Recommendations on Continuing Medical Education

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## Appendix

(Model) Regulations on Continuing Education
Continuing Medical Education and Sponsoring
Continuing medical education as an inherent element of physicians' activities
The in-service updating of knowledge and continuous expansion of professional skills is part of the self-image of physicians.

The aim of continuing education is to safeguard and continuously improve the quality of treatment, and thus to guarantee optimum provision of medical care for patients. Regular continuing education is consequently of major importance for quality assurance in medicine. Continuing education can only be successful if, on the one hand, it closes objective gaps in knowledge and action and, on the other hand, satisfies the subjective, individually perceived need for continuing education.

The Chambers of Physicians support the quality assurance efforts of their members by issuing recommendations regarding the form and content of continuing education, and by offering suitable events of their own.

Like quality assurance and quality improvement efforts, constant continuing education follows a cycle:
- Recognition of the need for continuing education
- Definition of the learning target
- Selection of the continuing education content
- Review of the teaching offers
- Selection of the learning method
- Check of learning success
- Application of the new knowledge in daily work
- Continuous review of knowledge

Legal framework conditions
In addition to the obligation to engage in continuing medical education pursuant to Art. 4 of the (Model) Professional Code, an obligation to furnish proof of continuing medical education has been rooted in the law since 1 January 2004 (SHI Modernisation Act (GMG)), both for SHI-accredited physicians (Section 95 d Book V Social Security Code (SGB V)) and for specialists in hospitals (Section 137 Para. 1 No. 2 SGB V). Reference is made to the version of SGB V valid at any one time.

Formulation of the content of criteria for the recognition of suitable continuing education events and the crediting of continuing education certificates of individual physicians are subject to the regulatory competence of the medical community. The basis for this are the (Model) Regulations on Continuing Education of the German Medical Association, which were adopted at the 104th German Medical Assembly in 2004 (see Appendix). Regarding the rating of continuing education measures, Art. 6 Para. 3 stipulates: "The State Medical Chamber issues supplementary guidelines on the rating of the continuing education measures, these being based on the nationally applicable, standard criteria." The "Recommendations of the German Medical Association on Continuing Medical Education" formulate these criteria in detail.

In the framework of the statutory obligation, physicians can in principle only be given credits for continuing education events that have previously been recognised by a State Chamber of Physicians, or a chamber of another healthcare profession, and rated with continuing education points. Further details are governed by the respective Continuing Education Regulations of the State Chambers of Physicians.

Content of continuing education
Continuing medical education gives consideration to scientific and procedure-related knowledge necessary for maintaining and further developing skills. This means the communication
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of subject-specific, interdisciplinary and interprofessional knowledge and information, as well as the acquisition of practical skills.

Learning content serving to improve social skills, communication and leadership skills, as well as methods of medical teaching, are just as much integral elements of continuing medical education as methods of quality management and evidence-based medicine. Health system-related, business-related and legal content serving the practice of the medical profession can be given consideration.

Regardless of the individual need for continuing education, the content of continuing medical education must meet the following criteria:

- Benefit for patients
- Comprehensibility
- Relevance and up-to-dateness
- Scientific evidence / corresponding to the general state of the science
- Applicability of the knowledge acquired in professional practice
- Benefit for the workflow
- Transparency (cost/benefit ratio / quality assurance / error management)
- Critical appraisal in the context of the subject area
- Independence from ideological and commercial interests
- Conformity with the specifications of the medical community (Continuing Education Regulations, Professional Codes)
- Conformity with ethical principles (WHO Declaration)

Types of continuing education

According to the (Model) Regulations on Continuing Education, recognition and the award of points presupposes a continuing education unit lasting at least 45 minutes and classification in one of the following categories of continuing education:

**Personal study (professional literature, audiovisual teaching and learning media)**
- Reading of scientific articles in journals and technical books (Cat. E)
- Use of audiovisual media and corresponding online offerings without checking of the learning success (Cat. E)
- Media-based continuing education with checking of the learning success in written form (Cat. D)

**Continuing education events**
- Presentation and discussion, conferences (Cats. A and B)
- Courses and seminars, work in small groups (Cat. C)

Continuing education in interactive small groups of approx. 20 participants for the thematically circumscribed communication of in-depth knowledge under professional supervision.

For all types of event classified in Category C, the Regulations on Continuing Education require that the "concept envisages the involvement of every individual participant". This can usually not be ensured in larger groups. Therefore, Category C generally applies only to groups with up to 25 participants and leads to the award of an additional point. Exceptions are possible following examination of a differentiated continuing education concept.

