



## Session 3

1:30 – 3:20

# Experience in Accreditation Perspectives and Lessons



**Dr. Mohammed Al-Houqani**  
Secretary General  
National Institute for Health Specialties



**Dr. Manal Al-Halabi**  
Dean and Professor of Pediatric  
Dentistry Hamdan Bin Mohammed  
College of Dental Medicine  
MBRU



**Dr. James Arrighi**  
President and Chief Executive Officer  
ACGME-International



**Dr. Elsheikh Badr**  
Policy Development Expert



**Dr. Mohammed Al-Houqani**  
Secretary General  
National Institute for Health Specialties

Dr. Mohammed Al Houqani is the Secretary General of the National Institute for Health Specialties, which is the accrediting and certifying body for postgraduate clinical training programs in the UAE. Dr. Al Houqani is an Associate Professor at United Arab Emirates University, Consultant of Internal Medicine, Respiriology and Sleep Medicine. He served as the Assistant Dean for Medical Education for 5 years. Dr. Al Houqani is a Fellow of Royal College of Physicians and Surgeons of Canada, Internal Medicine & Respiriology. He published 26 papers on tobacco and sleep disorders, and he was a keynote speaker in various international and regional conferences, workshops, and webinars.



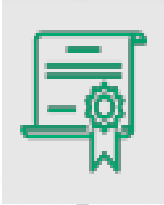
# NIHS Experience in Accreditation Perspectives and Lessons

**Dr. Mohammed Al-Houqani**  
Secretary General  
National Institute for Health Specialties

**1<sup>st</sup> Emirati Conference on Medical Education**  
11 February 2023



# NIHS Accreditation



## Accreditation

The process in which the quality of a Training Program is assessed by an External Body using a set of Standards.



## Accreditation Standards

The criteria defining the Minimum Quality of a Training Program.



## Accreditation System

An Evaluation System by an External Body Developing Standards and Assessing Compliance.





## NIHS Standards Development Process

Informed by best practices internationally



Contextualized to our local practice



Benefited from residency experiences in UAE



Reviewed by members of the scientific committee



Approved by Council of Scientific Affairs





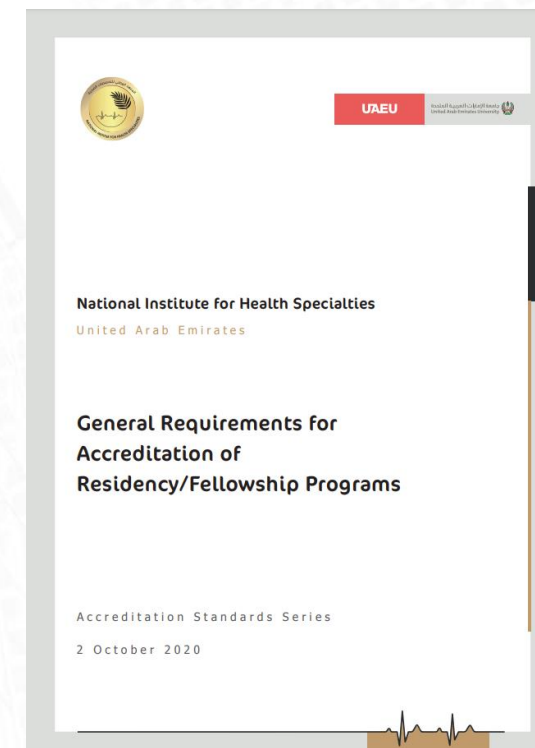
# NIHS Accreditation Standards




Institutional Accreditation Requirements

Program Accreditation Requirements

Specialty-Specific Requirements





|  |   |  |   |  |   |
|--|---|--|---|--|---|
| <br>ENT                     | <br>Psychiatry                       | <br>Pediatrics         | <br>Surgery                        | <br>Anesthesia                | <br>Dermatology          |
| <br>Gastroenterology        | <br>Hematology                       | <br>Neurology          | <br>Ophthalmology                  | <br>Pharmacy                  | <br>Radiology            |
| <br>Adult Rheumatology      | <br>Urology                          | <br>Family Medicine    | <br>Emergency Medicine             | <br>Obstetrics and Gynecology | <br>Internal Medicine    |
| <br>Clinical Genetics       | <br>Neonatology                      | <br>Medical Internship | <br>Intensive Care Unit            | <br>Cardiology                | <br>Prosthetic Dentistry |
| <br>Infectious Disease      | <br>Periodontology                   | <br>Endodontics        | <br>Nephrology                     | <br>Orthodontics              | <br>Pediatric Dentistry  |
| <br>Pediatric Rheumatology | <br>Child and Adolescent Psychiatry | <br>Dental Internship | <br>Pediatric Hematology Oncology | <br>Adult Oncology           |   |

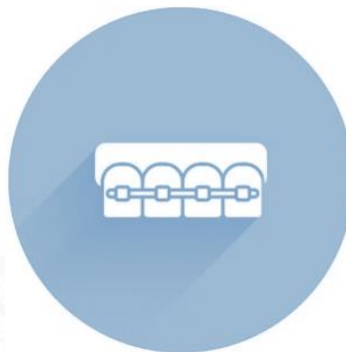
# Program Accreditation Requirement



# Dental Specialty Programs Accreditation



Endodontics



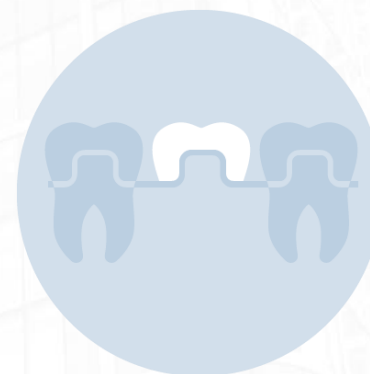
Orthodontics



Pediatric Dentistry



Periodontology

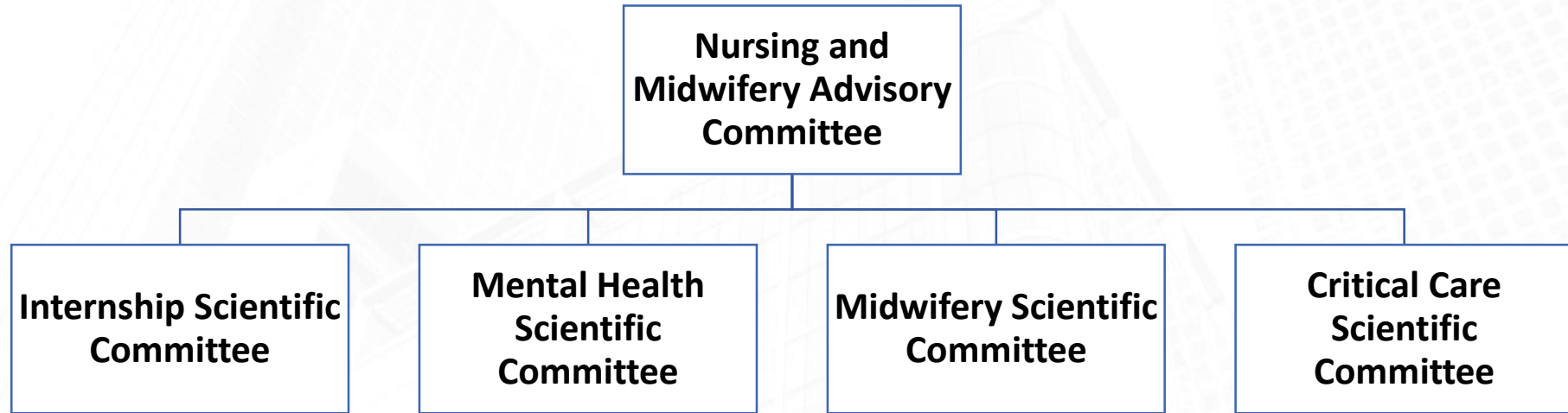


Prosthodontics





# Nursing Committees





# Institutional Accreditation Standards

The Five Key Domains:



Governance



Training Environment



Residents/Fellows



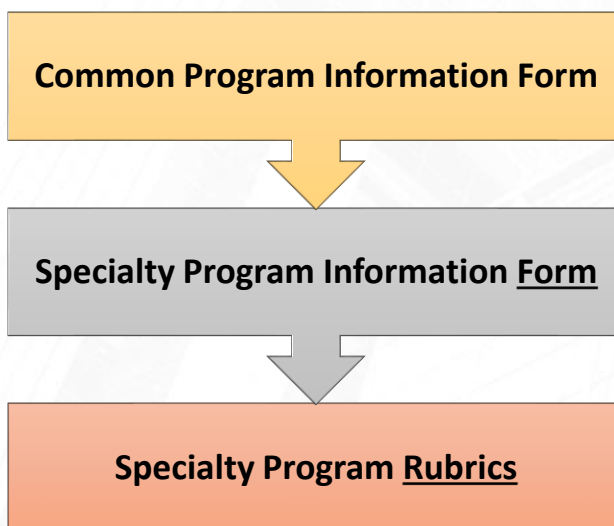
Faculty



Continuous Improvement and  
Innovation



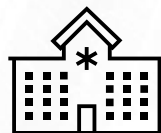
# Program Accreditation



The screenshot shows the 'Program Accreditation Service' web portal. The header includes the logo and navigation links: ABOUT US, ACCREDITATION, ASSESSMENT, TRAINING, E-SERVICES, and CONTACT US. The main content area is divided into two columns. The left column contains a sidebar with links: DEFINITION OF SERVICE, REQUIREMENT, PROCEDURES, START SERVICE (highlighted), SERVICE CHANNELS, FEES: 20,000 DHS/YEAR, DURATION: 3 MONTHS MAXIMUM, and GUIDELINES. The right column contains the 'Program Information Form' with sections for GENERAL INFORMATION, Application Information, and Attachments. The Application Information section includes fields for Institution Name, Institution Email, Application Type (New or Renewal), and Program Name. The Attachments section includes fields for Common Program Information Form, Specialty Program Information Form, and Self-Assessment form (Rubrics), each with a 'Choose File' button and a 'No file chosen' message. Below the Attachments section, there is a detailed instruction for downloading the Program Information Form Template and the Self-Assessment Form (Rubrics) from the provided links.



