UEMS Working Group
Post Graduate Training

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UEMS Current Working

Groups

Continuing Medical Education and Professional Development (CME-CPD)

eHealth

Future Structure of the UEMS

Postgraduate Training

Quality in Patient Care

Specialist Practice in current health systems
Our working group WGPGT (Working Group for Post graduate Training) has been one of the most active WGs for decades. Created a lot of valuable documents about UEMS policies by means of its hardworking and devoted chairs and members.

We are looking for voluntary members from S&Bs as well as national delegates.
UEMS Policies

- UEMS Introduction to European Training
- UEMS policy on CME
- UEMS policy on CPD (BASEL Declaration)
- UEMS policy on Training Duration
- UEMS policy on Medical Specialist Training
- UEMS policy on Autonomy in Medical Practice
- UEMS policy on the European Electronic Network
- UEMS policy on Promoting Good Quality of Care

www.uems.net
UEMS Publications

UEMS Charters & Declarations

Charter on Specialist Training (1993)

Charter on Continuing Medical Education (1994)

Charter on Quality Assurance in Specialist Practice in the EU (1996)

Charter on the Visitation of Training Centres (1997)

Charter on Continuing Professional Development - Basel Declaration (2001)

Declaration on Promoting Good Medical Care (2004)

Ensuring the Quality of Medical Care - Budapest Declaration (2006)

WG PGT

- While CESMA is mainly interested in the end product, (Summative assessment) part of the PGT, our working group is trying to work on harmonization of the earlier phases of PGT and try to organize studies that takes a picture of the current situation and solutions to harmonize training and create papers about this. We are now working on Access to the PGT and our main battle is
WG PGT

- Shall share the upcoming “EACMSQ”'s backbone with CESMA [and “0rzone-UEMS cooperation co.”], under UEMS executive!
WHEN and HOW is still vague, but we are expecting an organization similar to EACCME!
We are working on different aspects of PGT

We have been trying to gather current information, and update Chpt 6s.

This is to harmonize and standardize PGT (and exams?)
CHARTER on TRAINING of MEDICAL SPECIALISTS in the EUROPEAN COMMUNITY
Charter adopted by the Management Council of the UEMS, October 1993

- Chapter 1 - National Authority
- Chapter 2 - General Aspects of Training of Medical Specialists
- Chapter 3 - Requirements for Training Institutions
- Chapter 4 - Requirements for Chief of Training
- Chapter 5 - Requirements for Trainees
- Chapter 6 - Requirements for Specialty (to be filled in by the appropriate UEMS Specialist Section)
6. CHAPTER 6, REQUIREMENTS for the particular SPECIALTY: to be filled in by the appropriate UEMS Specialist Section

6.1. Article 1

**CENTRAL MONITORING AUTHORITY** for Individual Specialties at EC level:

1.1. There should be a monitoring authority for each individual specialty in the EC.
   This may be the UEMS/Specialized Section itself, the European Board or a body with close links with these institutions.

1.2. General standards for recognition of institutions and teachers in the specialty should be laid down.

1.3. A programme for quality assurance of training in the specialty should be laid down.

1.4. The system for recognition of quality in the specialty should be monitored.

1.5. The system for manpower planning in the specialty should be monitored.
6.2. Article 2

**GENERAL ASPECTS of TRAINING in the SPECIALTY:**

Specific rules should be laid down for the following aspects:

2.1. Selection for and access to the specialty.
2.2. Determination of the adequate duration of the training in the specialty.
2.3. Definition of the common trunk in training in the specialty.
2.4. Implementation of a training programme with specified contents and a training log-book in the specialty.
2.5. Implementation of a system of quality control and assessment of training in the specialty.
2.6. Implementation of numerus clausus, if necessary, within the framework of man-power planning policy in the specialty.
2.7. Facilitation of training periods abroad in the EC during the training for the specialty.
6.3. Article 3

**REQUIREMENTS for TRAINING INSTITUTIONS**

Specific rules should be laid down concerning:

3.1. Recognition of training institutions for the specialty.

3.2. The size and diversity of the training institution or group of institutions, the number of admissions to the institution(s) including day care, outpatient (ambulatory) activity and inpatient care, the number and diversity of practical procedures as well as appropriate access to other relevant specialties.

3.3. Quality assurance in the institution. Visitation of training institutions by the National Authority should be conducted in a structured manner.
6.4. Article 4

**REQUIREMENTS for TEACHERS within the specialty:**

4.1. The chief of training should have been practising the specialty for at least 5 years after specialist accreditation or should have completed a specific training programme before recognition as such. There should be additional teaching staff.

The teacher and the staff should be practising the specialty in its full extent.

Sub specialized teachers may be recognized by the National Authority for periods during the training.

4.2. The teacher should work out a training programme for the trainee in accordance with the trainee's own qualities and the possibilities of the institution, which also complies with national rules and EC Directives and considers UEMS/European Board recommendations.

4.3. The ratio between the number of qualified specialists in the teaching staff and the number of trainees should provide a close personal monitoring of the trainee during his/her training and provide adequate exposure of the trainee to the training.
6.5 - Article 5

**REQUIREMENTS for TRAINEES**

5.1. Experience: To build up his/her experience, the trainee should be involved in the treatment of a sufficient number of inpatients, day care patients, and outpatients (ambulatory) and perform a sufficient number of practical procedures of sufficient diversity.

5.2. The trainee should have sufficient linguistic ability to communicate with patients and to study international literature and communicate with foreign colleagues.

5.2. The trainee should keep his/her personal logbook or equivalent up to date according to national rules and EC Directives as well considering UEMS/European Board recommendations.

Training requirements for each specialty separately: see Chapter 6
Problems:

- It is a dynamic ever-changing and evolving process. We have difficulty reaching S&Bs for current CHPT 6s,
  - some does not exist, answer
  - some are old
  - some are up dated but sick of keep answering or sending the same document.
- Written in very different formats and length, 3-4 to 30-40 pages long
- No web support
Solutions:

- Create a database by means of an easy to fill template for S&Bs to fill in
- Easy to understand and fill in the blanks like simple format, with annexes etc for detailed information.
- Compatible with electronic editing, comparison and storing etc
- Compatible with the ECAMSQ studies. Using same language with modes of assessments. (Cardiology, Anesthesiology, Intensive care medicine..)
WG PGT

Appreciate any help from S&Bs

Thank you!