



UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS

Av. de la Couronne, 20, Kroonlaan
B-1050 BRUSSELS
www.uems.net

tel: +32-2-649.5164
fax: +32-2-640.3730
e-mail: SG@uems.net

UNION EUROPEENNE DES MEDECINS SPECIALISTES

U.E.M.S.

European Training Charter for Medical Specialists, UEMS 1995

EMERGENCY MEDICINE (EM)

Chapter 6, Charter on Training of Medical Specialists in the EU

September 2011

Requirements for the Specialty of Emergency Medicine (EM)

Emergency Medicine is an independent medical specialty based on the knowledge and skills required for the prevention, diagnosis and management of the acute and urgent aspects of illness and injury affecting patients of all age groups with a full spectrum of undifferentiated physical and behavioural disorders.

It is a specialty in which time is critical. The practice of Emergency Medicine encompasses the pre-hospital and in-hospital reception, resuscitation and management of undifferentiated urgent and emergency cases until discharge from the Emergency Department or transfer to the care of another physician.

It also includes involvement in the development of pre-hospital and in-hospital emergency medical systems.

Emergency Physicians care for patients with a wide range of pathology from the life threatening to the self limiting and from all age groups. The attendance and number of these patients is unpredictable and they mostly present with symptoms rather than diagnoses. Therefore the provision of care needs to be prioritised, and this is a dynamic process. The approach to the patient is global rather than organ specific.

Patient care includes physical, mental and social aspects. It focuses on initial care until discharge or referral to other health professionals. Patient education and public health aspects must be considered in all cases.

This Charter follows the structure established by the relevant UEMS policy paper. Its five Articles relate to:

- 1) A central monitoring authority for EM, including quality assurance and personnel planning
- 2) General aspects of training, including selection and access, duration, common basis, supervision, practical training and the use of a log book
- 3) Requirements for training institutions, including recognition, size of institutions and quality assurance
- 4) Requirements for trainers
- 5) Requirements for trainees

Article 1 General rules on monitoring, accreditation and quality management of postgraduate training in EM

1.1 Central monitoring authority for EM

At EU level the monitoring authority for the specialty of EM is the European Board of Emergency Medicine which works in conjunction with the Multidisciplinary Joint Committee on EM. This Committee was established in 2005 and works closely also with the European Society for Emergency Medicine.

At a national level the training in EM is regulated by national authorities, which set standards in accordance with national rules and EU legislation as well as according to the requirements of the European Board of Emergency Medicine.

1.2 Recognition of Trainers and Training Institutions

The standards for recognition of training institutions and trainers are matters for each National Training Authority (NTA), in accordance with national rules and EU legislation, as well as the requirements of the European Board of Emergency Medicine.

Each Training Programme (TP) must be recognised at national level in accordance with EU legislation as well as UEMS recommendations. The responsibility and authority for organising, coordinating, managing and assessing the individual training centre and the training process must be clearly identified and supervised in each centre by the National Training Authority responsible for the Training Programme in EM in the country.

Emergency Medicine trainers and training centres must be accredited in conformity with national and European standards.

1.3 Quality assurance

The NTA and the appropriate professional bodies must establish a mechanism for evaluation of the training process that monitors each of the following areas:

a) Evaluation of training centres

- Training Centres must be evaluated and accredited in accordance with national rules and EU legislation as well as UEMS recommendations.
- Evaluation of training centres must be conducted by visitation by the National Training Authority in a structured manner.
- Evaluation must also take into account the spectrum of services within the hospital.
- Repeated negative evaluations can result in the withdrawal of accreditation of a Training Centre.

b) Evaluation of training programme

- Regular internal and external evaluation of the Training Programme must be assured in a systematic manner both as regards adherence to the curriculum and the attainment of educational goals.
- Both trainees and trainers must have the opportunity to evaluate the programme confidentially and in writing at least annually.
- External evaluation must be made by visiting representatives of the NTA.
- The Training Programme Director (TPD) must use the results of all evaluations to improve the Training Programme.

c) Evaluation of trainers

- The TPD must evaluate trainer performance at least annually.
- This appraisal should include evaluation of clinical teaching ability, clinical knowledge, professional attitude and academic activities.

d) Evaluation of trainees

- Specialist education and training must include continuous assessment which tests whether the trainee has acquired the requisite knowledge, skills, attitudes and professional qualities to practise in the specialty of Emergency Medicine. This must include formal annual and final evaluations.
- The annual evaluation must formalise the assessment of a trainee's competence to promote the trainee's improvement.
- Upon completion of the Training Programme the trainee must submit his/her portfolio.
- The TPD must provide an overall judgment about the trainee's competence and fitness to practice as an independent specialist in Emergency Medicine.
- The individual assessment should include a final formal examination (written, oral and practical).

e) Re-accreditation of Emergency Physicians

- All emergency physicians must follow national regulations for re-accreditation.

1.4 Manpower Planning in the specialty of EM

The NTA must implement and monitor a system of manpower planning for the specialty and ensure an appropriate maximum number of training positions.

Article 2 General aspects of training in the specialty of EM

2.1 Procedure for selection of Trainees

Candidates for training in the specialty of EM should be physicians licensed in a country of the EU or they should have an equivalent qualification approved by the host country. It is the primary responsibility of each National Training Authority (NTA) to establish further criteria for entry into their training programme.

The selection and appointment of trainees must be in accordance with recognised selection procedure and agreed entry requirements in each country.

2.2 Number of Trainees per Training Programme

Trainees must be in appropriately remunerated positions. To ensure training and teaching of high quality the NTA must approve the maximum number of trainees per year and/or per Training Programme for accreditation purposes.

The number of training posts must be proportionate to established criteria, including clinical/practical training opportunities based on case mix and volume, supervisory capacity and educational resources.

