

# Historical Milestones of Continuing Professional Development System for Health Professionals in Egypt

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## Abstract

With over 104 million citizens in 2020 and high population growth, Egypt needs and deserves high-quality health care. While the regulatory framework for medical education in Egypt has rapidly evolved, the progress of developing a system of Continuing Professional Development (CPD) for health professionals has been slow. Grounded on the well-developed tradition of lifelong learning in the medical community, CPD integrates every health professional's ethical responsibility and increases job satisfaction. CPD involves an ongoing process of learning and upgrading knowledge and skills. It also entails the personal development of healthcare providers throughout their professional life. On March 13, 2022, Law No. 12 of 2022 was issued and published, which pertains to the establishment of the Egyptian Health Council and regulates its work. The executive regulations of Law No. 12 of 2022 were planned to be issued within six months of the law's publication. However, the executive regulations have not yet been issued, and the situation remains as it is without any regulating bylaws (in action) for an obligatory CPD system for all health professionals working in the Arab Republic of Egypt.

**Keywords:** CPD system, Professional Development, Health professionals

## Introduction

In nations where relevant systems are well set up, Continuing Professional Development (CPD) could be a standard prerequisite for the licensing, specialization, advancement, or re-licensing of medical specialists<sup>(1)</sup>. CPD involves an ongoing process of learning and upgrading data and skills. It also entails the personal development of a healthcare provider throughout his professional life<sup>(2)</sup>. CPD has been advocated and practiced worldwide<sup>(3)</sup>. In many countries, like the United States, Canada, and the United Kingdom, CPD is mandatory for the

revalidation of a doctor's practicing license. Singapore has implemented compulsory CPD since 2003<sup>(4)</sup>. Hong Kong's non-specialist doctors are encouraged to hitch the mandatory CPD imposed for specialist<sup>(5)</sup>. Regulations and bylaws regarding CPD among medical professionals are already in situ within the Philippines and Thailand, but participation remains voluntary<sup>(6)</sup>. The following are two examples, one international and one regional, for countries adopting CPD systems. At the international level, in May 2011, the Medical Council of Ireland (MCI) began to manage a compulsory system of CPD, which is

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required for the annual retention of a license to practice. Doctors seeking to renew their professional registration every year are required to complete an annual declaration form to verify that they need to be enrolled in and are complying with the necessities of a CPD scheme<sup>(7)</sup>. Regionally, the Kingdom of Saudi Arabia had no mandatory system of professional registration until 1995, when it imposed an accreditation system that counts Continuing Medical Education (CME) activities for the aim of licensing and re-licensing. The regulatory body for the registration and licensing of health professionals in the Kingdom of Saudi Arabia is the Saudi Commission for Health Professions (SCHS)<sup>(8)</sup>.

#### *Historical Milestones and Legislative Development*

In Egypt, CPD started in 2009 with a joint project between the Egyptian Medical Syndicate and the World Health Organization (WHO)<sup>(9,10)</sup>. This project aimed to assess the need for creating a CPD national system and exploring the conduct of appraisal, and the link between appraisal processes and access to continuing education and training. Focus groups were conducted in the Egyptian Medical Syndicate to study these issues in collaboration with the WHO. Although this project, in its initial phase, was exploratory, it was intended to extend its mission through a multiphase project to achieve the overall goal of establishing an internationally recognized system of CPD in health professions in Egypt. A joint project between the Egyptian Medical Syndicate and the WHO has been launched in the year 2009 as below.

#### *Terms of Reference of the Egyptian Medical Syndicate- WHO CPD Project*

1. Commission case studies from different institutions including of Medicine to present experiences and recommendations on

establishing CPD Program based on the guidelines provided.

2. Form a working group of national experts for the national CPD Program.
3. Hold several interactive seminars to review and improve on the different themes and case studies of CPD Program in collaboration with relevant partners.
4. Recruit national experts to draft the working paper for the conference on Continuing Medical Education (CME) and CPD in Egypt.
5. Convene a national conference to develop a consensus on a national strategy for Continuing Professional Development in Egypt.

*The addressed research questions were as follows:*

- How would the current medical education in Egypt prepare health professionals for CPD?
- What is the pattern of CPD that is applied in the academic medical institutions in Egypt?
- How far the academic medical institutions in Egypt are ready to contribute as training centers for non-academic health professionals in CPD?
- To what extent the academia and health professionals are satisfied with the currently available methods for CPD in Egypt?
- Does CPD hold a real chance for success in case it is applied by law in Egypt?