- Workshop (Cat. C)

Joint working meeting involving a moderator, with the aim of confronting complex problems relating to a previously defined topic in cooperative, and often also practical, form. Workshops occasionally go beyond the
communication of knowledge and exchange of experience by creating new approaches and/or giving the participants new ideas for further developments. The number of participants and the duration are limited.

- **Working group (Cat. C)**
  Meeting of a group for a concrete reason to deal with a task, examine a subject or factual situation, or solve a problem. All participants are equal. The number of participants and the duration are limited.

- **Work in small groups (Cat. C)**
  Elaboration of the factual situation or a proposed solution in connection with a specific problem over a defined period of time in a group comprising 3 to a maximum of 6 participants.

- **Case-based conference (Cat. C)**
  Joint deliberations on concrete cases that take place outside the daily routine meetings of everyday hospital work and involve external participants.

- **Interdisciplinary case-based conference (Cat. C)**
  Joint deliberations on concrete cases with representatives of several disciplines that take place outside the daily routine meetings of everyday hospital or practice work and involve external participants.

- **Quality circle (Cat. C)**
  Group of physicians / psychological psychotherapists from the same or different disciplines, who deal with the constant further development of quality in the "practical provision of medical services". In an exchange of experience between colleagues, the participants' own work is analysed, evaluated and, if necessary, specifically altered in the spirit of improving quality. The quality circle is headed by a moderator, who must furnish proof of training as quality circle moderator.

- **Balint group (Cat. C)**
  The Balint group comprises 8 to 12 physicians, who meet to regularly discuss problem patients from private and hospital practice. The group is headed by a psychotherapist with corresponding experience with Balint group work. The aim of Balint group work is to detect and correct problems in the relationship between physician and patient (definition of the German Balint Society).

- **Supervision (Cat. C)**
  Special form of discussion that serves professional qualification. The group is headed by a supervisor. Supervision is based on concrete experiences in the working environment and focuses on the interplay of person, professional role, institution and addressee. Supervision provides a sheltered environment in which to examine conflicts, stressful occurrences and current difficulties in everyday professional work, from a distance and without immediate pressure to act.

- **Intervision (Cat. C)**
  Intervision is supervision among colleagues: a discussion is held in a team without a moderator. An intervision group consists of 3 to 7 participants. It is a periodic event designed on a relatively long-term basis. The participants report on their own experience in dealing with patients in order to review their own conduct and the therapeutic decisions.

- **Literature conference (Cat. C)**
  Meeting for the purpose of presenting, evaluating and critically appraising current medical literature following presentations by individual speakers, outside the daily routine meeting and involving external participants.

- **Scientific publications and activities as a speaker (Cat. F)**
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- Time as a visiting doctor (Cat. G)
  Time as a visiting doctor is spent in other hospitals, private practices, institutes or departments. It serves the acquisition of new specialist knowledge or the expansion and perfection of knowledge and skills, the improvement of, and reflection on, own work, and the promotion of mutual understanding and respect through becoming acquainted with other organisational forms and working methods. Visiting doctors participate fully or partially in the everyday professional work of their host facility without remuneration. It must be ensured in this context that the visiting doctor has a permanent contact, who supports him/her during the familiarisation period, promotes his/her integration and is available to provide information and background information. Some State Chambers of Physicians only recognise times as a visiting doctor if the Chamber of Physicians was informed thereof beforehand.

- Specialist training courses, curricular continuing education measures, postgraduate study courses (Cat. H)

Department-internal discussions of patient cases and/or decision-making processes in everyday hospital work cannot be recognised as separate continuing medical education, even if learning effects are achieved in this context.

Events restricted to a specific group of participants, e.g. members' meetings, for the purpose of political opinion-forming or representation of professional political interests, can likewise not be credited. Partial recognition of scientific items on the agenda of such events is possible.

Quality requirements for (attendance-based) continuing education offerings:

Organisation
- Definition of the participant target group
- Selection of suitable experts / speakers
- Preparation and communication of the continuing education content in accordance with the above criteria
- Timely, comprehensive and formally appropriate information on learning targets, content, methods, venue and time of a continuing education measure
- Selection of the venue, time, room and media to suit the form and objective of the continuing education event, as well as the size of the continuing education group
- Obstacle-free access for people with disabilities
- Adherence to the planned time schedule of a continuing education event, or adaptation of the course of the event to the receptive capacity of the participants, allowing sufficient time for breaks and discussions
- Offer of suitable learning success checks to complete the learning process (interactive voting system, multiple-choice questions, verbal or written attestations, etc.)
- Appropriate personal support of the continuing education participant by the organiser and correspondingly trained personnel
- Timely application for corresponding recognitions (continuing education points / relevance for specialist training, where appropriate) from the respectively competent State Chambers of Physicians
- Evaluation of every event, preferably with feedback to the speakers
- Use of the Electronic Information Distributor (EIV) of the German Medical Association (www.eiv-fobi.de)
- Issue of attendance certificates, indicating the following: name of the organiser, title and date of the event, name of the participant; in the framework of continuing education modules eligible for points, also: the nationally uniform event number (VNR)
and information on the recognising State Chamber of Physicians, as well as the number of continuing education points acquired and the category

