Conference

Ewan Macdonald raised the proposal of a “Conference on the Future of Occupational Medicine in Europe” for 2002, and to invite the European Societies of OccMedicine and Academic organisations to this conference. Possibly this conference could be organized in combination with another conference.

Action
E. Macdonald
R. Jäger

f) Proposed standing group
No further progress in this subject, see 5 below.

5. Relationship with EASOM and ENSOP

Jacques van der Vliet, representing the Netherlands (but not officially nominated), suggested an open discussion on the cooperation of the three organisations UEMS, EASOM and ENSOP. Following the ENSOP board meeting in 1998, there had been no further activities, and ENSOP does not formally exist now because of unresolved problems with the statutes. Members of ENSOP are the Societies of Occ.Photicians, not individuals (question Tom McMahon). Further he reported on a meeting of the newly elected EASOM board which he had attended one day before. A conference in cooperation with the Dutch Society of OccMedicine is being planned in May 2001, and he proposed to combine it with an ENSOP meeting.

Luc Quaeghebeur described ENSOP as a “sleeping beauty” and spoke about the necessity of some legal action and some changes in the statutes to revive it.
Kaj Husmans asked if we really need both organisations UEMS and ENSOP. Ewan Macdonald commented that the three organisations have a lot of meetings with almost the same people, but what we need is to speak with one voice on the European level, and the ENSOP organisation needs an infrastructure not depending on the activity of one person, if it was going to develop. Further discussion is needed about, how the infrastructure can be organized.

6. Future programmes discussion

During the discussion a table was prepared (see Appendix A) identifying the aspects of strength and weakness of our speciality and the opportunities and threats for future development. From that the priorities for the future progress of the OM section were discussed:

I. Marketing and Selling of OM to the EU level
   Advisory Committees

II. Influence future EU-Legislation
    “OH for all” / quality assessment / minimum standards / compliance index

III. Cost - Impact - Analysis
     of the work-related ill health

IV. One voice / one body for OM on the EU level

Annex to I:
Whenever possible the members of the section shall contact MPs and members of the Advisory Committee. Every member of the OM section shall give a briefing note to his national representatives in DG5 in Luxembourg (about two pages).
Kaj Husman will provide a draft paper on OHS and mail it to the secretary for circulation.

Andy Slovak raised the question of future organisation of tasks and objectives of UEMS and ENSOP and also the question of a board of the section. Ewan Macdonald felt that the subject of a board could be the field of education and examination, but in close cooperation to EASOM. For him the most important point of view is to speak with one voice to the EU bodies.
Jacques van der Vliet described the four current organisations and what they represent:
Two of these organisations, UEMS and the CP, have an official status in the EU.

Consol Serra suggested to organize future meetings together. Ewan Macdonald pointed out that ENSOP and EASOM members had always been invited to the UEMS meetings. His proposal of a combined meeting in 2002 was unanimously agreed.

Knut Skyberg suggested to discuss new EU-legislation at UEMS-meetings (e.g. biological agents). Ewan Macdonald agreed; in his opinion the surveillance of forthcoming legislation is an important task, but could also be a task for ENSOP. Summarizing he said we should set "hard objectives" for the next years. For the next meeting a paper with "hard objectives" will be prepared.

7. Any other business

Ewan Macdonald circulated a sheet with the UEMS account and a list of the payments of the UEMS members. The yearly membership fee is 75 €.

8. Date and place of next meeting

Saturday 20 Oct 2001
Ljubljana / Slovenia

Ewan Macdonald thanked all participants for coming and closed the meeting at 2:30 p.m.
# Appendix A

<table>
<thead>
<tr>
<th>Strength</th>
<th>Weakness</th>
<th>Opportunities</th>
<th>Threats</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevention</td>
<td>difficult to sell prevention</td>
<td>Add value</td>
<td>Segregation</td>
</tr>
<tr>
<td>We know each other</td>
<td>Marketing</td>
<td>Ageing workforce</td>
<td>Globalisation</td>
</tr>
<tr>
<td>Work in small units</td>
<td>Isolation</td>
<td>epidemiological approach</td>
<td>lack of trainees</td>
</tr>
<tr>
<td>only speciality with knowledge about work and health</td>
<td>Relationship to other specialities</td>
<td>Practitioner, close to Academic</td>
<td>relationship to other specialists</td>
</tr>
<tr>
<td>Quality increasing</td>
<td>too clinical</td>
<td>legal protection for services</td>
<td>risk from other OH specialists</td>
</tr>
<tr>
<td>Multidisciplinarity</td>
<td>feel too dependent on legislation</td>
<td>psychological aspects</td>
<td>Deregulation</td>
</tr>
<tr>
<td>Core competencies defined</td>
<td>lack of strong representation</td>
<td>more emphasis on outcome of OH</td>
<td>Changing workplaces</td>
</tr>
<tr>
<td>Managerial skills</td>
<td>Managerial skills</td>
<td>Globalisation</td>
<td>Changing organisations</td>
</tr>
<tr>
<td>We learned to listen</td>
<td>lack of hospital base</td>
<td></td>
<td>seen as mandatory</td>
</tr>
<tr>
<td>Acess to the population</td>
<td>OccHealth in EU is split</td>
<td></td>
<td>seen as employers agent</td>
</tr>
<tr>
<td>Not in ivory tower</td>
<td>bad working conditions</td>
<td></td>
<td>difficult to follow up</td>
</tr>
<tr>
<td>Evidence based Medicine</td>
<td>Evid. based Med. more needed</td>
<td></td>
<td></td>
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<tr>
<td>Salary</td>
<td>Salary</td>
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