

CGP146

POLICY FOR MEDICAL EDUCATION

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1. POLICY INTRODUCTION

National Ambulance (NA) strives to deliver safe and quality services in accordance with international evidence based best practices, Clinical Practice Guidelines, Patient Care protocols, policies and procedures approved and published by NA and to comply with all relevant Laws and Regulations. National Ambulance is committed to fostering a culture of professional development and has therefore developed capacity and capability to provide best standards of Education and Learning for employees.

NA clinical staff must act in the best interests of the patient, any relatives or guardians accompanying the patients and within their specified scope of practice and must use relevant qualifications, training, skills and experience to provide high standards of care.

This Policy sets the NA requirements for all clinical staff to complete appropriate Continuing Medical Education (CME) whilst employed in the organization. All clinical employees must undertake learning and development relevant to their position and maintain all qualifications, skills and competencies relevant to their employment. The NA education system is geared to monitor all staff education and training, this is used in the privileging to practice system. Therefore, staff CME's are audited on a regular basis. This Policy is related to the following Management component: Continuous Improvement.

The purpose of Continuing Medical Education is to ensure that all clinical staff can provide care based on current evidence based best practice. The policy gives clear direction to ensure that all clinical staff have knowledge of the requirements needed to keep their knowledge, skills and practice up to date and be fit to practice. It also ensures that NA employees have the relevant and up to date knowledge required to obtain and renew their DOH license, fulfill their contractual obligations and provide safe and highest quality emergency healthcare services to its stakeholders.

2. SCOPE

This Policy applies to all CME required by NA and by any relevant Regulatory body in the United Arab Emirates. It applies to all NA clinical employees: Emergency Medical Technician (Basic, Intermediate and Advanced), Pharmacist, Physician, and Nurse.

3. ROLES AND RESPONSIBILITIES

MEDICAL DIRECTOR / DELEGATE

Has responsibility for:

- Development, review and revision of this Policy and other related Policies and Procedures;
- Developing any required, associated training;
- Setting Key Performance Indicators and any metrics to monitor the effectiveness of this policy.

CHIEF OPERATIONS OFFICER

- Has responsibility for implementation of the policy including compliance of clinical operational staff.

DIRECTORS

- Have responsibility to ensure that any issues that arise from Continuing Education matters are managed according to NA Policies.

SUPERVISORS/MANAGERS

- Must ensure that this policy is communicated to staff when they commence employment with NA;
- Must ensure that any matters that arise from this policy are promptly communicated to senior management.
- Education manager must ensure that this policy is implemented from a provision of Education and training perspective.

CLINICAL STAFF

- Must read and understand the Policy;
- Must maintain CME as manifest by attaining the specified number of hours required according to their position and in accordance with the Appendices 1 & 2;
- Must communicate with their supervisor in a timely manner if they are unable to comply with any element of this policy.

4. POLICY STATEMENT

All NA staff mentioned in section 4 of this policy must read and understand this and other relevant National Ambulance Education policies, procedures and guidelines including but not limited to:

- Fitness to practice Policy (CGP 203)

Staff must take responsibility for maintaining their own professional portfolio and holding relevant certificates, cards and transcripts of courses. Fitness to practice must be maintained at all times.

4.1. REQUIRED NUMBER OF HOURS

The table at Appendix 1 indicates the number of hours and category of CME as specified by NA (in conjunction with DOH and other regulatory bodies) and required by clinical staff in accordance with their license category. It is mandatory to achieve these hours annually or pro-rata dependent on the date of commencement of employment contract, in accordance with group allocation.

All requirements for number of hours in Appendix 1 are per annum; all completion and documentation must be presented before 31 December each year. There is no upper limit for number of hours CME gained. Category 1 hours can fulfil the whole of the total hours required instead of the mix of Category 1 and 2; however Category 2 hours cannot be used to fulfil any Category 1 requirement.

Staff must make every effort to attend education activities and must notify their supervisors and/or the Education Department promptly if they are unable to do so in order in accordance with this policy to give

opportunity to others to attend an activity. Failure to comply with this policy may result in disciplinary action in accordance with the NA Disciplinary Policy COP102.