This project has targeted two major patterns to highlight and study the present experiences, and personal and institutional views on the preparedness for establishing CPD, the first was the academia in medical schools and the second was the medical practitioners in general. Two

questionnaires were designed. The first questionnaire was applied to 7 medical schools (Cairo, Ain Shams, Alexandria, Suez Canal, Mansoura, Zagazig, and Al Menia universities). The second was used for interviewing medical practitioners working at different hospitals from all over Egypt. As regards the first targeted pattern, 120 professors (heads of departments) in 7 medical schools were interviewed using the first questionnaire while 1628 medical practitioners from different parts of Egypt were interviewed using the second questionnaire.

*The research findings from the project can be summarized as follows:*

- Current undergraduate medical education in Egypt needs an urgent reform plan to shift medical curricula from the concept of teaching to the concept of learning that prepares graduates for their future that depends on self, life-long learning.
- Academic medical institutes in Egypt depend more on postgraduate studies compared to the CME/CPD initiatives to train and prepare its staff. CPD takes, mainly, the form of personal initiatives in the majority of investigated academic institutes.
- Although it is not enough, there are some focal capacities in the academic medical institutes that could effectively participate as training centers in the CPD.
- Both the academia and health professionals are mostly dissatisfied with the current sources for CPD in Egypt. The absence of controlling laws and regulating bylaws is contributing to this sense of deficiency and dissatisfaction.

*Recommendations of this research were:*

- To involve the stakeholders such as

- the Ministry of Health and Medical Syndicate in the planning and evaluation of medical programs.
- To give regular feedback to the academic medical institutes about the performance of their graduates and their willingness to be reflected on the educational programs and become part of CME and CPD strategies for further promotion of their graduates' competencies.
- To consider the project as a transient phase before applying the CPD in the medical field in Egypt, therefore it will give the potential training centers a good chance to be prepared for such highly vital mission.

*Action plan for this research*

- Launching political pressure to endorse the CPD law in the Egyptian Parliament. We could help produce bylaws that address details needed for the implementation of CPD system in Egypt.
- As a multi-phase project, a proposal will be submitted to the WHO to continue sponsoring this important national activity until it materializes and becomes a national system in Egypt. Phase II terms of reference will be around:
  - Extending the CPD awareness the CPD bylaws to fulfill the health professionals' concerns that have been addressed during the CPD National Workshop.
  - Conducting a CPD pilot study to test the readiness of the Egyptian Medical Community to implement the CPD system.
  - Editing a comprehensive document about the CPD potentiality in Egypt to help the decision makers precisely pave the road map for implementing a CPD system in Egypt.

Workshop organizers were President of the Egyptian Medical Syndicate, General Secretary of the Arab Medical Union, the Founding Head of the Medical Education Department at the Faculty of Medicine, Suez Canal University which is considered the first Medical Education Department in Egypt, the Arab region and the Middle East region and workshop participants were representatives from MOH, represent-

tatives from the Egyptian Medical Syndicate, representatives from Health Professions Education Institutions in different universities, representative of the Military Medical Academy, representatives from Health Training Centers, representatives from NGOs, researchers and experts in CPD, and political figures, The goal of this workshop was to develop a consensus on National Strategy for CPD.



**Figure 3: One of the national CPD workshop's sessions with the participation of the President of the Egyptian Medical Syndicate and the General Secretary of the Arab Medical Union**

*The workshop's objectives were as follows:*

- Creating awareness about the importance of establishing a national CPD system for health professionals in Egypt.
- Shedding light on the regional and international trials for establishing a national CPD system for health professionals.
- Announcing and discussing the preliminary results of the national survey on the current situation of CME and CPD in Egypt according to the results of case studies from different medical institutions and MOH training centers.
- Discussing the possible strategies for upgrading CME& CPD in Egypt based on the survey results and the current situation.
- Identifying possible resources whether human, physical, or financial for funding and sustaining the agreed national CPD strategy.
- Developing a draft national plan for a CPD strategy in the medical field in Egypt.



**Figure 4. Small group discussion session during the national CPD workshop with participation of the President of the Egyptian Medical Syndicate**

### Outcomes of the workshop:

There was a consensus from the majority of participants around the following:

- There is a definite need to implement a CPD system in the health field in Egypt.
- The environment is encouraging for implementing a CPD system in Egypt.
- The infrastructure for applying a CPD system in Egypt is not fully ready, but still there is a good potential to start with.
- The prepared CPD law for endorsement by the Egyptian Parliament is full of missing important items that should be covered by producing fully detailed bylaws.
- The government should secure the costs of CPD, rather than be the responsibility of the health professionals.
- The CPD National Agency should report directly to the Egyptian President or at least to the Prime Minister, to be totally independent from the Ministry of Health.



**Figure 5. Workshop organizers**

(President of the Egyptian Medical Syndicate, General Secretary of Arab Medical Union, Founding Head of Medical Education Department at Faculty of Medicine, Suez Canal University which is considered the first Medical Education Department in Egypt, the Arab region and the Middle East region) & workshop participants (representatives from MOH, representatives from the Egyptian Medical Syndicate, representatives from Health Professions Education Institutions in different universities, representative of the Military Medical Academy, representatives from Health Training Centers, representatives from NGOs, researchers and experts in CPD, and political figures).