- At the request of the recognising State Chamber of Physicians, granting of an insight into all above-mentioned organisational and content-related procedures

**Speakers/Course managers**

- Multi-year medical professional experience and, preferably, current activity in the corresponding field/sector
- Where appropriate, authorisation to provide specialist training in the field/sector (specialist training courses)
- Medical teaching skills, teaching experience, enthusiasm and willingness to encourage discussion
- Practice and participant-oriented presentation of the teaching content, using appropriate, modern media
- Provision of an informative summary in the form of a handout

**Financial interests**

- Continuing medical education must be free of commercial interests
- Sponsoring must be made transparent
- The sponsor may not influence the form and content of the continuing education measure
- Speakers must disclose their connections with industry
- The scientific managers of continuing education events ensure product-neutrality
- Product advertising on the invitations and programmes of single-subject continuing education events is fundamentally not permissible; there are no objections to the advertising of several products by several manufacturers in the programmes of multi-subject events (conferences). The names of sponsors must be indicated
- Objective product information based on scientific criteria is permissible if the active ingredient (generic) is indicated instead of the product name, e.g. by the pharmaceutical industry
- All continuing education measures must communicate a balanced overview of the respective status of knowledge relating to corresponding diagnostic and therapeutic alternatives
- Commercial exhibitions with a temporal or spatial link to continuing education measures may influence neither the concept nor the implementation of the actual continuing education measure
- A commercially backed accompanying programme may neither take place at the same time as the content of the programme proper, nor may it last longer than the continuing education itself
- The admissibility of accepting benefits in kind for attendance at scientific continuing education events is governed by the Professional Code of the State Chambers of Physicians

**Additional quality requirements for media-based continuing education offerings:**

In addition to the quality requirements for attendance-based continuing education events, media-based continuing education offerings must also satisfy the following criteria:

**Organisation**

- Disclosure of, and compliance with, a quality assurance procedure for appraisal of the continuing education offering (review procedure by experts)
- Clear distinction between learning programmes and other parts of the online publication
- Clear references to the possibility of acquiring (the respective number of) continuing education points, with a description of the procedure
- Indication of the duration of the media-based continuing education offering and, where appropriate, the validity period of the recognition granted and the name of the recognising State Chamber of Physicians
- Granting of free access to password-protected continuing education offerings on the Internet to the recognising State Chamber of Physicians
- Minimum time requirement of 45 minutes for processing continuing education modules eligible for points
- Check of learning success (obligatory in the context of continuing education modules eligible for points) with obstacles to obtaining a pass
- Printable online participation certificates must contain the following information: organiser, title and date of the continuing education programme, name of the participant and, in the framework of continuing education modules eligible for points, the nationally uniform event number (VNR) and information on the recognising State Chamber of Physicians
- Compliance with the provisions of data protection law when handling personal data. Users should be able to reject any use exceeding the necessary purpose

**Authorship**
- Clear naming of specialist authors, publisher, publication date and/or version numbers, as well as legal accountabilities
- Guarantee of the high scientific topicality of the content
- Citation method and references to external sources similar to those used in scientific publications in print media

**Financial interests**
- Media-based continuing education modules involving product advertising cannot be recognised; the sponsors of the publication and/or the operator of the website may be named
- Processing of online continuing education modules by the participants may not be disturbed by banners, pop-ups or similar electronic applications
- The linking of continuing education modules to commercial websites is not permissible

As with all other types of continuing medical education, crediting to the continuing education certificate is only possible if the media-based continuing education offering has previously been recognised by a State Chamber of Physicians and rated with continuing education points.
Art. 1
Objective of Continuing Education

The continuing education of physicians is intended to maintain and constantly update their professional competence.