# Evidences of the Specialty Program Rubrics



Institution



Program Personnel and Resources



Resident Appointment



Educational Program



Scholarly Activities



Resident Evaluation and Promotion



CCC & PEC Committees



Duty Hours



Resident Supervision





# E-Services

Browser address bar: nihs.uaeu.ac.ae/en/establishment.shtml

Language: العربية

|              | ABOUT US   | ACCREDITATION   | ASSESSMENT   | TRAINING   | E-SERVICES  | CONTACT US  |
|--------------|--|---|--|--|---|---|
| National Ins | <ul style="list-style-type: none"><li>NIHS Establishment</li><li>Our responsibilities</li><li>Our Strategy</li><li>Organization Structure</li><li>Secretary General Message</li><li>Our Governance</li><li>Scientific Committees</li><li>Strategic Partners</li><li>Our Achievements</li></ul> | <ul style="list-style-type: none"><li>Overview &amp; Process</li><li>Central Accreditation Committee</li><li>Accreditation Surveyors Team</li><li>Accreditation Unit</li><li>Accreditation Forms</li><li>Accreditation Requirements</li><li>Accredited Institutions</li></ul> | <ul style="list-style-type: none"><li>Assessment Services</li><li>Central Assessment Committee</li><li>Assessment Regulations</li><li>Assessment Exams</li></ul> | <ul style="list-style-type: none"><li>Training for Residency Programs</li><li>CPD</li><li>Training Workshops</li></ul> | <ul style="list-style-type: none"><li>Institutional Accreditation</li><li>Program Accreditation</li><li>Medical Internship Accreditation</li><li>Surveyors Registration</li><li>Registration of Trainees</li><li>Licenses Exams</li><li>Emirates Medical Residency Entry Examination</li><li>Emirates Dental Residency Entry Examination</li><li>Emirates Pharmacy Residency Entry Examination</li><li>Certification Exams</li><li>Issuance of the Specialized Certificates</li></ul> | <ul style="list-style-type: none"><li>General Enquiries</li></ul> |



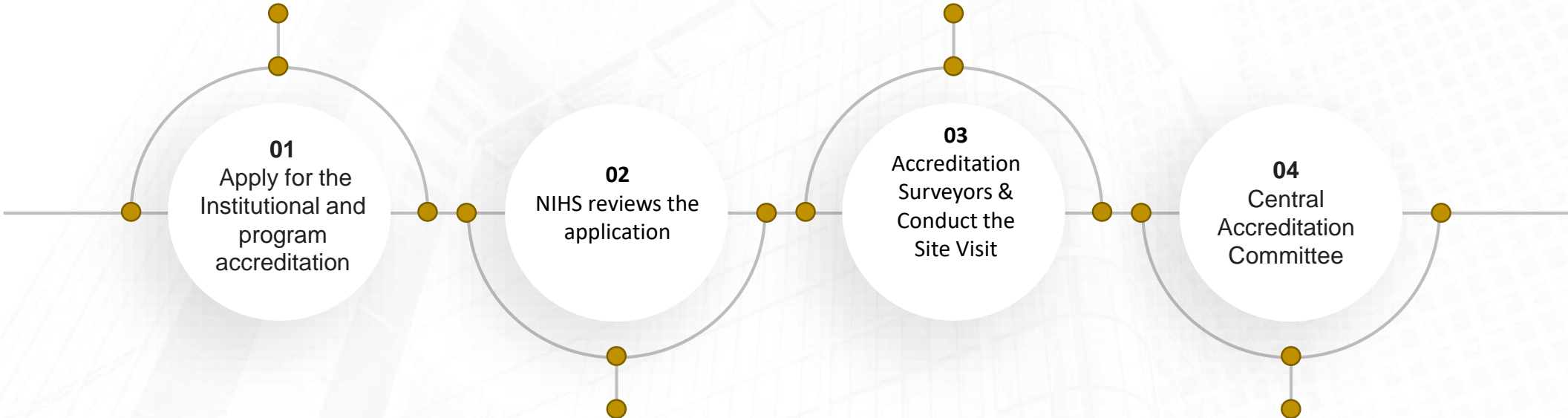
# Launching the Electronic Services of the National Institute for Health Specialties

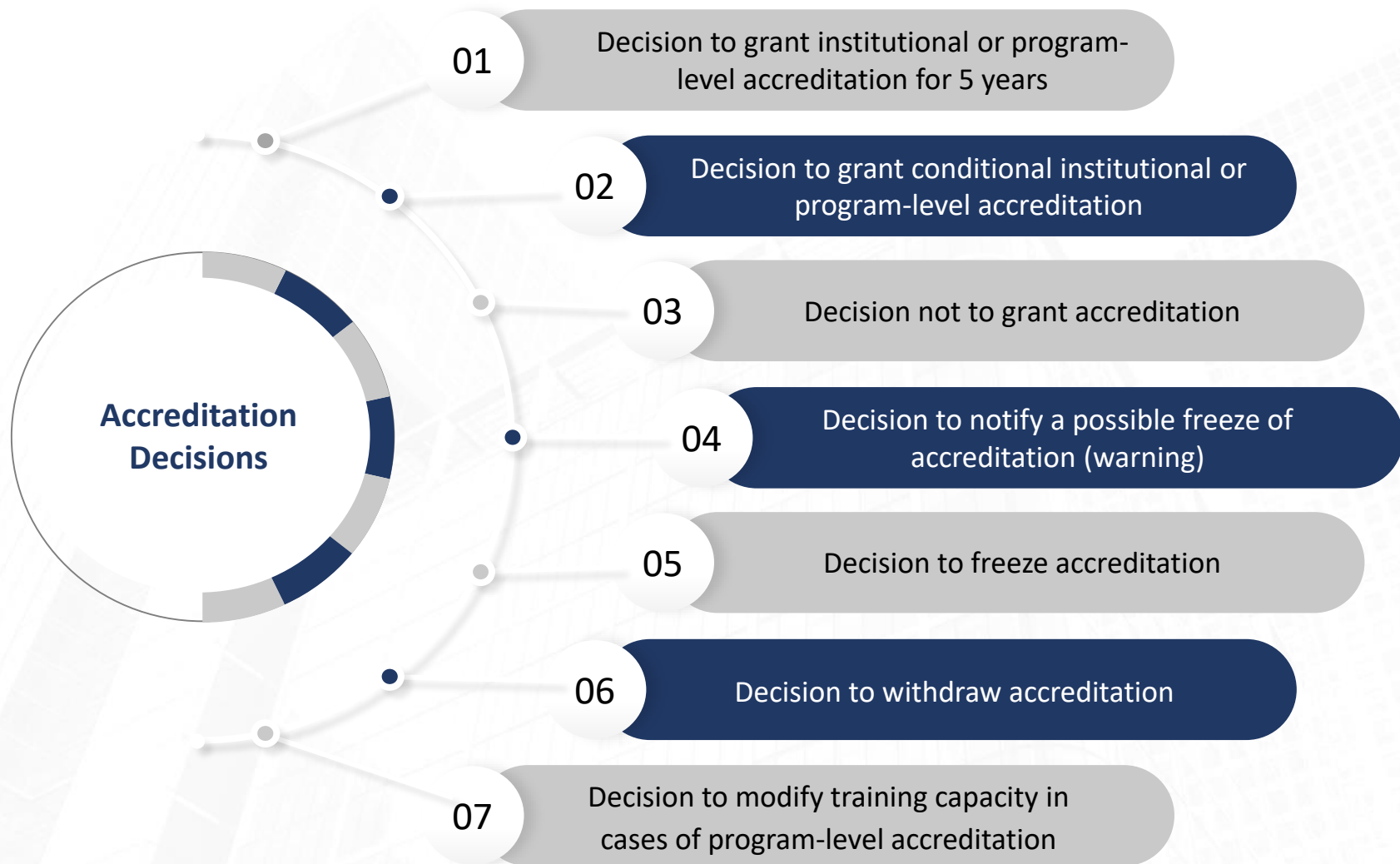




# Developing Institutional and Program Accreditation Procedures

The four stages of institutional and program accreditation:

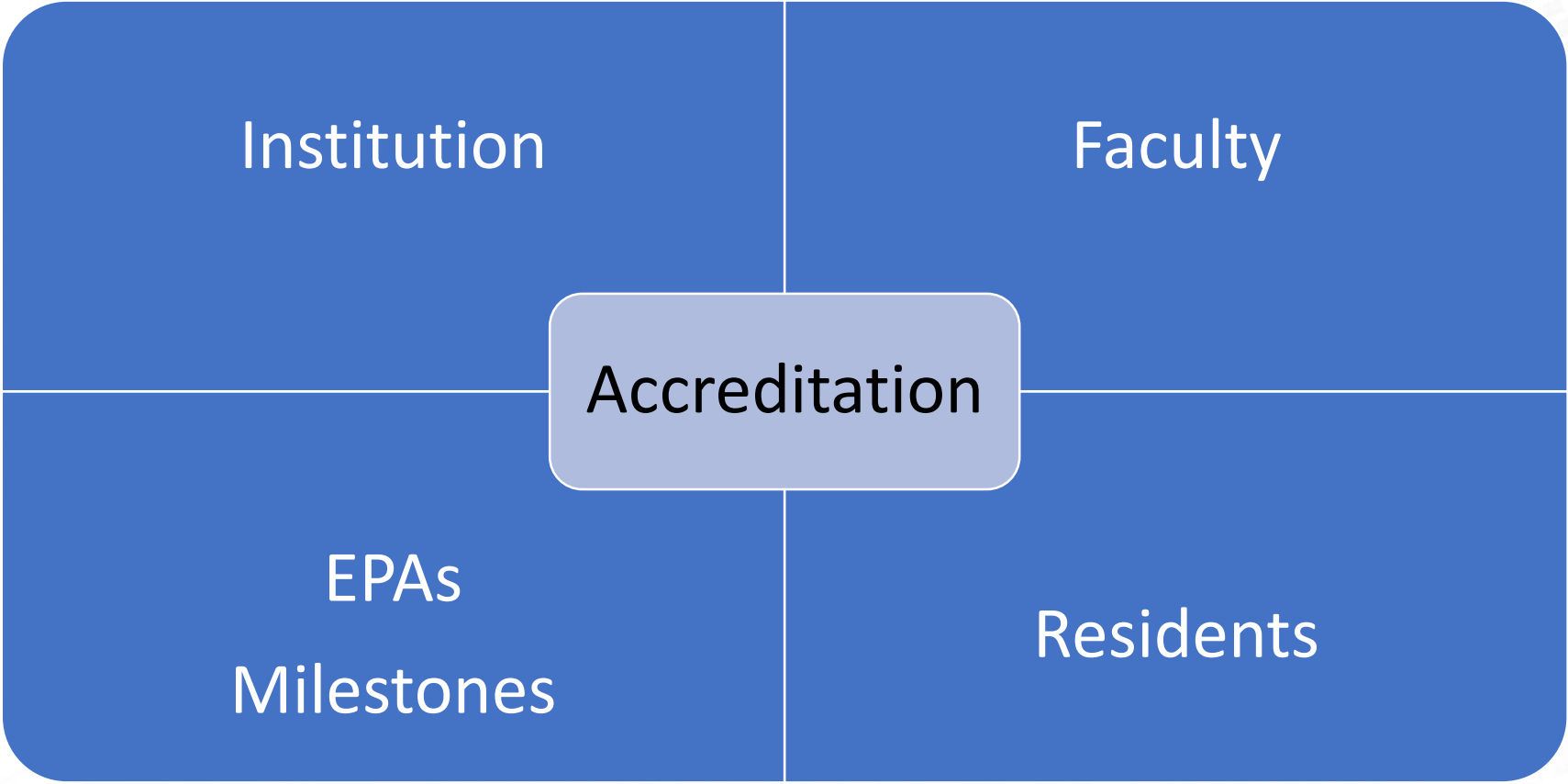








# Accreditation Portal





# Registration of Accreditation Surveyors Service



## Call For Accreditation Surveyors

**About NIHS:**

NIHS was established by Cabinet Decree as a national institution mandated to spearhead, regulate, and organize professional development for the health workforce with a particular emphasis on specialty training.

