

# COMPARATIVE CME/CPD FRAMEWORKS AND ACCREDITATION SYSTEMS IN GCC



## AUTHORS:

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## Background:

The State of Qatar's National Health Strategy 2011-2016 required the development and implementation of a CME/CPD framework and CPD accreditation system. The Accreditation Department, QCHP was given the responsibility of creating a CPD accreditation system to support the development of CPD activities included within the CPD framework, a set of CME/CPD standards and a means of ensuring compliance through a process of accreditation. A number of GCC countries had previously developed a CPD system for their healthcare practitioners.

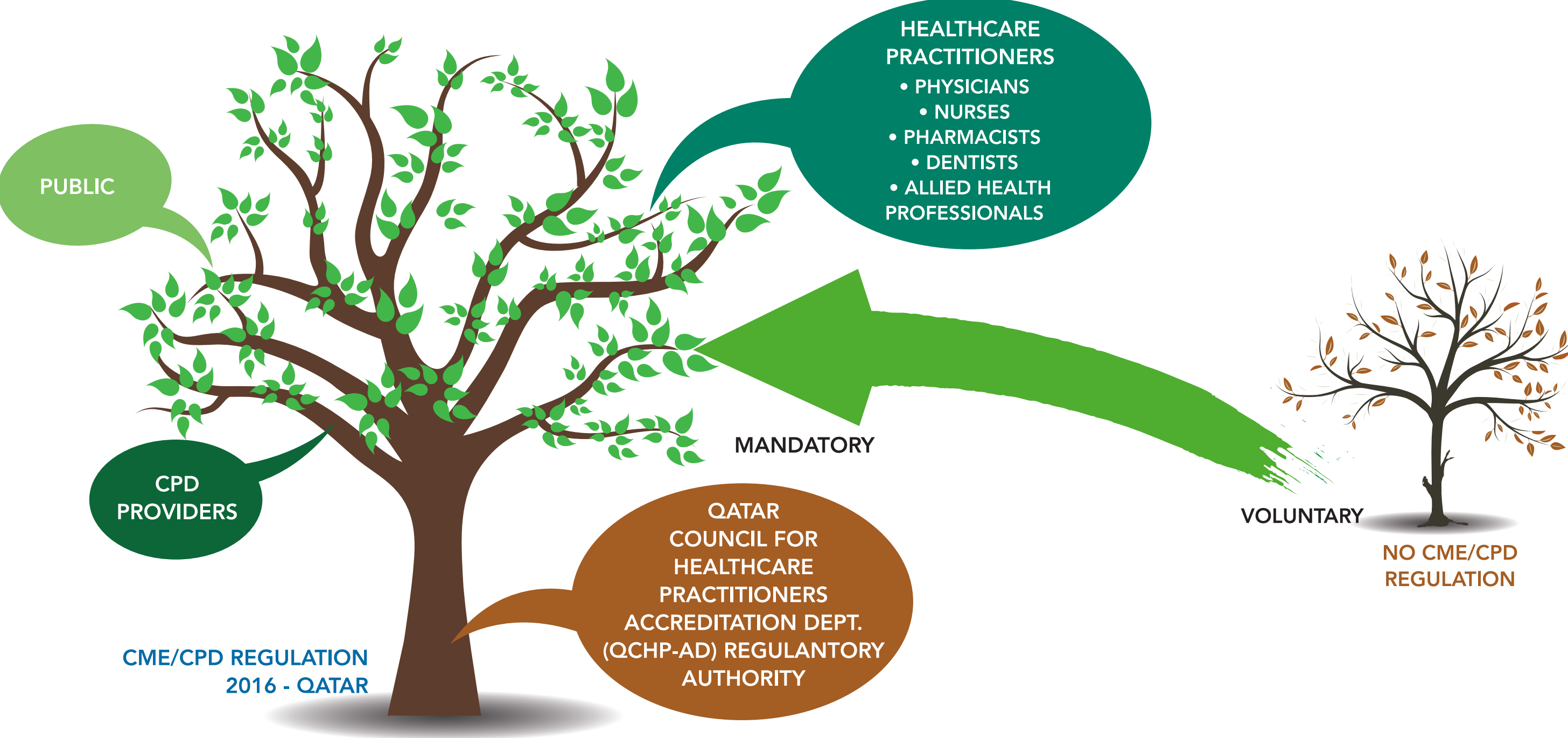
The main objective of this study was to review existing CPD systems among Gulf Cooperation Council (GCC) countries including Saudi Arabia, Kuwait, UAE, Oman, and Bahrain, to compare their characteristics, and assess their applicability for Qatar.

## Method:

Descriptions of each country's CPD system was obtained from multiple sources including publications (i.e. monographs, guides or papers published in the peer-reviewed journals), as well as information posted on official websites of the relevant health regulatory authority in each GCC country. The data abstraction process focused on the following elements: the type of activities included; the applicability to which health professions; the category-specific requirements established; whether participation was mandatory or voluntary; the process for reporting CPD activities; and the existence system.

