



**National Institute for Health Specialties
United Arab Emirates**

Addendum 2 Responsibilities for EPA Creation and Implementation

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Date & Signature:	
Scope of the Policy:	EPA implementation aligned with Emirati Board Examinations under the scope of NIHS
Stakeholders:	<ul style="list-style-type: none"> ▪ DIOs, GMECs, PDs, administrative staff, faculty of NIHS accredited programs ▪ Trainees of NIHS accredited programs ▪ Chairs and members of NIHS Committees ▪ NIHS Employees or Staff

Modification History

Version	Date	Summary of Revisions	Responsibility	Signature
V 1.0	16.04.2026	Guideline Created	NIHS Assessment Dept.	

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Addendum 2 Responsibilities for EPA Creation and Implementation

Introduction

The responsibility for the creation and implementation of Entrustable Professional Activities (EPAs) across NIHS training programs, including internship, residency, and fellowship programs, is shared across the following governance and operational structures.

1. NIHS Assessment Unit
2. Scientific Committee
3. Designated Institutional Official (DIO)
 - a. Institutional coordinators
4. Graduate Medical Education Committee (GMEC)
5. Program Director
 - a. Clinical Competency Committee (CCC)
 - b. Program Coordinators / ePortfolio Administrators (operational support role)

The sections below outline the specific responsibilities of each structure in the development, approval, implementation, monitoring, and continuous improvement of EPAs, including alignment with NIHS regulations, the NIHS ePortfolio framework, and accreditation renewal requirements.

1) NIHS Assessment Unit

A. Assessment design standardization

- Define/maintain the NIHS entrustment/rating scale and ensure EPAs are assessable using that scale.
- Quality-assure EPA tools: rubrics, narrative expectations, assessor prompts, and minimum evidence rules (validity, fairness, consistency).
- Guide and support generation of approved EPAs
 - Provide proposed benchmarks to the scientific committees,
 - Provide assessor support for development of EPAs by conducting multiple meetings for calibration guidance, rater error mitigation and feedback of quality standards.
 - Conduct final review and get approval from Scientific Committee on the final reviewed document
 - Create the form in alignment with the approved EPA document.

B. Monitoring and reporting

- Upload the EPAs and the procedure lists on the ePortfolio software in a way that is easy for entry of assessment data and PD decisions.
- Ensure that the ePortfolio provides dashboards with national/specialty analytics (completion patterns, assessor variability, narrative quality, entrustment distribution).
- Provide structured feedback to Scientific Committees and programs to drive EPA refinement and assessment of quality improvement.

C. Accreditation standards and renewal linkage

- Integrate EPA implementation expectations into program accreditation standards, including evidence requirements via ePortfolio.
- Define compliance indicators for accreditation or renewal (e.g., EPA coverage, evidence of completeness, institutional oversight, faculty readiness).
- Review program evidence during accreditation/renewal and require corrective action plans where gaps exist.

D. Governance and stakeholder engagement

- Ensure EPA implementation within each institution is embedded in institutional governance (DIO/GMEC oversight) and is demonstrably functional.
- Coordinate NIHS-wide stakeholder feedback cycles (questionnaires + interactive sessions) and ensure findings are translated into standards and expectations.

2) Scientific Committee (for each Specialty)

A. EPA design and approval

- Lead development of the specialty EPAs, aligned to NIHS's competency-based training approach, the NIHS ePortfolio structure and national healthcare regulations.
- Benchmark against internationally recognized EPA systems and UAE contextual adaptations.
- Define EPA specifications: scope, key features, setting, timing, case mix, basis of entrustment, assessment methods and the component tasks that can be observed and assessed.
- Generation of the list of procedures and minimum targets based on international benchmarks.

- Approve final EPA document and EPA forms. They are posted on the website and saved as per document structure of NIHS (title, version, effective date, change log).

B. Periodic review and improvement

- Conduct an annual or biannual EPA review using NIHS assessment unit and other stakeholder feedback (surveys/questionnaires + interactive engagement sessions).
- Identify EPAs needing revision (clarity, feasibility, safety-critical content, evidence requirements, entrustment thresholds).
- Approve version updates so that NIHS shall communicate changes to programs with implementation guidance.

3) Designated Institutional Official (DIO) for each institution

Institutional oversight (implementation assurance):

DIOs are supported operationally by institutional coordinators, who provide the necessary administrative and logistical assistance to facilitate implementation.

- Ensure each program implements EPAs as required by NIHS, and that implementation is resourced and operational.
- Oversee institution-wide compliance and readiness (faculty development, protected time, ePortfolio use, audit readiness).
- Review EPA implementation status at least annually (and as needed) and ensure gap analysis and correctional steps are made in an optimal timeframe as case.

4) Graduate Medical Education Committee (GMEC)

Governance, quality, and accountability

- Approve institutional policies that operationalize EPA implementation (governance assessment, data quality, escalation pathways).
- Review periodic reports on EPA implementation and outcomes; ensure program-level action plans are executed.

- Ensure EPA implementation evidence is available and accurate for accreditation and renewal processes.

5) Program Director (for each program)

A. Program implementation (primary responsibility)

The program directors are supported operationally by program coordinators, who provide the necessary administrative and logistical assistance to facilitate implementation.

- Implement EPAs within the training program, ensuring all rotations/settings support EPA assessment and documentation. E.g. EPA list in the trainee files, empower program coordinators to upload the list of trainees and approved faculty.
- Make necessary changes in the implementation timelines to suit their own programs. Ensure they define the list of eligible faculty who can make the assessment in the ePortfolio.
- Operationalize the NIHS rating scale, required evidence, and workflows within the NIHS ePortfolio. Collaborate with CCC in getting advice on decisions on trainee entrustment.
- Ensure faculty orientation, assessor calibration, and a functioning feedback culture.
- Establish program-level rules for evidence of capture and verification, applying the international best-practice principle that training records are reviewed for accuracy and completeness.

B. Review and verification

- Conduct semi-annual trainee progress reviews using EPA evidence and make progression/support decisions.
- Ensure an annual accuracy review of EPA records and readiness for NIHS audit/renewal, consistent with international expectations for annual record accuracy review in training documentation systems.
- Provide formal verification statements when required (e.g., completion/transition), reflecting internationally used PD verification practices for training evidence.

Summary of Communication Plan (RACI)

Activity	R (Responsible)	A (Accountable)	C (Consulted)	I (Informed)
Create/Update EPAs (content/specs)	Scientific Committee	Scientific Committee Chair	NIHS Assessment Unit	DIO; GMEC; Program Directors
Define rating scale and assessment tool standards	NIHS Assessment Unit	NIHS Assessment Unit	Scientific Committee	NIHS Assessment Unit; DIO; GMEC; Program Directors
Embed EPA requirements into accreditation and renewal	NIHS Assessment Unit	NIHS Assessment Unit	NIHS Assessment Unit; Scientific Committee	DIO; GMEC; Program Directors
Implement in program + ePortfolio evidence capture	Program Director	Program Director	DIO; GMEC; NIHS Assessment Unit	Scientific Committee
Monitor institutional compliance	DIO; GMEC	DIO	Program Directors; NIHS Assessment Unit	Scientific Committee
Annual review and enhancement	Scientific Committee	Scientific Committee Chair	NIHS Assessment Unit; Program Director feedback; DIO feedback; GMEC feedback	Stakeholders; Programs