GUIDELINES ON CONTINUING MEDICAL EDUCATION – 2009.

POLICY:

1. The Bhutan Medical and Health Council Regulations 2005 (Section 16.2) requires all the registered medical and health professionals to accrue a minimum of 30 credits in five years in order to be eligible for renewal of their registration. This minimum credit requirement shall be deemed to apply only to those members who wish to engage in active clinical practice and shall include a minimum of 3 credits per year in the core Continuing Medical Education (CME) activity in case of the Specialists.

2. Any medical or health professionals who are not in active clinical practice but wish to remain registered with the Bhutan Medical and Health Council shall have to have a lowered CME requirement of 15 credits in 5 years. Should such individual wish to pursue active clinical practice then he/she shall have to undergo a clinical attachment in relevant field for a minimum period of 3 months under a clinical supervisor appointed by the BMHC.

MISSION STATEMENT:

3. The Continuing Medication Education mission of BHMC is to provide a comprehensive education programme for the purposes of maintaining the healthcare providers up-to-date in clinical and research areas including leadership and management aspects of healthcare in order to foster highest quality of patient care.

PURPOSE:

4. The purpose of CME programme is:
a. To provide self-assessment and lifelong learning for the healthcare providers.
b. To offer educational resources to all the registered medical and health professionals in Bhutan to update and enhance their clinical competency in their relevant fields.
c. To provide quality patient care and clinical services.

GOALS OF CME PROGRAMME:

5. The main goals of CME programme are:
   a. To offer CME activities based on identified learners’ needs and deficiencies;
   b. To design and meet CME activities to meet the stated learning objectives;
   c. To present CME activities that enhances interdisciplinary synergy of health professionals;
   d. To provide CME experience in knowledge, attitude, and behavioral skills that results in improved clinical performance and professional development.

CONTENT AREAS:

6. The core contents of the CME programme would include the primary and specialty clinical educational activities which are designed to address the current and emerging advances in medical science, technology, clinical education and research. Besides, the CME activities would also integrate, wherever appropriate, practice management and leadership educational programmes that would result in managing competent, effective and efficient healthcare practices.

TARGET AUDIENCE:

7. The CME activities would be planned and designed to meets the professional and practice-related needs of all categories
of medical and health professionals registered with the Bhutan Medical and Health Council.

CALCULATION OF CME CREDITS:

8. One credit shall be accredited to 3 (three) working hours. Therefore, an individual who wish to remain in active clinical practice shall have to accrue a minimum of 6 credits in one year (that is, 18 hours of CME activity in one year to build a total of 30 credits in 5 years, which is equivalent to a total of 90 CME hours in 5 years).

9. For individuals not in active clinical practice but who wish to renew their registration shall have to have a lowered CME activity of 15 credits in 5 years (i.e., 45 CME hours in 5 years) that works out to 3 credits (or 9 CME hours) per year.

CME CREDITABLE ACTIVITIES:

10. The CME credits shall be assigned to the various CME creditable activities as outlined in table 1.

<table>
<thead>
<tr>
<th>Sl No.</th>
<th>Type of CME Activity</th>
<th>CME Credits awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Seminars</td>
<td>As per agenda</td>
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<tr>
<td>2.</td>
<td>Workshops</td>
<td>As per agenda</td>
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<td></td>
<td>Clinical Conference</td>
<td>As per agenda</td>
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</tr>
<tr>
<td>4</td>
<td>Clinical Meetings</td>
<td>As per agenda</td>
</tr>
<tr>
<td>5</td>
<td>Congress</td>
<td>As per agenda</td>
</tr>
<tr>
<td>6</td>
<td>Symposium</td>
<td>As per agenda</td>
</tr>
<tr>
<td>7</td>
<td>Structured Training Courses</td>
<td><strong>Duration</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 – 6 months</td>
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<tr>
<td></td>
<td></td>
<td>7 – 12 months</td>
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<td>13 – 24 months</td>
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<td></td>
<td></td>
<td>&gt; 24 months</td>
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<tr>
<td>8</td>
<td>Structured Clinical Attachments/Training</td>
<td>&lt; 2 weeks</td>
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<tr>
<td></td>
<td></td>
<td>Up to 1 month</td>
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<tr>
<td>9</td>
<td>Study Tours in relevant fields/topics</td>
<td>&lt; 10 days</td>
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<tr>
<td></td>
<td></td>
<td>&gt; 10 days</td>
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<tr>
<td>10</td>
<td>Clinical Research</td>
<td>6 credits: for main author/researcher 3 credits: for co-author/assistant</td>
</tr>
<tr>
<td>11</td>
<td>Publications – books, chapter in book, articles,</td>
<td>6 credits for book; 3 credits per chapter or</td>
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<tr>
<td>12.</td>
<td>Presentations – oral or poster in 1- 6</td>
<td>3 credits per paper/poster</td>
</tr>
<tr>
<td>13.</td>
<td>Assignment, project work – designing and developing teaching materials, guidelines, etc.</td>
<td>3 credits per paper/assignment</td>
</tr>
<tr>
<td>14.</td>
<td>Web-based or Tele-based CME activities in relevant fields</td>
<td>As per online accreditation</td>
</tr>
<tr>
<td>15.</td>
<td>Resource / Trainers/ Facilitators</td>
<td>3 credits per session</td>
</tr>
</tbody>
</table>
| 16. | Teaching faculty  
a) 1 semester  
b) 3 practicum hours | 3 credit  
1 credit |

**ACCREDITATION BY CME COMMITTEE:**

11. A CME Committee shall be instituted to accredit the CME programme and shall be comprised of members and discharge functions as described in the sub-sections that follow.