The data abstracted was summarized by key elements for the CPD systems in each GCC country.

## Results:



Starting in 2000, mandatory CME/CPD systems have now been implemented in 4 of 5 GCC countries (excluding Qatar) as a condition of licensure renewal. The governance of the CME system varied from professional bodies (Kuwait Institute of Medical Specialties) to health authorities or Ministries of Health (Dubai Health Authority (DHA) and Health Authority Abu Dhabi (HAAD)). Within the UAE regulation is provincial with not all provinces mandating participation in CME/CPD.

Mandatory participation in CME/CPD varied by profession: physicians and pharmacists in all 4 GCC countries followed by nurses, and allied health professions (3); traditional complementary and alternative medicine (2) and technicians (2).

The requirements for engaging in either group learning or self-learning were similar for specific professions but credit expectations did vary across health professions with the highest for physicians followed by pharmacist and nurses. No GCC country had requirements for engaging in assessment activities (see table 1).

CPD cycle length/duration varied from 1 to 5 years with both online and manual submission of credits a requirement in all 5 GCC countries.

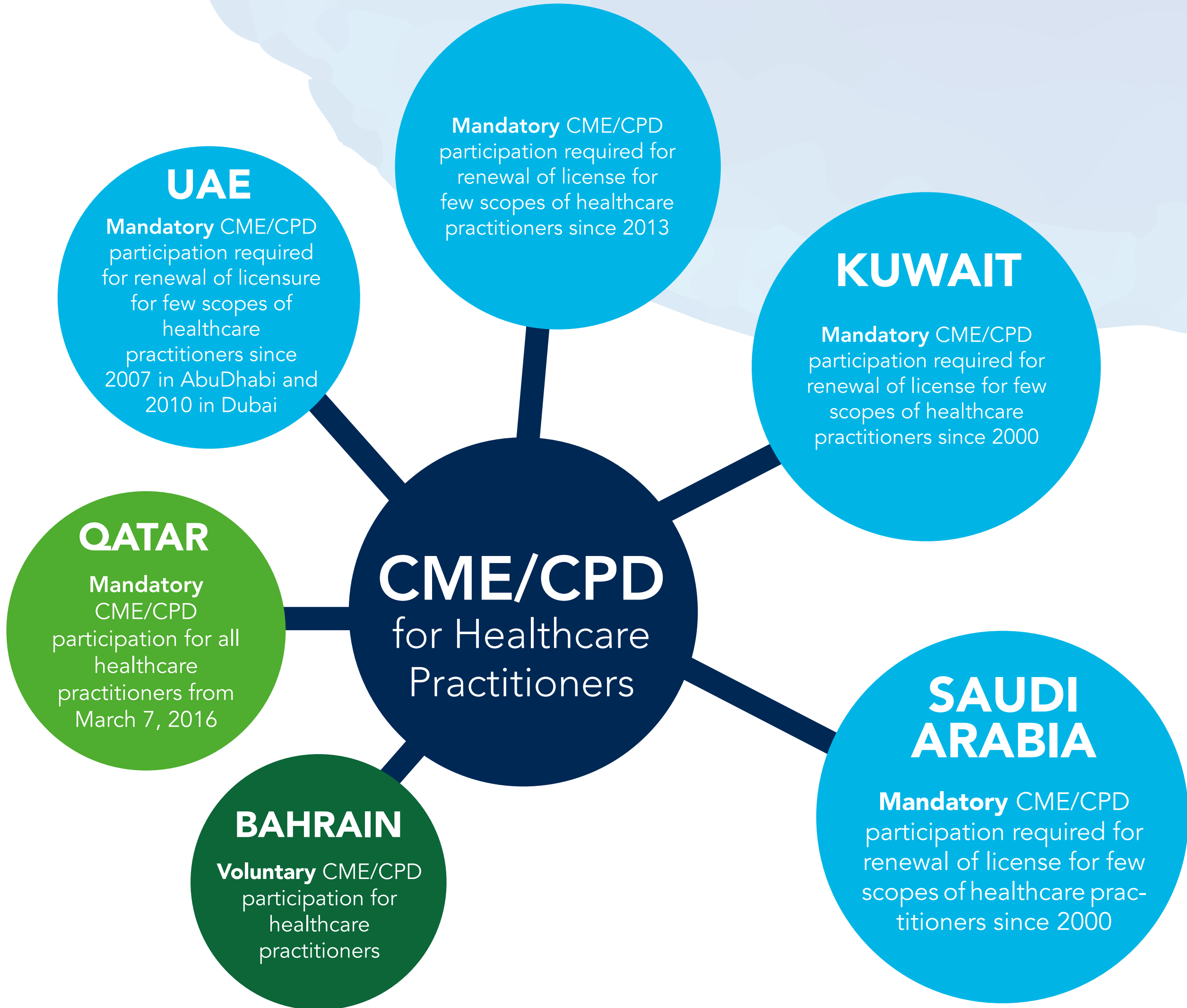
The development of CPD accreditation systems was more limited with the Saudi Commission for Health Specialties (SCHS) and Kuwait Institute of Medical Specialties (KIMS) implementing provider-based CME/CPD accreditation systems and UAE and Oman implementing activity-based CME/CPD accreditation systems.

