European and international medical bodies

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APPENDIX 13
1 Introduction

This document gives brief information about the structure and work of the various European and International medical and health-related bodies with which the British Medical Association is directly involved, or whose work is relevant to doctors in the United Kingdom.

The organisations described fall into three broad categories:

(i) Non-statutory European bodies whose membership is based on national organisations and of which the BMA is a member (Section 3);

(ii) Non-statutory bodies of which the BMA is not a member, but of which doctors may be aware (Section 4);

(iii) Non-statutory international bodies of which the BMA is a member (Section 5).

The list is not exhaustive, but covers the main medico-political and professional bodies. There are many specialised bodies with which the BMA is not in regular contact, and it would be impossible to include them all. The addresses of those which are listed are given in the appendix to this document.

For further information on any of the organisations listed in this guide, please contact the BMA International Department:

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London
WC1H 9JP
Tel: 0207 383 6133
Fax: 0207 383 6644
Email: internationalinfo@bma.org.uk
The BMA has had a mechanism for monitoring European affairs for over 40 years. This was established long before the UK finally joined the European Community in 1973. The BMA first appointed an ad hoc committee to consider the medical implications of entry into the European Economic Community in 1962. The Committee on the Common Market became the Committee on the EEC in 1971, with expanded membership and terms of reference as the UK prepared for membership. In 1990 it became the European Communities Committee and in 1992 a re-evaluation of the Association’s approach to European affairs led to the creation of a new European Committee to deal with Europe-wide health issues.

In 1996, the Association established a broader-based International Committee to monitor all aspects of its international work both in Europe and beyond. The BMA is also a founding member of, and provides the secretariat for, the European Forum, which brings together a wide range of UK health stakeholders and has the following terms of reference:

(i) To consider European policy or initiatives of interest to the medical profession in particular and to UK health professionals in general

(ii) To exchange information about European activities

(iii) If appropriate, to coordinate action to influence EU institutions and the UK government

The Forum was established in January 1993 and continues to meet twice a year. Further information can be found at: http://www.bma.org.uk/lobbying_campaigning/euro_parliament/Euroforum.jsp

Organisations such as the BMA use a number of different routes when lobbying on European issues. The approach used depends on the subject and where influence needs to be exerted. There are three broad approaches:

- Lobbying at national level. National governments are represented on the EU Council of Ministers (there are separate councils for different policy areas) which, along with the European Parliament, is the ultimate decision-making body in the EU. National governments also hold seats on bodies such as the Committee of Senior Officials in Public Health (CSOPH). Members of the European Parliament (MEPs) can also be contacted at national level.

- Direct lobbying at European level. The BMA employs an EU Policy Manager in Brussels to gather information, to establish contacts with key decision makers and to represent the views of BMA members. In this way, the BMA is able to maintain and develop direct contact with the European Commission, relevant interest groups, MEPs, and the UK government’s representation to the European Union.

- Lobbying through, or in tandem with, European professional associations (see section 3). When the priorities of the BMA align with those of the European professional associations, the BMA works in conjunction with these associations in
order to increase the effectiveness of its lobbying and to present a consensus voice of European doctors.

The BMA, in common with other organisations, uses a combination of all three approaches.
3 Non-statutory Professional Bodies of which the BMA is a member

The organisations described below are all non-governmental and funded by member subscriptions. They should not be confused with any statutory bodies or with the EU institutions.

3.1 Standing Committee of European Doctors (CPME)
http://www.cpme.eu

The Standing Committee of European Doctors, or “Comité Permanent des Médicins Européens”, is an umbrella organisation which aims to act as the voice of the whole profession in Europe. It was established in 1956 and has 27 members. The CPME is an international, not for profit association under Belgian Law composed of the national medical associations of European countries. It also unites associated members (those countries that are currently negotiating membership to the EU), associated organisations (specialised European medical associations) and observers.

CPME aims to promote the highest standards of medical training and medical practice in order to achieve the highest quality of health care for all citizens of Europe. It is also concerned with the promotion of public health, the relationship between patients and doctors and the free movement of doctors within the European Union.

