UEMS MINUTES OF MEETING 30TH JUNE 2007 BRUSSELS

Attending:

Lindsay – EANS
Maillet - UEMS
Asser – Estonia
Bettag - Germany
Bognar - Hungary
Cunha e Sa – Portugal
Cesarini - Sweden
Emery – France
Hide – UK

Jungmann - Germany Landolt – Switzerland

Mateo - Spain

Matgé - Luxembourg Mooij – Netherlands Muehlbauer – Austria Ogrezeanu - Romania Paladino – Croatia Palmer – UK Reulen - Germany Selviaridis – Greece

Stahl – Sweden (replacing Wallstedt)

Tamasauskas, Lithuania Trojanowski – Poland

Unlu – Turkey Verlooy – Belgium

Wowra - Germany (Radiosurgery

working group)

Garfield-Birkbeck - EANS

Apologies:

Benes – Czech Republic Brennum – Denmark Dolenc – Slovenia Feldman – Israel Helseth – Norway Kemeny – UK Radek, Poland Richling - Austria

Suchomel - Czech Republic

Van Loon – Belgium Wester – Norway

- 1. Professor Reulen (HJR) welcomed delegates to the meeting and listed the apologies
- 2. The minutes of the previous meeting (Antalya, February 2007) were approved unanimously

3. Section of Neurosurgery – UEMS

a. Report of President

HJR reported that:

- The standards for endovascular Additional Competence Training (ACT) are to be published on Acta On-Line (May 21, 2007 and under *Neurosurgical Concepts*: Standards of Training in endovascular neurointerventional therapy, Acta Neurochir 149:613-616)
- The "Glasgow Declaration" (European board exam) was produced by the examination boards of 9 specialist sections at a meeting in February this year. The Section of Neurosurgery had been invited to the next meeting of the group on 16th June. Professor Maillet (BM) attended the first meeting and informed the Section that the Declaration was a first step towards the

development of a harmonised examination structure and nomenclature across the specialties at European level. The next meeting of the group will be on 17th November this year and all Sections of the UEMS will be invited to attend. IT WAS AGREED THAT Drs Cesarini and Mateo would represent the Section. All future information from the group would be sent to the UEMS.

- Berlin Symposium: 11 surgical disciplines in Germany have created a parent organisation, a "Union of Surgical Disciplines" in order to discuss common problems and to form a powerful political grouping. This group has organized the symposium on the effects of the Working Time Directive (EWTD) on surgical training (Berlin 22.5.07). All important parties and authorities were participating. It was understood that there is a need for further 12 hours' training per week in order to allow trainers to train; currently training units are undertaking this work unpaid. The union therefore concluded that it would be more equitable to pay units based on the number of trainees in order to address the fact that units which do not run training have a financial advantage. The union has also found that trainees are concerned as to the level of training they receive. It has therefore been agreed that a list of minimum requirements of a training programme should be developed (valid for all surgical disciplines!) together with a logbook for trainees to use a proof of their training. It was concluded however, that there was no need to change the EWTD as the opt-out was sufficient to increase the time available from 48 hours to 66 hours. Trainees are willing to work for 58 – 60 hours per week as long as they are paid to do so (currently they are only paid for 48 hours' work). HJR reported that 2 Lander have so far set up the op- out.
- UEMS Sections and Boards meeting in May 2007: This was a positive meeting with the issuing of a UEMS policy statement on assessment during Postgraduate Medical Training. BM informed the meeting that the strategy document on the future of the UEMS would be discussed within the Sections and that the final document would represent a balance between the Sections and the Boards.
- Neuroradiologists' request for a division within the Neurosurgery Section: HJR contacted all interested specialties (Radiology and Neurology). The new President of the Radiology Section has advised that the Section will offer the Neuroradiologists the opportunity of establishing a division within the Radiology Section. IT WAS AGREED THAT the offer to establish a Neuroradiology division within the section of Neurosurgery would remain open until such time as a division had been established in Radiology
- Assessment of Training Programmes by Trainees: This has been requested by the UEMS. A first version has been developed and a second version is being drafted by a working group of 30 trainees. A third version will be available after 15th July 2007 and will be ready for consideration at the Winter meeting of the Section. Mr Lindsay (KWL) pointed out that it was important to know to whom the completed forms would be sent to and concerns over confidentiality had to be addressed. Professor Landolt (HL) informed the meeting that the Swiss Medical Federation sends the forms to the trainees who complete the forms anonymously. Averages across Switzerland and from each department are extrapolated in order to allow trainees to know their own positions in comparison to others. It was agreed that this type of assessment system could be useful for the JRAAC site visits. Professor Mooij (JJAM) explained that in the Netherlands there is an audit of every training unit every

