



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

Governance & Implementation of EPAs Guidelines

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Prepared by:	NIHS Assessment Dept.
Reviewed by:	Central Assessment Committee
Approved by:	NIHS Secretary General
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	08.01.2025	Policy Created	NIHS Assessment Dept.	

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This guideline should be used in conjunction with the NIHS EPA Policy issued in 2023.

PURPOSE

The purpose of this policy is to establish a clear framework and standards for the governance, implementation, and integration of Entrustable Professional Activities (EPAs) into all postgraduate medical, dental, pharmacy and nursing training programs in the United Arab Emirates (UAE). By aligning with competency-based medical education (CBME) principles and utilizing a secure digital platform, this policy ensures that residency, fellowship, and internship programs promote meaningful competence, enhance trainee performance, support continuous quality improvement, and maintain streamlined documentation accessible to all stakeholders.

SCOPE

This policy applies to all postgraduate training programs accredited by the National Institute of Health Specialties (NIHS) in the UAE, including residency, fellowship, and internship phases. It encompasses all aspects of EPA implementation, documentation through an NIHS-provided e-portfolio system, assessment strategies, reporting mechanisms, faculty training, trainee guidance, and compliance with accreditation standards.

DEFINITIONS

- **NIHS (National Institute of Health Specialties):** The governing body overseeing accreditation, standards, and quality of postgraduate medical training in the UAE.
- **DIO (Designated Institutional Official):** The individual at an institution responsible for graduate medical education compliance and oversight.
- **GMEC (Graduate Medical Education Committee):** The committee providing governance, strategic direction, and oversight of postgraduate training programs within an institution.
- **Clinical Competency Committee (CCC):** A program-level committee responsible for reviewing intern/resident/fellow performance and making recommendations on progression.
- **EPA (Entrustable Professional Activity):** A key unit of professional practice that can be fully entrusted to a trainee once he/she has demonstrated the necessary competence.

- **CBME (Competency-Based Medical Education):** An educational approach focusing on outcomes, where progression depends on demonstrating competence rather than time-based training.
- **Program Director (PD):** The individual responsible for the administration and operations of a specific residency/fellowship/ internship program.
- **E-Portfolio:** A secure, digital platform provided by NIHS for documenting EPAs, assessments, and trainee progress. Integrated with UAE Pass for secure login, accessible via mobile app and web, and offering dashboards for trainees, faculty, PDs, DIOs, and NIHS.

POLICIES AND PROCEDURES

4.1. Governance and Organizational Structure

A. National Governance (NIHS):

The NIHS provides oversight, sets national policies, and monitors compliance with EPA implementation standards. NIHS links CBME and EPA outcomes to accreditation, ensuring programs adhere to high-quality educational standards. NIHS conducts an annual review of EPA implementation in each program.

B. Institutional Level (DIO and GMEC):

- The DIO, with the support of the GMEC, must establish policies acknowledging and supporting all operational activities for EPA implementation and the use of the NIHS e-portfolio platform.
- The GMEC provides a system of monitoring, feedback, and continuous quality improvement regarding EPA-based training.