**NIHS roles:**

- Set standards for Institutional and specialty program accreditation
- Accredit training institutions and specialty programs
- Approve Residency and Fellowship programs
- Conduct specialized professional examinations.
- Issue certificates for higher health specialties (Board and Fellowship)


**Role and Responsibilities for Accreditation Surveyors:**

1. Implement the accreditation site visits to the medical training centers.
2. Conduct the required interviews to obtain the accreditation.
3. Audit the files and documents submitted by the training centers.
4. Ensure all documents meet the NIHS conditions, standards, and requirements.
5. Inspect the training center's facilities and equipment used for the training programs.
6. Ensure the availability of significant academic and administrative staff to run the training programs.
7. Prepare a comprehensive detailed report on the outcomes of the site visit.
8. Provide all information to Central Accreditation Committee.

[https://nihs.uaeu.ac.ae/en/registration\\_accreditation\\_surveyors/form.shtml](https://nihs.uaeu.ac.ae/en/registration_accreditation_surveyors/form.shtml)

**REGISTER NOW**

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العربية

ABOUT USACCREDITATIONASSESSMENTTRAININGE-SERVICESCONTACT US

National Institute for Health Specialties - Registration of Accreditation Surveyors Service

## Registration of Accreditation Surveyors Service

DEFINITION OF SERVICE

REQUIREMENT

PROCEDURES

START SERVICE

SERVICE CHANNELS:

DURATION: 6 WEEKS MAXIMUM

### Accreditation Surveyors Registration form

**GENERAL INSTRUCTION**  
Before you begin completing your application

1. Gather the required information so that you can complete the application without interruption.
2. Have a copy of your CV ready in PDF (.pdf) format to upload in step (i). Maximum file size 1000kb
3. Have a current photo ready in gif or jpg format (.gif, .jpg) to upload in step (i). Your photo size should be approximately (200 pixels x 300 pixels). Maximum file size 500kb.
4. All the information you entered here will be treated with high confidentiality.

**GENERAL INFORMATION**  
**Personal Information**

Full Name \*

Full Name \*

Nationality \*

Select

Date of Birth \*

Date of birth

Gender \*

Select

Mobile Number \*

Mobile Number \*



**Thank You**



**Dr. Manal Al-Halabi**

Dean and Professor of Pediatric  
Dentistry Hamdan Bin Mohammed  
College of Dental Medicine  
MBRU

Professor Manal obtained her dental degree from the University of Jordan in Amman and her Certificate of Specialty Training in Pediatric Dentistry and Master of Oral Biology from the University of Maryland at Baltimore in the USA. She is certified by the American Board of Pediatric Dentistry. Currently, Manal is the Dean and Professor of Pediatric Dentistry at Hamdan Bin Mohammed College of Dental Medicine, Mohammed Bin Rashid University of Medicine and Health Sciences. She is also a Founding Executive Board Member of the Emirates Pediatric Dentistry Club of the Emirates Dental Association. Dr Manal is an appointed member of the Educational Committee of the International Association of Paediatric Dentistry as well as the Standardized Records Committee of the International Association of Dental Traumatology. Her experience includes academic positions with Boston University and the University of Maryland as well as private clinical practice in the USA and the UAE. Her research interests include dental education, oral health of patients with special needs, traumatic dental injuries, and biological caries management in primary teeth. Dr Manal has numerous publications in internationally renowned high-impact professional journals.





جامعة محمد بن راشد  
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OF MEDICINE AND HEALTH SCIENCES

14



# The NIHS Experience/Dental Scientific Committees

Dr. Manal Al Halabi

Dean, Hamdan Bin Mohammed College of Dental Medicine.

# Purpose

The NIHS, in service to the public and dental profession developed and implemented Dentistry Residency Program Requirements for the dental internship and the dental specialty programs.

The goal is to promote and monitor the continuous quality of these programs.

# Progressive Approach to Accreditation

# Advantages of the NIHS accreditation model for dental specialties



- Promotes and monitors the continuous quality of Clinical training in postgraduate dental programs including university-based.
- Serves the needs of the UAE dental workforce.
- Supports the UAE strategic needs of high-quality oral health research including community-based, biomedical and transitional.



# Accreditation of Dental Residency Programs in North America

University-based programs (Academic clinical training) in pediatric dentistry compared to Hospital-based programs 50/49

| Program                     | University-based   | Hospital-based                 |
|-----------------------------|--|--------------------------------|
| <b>Didactic Training</b>    | More didactic components                                     | Less didactic components       |
| <b>Clinical Training</b>    | Similar level of clinical training and required competencies |                                |
| <b>Research requirement</b> | Completion of a MSc research dissertation                    | Completion of a research study |

# Regional Accreditation/Saudi Commission for Health Specialties

- Accredits hospital-based programs
- Has recently started allowing graduates of the Master and PhD programs from Saudi Universities to sit for the Saudi Board Examination

... 23/08/2022 • الهيئة السعودية...  
تعلن  
#الهيئة\_السعودية\_للتخصصات\_الصحية  
عن فتح بوابة التقديم على أهلية اختبار  
البيورد السعودي في تخصصات طب  
الأسنان لحملة الماجستير أو الدكتوراة  
من الجامعات السعودية.

**الآن**

يُمكنك التقديم على اختبار البيورد السعودي  
لتخصصات طب الأسنان لحملة الماجستير  
أو الدكتوراة من الجامعات السعودية.

spa.gov.sa  
لمعرفة المزيد

# Setting the Guidelines

# NIHS Defined Competencies:



Professionalism



Patient Care and Procedural Skills



Medical Knowledge



Practice-based Learning and Improvement



Interpersonal and Communication Skills



Systems-based Practice



# Commission on Dental Accreditation (CODA), American Dental Association (ADA)

- CODA was established in 1975.
- Recognized by the United States Department of Education (USDE)
- Functions independently and autonomously
- CODA accredits predoctoral dental education programs (DDS/DMD), advanced dental education programs (specialty) and allied dental education programs in the United States.
- The Commission also accredits predoctoral dental education programs internationally.

# Modification to the CODA requirements

- Minimum Core faculty-Student ratio set.
- Clinical requirements for prosthodontics and periodontology.
- Associate Program Director when the number of residents exceed 15.
- Minimum duration for most programs was increased.
- Requirement to design, complete and submit a graduation research project relevant to the specialty (emphasis on locally relevant research).
- Compliance with all NHHS requirements. (Committees, Structure...etc.)

# Minimum clinical requirements

- Clinical competency-based training.
- Some programs, (periodontology and prosthodontics) opted for specifying minimal number of required cases.
- Other programs opted to selectively specify minimally required numbers for certain procedures.
  - Endodontics: surgical cases
  - Pediatric dentistry: cases treated under oral sedation and general anesthesia.

# Guidelines for the Dental Internship Program



- Program was based on the NIHS medical internship guidelines with a few modifications to accommodate general dental practitioner- specific competency requirements.
- All the regulations can be applied to the private dental clinics.
- Required number of hours per week was adjusted to suit the dental training without on-calls.



# Chairs of NIHS Scientific Committees for Dentistry



Dental Internship Scientific Committee, **Dr Nabeel Humod Galeb.**

Endodontics Scientific Committee, **Dr. Mohamed Jamal**

Orthodontics Scientific Committee, **Professor Ahmed Ghoneima**

Pediatric Dentistry Scientific Committee, **Professor Manal Al Halabi**

Periodontology Scientific Committee, **Professor Momen Atieh**

Prosthodontics Scientific Committee, **Dr Moosa Abu Zaydeh.**



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**Dr. James Arrighi**  
President and Chief Executive  
Officer  
ACGME-International

Dr. James Arrighi is the President and Chief Executive Officer of ACGME-International. He completed his Bachelor of Science and Medical Doctor degrees at Brown University in Rhode Island, USA. He then completed training in internal medicine, cardiology, and nuclear medicine at Washington University in St. Louis, the National Institutes of Health, and Yale University School of Medicine. Before joining ACGME, Dr. Arrighi served as a program director for the cardiology fellowship, and as director of graduate medical education, at Brown University and Rhode Island Hospital. He is a Professor of Medicine, Diagnostic Imaging, and Medical Science at Brown, and received several faculty awards for teaching. For over two decades, he has mentored residents and fellows; he has published over 70 peer-reviewed publications and has delivered over 130 national or international invited lectures. He joined the ACGME-International in September 2021.



# Advancing Global [Postgraduate] Medical Education Through Accreditation: *Lessons Learned from ACGME-I*

Dr. James Arrighi, M.D.\*

*President and CEO, ACGME-International  
Professor of Medicine, Brown University*



**\*Employee of ACGME, otherwise no disclosures**





# Lesson 1: It is important to be guided by mission & values





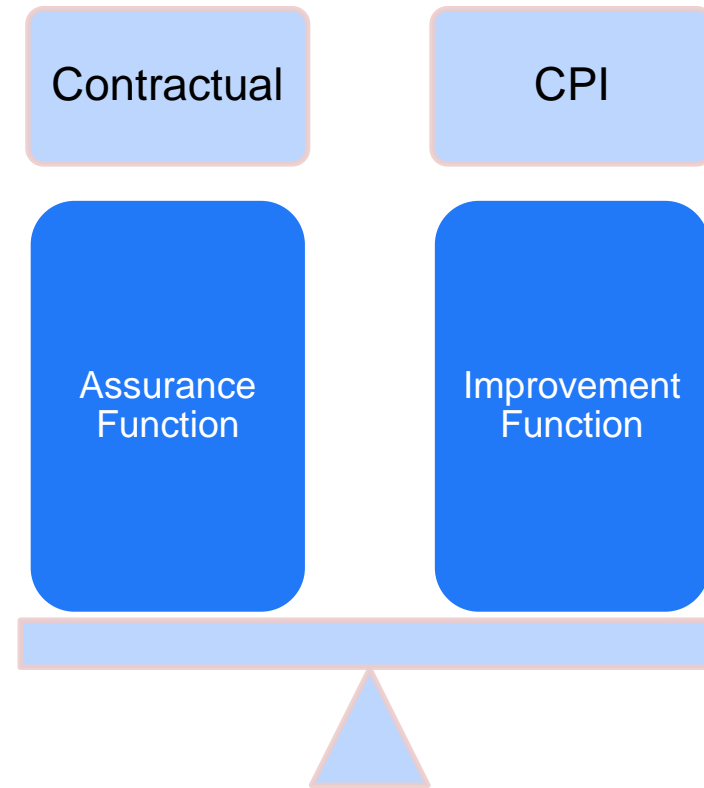
# ACGME-I Mission

The mission of ACGME-I is to improve health care by assessing and advancing the quality of resident physicians' education through accreditation. We protect the interests of residents and improve the quality of teaching, learning, research, and professional practice with the ultimate goal of benefitting the public that our accredited programs and graduates serve.



