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Subject

Professional Autonomy and Responsibility
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<u>Sujet</u>

Indépendance professionnelle et responsabilité Présenté par le Dr BOTTU et Dr VAN LEEUWEN

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<u>Professional Autonomy and Responsibility</u>

.The health care systems undergo many and rapid changes. On the one hand there is the emancipated, increasingly well-informed patient whose expectations are high and whose demands for medical care are great; on the other hand politicians and managers are following policies of cost containment. Such conditions put pressure to bear on the relationship between a doctor and his patient. Professional autonomy, properly defined and used, can help to preserve a balance between needs, demands and responsibilities of the parties involved with a priority for patient's needs.

Maintaining this balance, whilst guaranteeing the best possible doctorpatient relationship as well as high-quality care, requires that patients be free to choose their physician and that the professional relationship between doctor and patient is protected by strict confidentiality.

Autonomy and responsibility cannot be separated. The professional autonomy is not absolute, but restricted by professional and social responsibility and the autonomy of patients. This means that doctors can only claim professional autonomy if they are also prepared to account for their professional conduct first of all to their patients and their peers and to society. Rules of conduct drawn up by the medical profession and instruments to enforce their application have always served to ensure medical care of the highest possible professional and ethical standards.

Clinical guidelines, Continuous Professional Development and systems of peer review all can contribute to maintaining a high quality of care and to its objective evaluation. Clinical guidelines can help to base clinical decisions on the best evidence of their appropriateness and cost-effectiveness. They also provide for transparency of medical conduct. They can therefore serve the interest of all parties involved: doctors, patients and third part payers.

Professional autonomy dictates that a doctor shall deviate from a guideline whenever he feels that this is in the best medical interest of the patient; professional responsibility requires him to be prepared to provide arguments—other than invoking professional autonomy—for his decision. If clinical guidelines are to have this function they must be relevant to clinical practice and involved practicing physicians in their elaboration.

Any intervention of third parties in the doctor-patient relationship must be judged as to its benefit to the patient as well as its respect for the doctor's professional autonomy. Any doctor, independents of his or her manner of employment, must be able any circumstances to provide the care that is medically indicated. This is equally the case for doctors who are in training for a medical speciality or who work as member of a team. The doctor-in-charge must recognise the responsibility and independence of the team member. Patients must be able to depend on this. Such trust is the basis of the patient-doctor relationship; professional autonomy is a right of patients.