four years in addition to an annual trainee assessment form and that this has improved relations between trainees and trainers in the Netherlands. Dr Cesarini (KC) informed the meeting that Sweden operates a compulsory audit system and that there are no trainees in units which are not audited. Trainees have to complete a form which is used as part of the audit process and is kept confidential by the auditors.

3. b Report of Treasurer

On behalf of Dr van Loon (JvL) HJR reported that there are now 27 full members with 5 associate members and 1 country with observer status. Lithuania will be joining as a full member in October 2007. Azerbaijan will be attending the Winter meeting and Romania and Bulgaria will become full members at that meeting. Of the full members, 23 are due to pay and 20 have paid in 2006 their subscription to the UEMS section. 3 countries have not paid despite several reminders. Total income for 2007 so far was €2216. IT WAS AGREED THAT where a country had not paid its dues for two years, voting rights would be forfeited in the first instance, (+they receive invitation for meetings, but not the minutes) with a possible further sanction of non attendance at meetings.

4. Report of Chairman of JRAAC

Professor Trojanowski reported that the most recent site visits would be discussed at the meeting following that of the Section meeting, that two site visits were pending and that there had been no questions following previous site visits.

5. Report of President EANS

KWL reported that:

- The Training Course had taken place in Lisbon at the beginning of June. He thanked JJAM for his chairmanship of the Training Committee for the past four years and informed the meeting that JJAM had run 8 courses during that time.
- The Research Course had also been run in Lisbon with 40 participants.
 This course will no longer be run at the same time as the Training Courses
- The Training the Trainers course had also taken place in Lisbon. Four EANS facilitators were being trained. 2 of these were now fully trained and the remaining 2 were half way through their training. There will be one more course using the current facilitators.
- Arrangements for the European Congress are on schedule. The Scientific Programme is complete and the sponsorship levels have exceeded targets. The congress will break even if there are 900 delegates.
- The first part of the pilot two-year spine course will be held in November in Croatia, This is targeted at post accreditation neurosurgeons

- The Winter Meeting and Training Course will be held in Trondheim in February 2008. This is likely to be the last time the two events will be held at the same time.
- Joint committees with the UEMS are now the Continuing Medical Education Committee, the Examination Committee and JRAAC.

6. Election of President Elect of Section

Professor Trojanowski (TT) was not present. IT WAS AGREED to vote by a show of hands. PROFESSOR TROJANOWSKI WAS ELECTED UNANIMOUSLY. TT was duly congratulated and he extended his thanks to the Section and to HJR.

7. Subspecialisation: Presentation of draft and general discussion IT WAS AGREED that the term to be used is **Additional Competency Training (ACT)**.