# ACGME-I Values

- Honesty and Integrity
- Accountability and Transparency
- Equity and Fairness
- Diversity and Inclusion
- Excellence and Innovation
- Stewardship & service
- Leadership and Collaboration
- Engagement of Stakeholders
- Cultural sensitivity & consideration of local environment





# Lesson 1: It is important to be guided by mission & values

- Engagement strategy
- Scope of work
- Limits of flexibility
- Conflict resolution
- Accreditation processes





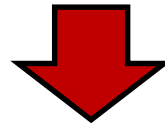
## Lesson 2: It's important to define “what you are not”

- Accreditor for all
- Consultants
- Certifying body
- Facilitator for “brain drain”
- US ACGME
- A government agency



## Lesson 3: Accreditation must be perceived as adding value

- Improvement in educational program: e.g. CBME development, professionalism...
- Foster innovation & continuous improvement
- System level impact on patient safety & quality of care
- Recruitment of trainees, training opportunities, networking
- Faculty recruitment and retention, networking, scholarship opportunities
- Badge of excellence and distinction



We must have a sense of what we believe is value, and what we can contribute

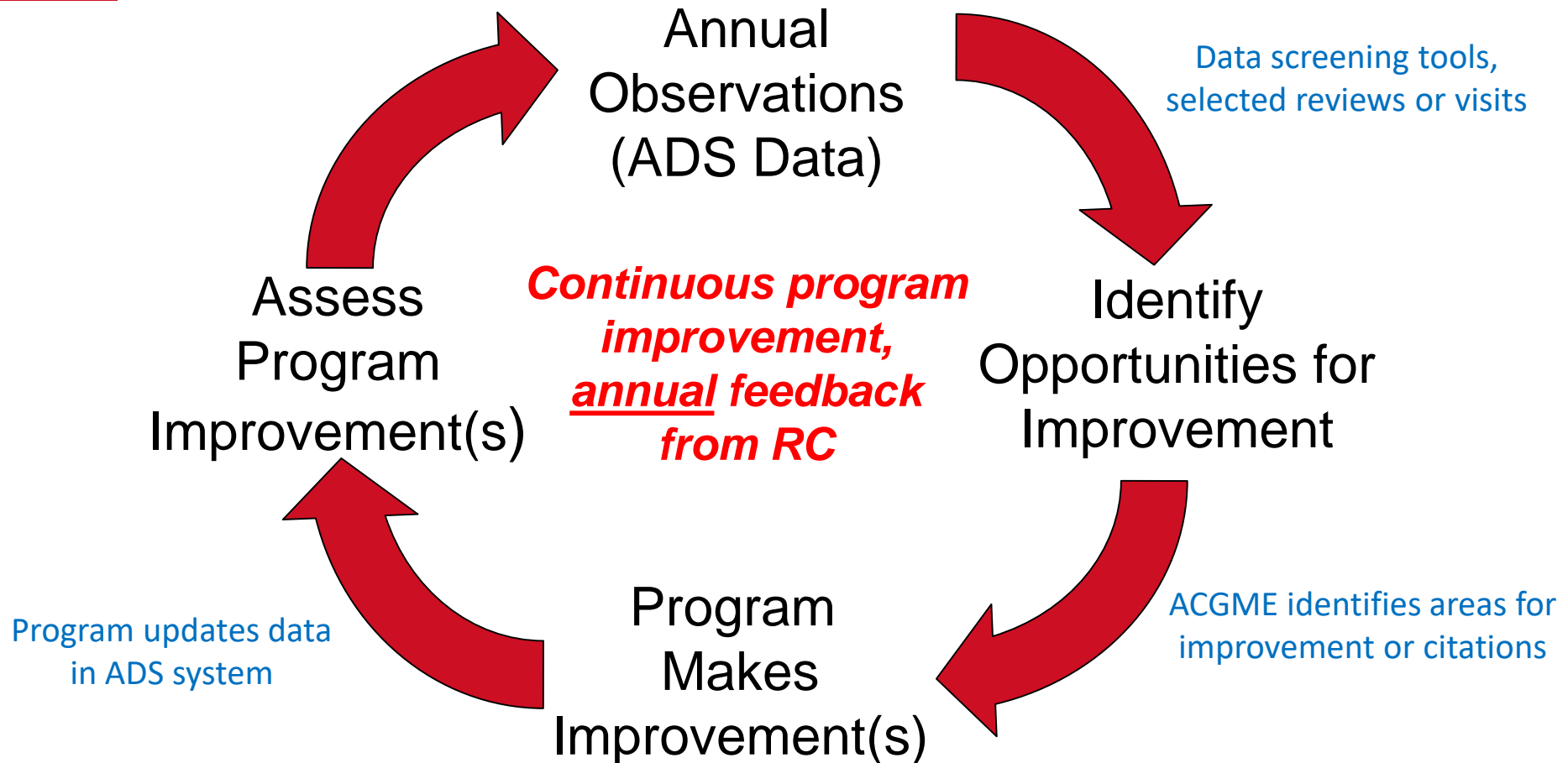


# Challenges in providing and/or demonstrating value

- We need more research
- Difficulty demonstrating “hard” outcomes (e.g. graduate performance, patient care metrics, ...)
- External factors (e.g. instability, pandemics)
- Multiple certifying authorities
- Properly leveraging the experience of the largest PGME accreditor in the world (ACGME)



## Lesson 4: The continuous improvement function of accreditation is as important as the assurance function





# ACGME: Pillars of Quality Improvement Functions

## Accreditation Processes

Annual review

Feedback loop for  
QI

## Outcomes (Milestones)

Development

Combined QA/QI  
functionality

## Focus on CLE

Focus on quality,  
safety, wellness...

Central role of SI





# Lesson 5: Construct & process for development of the accreditation standards is important

- Institutional, Foundational (“core”), and Specialty construct (tiered)
- Comprehensive, evidence based: oversight, personnel/faculty, educational infrastructure, evaluation processes, clinical learning environment (safety, quality, well being, teamwork, work hours)
- **Balance**  
Uniformity and consistency across regions, but with....  
Flexibility to accommodate regional differences in practice/culture
- Transparent
- Public input





# Lesson 6: Peer review is key to credibility

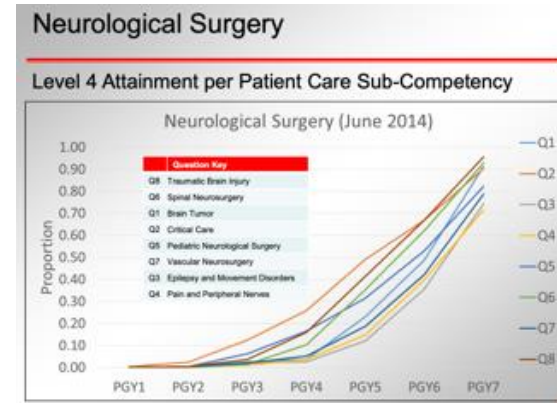
- Committee of peers (volunteers)
- Diversity by region & specialty
- Responsible for defining standards and making accreditation decisions
- Data driven
- Principle of “substantial compliance”
- Strict conflict of interest and confidentiality processes
- Completely separate from US operations





# Lesson 7: Our partners want *more feedback*

- Goal to provide meaningful data back to programs
- Develop performance indicators
- Benchmarking when possible to global metrics
- Site visits are valuable



The example is from the Internal Medicine Milestones, subcompetency 3: Manage patients with progressive responsibility and independence.

| Subcompetency   | Threshold  | Yr1, Mid-Year | Yr1, Year-End | Yr2, Mid-Year | Yr3, Mid-Year |
|-----------------|------------|---------------|---------------|---------------|---------------|
| PC03            |            |               |               |               |               |
| Manage Patients | <= Lev 5.0 |               |               |               |               |
|                 | <= Lev 4.5 |               |               |               |               |
|                 | <= Lev 4.0 |               |               | 5.7           | 6.1           |
|                 | <= Lev 3.5 |               | 5.8           | 6.0           | 11.7          |
|                 | <= Lev 3.0 | 5.8           | 6.1           | 8.1           | 31.4          |
|                 | <= Lev 2.5 | 6.5           | 8.4           | 14.3          | 33.0          |
|                 | <= Lev 2.0 | 8.6           | 11.7          | 24.7          | 6.8           |
|                 | <= Lev 1.5 | 9.5           | 16.5          | 23.8          |               |
|                 | <= Lev 1.0 | 9.5           | 16.5          | 23.8          |               |



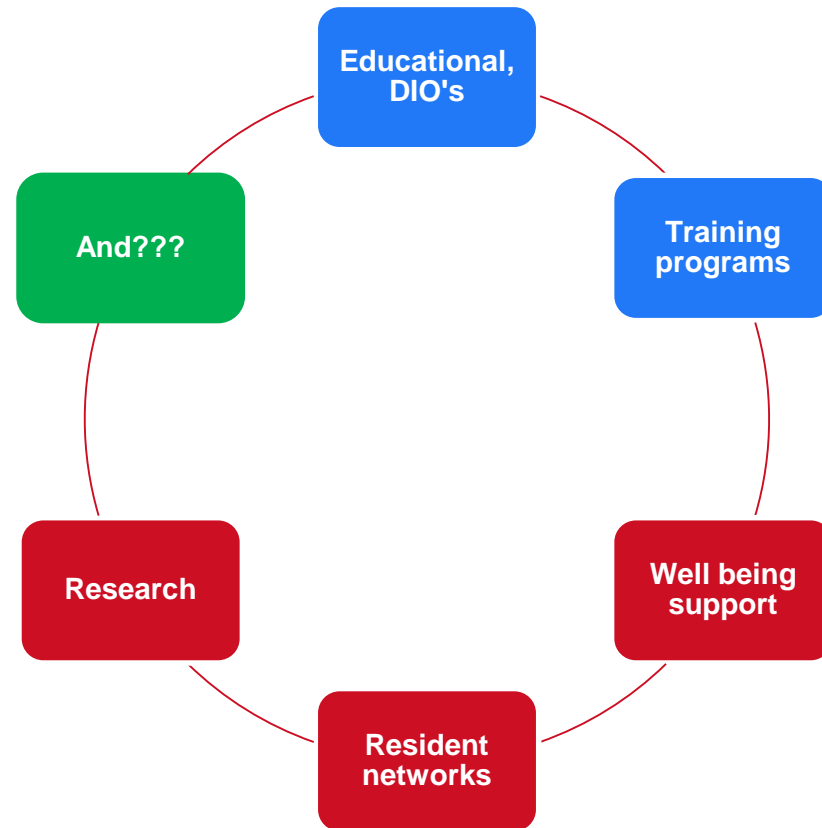


# Lesson 8: Our partners want to build community





# What “communities” should be developed?







# Building Community



ACGME International



Improving Graduate Medical Education in Haiti Through Collaborative Work

Course

Kerling Israel, MD, MPH, Senior Advisor for Medical Education at Partners I...