**MEMBERS:**

12. The CME Committee shall be comprised of representatives with clinical background from the following:

a. Department of Medical Services  
b. Department of Public Health  
c. Clinical department proposing or assigned to implement the activity  
d. BMHC Secretariat
FUNCTIONS OF CME COMMITTEE:
13. The CME Committee shall discharge the following functions:
   a. Develop and review the CME Policy Guidelines;
   b. Review the CME proposal;
   c. Assign credits to the proposed CME activities;
   d. Evaluate the relevance of CME activities to ensure that the proposed educational activities are compliant with the CME mission and procedures;
   e. Provide recommendations to the CME organizers;
   f. Appraise the CME credit status of the medical and health professionals to the health ministry;

PROCEDURES

Medical and health professionals engaged in full time clinical practice

14. The proposing individual/organization/agency shall submit the CME proposal in the prescribed format (appendix-I) at least one month in advance of the proposed date of the CME activity.

15. Any ad hoc CME activity that is carried out without prior accreditation by the CME Committee shall have to be accredited soon after completion of the activity.

16. The CME Committee shall review all CME activities in terms of the proposed activities’ relevance to the practice-area of the proposed target audience and their general or specific usefulness to enhancing quality of patient care.

17. The CME Committee shall communicate, in writing as in appendix-II, to the CME course organizer or applicant
regarding the activity’s credit approval or denial as well as any concerns the committee may have identified.

18. Where approval is accorded, the Committee shall assign credits to the CME activities and identify a chief resource person to sign up the CME Credit Passbooks of the individual participants including those of the other resource persons.

19. On completion of the CME activity, the organizer shall submit a list of the participants along with their BHMC Registration number to the council to facilitate updating of CME credits of the individual members for official record.

20. Individuals who acquire CME credits through participation in various CME programmes outside the country shall have to submit, to the CME Committee, the Certificate of Participation and/or programme agenda or brochure together with documents supporting the individuals’ official nomination for the CME course in question. After proper verification, the CME Committee shall assign appropriate credits and accordingly update the individual’s CME Credit Passbook.

21. The BMHC shall appraise the health ministry biannually on the CME credit status of the medical and health professionals.

**Medical and health professionals engaged in full time administration and programme**

22. A medical or health professional who is engaged full time in administration and programme responsibilities (that is, he/she is not in active clinical practice) shall have to submit a declaration, as outlined in appendix-III, indicating
his/her intentions as to whether or not he/she wish to pursue an active clinical practice.

23. An individual who wish to cease active clinical practice shall have to fulfill the lowered CME requirement of 15 credits in 5 years in order to be eligible for renewal of his/her registration with the BMHC.

24. An individual who wish to pursue full time clinical practice shall have to undergo a clinical attachment for a minimum period of 3 months under a clinical supervisor appointed for this purpose by the BMHC.

25. The Clinical Supervisor shall use a ‘Supervisory Assessment Tool’ designed specifically to assess the performance of an individual undergoing a supervised clinical attachment.

TIME FRAME

26. The revised guideline shall come into force from 13th March 2009 corresponding to 18th day of the 1st month of Earth Female Ox Year of the Bhutanese calendar. However, the credits accrued by the medical and health professionals up to the day this revised guideline comes into effect shall be treated as valid for the purpose of renewal of their registration with the Council.
APPENDIX – I: CME Application Format

1. Type of CME Activity [put ‘x’ in appropriate cage(s)]:

   □   a. Workshop □
   □   c. Congress
   □   d. Seminar □
   □   f. Clinical Meeting
   □   g. Research □
   □   i. Training
   □   j. Publications □
   □   m. Assignments □
   □   o. Others: …………
   □   b. Conference
   □   e. Symposium
   □   h. Attachment
   □   k. Presentations
   □   n. Online CME

2. Agenda – CME brochure [name of resource against topics & time allocated]:

   a. Venue:
   b. Duration of CME activity:
   c. Date:

3. Title of CME/Objectives of Proposed CME Activity:

4. Participants:

   a. Number:
   b. Category/levels:
5. Methodologies:

☐ a. Lecture ☐ b. Practical
☐ c. Demonstrations
☐ d. Tutorial ☐ e. Case-Conference
f. Role play
☐ g. Peer review ☐ h. Problem-based learning
i. Others: …………………

6. Resource Person(s):

a. Number:

b. Curriculum vitae:

7. CME Organizer/Applicant:

a. Signature:

b. Name:

c. Date:

APPENDIX – II: CME Approval Notice

1. Date of Receipt of Proposal:


3. Number of Credits Assigned:………………………..
3. Number of Credits assigned to /resource persons:

<table>
<thead>
<tr>
<th>Resource Persons</th>
<th>Credits Assigned</th>
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4. Principal Resource Person identified:
   *(He/she will sign up the CME Passbook of the participants and other resource persons)*

5. Comments/Recommendations by the CME Committee:

6. Signature
   For CME committee
APPENDIX – III: DECLARATION FORM
(To be used by medical & health professionals not in full time clinical practice)

To

The Registrar
Bhutan Medical and Health Council
Ministry of Health
Thimphu

Fax No. 00975-2-331576

Dear Sir,

I hereby declare that:

1. I am currently not in active clinical practice and have no regular patient contact.

2. I undertake to fulfill the following requirement of the Council:

   □ (i). Lowered CME requirement of 15 credits in 5 years for renewal of registration; or

   □ (ii). A Supervised Clinical attachment for a minimum of 3 months to be eligible for active clinical practice.
Signature :
........................................................................................................
........
Name :
........................................................................................................
........
BMHC R. No. : .................Tel No.:
........................................................................................................
Email:
 ........................................................................................................
 ...........
Date : .................................................................

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(For official use only)

Decision of Council:

1. Approved : ☐
2. Not approved : ☐

Verified by: .................................................................
Date: .................................................................