4.2. CATEGORIES OF CME ACTIVITIES

Categories of CME hours are in accordance with the *DOH Policy Categories of CME/CPD Activities* available on the DOH Website at:

<http://www.haad.ae/CME/LinkClick.aspx?fileticket=cGSwXltVrxl%3d&tabid=44>

Minimum numbers of credit hours of Category 1 requirements are detailed in the table at Appendix 1; all other CME can be credit hours Category 2, (non-accredited) CME in accordance with the HAAD Policy.

Category 1 activities must be accredited by Department of Health- Abu Dhabi (DOH) including but not limited to the following:

- Face to Face CME including but not limited to Life Support Training (See NA LMS)
- Evidence based Continuing education
- Performance improvement/clinical audit activities
- Enduring materials (printed, recorded or electronic)
- Postgraduate Medical Education and Supervised Clinical attachments
- Higher Education, completion of
- Journal Based continuing education
- Academic Activities such as Research, Published articles, peer review
- Internet point of care learning
- Recognized Internet based self-learning approved for Category 1 credit (2.5 ONLY)
- Procedural training skills
- Policy Development (only for approved and published policies with proof of significant contribution).

Category 2 activities are defined as all educational activities not accredited by DOH that:

- Comply with the DOH definition of Continuing Medical Education as detailed in Appendix 1.
- Comply with the DOH ethical opinion on 'Gifts to Physicians from Industry and on Ethical Issues in Continuing Education' (i.e. are not promotional)
- A healthcare professional considers to be worthwhile (see section 5.3 below)
- Note: Any CME activity not approved for Category 1 credit hours can be claimed as Category 2 credit hours if the health professional believes it was relevant to his/her practice. Activities within Category 2 are essentially of a self-learning nature, and must be beneficial to practice.

4.3. TYPES OF CME

Face to Face CME

The Education Department will ensure availability of sufficient and relevant face to face learning for all clinical staff; this includes life support courses and other courses relevant to the clinical services NA provides. It will also ensure that a robust service to enable clinical staff to book face to face courses is available through the Learning Management system.

All clinical staff must ensure that they complete the face to face courses in order to fulfil their relevant roles and responsibilities and their CME requirements as well as any mandatory educational courses required at on boarding.

Employees should not repeat the same face to face training courses (just to accumulate points) unless the training has expired, there should be variation in the courses taken to ensure a broad range of skills are kept up to date. It should also be noted that AHA Courses (BLS, ACLS, PALS) Qualifications are valid for two (2) Years and the NAEMT (PHTLS) Course Qualification is valid for Four (4) Years. This means that the Course CME's may be accumulated/use once only in the 2 or 4 year period respectively.

Licensure requirements and some Cat 1 Course validity are separate entities and may not always tally. Therefore, clinical practitioners may need to plan carefully to meet all the requirements for licensure.

All employees must understand and be proficient in using the National Ambulance Learning Management system at <https://training.nationalambulance.ae/>

National Ambulance staff who are qualified to instruct on specific category 1 or 2 CME courses will be allocated the relevant CME points if they have instructed on the full training course.

Electronic CME

National Ambulance will ensure availability of sufficient and relevant electronic learning for all employees and, where relevant the means by which to access the learning. National Ambulance will ensure that a system to complete some relevant eLearning is available through the Learning Management System at <https://training.nationalambulance.ae/>

All clinical staff must ensure that they complete the available eLearning courses in order to fulfil their relevant roles and responsibilities and their CME requirements in accordance with the table at Appendix 2 as well as any mandatory educational courses required to maintain their licensure.

Clinical staff may complete approved and recognized internet based self-learning, limited to in category 1 CMEs (see Appendix 2), but not limited in category 2 CMEs. Examples of DOH Accredited eLearning are available on the DOH CME site at

<http://www.haad.ae/CME/LinkClick.aspx?fileticket=FiwfhufqE3Q%3d&tabid=47> All clinical staff must notify their supervisor if they require clarification following any eLearning courses they complete.