The Foundations of Competency

Interactive Course

This course reviews some basic concepts medical...



ACGME Symposium on Physician Well-Being 2

Welcome

Video

Welcome remarks from the 2017 ACGME Symposium on Physician Well-Being.

PROGRAM DIRECTORS' GUIDE  
TO THE INTERNATIONAL  
FOUNDATIONAL PROGRAM  
REQUIREMENTS for  
Residency Programs

EDITION 4. 1 JULY 2021





# Requirements

## **US Fellowship Requirements:**

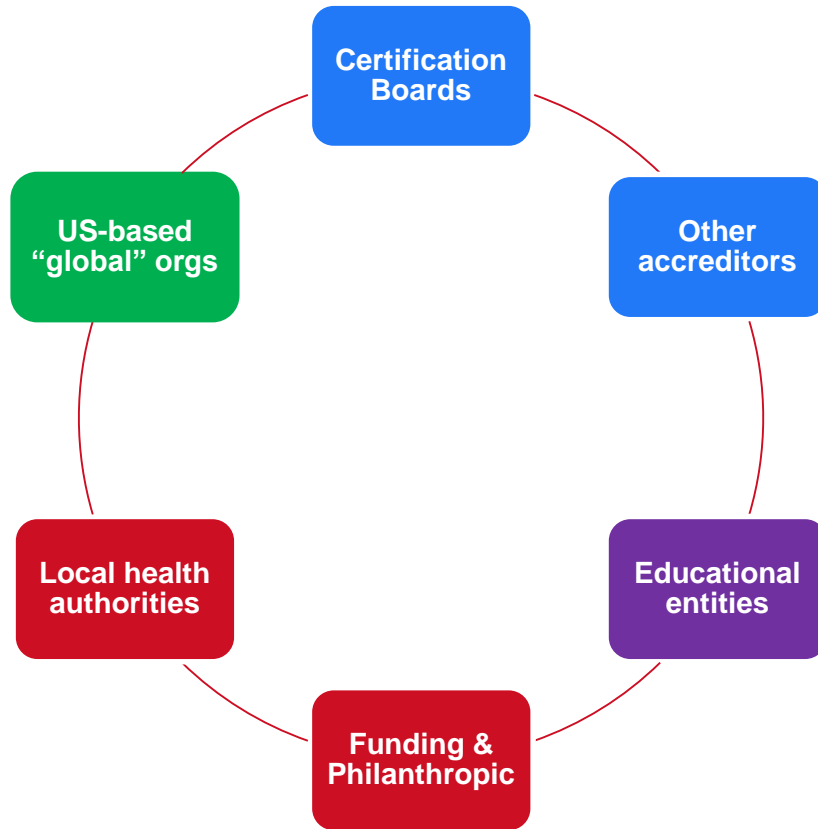
All required clinical education for entry into ACGME- accredited fellowship programs must be completed in an ACGME- accredited residency program, an AOA-approved residency program, a program with ACGME International (ACGME-I) Advanced Specialty Accreditation, or a Royal College of Physicians and Surgeons of Canada (RCPSC)-accredited or College of Family Physicians of Canada (CFPC)-accredited residency program located in Canada. (Core)

## **ACGME-I Requirements:**

Prior to appointment in the program, fellows should have completed an Accreditation Council for Graduate Medical Education (ACGME)- or ACGME-I-accredited residency program or an equivalent program acceptable to the DIO, GMEC, and program director.



# Lesson 9: Developing appropriate strategic partnerships is important



To promote  
and support  
PGME across  
the world



# Lesson 10: There is inherent tension in the system



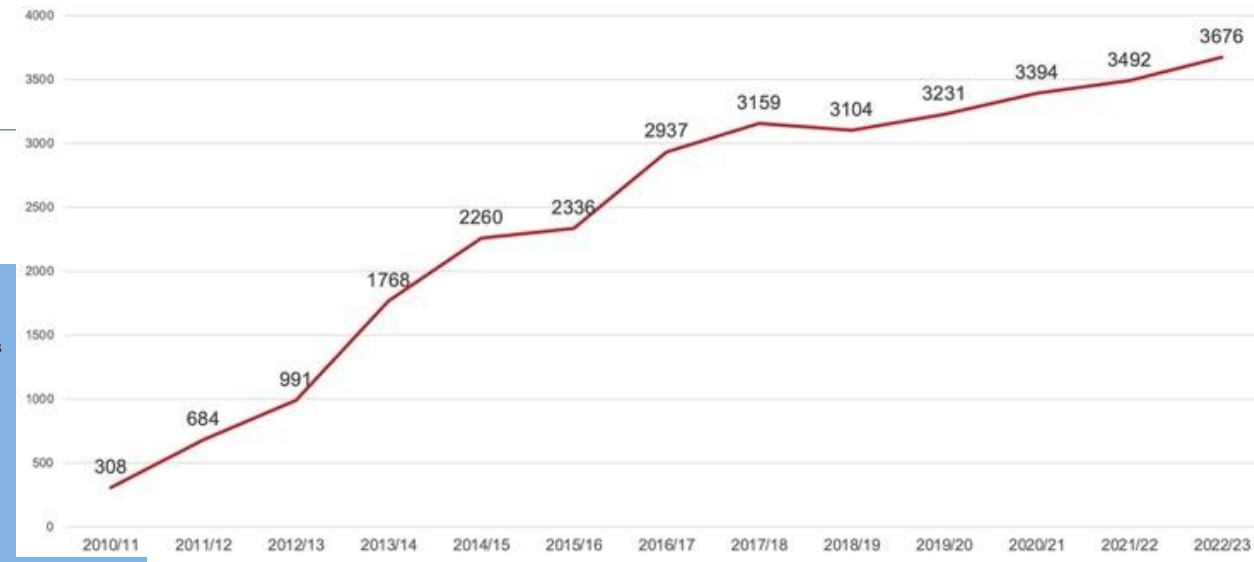
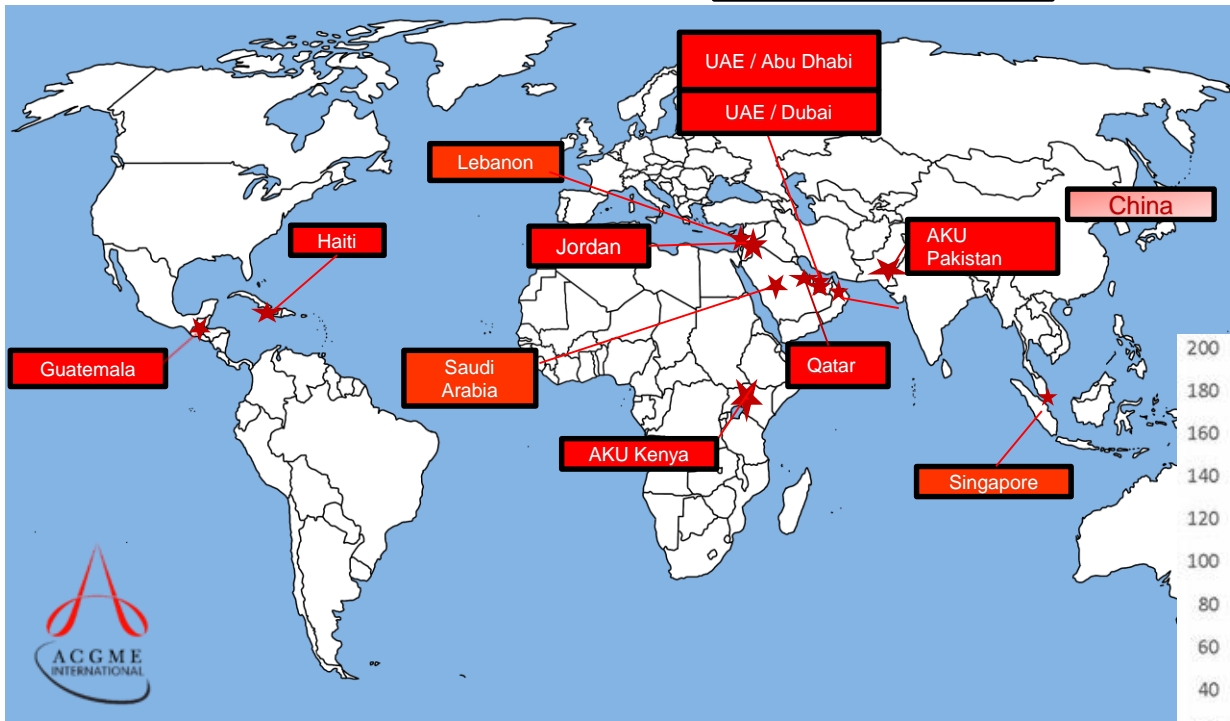
Uniformity  
US specialty construct  
Recognition of excellence  
Need for resources

or flexibility?  
or other models?  
or improvement?  
or commitment?