- Professor Cunha e Sa (MCeS) reported that there is a general move towards this giving rise to a potential conflict with pre-accreditation training whether this training should remain holistic, or whether it should become fragmented into blocks so that trainees no longer do any training in areas in which they have no interest. MCeS concluded that the obvious effect of the latter would be to limit the choice of practice open to the trainee from the beginning of training.
- The meeting discussed the paper on Neurosurgical Oncology ACT: IT WAS AGREED that the purpose of this additional training had to be to add expertise beyond that acquired during basic training at the level of both technical practice and knowledge of available treatments and methods. This would be reached by looking at both institutional requirements and those of the individual leading to a framework for ACT in Neuro-oncology which would not encroach on existing training. Therefore the core requirements/standards would have to be agreed and published as the standard to be attained by the individual and provided by units wishing to provide training programmes for ACT. IT WAS AGREED that ACT should in general go beyond basic training and that the Competency Tables should be closely adhered to for trainees. It was also agreed that the Section should produce a general statement on the matter of ACT as opposed to sub-specialisation. HJR extended the Section's thanks to MCeS. A second draft will be produced and a working group has now been established with Professors Palmer, Landolt and Mooij in addition to MCeS.

8. Workforce Planning:- Results of Inquiry

The committee consisted of Professors Hide, Bodosi, Bettag and Reulen. 27 societies were contacted and 24 responses were received. The results were presented (HJR) and the meeting discussed the following matters:

- The differing number of neurosurgeons per population. Comparison between number of neurosurgeons and number of neurosurgical operations seems to indicate some dependency.
- Whether manpower planning should be based on the population base and therefore whether the goal should be one neurosurgeon per 85,000-100,000.

- The rate of increase in the number of neurosurgeons during the next 6 years and the impact of these various growth rates across Europe.
- Whether a pan-European approach should be adopted establishing the ratio of supply to demand enabling each country to then adhere to that standard.
- The results can be used by the national societies to discuss their present situation and the future development.

IT WAS AGREED that a preliminary report should be produced showing the actual figures and trends. The report will be presented to national societies through delegates and amendments as well as recommendations can be made until November 30, 2007. The aim would be to publish the final report in Acta in Spring 2008.

9. Neurointervention: report of Task Force

Dr Muehlbauer (MM) reported on behalf of Professor Richling (BR):

- There is now a comprehensive neurosurgical ACT for Neurointervention procedures.
- New ACT posts are unlikely to be forthcoming and therefore exchanges of individuals between units should be established.
- The programme has been presented at the EANS training courses but in order for the programme to become widely known, each national society will need to integrate it into national training programmes in order to begin to give the programme some form of legal basis.

10. CME, report of Permanent Working Group

HJR informed the group that SConst due to his new obligations will retire as chairman, but wishes to remain a member of this committee. JvL was proposed as chairman and unanimously elected, starting the job after the EANS meeting in Glasgow. BM informed the meeting that a new web-based application form would be available from September.

11. Radiosurgery: presentation of draft

Professor Wowra presented the draft report on behalf of Mr Kemeny (AK). The meeting discussed the following matters:

- Whether Radiosurgery is part of neurosurgical practice
- Whether 2 years to be spent training in this field was appropriate or can be reduced to 1- 1.5 years
- The ultimate goal of the document; independent practice or team practice

IT WAS AGREED that the document should first be a statement of principle in order to ensure that the legal restrictions on a neurosurgeon delivering radiation should be lifted or at the very least not further extended. This should be followed by a definition of terms and the different techniques used respectively the different approaches by a.) neurosurgeons; b.) radiotherapists and c. neurosurgeons and radiotherapists, depending on the protocols for specific types of care. The meeting also agreed that a radiotherapist should be invited to attend the next meeting of the Section. HJR

acknowledged the work of AK and this item would be put on the next meeting agenda.

12. Board Examination Committee

Dr Cesarini (KC) reported that:

- There had not been any examinations part II since her report to the meeting in Antalya in February 2007.
- It is likely that a session of Part II will be run at the time of the European Congress in Glasgow in September although it would be most convenient to run a session at the time of the Brussels meeting of the Section.
- Work has started towards establishing possible accreditation of national examinations (example Poland) in order to give national examinations a European Standard Mark.

13. Any Other Business

There was no other business. IT WAS AGREED that the next meeting of the Section will be in Trondheim in February 2008.