EUROPEAN BOARD OF HAND SURGERY MEETING  
BUDAPEST, HUNGARY, November 17th, 2013

Present: T. Raatikainen (EBHS - UEMS Section for Surgery), P. Eadie (deputy representative EBOPRAS), M. Ceruso (Secretary UEMS MJC on Hand Surgery and past-Secretary General FESSH), Zs. Szabó (Secretary General FESSH), M. Calcagni (Chairman FESSH Examination Committee), J. Bahm (Chairman elect FESSH European Accreditation Committee), D. Warwick (Chairman of Training Committee FESSH)

1. The meeting starts at 9:00 am with the approval of the minutes of the last meeting in Antalya (May 2013) and the proposed agenda for this meeting.

2. M. Ceruso informs about the UEMS Council Meeting held in October 18th in Paris, France. Minutes of this meeting was sent to EBOT, EBOPRAS.

3. Zs. Szabó informs that bank account has been opened, but due to lack of reply from bank since July, therefore no payment has been made. FESSH plans 1 EUR/FESSH member to transfer to this account (cca 3000 EUR), which means a legal explanation for money transfer. This would make a break even in financing. Since Asszisztencia is dealing with EBHS matters, Asszisztencia should get a compensation for this work.

M. Ceruso proposes to decide about the costs of non FESSH delegates taking part in EBHS meeting. He suggests that the „mother federation“ of these participants needs to take expenses. Political and economical question is how FESSH would like these people be involved in EBHS work. Due to UEMS internal memorandum the sections should cover the fees of their activities, and Sections can have revenues from subscription (paid by delegating specialists), EACCME evaluation, Exam fees. FESSH never received this money, we should pose some questions to UEMS treasurer. M. Ceruso takes this task.

T. Raatikainen: it is difficult to say at MJC, who are the members.

Zs. Szabó: it is a problem, that in MJC only some of the sections (only hand surgery) pays membership fee.

M. Ceruso: sections and national associations are stronger than FESSH in the Board. FESSH is just a minority shareholder, max 49%. There can be other people here who are not interested in hand surgery and can vote against it. Therefore FESSH is interested in selecting only hand surgeons. Each member of the board should have an official nomination from their national societies. It is important that FESSH would be supported by the national medical societies.

Participants agreed to hire Asszisztencia for managing EBHS activity for a fee.

4. M. Ceruso: UEMS could assess standards and publish a list of Accredited Centers on the web. FESSH has HTC centers and training centers - this would be a future involvement of the Board: European accreditation based on European criteria (UEMS/FESSH) paired with European exam. Visitation is a leading element to accreditation, problem of board certification in other countries.

D. Warwick: visitation is too expensive

M. Calcagni, J. Bahm: local political considerations are not yet parallel with the European intentions, we are not aware of each country’s reality. Our decision has a very high political impact locally.
Zs. Szabó: this may be the next most important question that can be asked from delegates: level 1-2-3 accredited centers?

M. Ceruso: we are not in a hurry, this is the future, a trend, that accreditation is having more importance and FESSH should be informed about it. UEMS is in charge of professional representations, not the scientific societies: boards includes scientific societies, societies apply to national organizations to have it endorsed. A working group was set up, aiming to develop a process for accreditation of clinical skills center in Europe. Meeting in April 2014 in Rome, M. Ceruso will take part.

5. Assessments (exams)
- Linked with European Scientific Societies
- Run in parallel with national exams
- Linked with European educational pathways

M. Calcagni: this seems to be a self blowing balloon with accreditating the already accreditated things. A certain limit should be set.

M. Ceruso: this is just an information on what was presented at the meeting, what is happening now, this is just a vision, no decision on this has been made. We just should be aware of this. And use the chance of interacting where possible. „FESSH lived in a small village and moved to the city, which is dangerous. We need to learn how to live in a city.“

6. European Fellowships
ICOSET Conference: International Conference on Surgical Training and Education
April 2014 UK – L. Muir from examination committee may be asked to take part, FESSH pays. A guide for succesfully writing MCQs

7. T. Raatikainen: structure of the European Board in the future:
MJC – FESSH, EBOT, EBOPRAS: equal number of delegates, executives
MJC: UEMS Sections + Medical Associations: MA may nominate 2 national delegates directly to MJC
FESSH, EBOT, EBOPRAS: delegates through national societies or federation

EBHS:
- minimum number of sections needed for MJC is 2
- activity should be based on Hand Surgery
- speciality of HS is encouraged targetting to own section
- active delegate in Section for Surgery is mandatory
- „hand surgery“ specialists from OT –and PLA sections are mandatory

How to continue with Section for Surgery – MJC
- Finnish hand surgeon to SS
- Other national delegate (HU, S, A, CH?)
- Some national medical association nominate a hand surgeon directly to MJC (who pays?)

8. Report working group on post graduate training. Length: max 5 years (not less than 3) and based on competences (European directives on training)
9. M. Ceruso: EACCME progress report: need to have trusted providers - would it be Asszisztencia? J. Bahm: it can be but an application should not be with automatic signage since not all meeting is a teaching event, which is important.

10. Joining to Wound Healing MJC? - in general no, but M. Ceruso takes part at first meetings to get more information which helps to decide on later action.

11. EBHS website:
   - needs to be created independently
   - linked to FESSH and UEMS
   - documents uploaded
   - password protected area