# ACGME-I in 2022

Accredited Institutions      Contract only







**Thank You!**



**Dr. Elsheikh Badr**  
Policy Development Expert

Dr Elsheikh Badr is a public health physician and a health workforce expert and strategist with over 20 years' service in senior health systems and health workforce positions in Sudan and beyond. He qualified as medical doctor and obtained a postgraduate diploma in public health from Gezira University in Sudan and a master's in health policy planning and management from the University of Leeds UK. His professional qualifications included Sudan Board fellowship in community medicine and the fellowship of the Faculty of Public Health of the Royal Colleges of physicians UK. He obtained postgraduate training certificates on health workforce development including at University of Liverpool, University of Oxford, Royal Tropical Institute Amsterdam, Collective leadership institute Berlin, Harvard University, and University of California at Berkeley. Dr Badr was the Director for Health Workforce Development at the Sudan Federal Ministry of Health and President of the Academy of Health sciences, a large, decentralized health professions education institution. He also served as Secretary General for the Sudan Medical Specialization Board, the premier postgraduate medical education body in the country. Dr Badr has been widely involved in national, regional, and global health workforce and health professions education initiatives. He is currently the Chairperson of the Community Medicine Council of the Arab Board of Health Specializations. Dr Badr is also a designated WHO health workforce consultant and served as member of international expert panels convened by the WHO on various areas related to health workforce development. Since 2019, Dr Badr has been serving as policy expert with the National Qualifications Center UAE (Ministry of Education) working on the project of the National Institute for Health Specialties (NIHS) aimed at the development of postgraduate health professions education capacity. He is currently part of the NIHS team working in areas relating to governance, accreditation, assessment, and CPD. Dr Badr research work and interests include health systems strengthening, health workforce policy, migration, health professions education, and health workforce regulation.



# The NIHS Accreditation System

*Reflections and Lessons for Improving the Survey Experience*

**Dr. Elsheikh Badr**  
**Policy Development Expert**

**1<sup>st</sup> Emirati Conference on Medical Education**

**11 February 2023**



## Presentation Outline

- Accreditation concepts
- Role of accreditation surveyors
- Role of NIHS support team
- The survey experience
- Accreditation decision





## Accreditation Concept

“The process of **formal evaluation** of an educational program, institution, or system against **defined standards** by an **external body** for the purposes of **quality assurance and enhancement**”

Frank et al, 2020





# Accreditation Principles

Developmental

Continuous and  
not a one-off  
encounter

Mostly  
qualitative  
judgement

Driven by health  
care safety and  
effectiveness

Guided by ethical  
underpinnings  
(honest exercise)

Transparency

Accountability

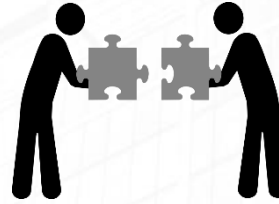
Mutual learning  
considerations



# Why is Accreditation Important?



Quality assurance  
process aligned with  
expected standards



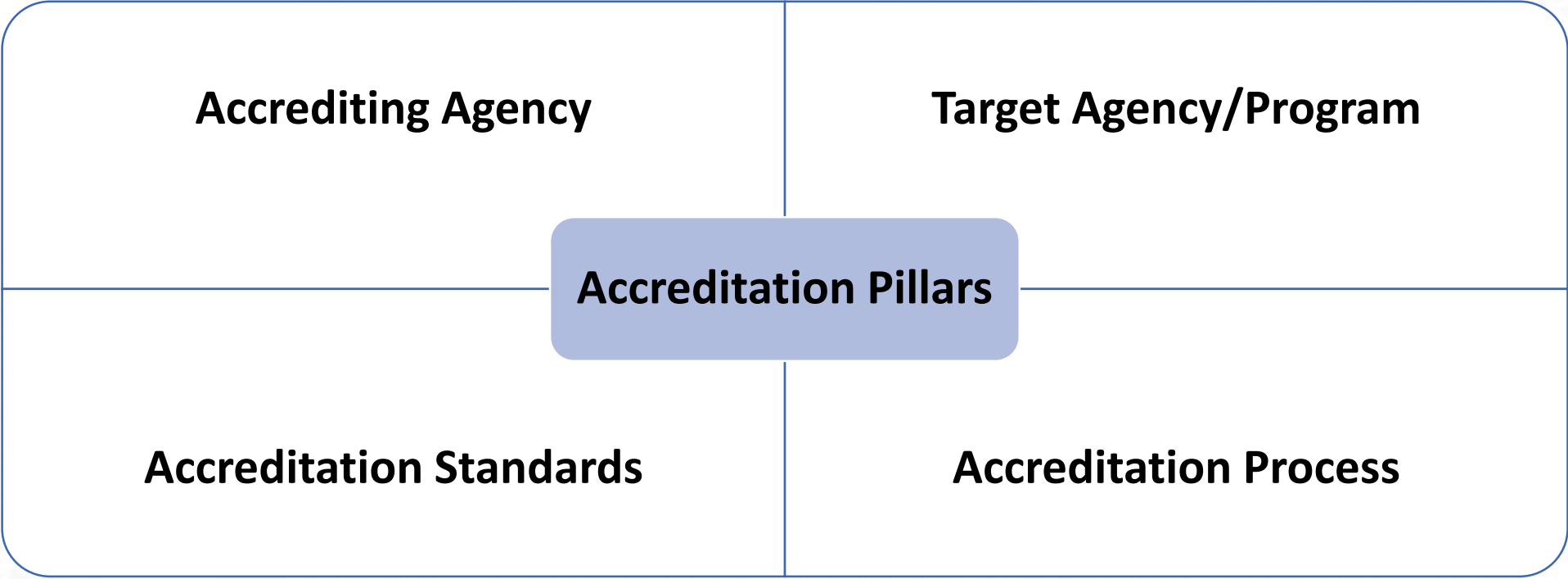
Graduates that are fit  
for practice and fit for  
purpose



Public Safety



# Pillars of Accreditation





## The NIHS Mandate (Accreditor)

- Cabinet Decree No (28) year 2014 mandates the NIHS to accredit institutions and programs in context of health specialties
- As a national institution, the NIHS ensures harmonization of standards and streamlining of specialty education towards a unified national system benchmarked to international best practice
- The NIHS spearheads a national accreditation system anchored in a participative approach



# Targets for Accreditation (Accreditees)

|                     |   |
|---------------------|---|
| <b>Institutions</b> | <ul style="list-style-type: none"><li>▪ Hospitals</li><li>▪ Health care facilities</li><li>▪ Umbrella institutions e.g., health systems, academic systems, etc.</li></ul> |
| <b>Programs</b>     | <ul style="list-style-type: none"><li>▪ Residency</li><li>▪ Fellowship</li><li>▪ Internship</li><li>▪ CPD</li></ul>   |



# NIHS Standards Development Process

Informed by best practices internationally



Contextualized to our local practice



Benefited from residency experiences in UAE



Reviewed by members of the scientific committee



Approved by Council of Scientific Affairs





# Accreditation Standards

- General/Common Requirements
  - Institutional
  - Program level
- Specialty-specific requirements
- Referral policies, rules, bylaws, decisions



# Residency and Fellowship Programs

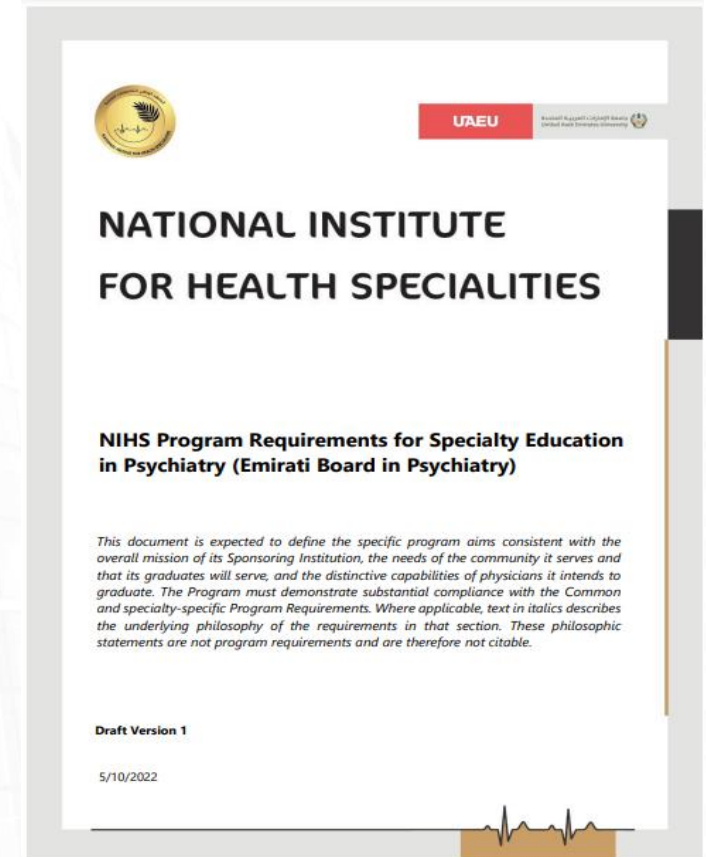
|  |   |   |   |   |  |
|--|---|---|---|---|--|
| <br><b>ENT</b>                      | <br><b>Psychiatry</b>                        | <br><b>Pediatrics</b>          | <br><b>Surgery</b>             | <br><b>Anesthesia</b>                | <br><b>Dermatology</b>          |
| <br><b>Gastroenterology</b>         | <br><b>Hematology</b>                        | <br><b>Neurology</b>           | <br><b>Ophthalmology</b>       | <br><b>Pharmacy</b>                  | <br><b>Radiology</b>            |
| <br><b>Adult Rheumatology</b>       | <br><b>Urology</b>                           | <br><b>Family Medicine</b>     | <br><b>Emergency Medicine</b>  | <br><b>Obstetrics and Gynecology</b> | <br><b>Internal Medicine</b>    |
| <br><b>Clinical Genetics</b>        | <br><b>Neonatology</b>                       | <br><b>Medical Internship</b>  | <br><b>Intensive Care Unit</b> | <br><b>Cardiology</b>                | <br><b>Prosthetic Dentistry</b> |
| <br><b>Infectious Disease</b>       | <br><b>Periodontology</b>                    | <br><b>Endodontics</b>         | <br><b>Nephrology</b>          | <br><b>Orthodontics</b>              | <br><b>Pediatric Dentistry</b>  |
| <br><b>Pediatric Rheumatology</b> | <br><b>Child and Adolescent Psychiatry</b> | <br><b>Dental Internship</b> |   |   |  |



# Program Accreditation Requirements

## Key Areas

- Sponsoring Institution.
- Participating Sites.
- Recruitment & Resources.
- Personnel: Program Director , Faculty and Program Coordinator.
- Resident Appointments, Eligibility Requirements and Number of Residents.
- Educational Program, Defined Core Competencies.
- Curriculum Organization and Resident Experiences.
- Resident, Faculty and Program Evaluation.
- Clinical Experience and Education.