## Take home message:

Development of an innovative CME/CPD framework and accreditation system requires a foundation that intentionally integrates local, regional and international best practices.

## Discussion:

Requirements for mandating engagement in CME/CPD varies across GCC members. Analysis of regional CME systems across GCC countries was useful in identifying the strategies, and requirements of the different CME/CPD systems to inform the development of the planned mandatory CME/CPD system in Qatar.



## Conclusion:

The development of a national CME/CPD framework, credit system and CPD accreditation system will be designed to support the National Health Strategy for Qatar. The implementation of a mandatory CME/CPD system for Qatar will be:

- Applicable to all licensed healthcare practitioners.
- Linked to renewal of licensure
- Supported by a hybrid CPD accreditation system comprising of Provider and Activity based accreditation system
- Intended to promote lifelong learning, inter-professional education and enhance quality of care.

## Lessons learned:

The development of a National CME/CPD system is informed by:

- Regional requirements within the GCC.
- Mandating CPD requirements for multiple licensed healthcare practitioners is consistent with other GCC countries
- The learning activities within the CPD framework will include group-learning, self-directed learning as well as assessment-based learning to support different patterns of learning.
- Establishing an electronic system for CPD reporting by practitioners would eliminate the necessity of paper-based reporting.

## References

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2. Regulation Manual, Saudi Commission for Health Specialties
3. Dr. Awatif Alghamdi, BSc Health SER ADM. MSc Ed.D., Challenges of Continuing Medical Education in Saudi Arabia's Hospitals, September 2012
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Table 1: CME/CPD Requirements across GCC Countries

CME/CPD Credit requirements per year	Saudi Commission for Health Specialties (SCFHS) Saudi Arabia	Kuwait Institute for Medical Specialization (KIMS), Kuwait	Health Authority Abu Dhabi (HAAD) in UAE	Dubai Health Authority (DHA) in UAE	Oman Medical Specialty Board (OMSB)	Bahrain	CPD System for Qatar (QCHP)
Mandatory/Voluntary	Mandatory since 2000	Mandatory since 2000	Mandatory since January 2007	Mandatory since July 2010	Mandatory since 2013	Voluntary	Mandatory in March 2016
Physicians & Dentists	40	50	40	40	40		40
Pharmacists	25	25	20	20	30		40
Nurses	20	-	20	20	20		40
Allied Health	20	-	10	10	20		40
Technicians	10	-	-	-	10		40
Traditional, Complementary and Alternative Medicine	20	-	10	10	-		-
CPD Cycle Length	3 years and 5 years	5 years	1 year	1 year	3 years	-	2 years
Governance of the CPD system	Saudi Commission for Health Specialties	Kuwait Institute for Medical Specialization	Health Authority of Abu Dhabi (Ministry of Health)	Dubai Health Authority (Ministry of Health)	Oman Medical Specialty Board		Qatar Council for Healthcare Practitioners
Reporting of CPD activities	Manual and Electronic	Manual and Electronic	Manual	Electronic	Electronic	-	Electronic
Type of CME/CPD Accreditation System	Provider-based	Provider-based	Activity-based	Activity-based	Activity-based	No CPD accreditation system	Provider and Activity based

**\*Category-1:** Group learning CPD Activities: Conferences, symposia, seminars and workshops  
Educational rounds (including morning report in healthcare facilities, Grand rounds, Morbidity and Mortality rounds, tumor boards and case-based discussions)  
Journal clubs  
Online synchronous and blended learning activities

**\*\*Category-2:** Self-directed learning Activities: Under clinical practice: Answering self-identified clinical questions, Reading journals, books or monographs, Completing self-learning modules, Viewing podcasts or webcasts  
Under Education and training: Postgraduate degrees or diploma programs recognized by a relevant professional body, Preparation for formal teaching activities, Development of assessment tools or activities (including Objective Structured Clinical Examination (OSCE), MCQ or short answer questions), Educational sessions to enhance the skills of examiners, Mentoring students, trainees, or peers  
Under Research and Quality Improvement: Development of a research grant or peer-reviewed publication, Peer review of a clinical practice, Peer review for journals or research grants, Participating in or leading quality improvement projects

**\*\*\*Category-3:** Assessment Activities: Accredited Assessment activities: Direct observation of procedures or performance in practice, Knowledge assessment programs, Simulation, Clinical audits, Multi-source feedback  
Other Assessment: Feedback from annual performance review, Feedback on teaching effectiveness