External CME

External CME is permissible from either Category 1 or 2, Clinical staff must ensure that they obtain the documentary evidence of the attendance at any external CME event and submit this evidence in accordance with section 5.7.

***NB** - If no official CME certificate is provided for external CME courses then no CME points will be awarded by National Ambulance.

4.4. RELEVANCE OF CME

All CME activity must be relevant to the employee's position and scope of practice. Justification may be requested for any CME that is not deemed relevant to the employee's position and scope of practice.

4.5. GAP OF PRACTICE

Gap of Practice is when the health care professional is out of practice (in his/her specific field) for more than two years. If an employee has a gap of practice of more than two years they must obtain 4.5 hours CME per month for every month over the two years. This CME must be 50% Category 1 and 50% Category 2 hours.

The documentary evidence must be sent to the relevant person in the Licensing team as well as to the NA Education Coordinator to ensure that this information is available both for Education and Licensing purposes. Calculating required CME hours for gap of practice can be done at <https://www.haad.ae/cme/GapofPractice.aspx>

4.6. CME REQUIRED FOR LICENSING

Initial Licensing (On boarding staff)

The current CME requirements are detailed, for purposes of licensing with Health Authority Abu Dhabi or Ministry of Health in the Professional Qualifications Requirements (PQR) document at <http://www.haad.ae/haad/tabid/927/Default.aspx> and in the table 'Two Year CME Plan (see appendix 3)

Employees must complete the relevant CME courses required for licensure as part of the onboarding process when commencing employment with NA, minimum requirements (but subject to DOH/MoH exam exception standards)

1. Computer Based Testing – CBT (only 3 attempt permitted)

2. Objective Structures Clinical Examination – OSCE (only 3 attempt permitted)
3. Continuous Medical Education - CME

Failure to attain DOH licensing for any reason may result in review of the employment contract

License Renewal

Employees subject to DOH/MOH CME requirements for purposes of license renewal must submit documentary evidence at least one month prior to license expiry date to ensure sufficient time for approval and uploading of documents.

4.7. GROUP ALLOCATION FOR CMES

There are no group allocations for Education Courses (CME credited). The Education Department schedules more than the required number of courses to cater for all NA Staff with due consideration of shift patterns and accessibility on an annual basis. Bookings for face to face learning activities are managed through the LMS Portal. Staff are required to plan ahead and avoid leaving learning activities to the end of their license renewal period or will have to suffer the consequences of non-compliance.

4.8. BOOKING FACE TO FACE EDUCATION COURSES

Employees should use the NA Learning management system at <https://training.nationalambulance.ae/> to book face to face courses; if there is any substantial system downtime, employees should liaise with the NA Education coordinator.

The closing dates for sign-up to courses will be Seven (7) Days before a course commences, if an employee wishes to join a course after this they should email or phone the Education Manager for permission to book into the course. ALL NA Courses (CME's) are guided by, credited and regulated through DOH / MOH.

If a course has been booked every effort must be made to attend. Cancellation can be carried out by the employee (on the LMS system used to book the course) if it is at least ten working days prior to the course; any cancellations made less than ten working days before the course commences must be sanctioned by a supervisor by email or telephone and the information communicated to the Education Manager. Any cancellation must be based on one of the following reasons:

- Conflicting operational requirements;
- Sickness (with a valid sick certification);
- Emergency situation e.g. family bereavement.

Employees must make every effort to be punctual for courses, if there is an issue such as transport which will make an employee late, contact the Course Instructor or Education Manager by telephone.

If the above conditions are breached an employee could be held personally liable for the cost of the course or be subject to other disciplinary measures in accordance with the disciplinary proceedings as contained in COP 102 NA Disciplinary Policy.

4.9. COMMUNICATION

All employees must communicate their CME achievements either by recording them through the NA Learning Management system or, if there is any substantial system downtime, with the NA Education Co-coordinator.

Documentary evidence from all education activity outside NA such as Higher Degrees/Diplomas/Certificates should be provided to the NA Education Department and their supervisor/manager to ensure that employee details and credentials are kept up to date. If their credentials have changed employees should notify HR department to ensure that their personnel details are updated.