[https://nihs.uaeu.ac.ae/en/acc\\_forms\\_requirements.shtml](https://nihs.uaeu.ac.ae/en/acc_forms_requirements.shtml)



## Accreditation Process

**Phase 1**

Application  
and self-study

**Phase 2**

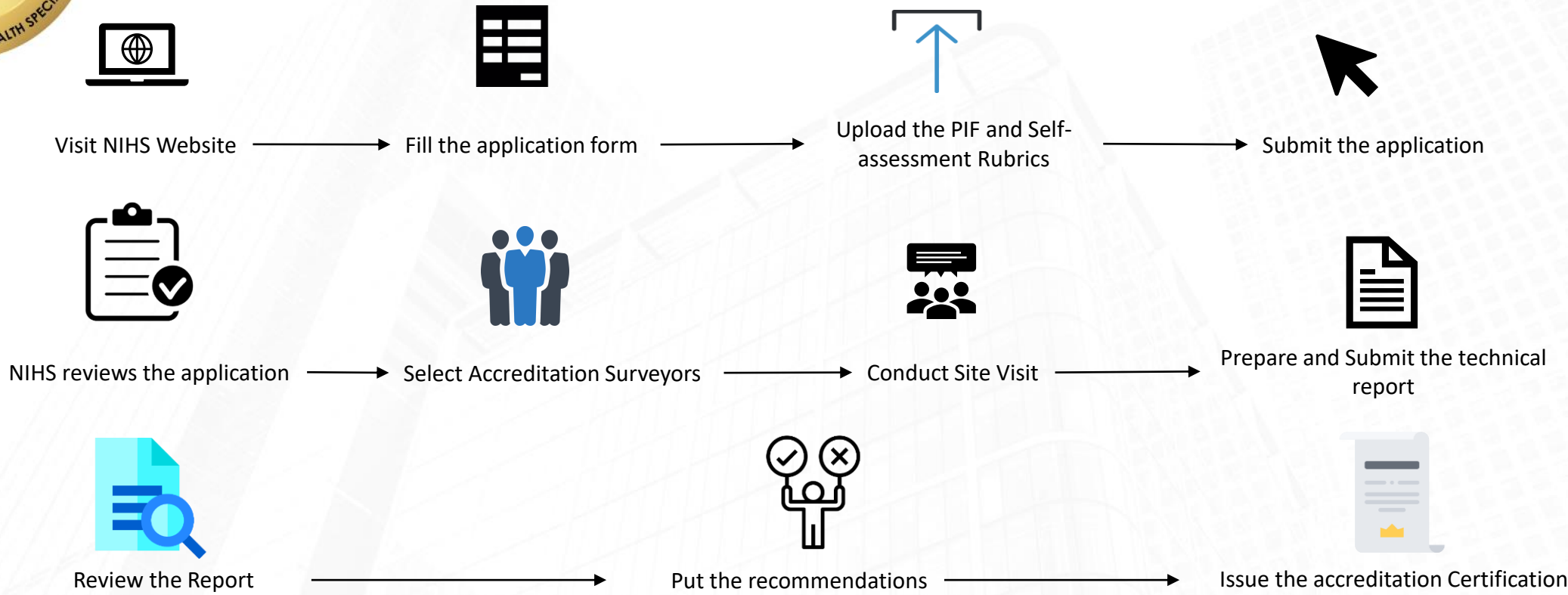
Review and  
site visit

**Phase 3**

Accreditation  
decision



# Accreditation Process







# The Role of Accreditation Surveyors

- Human tool to support Application Assessment and Decision Making
- Their role cross cuts the whole process: reviewing applications, conducting the visit, involvement in decision making
- They provide useful peer opinion to support improvement of institutions and programs
- They provide useful feedback to support improvements within the NIHS
- They can coach and mentor new generations of surveyors



# Accreditation Survey Team



Usually between 2 to 3.



From outside the institution



At least one subject matter expert

## Main Function:

To validate if the Accreditation Standards are Met, Partially Met, Not Met or N/A and provide feedback for improvement.





# Essence of Accreditation Surveying

Is not only a one-day ad hoc encounter!

Is a collaborative endeavor

Is a learning process for all

Is dynamic and iterative

Is a structured research-like process

Its effectiveness rests on good preparations



# Standardization and Development of Surveyors

- Surveying for accreditation purpose is not open to anyone
- Criteria for Selecting Surveyors
- Process for Application
- Training Requirements
- Formal Registry of Surveyors
- Recognition of Surveyors

The   
Certified  
Surveyor



# The Role of NIHS Support Team

- Convening and Orientation of Surveyors
- Communicating the necessary resources and documentation to surveyors
- Coordinate the logistics for the site visit
- Witness the site visit and respond to relevant queries
- Maintain communication with target institutions and programs
- Support surveyors in preparing the survey report
- Provide feedback to NIHS on the whole process





# The Survey Experience

Before the site  
visit

During the site  
visit

After the site visit





## Before the Site Visit

- Get acquainted with NIHS rules and regulations
- Plan to dedicate yourself to the site visit day/duration
- Read the application and accompanying documents
- Attend the NIHS pre-visit meeting
- Divide roles among surveyors
- Prepare your notes



## During the Site Visit

- Arrive on time
- Mind the purpose of accreditation as developmental: be constructive
- Establish rapport and trust
- Be critical and triangulate
- Take the lead and manage the conversations
- Mind the difference between institutional and program accreditation
- Time management (be guided by the schedule)
- Avoid any areas of conflicts



## During the Site Visit

- The site tour: what to expect?
  - Purpose: verifying what is reported
  - Focusing on educational setup and environment
  - Triangulate e.g., casual talks
- Carefully manage the exit meeting
  - Purpose: concise reflections and clarifications
  - Ask for missing/additional documents
  - Highlight discrepancies
  - Avoid communicating a decision (outcome)



## After the Site Visit

- Compiling surveyors' comments/judgement
- Consensus among surveyors
- Contacting the institution/program for any clarifications
- The final joint report (NIHS format)
  - Overall reflections
  - Citations
  - Recommendations for improvement
  - Recommendation for accreditation decision
- Feedback to NIHS: any reflections, observations, recommendations from surveyors





## After the Site Visit

- Reporting back to the central Accreditation Committee
  - Attending the committee meeting
  - Presenting on behalf of the survey team
  - Communicate the agreed recommendation and not an individual judgement
  - Respond to committee queries or clarifications
  - Do not vote against the survey recommendation (if you are a member of the Central Accreditation Committee)



# Illustrative Examples



# Program Accreditation Survey Agenda

| Agenda   | Remarks   |
|--|---|
| ▪ Meeting the Program Director                             | Together with Program Coordinator and Associate Program Director if available |
| ▪ Documents Review   | With program Director and Program Coordinator                                 |
| ▪ Meeting with Residents/fellows                           | Representatives from all levels   |
| ▪ Meeting with Faculty                                     | Minimum 5 Faculty   |
| ▪ Meeting with the Head of Department                      |   |
| ▪ Facility Tour  | e.g., On- Call Rooms, Lounge, Training classrooms, OPD, Wards, ER, OR, etc.   |
| ▪ Meeting with DIO   |   |
| ▪ Surveyors Closed Meeting and Preparing the Survey Report |   |
| ▪ Exit De-Brief report with the Program Director           | Program Coordinator and DIO can attend  |



# Program Accreditation Forms



## National Institute for Health Specialties Common Program Information Form

| 1. GENERAL INFORMATION  |  |                               |
|---|--|-------------------------------|
| 1 Application Information   |  |                               |
| Date:   | Click or tap here to enter text.   |                               |
| Application Type:   | <input type="checkbox"/> New (Initial Accreditation Application)<br><input type="checkbox"/> Renewal (Continued Accreditation Application) |                               |
| 2 Program and Sponsoring Institution Information  |  |                               |
| Title of Program:   |  |                               |
| Name of Sponsoring Institution:   |  |                               |
| Address:  |  |                               |
| Hospital/Center:  |  |                               |
| PO Box:   |  |                               |
| Institutional Education / Academic Affairs Director (Designated Institutional Official):  |  |                               |
| Email:  |  |                               |
| Start date:   |  |                               |
| Accreditation and/or Certification body (if applicable provide evidence of current accreditation letters in the appendix such as Arab Board, ACGME-I, Royal College (letters without citations), etc.): | <input type="checkbox"/> Yes   | <input type="checkbox"/> No   |
| If Yes, Specify Accreditation Body  | Accreditation Body   | Date of Initial Accreditation |
| Training years:   |  |                               |



## National Institute for Health Specialties Internal Medicine Program Information Form

| Application Information   |  |
|---|--|
| Date:   | Click or tap here to enter text.   |
| Application Type:   | <input type="checkbox"/> New (Initial Accreditation Application)<br><input type="checkbox"/> Renewal (Continued Accreditation Application) |
| Program Name:   | Click or tap here to enter text.   |
| Institution Name:   | Click or tap here to enter text.   |
| Table of Contents   |  |
| When you have the completed forms, number each page sequentially in the bottom. Report this pagination in the Table of Contents and submit this cover page with the completed Program Information Form. |  |
| Advanced Specialty PIF  | Page(s)  |
| 1. Introduction   | #  |
| A. Duration of Education  | #  |
| 2. Institutions   | #  |
| A. Participating Sites  | #  |
| 3. Program Personnel and Resources  | #  |
| A. Program Director   | #  |
| B. Associate Program Director(s)  | #  |
| C. Faculty  | #  |
| D. Other Program Personnel  | #  |
| E. Resources  | #  |
| 4. Resident Appointment   | #  |
| A. Residents Appointment and Eligibility Criteria   | #  |
| 5. Educational Program  | #  |
| 1. Regularly Scheduled Didactic Sessions  | #  |
| 2. Clinical Experience  | #  |
| 3. Residents' Scholarly Activities  | #  |
| 4. Duty Hour and Work Limitations   | #  |
| 6. Core Competencies  | #  |
| A. Patient Care   | #  |
| B. Medical Knowledge  | #  |
| C. Practice-based Learning and Improvement  | #  |

| Form Title                  | Version | Date     | Owner | Page |
|-----------------------------|---------|----------|-------|------|
| NHHS Internal Medicine Form | 1       | Nov 2021 | NHHS  | 1    |



## National Institute for Health Specialties Rubrics for Internal Medicine Residency Program

| GENERAL INFORMATION   |                                  |                          |                          |                                  |                                  |
|---|----------------------------------|--------------------------|--------------------------|----------------------------------|----------------------------------|
| 1 Institution Information   |                                  |                          |                          |                                  |                                  |
| Institution:  | Click or tap here to enter text. |                          |                          |                                  |                                  |
| Address:  | Click or tap here to enter text. |                          |                          |                                  |                                  |
| Date:   | Click or tap here to enter text. |                          |                          |                                  |                                  |
| Requirements  | Status                           |                          |                          | Evidence if applicable           | Comments                         |
|   | Met                              | P. Met                   | Not Met                  |                                  |                                  |
| INSTITUTION   |                                  |                          |                          |                                  |                                  |
| 1. The program is sponsored by a National Institute for Health Specialties accredited sponsoring institution. | <input type="checkbox"/>         | <input type="checkbox"/> | <input type="checkbox"/> | Click or tap here to enter text. | Click or tap here to enter text. |
| 2. A valid program letter of agreement (PLA) exists with each participating site.                             | <input type="checkbox"/>         | <input type="checkbox"/> | <input type="checkbox"/> | Click or tap here to enter text. | Click or tap here to enter text. |

| Form Title  | Version | Date       | Owner | Page |
|---|---------|------------|-------|------|
| Rubrics for Internal Medicine Residency Program Accreditation | 1       | April 2021 | NHHS  | 1    |



# Meeting with the Program Director

- Start with General Positive Comments/Suggestions
- The Program Director to describe:
  - Strengths of the Program
  - Challenges Facing the Programs
  - How the Program have responded to Previous Weakness
  - Adequate Admin and Time Support
  - Relationship with the Head of Department or Divisions
  - Assessing Process Not the People
- How the Training Program Committee Function:
  - Role of Residents and fellows.
  - Clarification from the CCC & PEC's Minutes Documents Review
  - How is the Program running?
  - Are the Training Program Resources Adequate?
  - How is the Academic Program Structured and Delivered? How is the Communication with the GMEC?
  - How is the Communication with the DIO?
  - How is the Support from the DIO and the Institution? How is the Communication with the NIHS?





