



UEMS Multi-Disciplinary Joint Committee (MJC) Intensive Care Medicine

Minutes Meeting of the MJC ICM

Meeting Minutes

Date: Sunday, May 25, 2025

Time: 10:30–11:40 WEST

Location: Room “1.08,” ESAIC Congress, Lisbon (hybrid: onsite & Zoom)

Subject: UEMS Multi-Disciplinary Joint Committee (MJC) Intensive Care Medicine and EBICM Spring Meeting

Agenda:

1. Welcome

Meeting opened at 10:30 WEST.

Chair welcomed all participants and thanked ESAIC for hosting.

2. Roll Call and Introductions

In-person and Online attendees introduced themselves

3. Agenda Confirmation

Agenda confirmed as circulated; no modifications.

4. Approval of Minutes

Munich 2024 minutes approved.

Barcelona 2024 minutes: acknowledged as missing; Secretariat to circulate to full group.

5. Clarification of Structures (MJC vs EBICM)

Discussion on the composition of MJC vs EBICM:

MJC: representatives from UEMS Sections and national member states.

EBICM: MJC members + ESICM members.

EBICM functions as a working group of the MJC.

6. Report of the MJC President

Chair presented updated MJC membership list; noted increasing participation.

Highlighted ongoing work with EU institutions:

Critical Medicines Alliance & Act - addressing ICU drug shortages.

EU crisis response plan (DG SANTE) - pending publication Q2/Q3 2025.

KeepCaring project - staff wellbeing; survey and newsletter shared.

Care4Everybody study - EDI and gender equity.

Please see pptx attached

7. Secretary/Treasurer Report (E. Uhl)

Emphasized urgent need to update the Common Training Framework / ETR (last accepted 2014).

Proposed: build a working group with volunteers from MJC, EBICM, ESAIC, ESICM.

Topics for update: EPAs, ICU accreditation in Europe, alignment with training centers.

Financial status: no issues.

Discussion:

Agreement that ETR update should be prioritized by EBICM as MJC working group.

Proposal to launch a call for volunteers with a clear timeline (end of 2025 target).

Antonio Artigas raised the need for ICU accreditation to complement training standards.

8. External Representations

8.1 ESAIC / ESICM Input

Jan De Waele

End-of-life care must be integrated in ICU training.

Patient safety requires renewed focus; proposed to revisit the Vienna Declaration (2012) and update for EU advocacy.

Antimicrobial resistance and stewardship must be embedded in training.

Interprofessional communication is a key area for development.

Additional points:

Workforce migration (South-North Europe) is creating inequities; needs political recognition.

8.2 EJD

Upcoming EJD elections for UEMS section reps.

Draft policy paper on postgraduate training:

Fair and equal access to training.

Adequate mentoring and staff resources.

Accountability of both trainees and mentors.

Recent reports: From Tradition to Transition; From Mandate to Motivation.

8.3 Multidisciplinary Involvement

Concern noted: meetings dominated by anesthesiology & intensive care reps.

Past participation from cardiology, cardiac surgery, and surgery has declined.

UEMS office was contacted to promote sending delegates from these sections.

9. Correspondence

No formal correspondence received.

10. Future Meetings

Next meeting: Munich, Sunday 26 October 2025 (during ESICM Congress).

11. Any Other Business

Proposal to revive Vienna Declaration on Patient Safety as a joint EU-level advocacy initiative.

12. Closing

Meeting closed at 11:40 WEST.

Chair thanked participants for contributions and ESAIC for hosting.