The responsibility is entirely on the individual to provide original documentary evidence of education activities. No evidence equals No CMEs can be awarded without original documentary evidence. This is especially important for non-course related CME where objectivity of CME needs to be visible and of objective demonstrable benefit. If it is of no justifiable objective clinical benefit it will not be accepted.

All CME achievements claimed must be accompanied by objective evidence of completion in the form of an independent certificate and a transcript of study. Approval of external and non-course related CME documents is subject to the discretion of the Education Manager and in the case of need for arbitration the CMA or delegate should be consulted.

External and non-course related CME evidence must be submitted for authentication and uploading within 1 month of the date on the certificate for verification purposes. After this time it will not be accepted. If the external CME cannot be verified it will not be accepted.

Falsifying CME will subject an individual to NA Disciplinary proceedings. It is also the responsibility of staff to ensure that they maintain an up to date portfolio of education, qualifications and experience with all relevant certifications.

5. RELEVANT LEGISLATION

International, federal or local legislation and circulars relevant to this Policy. Full detail on this legislation can be found in QHP109 Legal Register.

Code, Name of Legislation	Jurisdiction
DOH	Jurisdiction here

6. FEEDBACK

Any feedback or suggestions for improvement to this Policy, Processes or Procedures can be submitted to ghse@nationalambulance.ae

7. DOCUMENT CONTROL AND OWNERSHIP

A review and update of this document will take place as necessary, when changes occur that identify the need to revise this Policy such as changes in roles and responsibilities, release of new legislative or technical guidance, or identification of a new policy area.

This document ownership for editing is identified as:

- Medical Director / Delegate

This controlled document is managed / overseen by [Procurement and Tendering Committee and/or Audit and Risk Management Committee and/or HR and Compensation Committee].

Change Brief

Version No.	Date	Change
1	19 May 2014	New Policy
2	11 July 2014	Version 2 including clarifications in hours required at each level
3	08 July 2015	Version 3 gives clarification on numerous points and specifies group allocations.
4	19 January 2016	Updating Appendix 3 to reflect courses currently delivered
5	18 August 2016	Risk Based Thinking compliance statement added.
6	September 2019	Policy Due for Update, Title Changes, CME Corrections. Removal of Group Training Schedule Replace HAAD by DOH

CEO Approval

Board Member Verification

Appendix 1

Position/ Title	Min. Total required hours	Min. hours Category 1	Suggested Min. hours Category 2
EMT Basic (DOH)	20	10	10
Ambulance Technician (MOH)	20	10	10
DOH EMT Intermediate	25	15	10
DOH EMT Advanced-(Paramedic)	30	15	15
DOH EMT Advanced-(Paramedic) with Extended Scope of Practice	35	20	15
Pharmacist	20	10	10
Physician	40	20 (min. of 10 hours of this 20 must be in the relevant specialty)	20
Nurse	20	10	10

***For Review – above hours do not reflect DOH**

Allied Healthcare Workers: EMT's (B/I/A): 10hours /yr

Doctor: 40hours/yr

Appendix 2

Position/ Title	Hours of eLearning allowed Category 1 CMEs
EMT Basic (DOH)	2.5 hours can be attained from recognized Internet based self-learning approved for Category 1 credit
Ambulance Technician (MOH)	2.5 hours can be attained from recognized Internet based self-learning approved for Category 1 credit
DOH EMT Intermediate	5 hours can be attained from recognized Internet based self-learning approved for Category 1 credit
DOH EMT Advanced-(Paramedic)	5 hours can be attained from recognized Internet based self-learning approved for Category 1 credit
DOH EMT Advanced-(Paramedic) with extended scope of practice	5 hours can be attained from recognized Internet based self-learning approved for Category 1 credit
Pharmacist	2.5 hours can be attained from recognized Internet based self-learning approved for Category 1 credit
Physician	30 hours can be attained from recognized Internet based self-learning approved for Category 1 credit, 5 hours of which will be counted for category 1 hour as the other 25 will be counted towards category 2 hours
Nurse	2.5 hours can be attained from recognized Internet based self-learning approved for Category 1 credit