C. Program Level (PD, CCC, Program Coordinators):

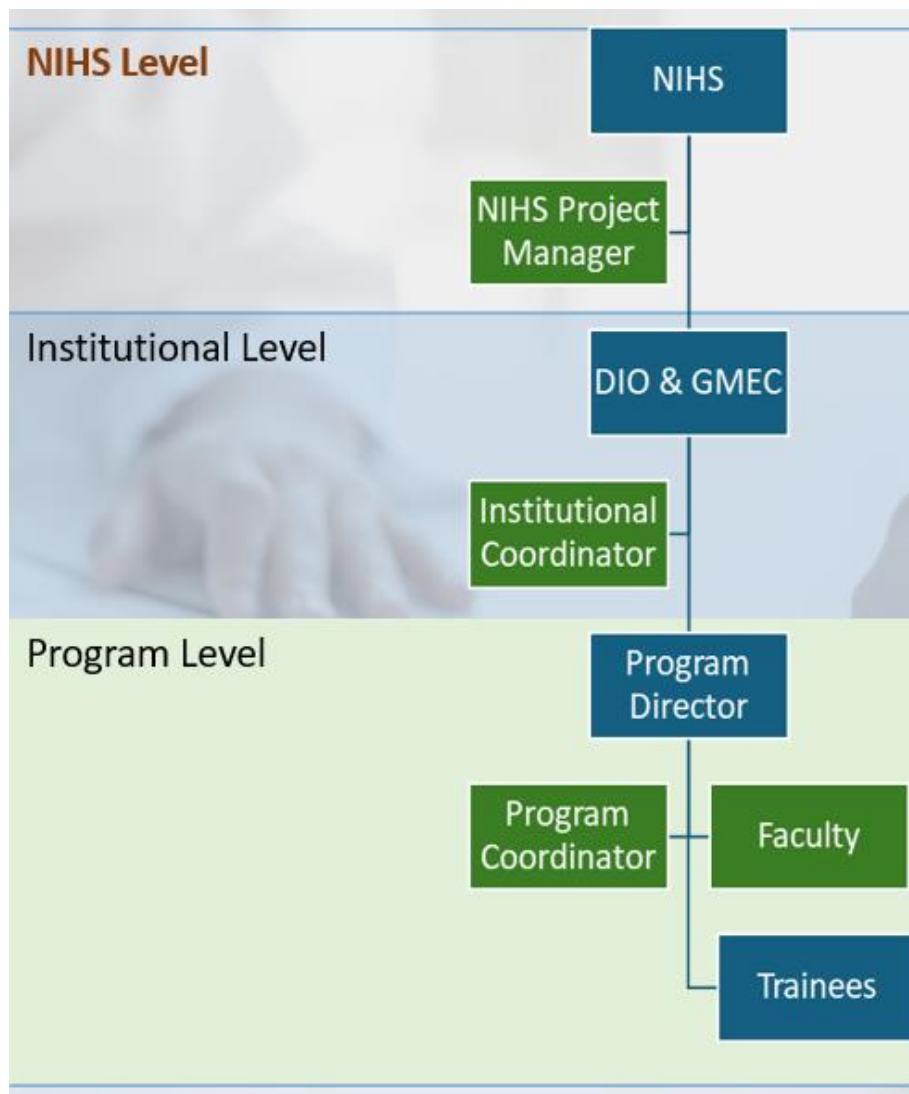
- The Program Director is responsible for implementing the EPA policy, ensuring all stakeholders use the e-portfolio platform, communicating timelines, ensuring training opportunities, and monitoring compliance.
- The CCC reviews EPA progress at least every six months (recommended every three months) and makes recommendations to PD regarding entrustment levels, progression, and remediation, with data accessible in the e-portfolio dashboards.
- Based on CCC recommendations, the PD will ultimately decide on entrustment level for each EPA and each intern/resident/fellow. This decision must be communicated to each trainee.

- One of the responsibilities of the Program Director is to complete the eligibility certificates for the Final Emirati Board Examination, ensuring they include the summative data of EPAs attainment.
- Program Coordinators support documentation, reporting, and communication within the e-portfolio platform and with the Institutional Coordinator.

D. Institutional Coordinator:

Serves as the primary contact person with the NIHS, facilitates communication, supports the integration of EPA data into the e-portfolio, and ensures regular updates and compliance.

ORGANIZATIONAL CHART



4.2. Policy Development and Implementation Plan

A. Policy Elaboration:

Each institution, through the DIO and GMEC, must develop a local EPA policy that outlines the operational framework, responsibilities, timelines, standards for EPA implementation, and incorporation of the e-portfolio system.

B. Implementation and Monitoring Plan:

- Institutions must adopt a hospital-wide mandate ensuring all faculty, trainees, and relevant staff comply with EPA standards and e-portfolio usage.
- The plan includes clear timelines, assessment calendars, and EPA integration into daily training activities.
- The GMEC shall continuously monitor and provide feedback on the effectiveness of competency-based EPA training and the utilization of the e-portfolio platform.

C. Accreditation Linkage:

- EPA implementation is integrated into the annual report of accredited programs.
- Compliance with EPA requirements and proper use of the e-portfolio influence accreditation status.
- International best practices (e.g., RCPSC, ABMS) support linking CBME and EPAs to accreditation processes.

4.3. E-Portfolio Platform and Digital Documentation

A. E-Portfolio System (NIHS-Provided):

- The NIHS provides a secure, mobile-based e-portfolio platform integrated with UAE Pass for login security.
- This platform is accessible by trainees, faculty, PDs, DIOs, and NIHS.
- Trainees can initiate assessments at the workplace, and supervisors can complete them on the spot or at a later time.
- The platform displays dashboards for all stakeholders to track individual and program-level progress.

B. Features of the E-Portfolio:

- Integration with ACGME Milestones mapped against EPAs and tasks.
- Scoring based on levels of autonomy and entrustment.
- Continuous availability of dashboards to monitor completion, performance, and progression.
- Secure and regularly monitored by NIHS for compliance and data integrity.

C. Mobile App and Real-Time Assessment:

- The e-portfolio's mobile app allows for initiating and completing assessments in real-time at the workplace.
- Completed assessments appear on the trainee's and faculty's dashboards, informing immediate feedback and action.

