

## **UEMS CHARTER ON CONTINUING MEDICAL EDUCATION (CME) IN INFECTIOUS DISEASES**

### **Introduction**

The European Union of Medical Specialties (UEMS) was founded in Brussels on 20 July 1958 with one of its objectives being to study, promote and defend the quality of a comparably high level of specialist care given to patients in the European Community (article 2 of the Statutes of the UEMS). The UEMS acts as an advisory board to the Advisory Committee in Medical Training (ACMT) which is a Committee of the European Union.

Specialist Sections were created for a number of specialties at that time but the Specialist Section for Infectious Diseases was not formed until 1997. The European Board for Infectious Diseases was instituted in September 1998.

The Specialty Sections of the UEMS have been asked to make recommendations for Continuing Medical Education (CME) as part of continuing professional development for their individual Specialty. The following guidelines have been drawn up by the Board for Infectious Diseases of the UEMS to support the introduction of CME for Infectious Diseases physicians working in member countries.

The concept of CME is being introduced in a number of countries in the European Union but remains, at the present time, voluntary in most of these countries. Some countries have a better developed structure for accrediting and monitoring postgraduate events for CME than others. It seems probable that in the fullness of time the pressure of quality assurance in medical practice as part of clinical governance will result in CME becoming mandatory for re-accreditation and re-certification and may become a contractual requirement. It is recognised that each country will develop CME appropriate to the circumstances with its own health service and this paper is designed to facilitate CME which will, by having common standards, facilitate movement of Specialists in Infectious Diseases between member states. They are designed as general guidelines.

CME should ideally be organised by the same professional body responsible for postgraduate training in any country. From an organisational perspective these areas are mutually supportive. The structure of these guidelines has been based on the recommendations for CME by the Specialty section in nephrology of the UEMS. It is recognised that these guidelines will require to be kept under review in the light of experience of CME at national and European levels. Innovation in the provision of CME opportunities (for example in the use of information technology), is to be encouraged.

### **Definition**

Continuing medical education in Infectious Diseases is a programme of educational activities which have the objective of guaranteeing the maintenance and upgrading of knowledge, skills and competence following completion of postgraduate training in Infectious Diseases. CME has an ethical and moral obligation for each infectious diseases physician throughout his or her professional career in order to maintain the highest possible professional standards.

### **Recommendations**

1. The Specialty Section of Infectious Diseases considers it is essential that all physicians who have completed their training and who are accredited should continue in medical education throughout their professional careers.
2. It is recommended that the professional body responsible for CME in each country should establish a five year cycle of CME re-accreditation/re-certification.
3. A credit system for CME similar to that employed in North America and the United Kingdom should be utilised.
4. External "CME" credits may be earned by attendance at courses, conferences, lectures, scientific

meetings, workshops, etc. where the course has been subjected to prior assessment of content and relevance by the appropriate national authority.

5. Internal "CME" credits will be awarded for hospital and locally based educational activities including teaching, audit and published material as well as self-directed learning.
6. Courses provided by the national specialty body in each country should be automatically recognised by the national authority as should be courses and meetings organised by the European Society for Clinical Microbiology and Infectious Diseases and other recognised specialist European infection societies.
7. Courses recognised in one country for CME should be automatically recognised for equal credits by the appropriate authorities in other countries.
8. A credit is a unit of CME corresponding to one hour of educational activity. 250 CME credits will be required over a five year period for qualification for re-accreditation, re-certification as and when this is deemed appropriate. At least 125 of these credits should be external credits. It is strongly recommended that 50 of the 250 credits should be in general internal medicine in recognition of the requirements of continuing medical education in this discipline for specialists in Infectious Diseases.
9. Registration for CME should be organised by the appropriate authorities in each country. A system should be introduced in each country for appeals in extenuating circumstances where the required number of credits is not achieved. In addition specialists in Infectious Diseases who fail to achieve 250 credits in five years should receive counselling from the appropriate authority in their country.
10. Credits in excess of the required 250 will not be carried forward to the following five year cycle.
11. Organisers of courses and meetings should apply to the appropriate authority in each country for the award of credits and the number given for attendance at such courses should be included in the advertising. Organisers should provide delegates with documentation to support the award of credits.
12. The award of internal credits:
  - a. Local hospital education activity.
  - b. Preparation and delivery of lectures or seminars.
  - c. Preparation and delivery of audit reports.
  - d. Visits to other departments to learn new techniques/knowledge.
  - e. Preparation and publication of a paper in a recognised peer review journal (maximum 5 credits).
  - f. Preparation and authorship of book or chapter (maximum 10 credits).
  - g. Each preparation of an abstract for verbal or poster presentation (maximum of 3 credits).
13. Each specialist in Infectious Diseases should submit a copy of his or her CME credit record to the appropriate national authority for validation and record keeping annually.
14. The National Authority should remind specialists in Infectious Diseases at the end of the third year cycle of the requirements for the last two years.
  1. A CME programme for individual specialists in Infectious Diseases should begin immediately on receipt of accreditation by the appropriate authority.
16. Entitlement to study leave and financial support for the purpose of participation in a recognised CME programme should be contractual rather than discretionary. For Infectious Diseases physicians in private practice a proportion of fee income should be set aside for financing CME.
17. The appropriate authority in each country should also produce an annual report on CME in Infectious Diseases.

UEMS CME guidelines for Infectious Diseases - September 1999.