Art. 2
Content of Continuing Education

Taking into account scientific findings and new medical procedures, continuing education is intended to communicate the knowledge of medicine and medical technology necessary to maintain and update professional competence. Continuing education should comprise both specialised and interdisciplinary knowledge and the learning of practical clinical skills. In this context, continuing education should cover all medical disciplines in a balanced manner. Continuing medical education also encompasses the improvement of communication and social skills. Continuing medical education also includes methods of quality assurance, quality management and evidence-based medicine. Nationally applicable, standard specifications regarding the reasonable scope of continuing education are to be observed.
Art. 3

Continuing Education Methods

(1) The physician is free to choose the nature of his/her continuing education. The manner in which knowledge is acquired is to be geared to the individually different forms of learning behaviour.

(2) Insofar as continuing education particularly takes place through participation in continuing education events according to Para. 3 No. 2, the physician should comply with the obligation to undergo continuing education by attending continuing education measures recognised by the State Medical Chamber.

(3) Suitable methods of continuing education include, in particular:
   1. Media-based personal study (e.g. professional literature, audiovisual teaching and learning materials, structured interactive continuing education);
   2. Attendance at continuing education events (e.g. conferences, seminars, group exercises, courses, colloquia, quality circles);
   3. Continuing clinical education (e.g. time as visiting doctor, case presentations);
   4. Curriculum-based content, e.g. in the form of curricular continuing education, specialist training courses prescribed for a specialist qualification under the Regulations on Specialist Training, supplementary courses of study.

Art. 4

Organisation of Proof of Continuing Education

(1) The State Medical Chamber promotes the continuing education of Chamber members by offering its own continuing education measures and by recognising suitable continuing education measures as a basis for proof of compliance with the obligation to undergo continuing professional education.

(2) The purpose of promoting the obligation to undergo continuing education, and of proving compliance with it, is particularly served by the Continuing Education Certificate of the State Medical Chamber (Art. 5), which is awarded, on the basis
of the regulations below, to every physician upon application, subject to the pro-
viso that the regulated requirements are fulfilled.

**Art. 5**

**Continuing Education Certificates of the State Medical Chamber**

A Continuing Education Certificate is issued if, within a period of [three] [five] years prior to application, the physician has completed continuing education measures, the sum total of which reaches the minimum rating of [150] [250] points, determined according to the rules in Art. 6.

Only the continuing education measures regulated in Art. 6 Para. 2 can be considered for acquisition of the Continuing Education Certificate; a further prerequisite is prior recognition of the continuing education measures to be credited pursuant to Art. 7. This does not affect Art. 12. The recognition procedure is governed by Arts. 7 to 11.

**Art. 6**

**Rating of Continuing Education Measures**

(1) The continuing education measures are rated using a points system. The basic unit is a 45-minute continuing education unit. The categories and the details of the rating scale are defined in Para. 2.

(2) The following categories of continuing education measures are suitable for the Continuing Education Certificate and are rated as follows:

- **Category A:** Presentation and discussion
  1 point per continuing education unit; max. 8 points per day

- **Category B:** Multi-day conferences at home and abroad
  If no proof according to Category A or C is furnished:
  3 points per half-day or 6 points per day

- **Category C:** Continuing education whose concept envisages the involvement of every individual participant (e.g. workshops,
working groups, quality circles, Balint groups, work in small groups, supervision, case-based conferences, literature conferences, practical exercises

1. 1 point per continuing education unit
   1 bonus point per event up to 4 hours
2. Max. 2 bonus points per day

Category D: Structured interactive continuing education via print media, online media and audiovisual media with proven qualification and evaluation of the learning success in written form
1 point per exercise unit

Category E: Personal study by means of professional literature/books and teaching materials
A maximum of [30] [50] points for [three] [five] years will be recognised in Category E

Category F: Scientific publications and presentations
1. Authors are awarded 1 point per contribution
2. Speakers/quality-circle moderators are awarded 1 point per contribution/poster/presentation in addition to the points for participants

Category G: Time as a visiting doctor
1. 1 point per hour; max. 8 points per day

Category H: Curriculum-based content, e.g. in the form of curricular continuing education measures, specialist training courses prescribed for a specialist qualification under the Regulations on Specialist Training, supplementary courses of study.
1. 1 point per continuing education unit

Success check: 1 bonus point for Categories A and C
(3) The State Medical Chamber issues supplementary guidelines on the rating of the continuing education measures, these being based on the nationally applicable, standard criteria ["..."]. The guidelines also define the exceptions in which the maximum crediting of rating points may be exceeded in justified exceptional cases in the individual Categories in the event of otherwise equivalent continuing education.

Art. 7
Recognition of Continuing Education Measures

(1) In principle, continuing education measures in Categories A to D, G and H of Art. 6 Para. 2 can only serve as a basis for award of the Continuing Education Certificate if they were recognised by a State Medical Chamber prior to their implementation. For measures in Category F of Art. 6 Para. 2, the physician must furnish suitable proof when submitting the application for award of the Continuing Education Certificate.