2.3 Implementation of Training Programmes in EM

Recognised specialist training in Emergency Medicine must conform to national and institutional regulations and must take into account the individual needs of trainees.

It must encompass integrated and updated practical, clinical and theoretical instruction. It must be based on clinical participation and responsibilities in patient care.

The trainee must attain the core competencies described in the European Curriculum for Emergency Medicine.

The trainee must learn through exposure to a full range of clinical cases and be able to appreciate the issues associated with the delivery of safe, high quality and cost effective health care.

The trainee must be involved in the treatment of a sufficient number of patients and perform an adequate number of procedures of sufficient diversity.

Administrative, teaching, professional and leadership skills must also be included in the Training Programme.

Article 3 Requirements for training institutions

Training institutions will be approved and accredited as a training facility by the responsible National Training Authority. The following are the general requirements for any such institution:

3.1 Training Centre (TC)

This is a hospital or group of hospitals which together receive an appropriate case-mix of patients in their Emergency Departments and therefore offer the trainee experience in the full range of the specialty of EM and appropriate access to other relevant specialties.

3.2 Training Programme

Each Training Centre develops its Training Programme in accordance with national rules and EU legislation, as well as the requirements of the European Board of Emergency Medicine and the European Curriculum for EM.

3.3 Training Programme Director

The Training Programme Director is a physician who works solely in an Emergency Department (ED) within the Training Centre and who must be either a specialist in Emergency Medicine (in countries where the speciality has been recognised for at least 5 years) or a specialist who has been practising Emergency Medicine for at least 5 years.

3.4 Training Centre Requirements

Each Training Centre must encompass relevant specialties in order to give the trainee appropriate access and the opportunity of developing their clinical skills and fulfilling the curriculum and their log-book/portfolio.

Within the Training Centre there should be an ED with a significant patient load which has an appropriate case-mix and which provides care at all hours. The Centre must provide time, space and opportunities for:

- a) Clinical sessions
- b) Practical and theoretical study with well resourced physical or virtual library
- c) Research activities
- d) Critical appraisal of medical literature.
- e) Teaching with appropriate practice and audio-visual aids

Article 4 Requirements for trainers

The faculty for Emergency Medicine must include a Training Programme Director (TPD) and an appropriate number of trainers. Trainers should devote a large

proportion of their professional efforts to training and should be given sufficient time to meet the educational requirements of the programme.

All physicians should participate in practice-based training as emphasised by the World Federation for Medical Education, WFME.

4.1 Accreditation of Trainers

The Training Programme Director must be approved by the National Training Authority and fully direct the Training Programme.

Trainers must be either accredited by the NTA or selected by the TPD and accept responsibility for the day to day supervision and management of trainees as delegated by the TPD.

In general, to be recognised as a trainer, a physician should:

- a) Be certified as a specialist in EM by the responsible national authority in his or her country.
- b) Be recognised as a trainer in EM by the responsible national authority in his or her country.
- c) Demonstrate his or her clinical activity as being within this discipline.
- d) Actively participate in training and research in EM with regular publications.

Specialised trainers in units of specialties closely related to Emergency Medicine may be recognised by the National Authority for specified periods of training

4.2 Ratio of Trainers to Trainees in each TC

There must be a sufficient number of trainers in the EDs to ensure adequate clinical instruction and supervision of trainees as well as efficient, high quality clinical care.

The ratio of trainers to the number of trainees must be sufficient to allow training to proceed without difficulty and to ensure close personal interaction and monitoring of the trainee during their training.

The recommended optimal trainer/emergency medicine trainee ratio is 1 to 2 during clinical work in the Emergency Department.

Article 5 Requirements for Training in EM

5.1 Duration of Training in EM

According to the UEMS Charter on Training the duration of training of medical specialists must be sufficient to ensure training for independent practice of the specialty after the completion of training.

European medical specialty training is governed by EU Directive 2005/36/EC and is set at a minimum of 5 years of full-time training in EM as a primary medical specialty.

5.2 Other aspects of Training

The trainee should gain experience of clinical diagnosis and management in the areas defined in the European Curriculum for Emergency Medicine.

Within the 5 years of Emergency Medicine training a minimum of 3 years must be spent inside an Emergency Department accredited for training.

Where part of the five years training course is spent in the units of other specialties, they themselves must also be approved as training institutions by their National Training Authority. This training should be spent in the units of specialties closely related to Emergency Medicine.

5.3 Trainee's Log-Book/Portfolio

EM trainees must acquire a number of skills as part of their training.

The trainee should keep a personal log book (physical or virtual) or equivalent of his/her training activities which follows the course of his or her training and present this before certification.

The personal logbook will contain reports from the trainer giving an account of the trainee's active participation in the work of the unit and his or her publications, scientific and research works, including relevant theses.

The TPD or his/her deputy must inspect the trainee's log-book/portfolio at regular intervals to ensure that it is in accordance with the requirements of the Curriculum.

The European Board attaches considerable importance to the details of the training programme as shown in the log-book/portfolio.

5.4 Curriculum in Emergency Medicine

The national curriculum in EM must cover knowledge, skills and expertise which the trainee in Emergency Medicine must achieve, in accordance with the European Curriculum for EM, It should include:

1. Core Competencies of the European Emergency Physician
 - a) Patient care
 - b) Medical knowledge and clinical skills
 - c) Communication, collaboration and interpersonal skills
 - d) Professionalism, ethical and legal issues
 - e) Organisational planning and service management skills
 - f) Education and research.
2. System-Based Core Knowledge
3. Common Presenting Symptoms
4. Specific Aspects of Emergency Medicine
5. Core Clinical Procedures and Skills.

European Board of EM – Sept 2011