An organisation representing medical doctors may become a member of the Standing Committee if it is the most representative non-governmental national medical organisation of one of the countries of the European Union or one of the signatory countries of the European Economic Area agreement.

The BMA is the member organisation for the UK and appoints delegations which represent the major branches of practice and other interests.

The CPME currently focuses on four over-arching policy areas and meets twice a year:

- Medical Training, Continuing Professional Development and Quality Improvement
- Ethics and Professional Codes
- Organisation of Health Care, Social Security, Health Economics
- Public Health, Prevention and Environment

The President of the CPME is elected every three years. The UK held the presidency in 2008-2009 under Dr Michael Wilks.

Iceland took over in 2013 under the leadership of Dr Katrín Fjeldsted. There has been a permanent CPME office, managed by a permanent Secretary General, in Brussels since 1992. This was established in order to improve links with the European institutions, to increase awareness of the CPME’s activities, to aid continuity and to provide a permanent point of contact for outside organisations.
3.2 European Union of Medical Specialists (UEMS)

http://www.uems.net/

As its name suggests, the UEMS represents the interests of European specialists. It is concerned with the quality of specialist care in Europe and the promotion of cooperation within the medical profession. It was founded in 1958. Its member organisations are the national professional associations representing specialists within the European Economic Area. Associations from other European countries are eligible to become associate members.

The main organ of the UEMS is its Council. In addition, there are more than 30 specialist sections, entitled ‘sections and boards’ which study issues relating to training and practise in specialties which are recognised in at least one-third of EU member states. In recent years these sections have set up European Boards, whose purpose is to guarantee high standards of specialist care throughout Europe by promoting standards of excellence in training.

Although Boards are free to draw up their own assessment systems, they do not replace national qualifications, nor will they be a prerequisite for moving between member states.

The specialist sections and boards report to the Council. Although the BMA is the member organisation for the UK, it also works closely with the Academy of Medical Royal Colleges. Representation on the Council is shared, and nominations to the sections and boards are made by the relevant Royal Colleges and channelled by the BMA to the UEMS.

In recent years, the UEMS has produced a number of policy statements and charters on specialist training, continuing medical education and quality assurance. It has also established a European Accreditation Council for Continuing Medical Education (EACCME), which aims to facilitate the mutual recognition of CME points across Europe.

The UEMS has a permanent Secretary General and administrative secretariat in Brussels. Its officers are elected from among national delegations. The current Secretary General is Dr Edwin Borman of the BMA. The President is Dr Romuald Krajewski from Poland.

3.3 European Union of General Practitioners (UEMO)

http://www.uemo.eu/

The UEMO was founded in 1967 and represents general practitioners. Its members are professional associations representing general practitioners - for the UK, representation is shared between the Royal College of General Practitioners and the BMA.

The UEMO’s principal objectives include: to study and promote the highest standards of training, practice and patient care; to defend of the role of general practitioners in health care systems; to promote the ethical, scientific, professional, social and economic interests of European GPs and to secure their freedom to practice in the best interests of their patients. Its statutes have been revised to permit organisations from any European country to become members.

The UEMO currently has seven working groups whose role is to draft policy which is then put to the vote in the General Assembly. The working groups cover:
- CME/CPD
- Equal opportunities
- Specialist training
- Preventative activities/public health
- Future GP workforce
- Quality assurance
- Permanent ad hoc working group

The UEMO meets twice a year and the Presidency is held for a four year mandate. The current President is Dr Ferenc Hajnal of Hungary.

**Note:** The UEMS, UEMO and CPME all maintain contact with each other, and are represented at each others’ meetings by liaison officers. The BMA would like to see, and does everything it can to encourage, more efficient use of resources and more operational integration between the European medical organisations.

### 3.5 European Forum of Medical Associations and the World Health Organisation (EFMA-WHO)

This forum meets annually and provides an opportunity for dialogue between the European Regional Office of the World Health Organisation and representatives of the national medical associations of the 51 countries of the European region. National medical associations host meetings on a rotating basis, the BMA having last done so in 1995. The meetings consist of presentations on specific subjects and reports from action groups and from individual associations on developments during the previous year. This is followed by discussions in plenary sessions and working groups. These sometimes culminate in the adoption of consensus statements or the establishment of working groups for specific studies.