(2) Continuing education measures offered by other organisers are recognised in accordance with Arts. 8 and 9.

Art. 8
Prerequisites for Recognition of Continuing Education Measures

(1) Recognition of a continuing education measure presupposes that the continuing education content to be communicated
1. Is in keeping with the objectives of the code of professional conduct and these Continuing Education Regulations,
2. Gives consideration to the nationally applicable, standard recommendations of the State Medical Chambers on quality assurance in continuing medical education (in: "Recommendations of the German Medical Association on Continuing Medical Education") [alternatively: the criteria of the German Medical Association, dated ...],
3. Is free of business interests.
Continuing education should generally be open to all physicians. Organisers and speakers must disclose economic ties with industry to the State Medical Chamber.

(2) A physician must always be appointed to bear scientific responsibility for continuing education measures in Categories A to D, G and H of Art. 6 Para. 2.

Art. 9
Recognition Procedure for Continuing Education Measures

(1) Recognition is granted upon application by the organiser. The application must state the name of the responsible person according to Art. 8 Para. 2.

(2) The Board of the State Medical Chamber adopts guidelines relating to the recognition procedure. In uniform manner for all measures in Categories A to D, G and H of Art. 6 Para. 2 open to consideration, the guidelines define the prerequisites for recognition, based on the criteria of the German Medical Association, in respect of the following details:
1. Application deadlines
2. Content of applications
3. Methods of checking the learning success
4. Lists of participants
5. Participant certificates
6. Special regulations for the recognition of individual categories of continuing education.

(3) The organiser must provide a written declaration of compliance with the recommendations of the German Medical Association pursuant to Art. 8 (1) 2.

(4) The organiser can be commissioned by the State Medical Chamber to send, with the consent of the participating physicians, the proof of their participation in the recognised continuing education event directly to the State Medical Chamber.
Art. 10
Recognition of Continuing Education Organisers

On application, a suitable organiser can be given the promise by the State Medical Chamber, for all the events staged by it or for specific events, that the continuing education events will be recognised without being reviewed individually. Conditions are attached to this promise. It must be ensured in this context that the organiser demonstrably observes the provisions of these Regulations when selecting and rating the events.

Art. 11
Mutual Recognition of Continuing Education Measures

The State Medical Chamber recognises continuing education measures recognised by the chamber of another healthcare profession as a basis for award of a Continuing Education Certificate.

Art. 12
Continuing Education Abroad

(1) Continuing education measures implemented abroad are recognised if they essentially correspond to the requirements of these Continuing Education Regulations. The need for prior recognition can be dispensed with.

(2) The physician must furnish proof of the nature of the continuing education that permits the verification of compliance with the criteria according to Art. 8.
Continuing education as a life-long learning process is a professional duty of physicians. Owing to the prevailing structures, fulfilment of this duty makes cooperation between the medical community and third parties necessary and desirable in many areas.

However, this cooperation must be structured in such a way that neither the good of the patient nor the preservation of physicians' independence is jeopardised at any time.

In particular, this means that the content of continuing medical training must be kept independent of financial interests of third parties and free of commercial influences on diagnosis and therapy in hospitals and private practice.

This results in the following demands:

- Sponsoring must be made transparent
- The sponsor may not influence the form and content of the continuing education measure
- Speakers must disclose their connections with industry
- The scientific managers of continuing education events ensure product-neutrality
- Product advertising on the invitations and programmes of single-subject continuing education events is fundamentally not permissible; there are no objections to the advertising of several products by several manufacturers in the programmes of multi-subject events (conferences). The naming of sponsors is permissible
- Objective product information based on scientific criteria is permissible if the active ingredient (generic) is indicated instead of the product name, e.g. by the pharmaceutical industry
- All continuing education measures must communicate a balanced overview of the respective status of knowledge relating to corresponding diagnostic and therapeutic alternatives
- Commercial exhibitions with a temporal or spatial link to continuing education measures may influence neither the concept nor the implementation of the actual continuing education measure
- A commercially backed accompanying programme may neither take place at the same time as the content of the programme proper, nor may it last longer than the continuing education itself
- The admissibility of accepting benefits in kind for attendance at scientific continuing education events is governed by the Professional Codes of the Federal States.

**Supplementary recommendations for written or audiovisual media**

- Product advertising is not permissible in recognised media-based continuing education modules; the sponsors of the publication and/or the operator of the website may be named
- Processing of online continuing education modules by the participants may not be disturbed by banners, pop-ups or similar electronic applications
- The linking of continuing education modules to commercial websites is not permissible