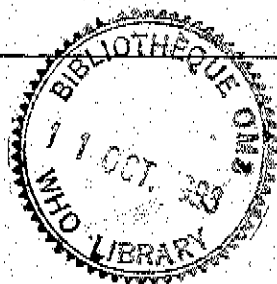




WORLD HEALTH ORGANIZATION  
REGIONAL OFFICE FOR EUROPE  
COPENHAGEN



EUR/ICP/HSC 021(C)(S)  
Original: English  
EUR/HFA target 37  
1993

# MEETING OF THE EUROPEAN FORUM OF MEDICAL ASSOCIATIONS AND WHO

Summary Report on a WHO Meeting

Utrecht, Netherlands, 28 – 29 January 1993

## ABSTRACT

The second meeting of the European Forum of Medical Associations and WHO in Utrecht in January 1993 brought together existing and prospective member associations from 47 Member States of the WHO European Region. They exchanged their experiences with various forms of health care financing. They also discussed other issues of common concern, such as East-West cooperation, management and leadership training, physicians and HIV infection, continuing medical education, health care reforms, medical ethics, indoor exposure to pollutants and patients' rights. They welcomed the creation of new independent medical associations in some countries of central and eastern Europe and discussed the changing role of physicians in these countries. They reviewed two projects that the Forum is now collaborating on: one on the role of physicians in suicide prevention, and another on the quality of care. As a result of the latter, they made recommendations for national medical associations regarding quality of care development. They also issued a joint statement expressing their concern for the people affected by hostilities in the former Yugoslavia and supporting the work of their professional colleagues there.

This report is issued in English, French, German and Russian, and all rights are reserved by the WHO Regional Office for Europe. The document may nevertheless be freely reviewed, abstracted, reproduced or translated into any other language, but not for sale or for use in conjunction with commercial purposes. The WHO name and emblem are protected and may not be used on any reproduction or translation of this document without permission. Any views expressed by named authors are solely the responsibility of those authors. The Regional Office would appreciate receiving three copies of any translation.

**TARGET 37  
PARTNERS FOR HEALTH**

*By the year 2000, in all Member States, a wide range of organizations and groups throughout the public, private and voluntary sectors should be actively contributing to the achievement of health for all.*

**Keywords**

SOCIETIES, MEDICAL  
HEALTH POLICY – trends  
DELIVERY OF HEALTH CARE – trends  
HEALTH FOR ALL  
HFA STRATEGY COORDINATION  
HUMANITARIAN ASSISTANCE  
QUALITY ASSURANCE, HEALTH CARE  
HEALTH ECONOMICS  
ENVIRONMENTAL HEALTH  
SUICIDE – prevent/control  
CONGRESSES  
CCEE

## Introduction

This meeting of the European Forum was the seventh in a series that began as a dialogue on health policy between WHO and national medical associations. The Forum was created in 1991; the present meeting of the Forum was the scene of greatly expanded participation. It was attended by the representatives of member associations and prospective members from 47 Member States of the WHO European Region.

## Discussion

The major issue discussed was the financing of health care and its effect on public health, hospital services and physicians. The participants shared their experiences with the three main systems of financing health care: the Beveridge national health service system, the Bismarck health insurance system and the Semashko system originally adopted in the former USSR. They also debated the merits of combining features from each system.

Among the associations participating for the first time was the Croatian Medical Association; various other associations are bringing humanitarian assistance to the former Yugoslavia. WHO has its own large-scale programme with over 50 field staff and six major projects. Expressions of concern for the war-affected population were incorporated in a statement from the Forum, urging national medical associations to support their professional colleagues who are caring for the suffering (Annex 3).

The democratic changes in the countries of central and eastern Europe are affecting the role of physicians who must re-establish their place in these new societies. Many medical associations are being restructured and their fields of expertise are not always as clear as those of western organizations. Central and eastern European countries are at different stages of development and should not be viewed as a block. They would welcome timely help from western Europe and the contacts made possible by the Forum are of great benefit.

The Forum applauded the creation of new associations that were now functioning as

independent nongovernmental organizations of physicians. The Liaison Committee of the Forum was responsible for scrutinizing membership in the Forum based on agreed criteria. All new associations should therefore provide information on their organizations.

Progress reports were given on the activities of the national medical associations. The Norwegian Medical Association had produced a booklet summarizing these activities, which is available from the Association. The booklet did not contain a full list of associations but missing information was being sought. Recent information was present on East-West cooperation, management and leadership training, physicians and HIV infection, continuing medical education and other professional topics. Topics of special interest were the health care reforms in Germany, and the role of the medical association in medical ethics in Romania.