### Results

- This project consisted of two parts, the first part was applied in the faculties of medicine and the second one applied to medical practitioners. Two questionnaires were used, the first one was applied in 7 faculties of medicine (Cairo, Ain Shams, Alexandria, Suez Canal, Mansoura, Zagazig, and Al Menia) while the second questionnaire was used for interviewing medical practitioners working in different types of hospitals all over Egypt.
- As regards the first part, 120 professors (heads of departments) in 7 faculties were interviewed using the first questionnaire while 1628 medical practitioners from different regions in Egypt participated

and were interviewed using the second questionnaire.

- In the first part of this project, it's our interest to know if our faculty of medicine applies CPD for their staff and what are the current capabilities to apply the continuing professional development.
  - Regarding the human resources in the related faculties, the results showed that there is enough staff for postgraduate students with an average ratio (1:1.5) while the ratio for undergraduates ranged between 1:2 in the Suez Canal Faculty of Medicine to 1:6 in Alexandria Faculty of Medicine. In all 7 faculties except Al Menia, there were staff who are qualified in Medical Education. Moreover, two faculties (Suez Canal and Alexandria) have a department for medical education and three faculties have units or centers for continuing medical education (Cairo, Ain Shams, and Zagazig). Still in Mansoura and Al Menia faculties of Medicine, there is no specific unit or center for continuing medical education.
  - Undergraduate learning is still in the classic teacher centered method in Mansoura, Zagazig and El Menia medical faculties. Suez Canal is the only faculty following the student oriented and self-learning method in undergraduate learning. Other faculties have mixed learning methods. Mixed learning is used for postgraduate students in all studied faculties. No elective courses for undergraduate students except in Alexandria and Suez Canal. All facilities of self-learning are available in the studied faculties except Mansoura, Zagazig and El Menia that lacks only audiovisual facilities.
  - Regarding the current situation of Continuing Medical Education, 85%
- of the departments that shared in the study reported the presence of a CME for their staff. They considered the obligatory courses (6 courses) that are prerequisites for further promotion of the staff as a plan of the departments for CME.
  - 45% of surveyed departments in all universities had previously invited national experts to update the CME or quality of education which recorded the highest ratios in Suez Canal (56%) and the lowest in Mansoura (20%).
  - International experts for CME updating were invited from the 32% of all faculties departments; highest in Cairo (70%) and least in Suez Canal (12.5%). No international CME experts were previously invited in Al Menia University.
- *Is self-learning a common practice in the Egyptian universities?* The results revealed that 68% of all faculties' departments have self-learning activities for junior staff that was least reported in Ain Shams University (53%). In addition, about 56% of all the surveyed faculties have activities for CPD.
- *To what extent the CPD training programs affect the work performance?* The results pointed out that 37.7% of the departments reported a real improve in the quality of the work. Real improvement in the quality of work performance was the highest in Ain Shams (64%) followed by Cairo and Al Menia (50%) then Suez Canal (47%). Also, 44% of faculties departments reported an increase in the quality of work performance following CPD training programs. On the other hand, nearly half of all faculties departments reported no



or slight disturbance in work performance as an effect of CPD training programs.

- *Which method of learning is preferable by the faculty staff?*
  - Around 64% of the department's heads mentioned that traditional learning in CPD was the most preferred method. It was the highest in Mansoura, Cairo, and Suez Canal Universities.
  - The analysis of the second questionnaire (part two of the study) showed that 1628 medical practitioners had been interviewed. Different regions of Egypt were represented in the sample. Greater Cairo is contributing with the most comparing to the whole sample (46%) and Suez Canal zone is contributing the least (4%). The majority of the participating medical practitioners (41%) have completed the Master degree and 20% have got Diploma degree. Only 4% have got the Board/Fellowship degree. Medical practitioners participating were mostly specialists (35%) followed by residents (28%). Faculty staff members form 11.6% of the sample.
- *Do medical practitioners plan for post-graduate studies after graduation?*

The analysis revealed that 72.3% of the participants are keen to continue their postgraduate studies after graduation. The majority of residents (91%) have future plans for postgraduate studies.
- *What is the status of training activities amongst the medical practitioners?* The analysis showed that during the last 12 months, about two-

thirds of the medical practitioners attended either training programs or workshops. Medical practitioners with Doctor, Master, and board degrees reported the highest attendance rate for training programs and workshops. The median number of training activities attended during the last year was 3 for all medical practitioners irrespective to their degrees.