EFMA-WHO produces a yearly handbook, *National Medical Associations in Europe*, which contains information about the constitution, activities and officers of participating national medical associations.
4 Other Non-Statutory Professional Bodies

4.1 Conférence Européen des Ordres des Médecins (CEOM)
http://www.ceom-ecmo.eu/en

The concept of a medical ‘order’ comes from the Latin-based languages and is not easy to translate into English, but the term is usually applied to regulatory bodies. The functions of the French ordre, which holds the secretariat of the CEOM on a permanent basis, are defined by law and include the upholding of the morality, probity and dedication essential to the practice of medicine, the adherence of doctors to professional and ethical codes and the defence of the honour and independence of the medical profession.

The organisations represented at the CEOM, which was established in 1971, all have some responsibility for the registration of doctors and for professional/ethical codes and disciplinary matters. The General Medical Council is the member for the UK and the BMA does not attend its meetings.

The CEOM is involved in the study of practical measures to be taken by regulatory authorities to implement EU legislation, and the upholding of standards of medical practice to protect the interests of patients. Its members regularly exchange data about registration in their countries of doctors from other EU/EEA member states.

The CEOM meets twice a year and the current President is Dr Roland Kerzmann of Belgium.

4.2 European Junior Doctors (EJD)
www.juniordoctors.eu

The EJD was established in 1976 as the Permanent Working Group of European Junior Hospital Doctors. It dropped the word ‘Hospital’ in 1996 to make clear that it represents all junior doctors wherever they work. It currently comprises 19 members. The EJD’s aims are as follows:

• To safeguard the interests of junior doctors in Europe
• To improve the relations between its member organisations
• To narrow the gap between junior doctors in the EU and those from third countries

The group holds two plenary meetings a year, hosted and chaired by each member organisation in turn. It also has three subcommittees:

• Postgraduate medical training
• EU/EEA
• Medical workforce

The current President is Dr Carsten Mohrhardt from Germany.

The BMA’s resigned from the EJD in December 2009 but is currently reviewing its relationship with the organisation.

4.3 European Association of Senior Hospital Physicians (AEMH)
The AEMH is a professional association of senior hospital doctors. It encourages the exchange of ideas and experiences and promotes discussion among doctors, patients and politicians with the principle objective of promoting health and improving patient safety.

The AEMH has a permanent secretariat in Brussels and comprises 17 member organisations. The UK is not a member of AEMH. The current President is Dr Joao de Deus from Portugal.

4.4 European Federation of Salaried Doctors (FEMS)  
http://www.fems.net/

The FEMS was founded in 1964. Membership does not include all EU/EEA countries, but equally does not seem to be limited to one organisation per country. The organisation is dominated by southern and eastern member states. The UK is not a member of FEMS.

The Federation is registered in France but has a permanent secretariat in Brussels. Its stated aim is to study and defend the interests of salaried doctors and to improve their working conditions from the psychological, medical and material points of view. It states clearly that it does not seek to promote salaried practice at the expense of private or self-employed practice.

The current President is Dr Enrico Reginato from Italy.

Note: AEMH and FEMS collaborate closely and share a secretariat in Brussels.

4.5 World Organisation of Family Doctors Europe (WONCA Europe)  
http://www.woncaeurope.org/

WONCA Europe is the European regional branch of the international organisation, WONCA. It has over 40 member organisations and represents more than 45,000 family doctors in Europe.

WONCA Europe is the academic and scientific society for general practitioners in Europe. Its objective is to improve the quality of life of the peoples of the world through fostering and maintaining high standards of care in general practice by providing a forum for exchange of knowledge and information; encouraging and supporting the development of academic organisations of general practitioners; and representing the educational, research and service provision activities of general practitioners before other world organisations and forums concerned with health and medical care.