# Meeting with Head of Department

- To describe an overview of the Program: Strengths and Challenges
- To describe the Involvement with the PD and TPs: Adequate Support for PD
- Are the Resources Adequate for the Programs and the Department?
- How the Faculty are assessed, rewarded
- Feedback provided and poor performance handled?



# Meeting with Residents and Fellows

- Emphasize that comments are Confidential and Anonymous
- Compliance with Standards
- Look for Balance of Strengths and Areas of Improvement
- Relationship with PD, Department Heads
- Training Programs' Goals and Objectives, do they have it and meet it?
- Educational, Clinical and Procedural Skills
- Graduating Professional Responsibilities
- Supervision of Training according to Training Level (Direct or Indirect)
- Service/Training Ratio
- Protected Academic time
- Training Programs' Academic Half-Days, Who is involved? What is covered?
- Assessment of Clinical and Procedural Skills



# Meeting with Residents and Fellows

- Day-to-day Feedback, End-of-Rotation Feedback, Timely?
- Evaluation of the Training Programs, Rotations, Program Director and Faculty?
- Training Environment, Safe and Free of Intimidation and Harassment?
- Open-Ended Questions: Strengths and Challenges of the Program
- What would they improve/change first if they were the PDs or the DIO?
- Be careful of having One Trainee Dominate the Discussion
- Be careful of having One Issue Dominate the Discussion
- Watch Body Language for Clues
- Cover all Issues
- Closing Question: Would you Recommend This Training Center or Program to a New Graduate Applicant?



## Meeting with Faculty

- Explore Strengths and Challenges of the Training Program
- Do they receive and implement the Goals and Objectives for each component of the Training Program?
- Protected time for training (FTE as per NIHS requirements)
- Communication with the Department Heads and the PD
- Assessment of the Residents and Fellows and Faculty either received and provided?
- Their Involvement in the Academic Half-Day
- Do they feel valued?
- Do they have Opportunities for Faculty Development?
- Scholarly and Safe Training Environment?





## At the End of the Survey

- The Survey Team identifies the Strengths and Areas for Improvement, Areas for Non-Compliance, Avoid the word “Weakness”.
- Exit De-Brief with the PD (Program Accreditation or DIO (Institutional Accreditation).
- Each Area for Improvement or Weakness Relates to One of the Accreditation Standards.
- Accreditation Survey Report is Prepared, Signed and Submitted within the same day before the Survey Team Leaves.
- Do not disclose the Recommended Accreditation Decision during the Exit De-Brief, or at anytime.
- The survey visit outcome remains as a recommendation. The decision is taken later by NIHS
- The decision will be communicated to you via email.





NIHS  
Accreditation  
Surveyors  
Reporting  
Card

|  |                             |  |                          |                                |                     |                           |  |
|--|-----------------------------|--|--------------------------|--------------------------------|---------------------|---------------------------|--|
| Institution:   | Add text                    |  |                          |                                | Program Title:      | Add text                  |  |
| Site Visit Date:   | Add text                    |  |                          |                                | Surveyor name(s):   | Add text                  |  |
| Section 1: General Findings  |                             |  |                          |                                |                     |                           |  |
| Overview:  |                             | Add text   |                          |                                |                     |                           |  |
| Based on all the information available to the NIHS surveyor Committee members at the time of site visit, the committee recommended the following decision:<br>▪ Add text |                             |  |                          |                                |                     |                           |  |
| Resident's/Fellows 'Maximum Capacity Per Year  |                             |  |                          |                                |                     |                           |  |
| Training Years   | Current Resident's per Year | Current Resident's per Program                                     | Core Faculty per program | Core Faculty to resident ratio | Faculty per program | Faculty to resident ratio |  |
|  |                             |  |                          |                                |                     |                           |  |
| Section 2: Citations   |                             |  |                          |                                |                     |                           |  |
| Areas not in substantial compliance (Citations) foundational requirements and areas of improvement must be observed:   |                             |  |                          |                                |                     |                           |  |
| Criterion :  |                             | Add text   |                          |                                |                     |                           |  |
| Status:  |                             | Since: DD/MM/YYYY   Status: <u>(Met/Partially Met/Not Met)</u>     |                          |                                |                     |                           |  |
| Surveyors Note:  |                             | Based on provided and reviewed material to the surveyors .....etc. |                          |                                |                     |                           |  |
| Section 3: Suggestion of Areas of Improvement  |                             |  |                          |                                |                     |                           |  |
| ▪ Add text   |                             |  |                          |                                |                     |                           |  |
| Surveyor's Name:   |                             | Add text   |                          | Surveyor's Signature:          |                     | Add signature             |  |



# Dealing with Difficult Situations

- Host dominance
- Controlling interviews
- Addressing inertia
- Disagreement among surveyors
- Adverse events
- Ethical dilemmas



# The Accreditation Decision

- Surveyors report is central to the decision-making process
- The Central Accreditation Committee is the next layer of governance for decision making
- The NIHS Secretary General takes the decision based on the Central accreditation committee recommendation
- Appeals against accreditation decision is possible
- The revision process, if decided by the NIHS, can involve engagement of the survey team and the Central Accreditation Committee



# The Accreditation Decision



18<sup>th</sup> March 2022  
Dr Latifa Al Ketbi  
DIO  
Ambulatory Healthcare Services

Dear Dr Latifa,

The Central Accreditation Committee has reviewed the application & surveyors report submitted for institutional accreditation with regards to Ambulatory Healthcare Services.

Based on the recommendation of the Central Accreditation Committee, the decision of the NIHS is to grant institutional accreditation for AHS Hospital for a period of 5 years effective from the 18<sup>th</sup> of March 2022 and you will receive a certificate to this effect. Congratulations on this achievement and the great efforts you dedicated to promote specialty education.

The following are areas for improvement raised by the survey visit that need to be addressed within a year from now

- DIO and GMEC report to higher management level to ensure reaching the greatest degree of support, transparency, and intendancy.
- For future program expansion plans, training space, equipment and resources will be required across all specialties.
- It is recommended to increase the number of dentistry faculty to cover all dentistry specialties.
- Invest more on research projects & encourage residents to develop and engage in the innovative projects.
- Increase the awareness activities for the faculty around their educational policies.
- Address solutions for some cultural issues related to male residents rotating in dentistry & Ob-Gyn to ensure adequate exposure.







# Reasons for the Institution and Program Survey

New  
Accreditation

Re-  
Accreditation

Conditional  
Accreditation  
Follow-up

Warning for  
Freezing  
Follow up

Freezing  
Follow-up

Withdraw

Maintenance  
of  
Accreditation  
Random  
Survey.


Citation or  
Red Flag  
Initiated  
Survey





# NIHS E-Service

## Registration of Accreditation Surveyors Service



ا A A A العربية

ABOUT USACCREDITATIONASSESSMENTTRAININGE-SERVICESCONTACT US

National Institute for Health Specialities - Registration of Accreditation Surveyors Service

1 DEFINITION OF SERVICE

2 REQUIREMENT

3 PROCEDURES

▶ START SERVICE

SERVICE CHANNELS:DURATION: 6 WEEKS MAXIMUM

### Accreditation Surveyors Registration form

GENERAL INSTRUCTION  
Before you begin completing your application

- Gather the required information so that you can complete the application without interruption.
- Have a copy of your CV ready in PDF (.pdf) format to upload in step (i). Maximum file size 1000kb
- Have a current photo ready in gif or jpg format (.gif, .jpg) to upload in step (i). Your photo size should be approximately (200 pixels x 300 pixels). Maximum file size 500kb.
- All the information you entered here will be treated with high confidentiality.

GENERAL INFORMATION  
Personal Information

Full Name \*

Nationality \*

Select

Date of Birth \*

Date of birth

Gender \*

Select

Mobile Number \*



UAEUجامعة الإمارات العربية المتحدةUnited Arab Emirates University

# Call For Accreditation Surveyors

### About NIHS:

NIHS was established by Cabinet Decree as a national institution mandated to spearhead, regulate, and organize professional development for the health workforce with a particular emphasis on specialty training.

#### NIHS roles:

- Set standards for Institutional and specialty program accreditation
- Accredit training institutions and specialty programs
- Approve Residency and Fellowship programs
- Conduct specialized professional examinations.
- Issue certificates for higher health specialties (Board and Fellowship)

### Role and Responsibilities for Accreditation Surveyors:

- Implement the accreditation site visits to the medical training centers.
- Conduct the required interviews to obtain the accreditation.
- Audit the files and documents submitted by the training centers.
- Ensure all documents meet the NIHS conditions, standards, and requirements.
- Inspect the training center's facilities and equipment used for the training programs.
- Ensure the availability of significant academic and administrative staff to run the training programs.
- Prepare a comprehensive detailed report on the outcomes of the site visit.
- Provide all information to Central Accreditation Committee.

REGISTER NOW

[https://nihs.uaeu.ac.ae/en/registration\\_accreditation\\_surveyors/form.shtml](https://nihs.uaeu.ac.ae/en/registration_accreditation_surveyors/form.shtml)

"Salsabil Study"  
"The University of the Future"



# Questions, Feedback, Discussion..



**Thank You..**