The Forum now has two collaborative projects. A quality of care project has been developed since the previous meeting and the Forum adopted a set of recommendations for national medical associations about the development of quality of care measures (Annexes 1 and 2). A new initiative was a project on the role of physicians in suicide prevention.

A presentation from the WHO European Centre for Environment and Health, in Bilthoven in the Netherlands, drew attention to the risks to health of indoor exposure to pollutants. The topic of patients' rights has also been debated by the Forum in the past and a useful report had recently been produced on patients' rights in the countries of the Toronto Group by the Royal Dutch Medical Association.

Decisions had been made about financing the Forum in a regular way and had been successfully put into effect for the present meeting. A new Liaison Committee was elected. The next Forum will be hosted by the Federation of Hungarian Medical Societies in Budapest from 10 to 12 February 1994.

Annex 1

STATEMENT ON QUALITY OF CARE<sup>\*</sup>

Recommendations for national medical associations regarding quality of care development (QCD)

The European Forum of Medical Associations and WHO strongly recommends that national medical associations (NMAs) should take a leading role in DESIGNING quality of care development POLICIES with the overall aim of benefiting patient care. NMAs AND WHO RECOGNIZE THAT securing quality of medical care is primarily the responsibility of the physicians themselves. QCD is therefore both an ethical, educational and professional responsibility that is inherent to the independence of the profession.

To achieve this, NMAs should:

- promote the professional responsibility for QCD and institute the establishment of internal self-evaluative mechanisms among their members;
- promote the development of strategic quality markers by the individual specialties, including consideration of the personal experience of patients;
- institute external quality evaluation, which should include mechanisms for support, supervision and the establishment of protected comparative databases, retrieved from appropriate recording of patient-care data, managed by the profession to ensure that confidentiality for both patient and physician is guaranteed;
- disseminate information on best demonstrated practice and promote its constructive application;
- promote the description of good practice, for example by consensus conferences and other methods that produce statements on medical care, that can be used as reference in evaluative mechanisms; and
- acknowledge that, apart from the fact that research is the basis for QCD, there is need for research on QCD itself.

---

<sup>\*</sup> At its meeting in Berne on 26 March 1993, the Liaison Committee proposed the removal of the words in capitals. These changes do not alter the substance of the statement and will be presented to the next meeting of the Forum in February 1994. The "new" version is overleaf.

---

Annex 2

STATEMENT ON QUALITY OF CARE

Recommendations for national medical associations regarding quality of care development (QCD)

The European Forum of Medical Associations and WHO strongly recommends that national medical associations (NMAs) should take a leading role in quality of care development with the overall aim of benefiting patient care. Securing quality of medical care is primarily the responsibility of the physicians themselves. QCD is therefore both an ethical, educational and professional responsibility that is inherent to the independence of the profession.

To achieve this, NMAs should:

- promote the professional responsibility for QCD and institute the establishment of internal self-evaluative mechanisms among their members;
- promote the development of strategic quality markers by the individual specialties, including consideration of the personal experience of patients;
- institute external quality evaluation, which should include mechanisms for support, supervision and the establishment of protected comparative databases, retrieved from appropriate recording of patient-care data, managed by the profession to ensure that confidentiality for both patient and physician is guaranteed;
- disseminate information on best demonstrated practice and promote its constructive application;
- promote the description of good practice, for example by consensus conferences and other methods that produce statements on medical care, that can be used as reference in evaluative mechanisms; and
- acknowledge that, apart from the fact that research is the basis for QCD, there is need for research on QCD itself.

**Annex 3**

**STATEMENT ON HELP TO THE WAR-DEVASTATED POPULATIONS  
IN THE FORMER YUGOSLAVIA**

The European Forum of Medical Associations and WHO meeting in Utrecht, Netherlands, on 28 January 1993, expresses its profound regret that the human suffering and damage to health from the armed conflict in former Yugoslavia, to which it referred in its appeal last year, have substantially increased.

Once again, the physicians of Europe call for a cessation of hostilities and remind European states of their international obligations to peaceful reconciliation under various instruments, including the European policy for health for all, which defines peace as a prerequisite for health.

The Forum further condemns the attacks on hospitals and other health establishments.

Mindful of the appalling consequences of the aggression and violence imposed on an innocent population, and the need for support and assistance in rehabilitating those affected by these hostilities, the Forum urges national medical associations to offer support to their professional colleagues who are caring for the suffering children, women and men in republics of the former Yugoslavia.