The current President is Prof Job FM Metsemakers of the Netherlands. The RCGP is the UK member of the organisation. The BMA does not attend its meetings.
5. International Medical Bodies

5.1 The World Medical Association (WMA)
http://www.wma.net

The World Medical Association was founded in September 1947 at a gathering of delegates from 27 national medical associations. There are now more than 70 national members. National subscriptions are calculated according to the number of doctors declared. It is an independent confederation of free, professional medical associations from around the world, although individual doctors can join as associate members.

The Association is an apolitical body which provides a forum for its member associations to communicate with each other more effectively; to achieve consensus on high standards of medical ethics and professional competence and to promote the professional freedom of physicians world-wide. Policy is determined by its General Assembly, which meets annually.

Since its inception, the WMA has aimed to provide guidance to doctors worldwide through its Declaration and Statements. These also provide policy guidance to national medical associations, governments and international organisations across the globe. The Declarations and Statements cover a wide range of subjects, including an international code of medical ethics, the rights of patients, research on human subjects, care of the sick and wounded in a time of armed conflict, torture of prisoners, the use and misuse of drugs, family planning and pollution. The WMA has also considered the plight of doctors incarcerated in contravention of their human rights, and has sent delegations to some areas to investigate reports of such abuses.

The current president of the WMA is Dr Cecil B. Wilson of the USA. The WMA has a secretariat based in France.

5.2 Commonwealth Medical Association (CMA)

The Commonwealth Medical Association (CMA) was established in 1962, at a time when an increasing number of Commonwealth countries were gaining their independence and overseas branches of the British Medical Association were being replaced by national medical associations. The CMA's constitution was later changed in 1989 with its main aim to strengthen the capacity of national medical associations in developing countries to improve the health of their vulnerable and disadvantaged groups. From 1997 CMA project activities designed to achieve this aim became interlinked with those of the Commonwealth Medical Association Trust (COMMAT), which is a registered charity under English law. In 2004 the two organisations separated and the CMA adopted a revised constitution in 2004.

Many of the developed Commonwealth country members (including the BMA) left the CMA in 2004. The current president is Dr Gordon Caruana-Dingli of Malta whilst the secretariat is located in BMA House, London.

The CMA (and COMMAT) has traditionally concentrated on issues which most affect the health of those in developing countries. These include:

- HIV/AIDS - over 60% of HIV/AIDS cases occur in Commonwealth countries, which comprise only 30% of the world's population
• Recruitment of health professionals from developing to developed countries
• Medical ethics and human rights
• Adolescent health
• Reproductive health
• Women's health

Further Information about COMMAT can be found at - http://www.commat.org/
APPENDIX

The organisations mentioned in this document can be contacted as follows:

Organisations listed in Section 3:

Standing Committee of European Doctors (CPME)
Rue Guimard 15
Brussels 1040
Belgium
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Email: secretariat@cpme.eu

European Union of Medical Specialists (UEMS)
Avenue de la Couronne 20
Brussels 1050
Belgium
Tel: 0032 2649 51 64
Fax: 0032 2640 37 30
Email: sg@uems.net

European Union of General Practitioners (UEMO)
Rue de Deux Eglises 39
Brussels 1000
Belgium
Email: secretariat@uemo.eu

Permanent Working Group of European Junior Doctors (PWG)
Avenue de la Couronne 20
Brussels 1050
Belgium
Email: secretariat@juniordoctors.eu

Organisations listed in Section 4:

Conférence Européen des Ordres des Médecins (CEOM)
c/o Conseil National de l’Ordre des Médecins
Boulevard Hausmann, 180
F-75389 PARIS CEDEX 08
France
Tel: 0033 1 5389 32 41
Fax: 0033 1 5389 33 44

European Association of Senior Hospital Physicians (AEMH)
Rue Guimard 15
Brussels 1040
Belgium
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Fax: 0032 2 732 99 72
Email: secretariat@aemh.org
European Federation of Salaried Doctors (FEMS)
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Fax: 0032 2 732 99 72
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WONCA Europe
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Organisations listed in section 5:

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France
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International Department
BMA House
Tavistock Square
London WC1H 9JP
Email: cmal liaison@cma bma.org.uk