- *In 5 to 20 years duration, how many graduates have decided to stay without post-graduate studies?*

From the analysis of the results, it was clear that about 29% of those graduated since 6 to 10 years still general physicians while the percent amongst those graduated since 11 to 15 years was 10%. It was also, noticed that even after 20 years from graduation still 8 % did not get any postgraduate degree.
- *To what extend the trainees satisfied with the last training courses?*

The results of the interview revealed that the average score was 75 out of 100 for all items of the training course as its relation to their jobs, overall benefit, quality of the scientific contents and materials. The least score reported by practitioners concerning courses evaluation is the quality of the practical parts of the course (50 out of 100). Moreover, trainers were scored 75 out of 100 in all aspects of assessment. Similar score (75 out of 100) was given for the assessment of the training places. When we asked about the level of training courses, 20% mentioned above their levels and about 11% mentioned below their levels. It was noticed that

there was slight problem to take permission from the authorities for attending the training programs, on average this item scored 50 out of 100.

- *Are physicians aware of the new law for re-validation of their license? And is there a consensus from the medical practitioners around this law?*

The analysis showed that about 47% of the interviewees are aware about the new law and 54% agree with its items.

In 2011 this national effort was interrupted by the Arab Spring Revolution, then completely stopped till 2016. Until 2016, there was no regulatory system for accreditation of CME/CPD activities or their providers. After completion of the necessities of the MBChB or the next degree, graduates utilized to yield their qualifications to the Egyptian Medical Syndicate to get a professional title. The assigned title is as a rule based as it were on the graduation qualifications and the longtime of involvement after getting the degree<sup>(11)</sup>. Based on the same criteria, a lifelong license to practice medicine is granted by the Ministry of Health<sup>(12)</sup>.

There have been some activities to set up centers for the arrangement of CME/CPD activities in Egypt<sup>(13)</sup>. In any case, these CME/CPD providers have been working without the umbrella of a national regulatory system, which has been the most challenge for CME/CPD in Egypt. <sup>(14)</sup> This has

changed with the formal introduction of Compulsory Egyptian Medical Training Authority (CEMTA), in 2016, this authority was having three fundamental capacities: provision of CPD activities, accreditation of CPD centers, and endorsement of gotten CPD credits, with consequent grant of licenses to practice medication<sup>(15)</sup>. In 2016, Compulsory Egyptian Medical Training Authority (CEMTA) was established by Prime Minister Decision No. 210 of January 31, 2016, and amended by Resolution No. 2040 of 2016, given that the body has legal identity and reports to the Prime Minister. The CEMTA has established a Committee for Accreditation of CPD Programs called CEMTA-CPD.<sup>(16)</sup> In September 2017, a workshop organized by the Higher Education Development Experts Team and Erasmus office, Egypt in presence of representatives of the National Authority for Quality Assurance and Accreditation of Education, CEMTA, the Medical and Nursing Sectors of the Supreme Council of Universities, the Presidents of Universities, Education and Health Committees of Egyptian Parliament. the Health Care Scientific Societies, Medical and Nursing Unions and Nursing professional development experts from Egypt and Europe to discuss CPD planning, implementation, and accreditation in the health sector<sup>(17,18)</sup>. In August 2018, CPD-by-laws approved<sup>(19)</sup>. As there are still no controlling laws (in action) for obligatory CPD system for all health professionals working in Egypt.





Figure 6. The CEMTA-CPD committee celebration of CPD-bylaws approval - Egypt - August 2018.

In 2019, Issuing Law No. 153 of 2019 amending the arrangements of the Medical Profession Law, including the following: Those who have studied at the Faculty of Medicine are licensed to practice medicine for five years + two years of compulsory training. To get a license to practice medicine for the first time, it is required to pass the national examination for qualification to practice the profession, which is held by CEMTA. The license is renewed every five years<sup>(16)</sup>.

On March 13, 2022, in the Official Gazette, Law No. 12 of 2022 was published<sup>(20)</sup>. This law establishing and organizing the Egyptian Health Council was issued, which aims to regulate the fields of health in Egypt in the areas of post-graduate education, and CPD of health professionals. The provisions of Law 12 of 2022 apply to all graduates of the faculties of the health sector and other health specializations in Egypt. The Egyptian Health Council will replace the Supreme Committee for Medical Specialties established by Prime Minister's Decision No. 3 of 1998, as well as Compulsory Egyptian Medical Training Authority (CEMTA), established by Prime Minister's Decision No. 210 of 2016. The executive regulations of Law No. 12 of 2022 were supposed to be issued within six months of the law's

publication. However, the executive regulations have not yet been issued, and the situation remains as it is.

## Conclusions

Currently in Egypt, the practice of CPD is voluntary for all health professionals. As there are still no regulating bylaws (in action) for obligatory CPD system for all health professionals working in Egypt.

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