



# UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES EUROPEAN UNION OF MEDICAL SPECIALISTS

*Association internationale sans but lucratif*

*International non-profit organisation*

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## **Training Requirements for the Specialty of ...**

*European Standards of Postgraduate Medical Specialist Training*

*(old chapter 6)*

### **Preamble**

The UEMS is a non-governmental organisation representing national associations of medical specialists at the European Level. With a current membership of 34 national associations and operating through 39 Specialist Sections and European Boards, the UEMS is committed to promote the free movement of medical specialists across Europe while ensuring the highest level of training which will pave the way to the improvement of quality of care for the benefit of all European citizens. The UEMS areas of expertise notably encompass Continuing Medical Education, Post Graduate Training and Quality Assurance.

It is the UEMS' conviction that the quality of medical care and expertise is directly linked to the quality of training provided to the medical professionals. Therefore the UEMS committed itself to contribute to the improvement of medical training at the European level through the development of European Standards in the different medical disciplines. No matter where doctors are trained, they should have at least the same core competencies.

In 1994, the UEMS adopted its Charter on Post Graduate Training aiming at providing the recommendations at the European level for good medical training. Made up of six chapters, this Charter set the basis for the European approach in the field of Post Graduate Training. With five chapters being common to all specialties, this Charter provided a sixth chapter, known as "Chapter 6", that each Specialist Section was to complete according to the specific needs of their discipline.

More than a decade after the introduction of this Charter, the UEMS Specialist Sections and European Boards have continued working on developing these European Standards in Medical training that reflects modern medical practice and current scientific findings. In doing so, the UEMS Specialist Sections and European Boards did not aimed to supersede the National Authorities' competence in defining the content of postgraduate training in their own State but rather to complement these and ensure that high quality training is provided across Europe.

At the European level, the legal mechanism ensuring the free movement of doctors through the recognition of their qualifications was established back in the 1970s by the European Union. Sectorial Directives were adopted and one Directive addressed specifically the issue of medical Training at the European level. However, in 2005, the European Commission proposed to the European Parliament and Council to have a unique legal framework for the recognition of the Professional Qualifications to

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facilitate and improve the mobility of all workers throughout Europe. This Directive 2005/36/EC established the mechanism of automatic mutual recognition of qualifications for medical doctors according to training requirements within all Member States; this is based on the length of training in the Specialty and the title of qualification.

Given the long-standing experience of UEMS Specialist Sections and European Boards on the one hand and the European legal framework enabling Medical Specialists and Trainees to move from one country to another on the other hand, the UEMS is uniquely in position to provide specialty-based recommendations. The UEMS values professional competence as *“the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and community being served”*<sup>1</sup>. While professional activity is regulated by national law in EU Member States, it is the UEMS understanding that it has to comply with International treaties and UN declarations on Human Rights as well as the WMA International Code of Medical Ethics.

This document derives from the previous Chapter 6 of the Training Charter and provides definitions of specialist competencies and procedures as well as how to document and assess them. For the sake of transparency and coherence, it has been renamed as “Training Requirements for the Specialty of X”. This document aims to provide the basic Training Requirements for each specialty and should be regularly updated by UEMS Specialist Sections and European Boards to reflect scientific and medical progress. The three-part structure of this documents reflects the UEMS approach to have a coherent pragmatic document not only for medical specialists but also for decision-makers at the National and European level interested in knowing more about medical specialist training.

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<sup>1</sup> Defining and Assessing Professional Competence, Dr Ronald M. Epstein and Dr Edward M. Houndert, Journal of American Medical Association, January 9, 2002, Vol 287 No 2

## **I. TRAINING REQUIREMENTS FOR TRAINEES**

### **1. Content of training and learning outcome**

#### **Competencies required of the trainee**

*Definition of competency: knowledge, skills and professionalism*

*A medical trainee is a doctor who has completed their general professional training as a physician and is in an accredited training programme to become a recognised medical specialist. Variably known in different countries as an intern, fellow or registrar.*

*'Learning Outcomes' means statements of what a learner knows, understands and is able to do on completion of a learning process, which are defined in terms of knowledge, skills and competence.*

#### **a. Theoretical knowledge**

*Should include the main domains covered by the specialty with a short description of domains that trainee should master in the specialty*

#### **b. Practical and clinical skills**

*Key skills to possess in this specialty*

*Number of procedures required*

#### **c. Competences**

*Description of levels of competencies*

*The European Specialist Curriculum must cover not only knowledge and skills, but also domains of professionalism, as detailed by the UEMS Section.*

### **2. Organisation of training**

#### **a. Schedule of training**

*Minimum duration of training*

*Include required timing*

#### **b. Curriculum of training**

#### **c. Assessment and evaluation**

*Definition of assessment, description of formative and summative assessments,*

*Assessment: Process by which information is obtained relative to some known objective or goal. (a broad term that includes testing)*

*Evaluation: Inherent in the idea of evaluation is "value." Process designed to provide information that will help us make a judgment about a given situation*

#### **d. Governance**

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## II. TRAINING REQUIREMENTS FOR TRAINERS

### 1. Process for recognition as trainer

a. Requested qualification and experience

b. Core competencies for trainers

*Special Qualifications of the trainers when required (if not covered by EU Directive on Professional Qualifications)*

### 2. Quality management for trainers

## III. TRAINING REQUIREMENTS FOR TRAINING INSTITUTIONS

*(if not covered by EU Directive on Professional Qualifications)*

### 1. Process for recognition as training center

a. Requirement on staff and clinical activities

*Minimal number of patients cared for as inpatients and as out patients*

*Range of clinical specialties*

*Composition and availability of faculty, training programme defined, guidelines applies*

*Trainee / trainer ratio*

*Minimal scientific activity*

b. Requirement on equipment, accommodation

*Medical-technical equipment, library, opportunities for R&D*

### 2. Quality Management within Training institutions

*Accreditation*

*Clinical Governance*

*Manpower planning*

*Regular report*

*External auditing*

*Transparency of training programmes*

*Structure for coordination of training*

*Framework of approval – how are they approved*