D. Annual Review by NIHS:

- NIHS will annually review program performance, documentation accuracy, and compliance as reflected in the e-portfolio data.
- Completion and quality of EPA documentation in the e-portfolio influence eligibility for the Emirati Board examinations and certification.

4.4. Program Responsibilities

A. Trainee Access to Resources:

Each program must provide trainees with:

- E-Portfolios, forms, guidelines, manuals (electronic or hard copies)
- Training opportunities (workshops, seminars)
- Mentorship programs with experienced faculty
- Policies, regulations, and EPAs accessible in the e-portfolio

B. EPA Policies at Program Level:

- Include the full list of EPAs, promotion criteria, and assessment timelines in the policy folder and e-portfolio.
- Communicate timelines of assessments and any changes to all trainees and faculty at the start of the year.

C. Communication to Trainees:

- Trainees have access to a dashboard displaying completed/ incomplete EPAs, case logs, and relevant policies in the e-portfolio platform.

- Promotion criteria based on EPA completion, assessment outcomes, and case logs are available in the e-portfolio.

D. Program Director's Role:

- Ensures timely communication of requirements and deadlines.
- Monitors and submits progress reports through the e-portfolio.
- Issues notifications, reminders, and warnings via official communication and/or e-portfolio alerts.

4.5. Decision Making and CCC Meetings

A. CCC Meetings:

- Minimum frequency: every 6 months (recommended every 3 months)
- EPAs reviewed using data from the e-portfolio platform, aiding in recommendations to PD in decision-making on entrustment and progression.
- CCC decides on the number of observations and entrustment conditions.

B. Documentation and Reporting:

- The PD, in accordance with CCC recommendations, must decide and document EPA outcomes in the resident's e-portfolio.
- Records updated at least every six months; strongly advised to meet every 3 months.
- CCC reports and PD submissions to NIHS must occur within one month of the CCC meeting via the e-portfolio.

4.6. Comprehensive Assessment and Promotion Criteria

A. Minimum EPA Requirements:

- Completion of mandatory EPAs per training year is required for promotion.
- Trainees are encouraged to exceed minimum requirements for enhanced competence.

B. Conditional Promotion:

- If EPAs are not met, conditional promotion may be granted, requiring completion of outstanding EPAs within two months.

- Flexibility is built in to focus on meaningful competence, not formalities.

C. Transition Guidelines for Advanced Trainees:

- Advanced trainees (PGY3/PGY4) focus only on current-year EPAs.
- CCC conducts individualized reviews, ensuring no backtracking to earlier EPAs is required.
- Aligns with best practices from international boards (RCPSC, ABMS).

4.7. Entrustment in Practice

A. Validity of Entrustment Decisions:

- Entrustment made by faculty trained in EPA assessment.
- Feedback documented in the e-portfolio by trained faculty.

B. Complex Procedures:

- Appropriate supervision is required for surgical/complex procedures.
- Supervising physician must authorize operations case-by-case.
- Documentation (supervisor's name, supervision level) must be recorded in patient's chart and in the e-portfolio.

C. Delegation to Senior Residents:

- Senior/chief residents proposed are expected to perform most procedures without immediate supervision if entrusted.
- Supervising physician retains discretion.

D. Emergency Situations:

- Residents may act independently to save lives, then inform supervisor and document actions accordingly.

4.8. Feedback and Coaching

A. Feedback Practices:

- Timely (recommended immediate), constructive, meaningful and specific feedback provided through and documented in the e-portfolio.
- Focus on observed behaviours, performance standards, and positive reinforcement.

B. Training for Faculty:

- Offer sessions on providing effective feedback.
- Encourage frequent, meaningful feedback interactions.

C. Literature Findings:

- Feedback is critical yet often underutilized; immediate verbal feedback holds significant importance.
- Trainees value tools that complement, not replace, verbal feedback.

INTEGRATION WITH ACCREDITATION AND CERTIFICATION

- Compliance with EPA documentation and CBME standards in the e-portfolio is a requirement for obtaining eligibility to sit for the Emirati Board examination and, ultimately, for certification by the Emirati Board.
- Annual reviews by NIHS, including EPA completion data from the e-portfolio, ensure programs maintain educational quality and accountability.

REFERENCES

- Royal College of Physicians and Surgeons of Canada (RCPSC) guidelines on CBME and EPAs.
- American Board of Medical Specialties (ABMS) standards for CBME and EPA integration.
- NIHS accreditation standards and policies.
- Local and international literature on workplace-based assessments and feedback practices.

REVIEW AND REVISION

This policy shall be reviewed every two years or as needed, considering feedback from stakeholders, changes in NIHS regulations, technological updates to the e-portfolio platform, and evolving best practices in medical education.