

UEMO 2001/015

Danish reply to UEMO 2000/042 Amended 2

CME QUESTIONNAIRE

Country:

DENMARK

Organization:

DANISH MEDICAL ASSOCIATION

Name of person completing questionnaire:

Helle Nielsen

Telephone/telefax/e-mail address:

+45 3544 8125/+45 3544 8508/hn@dadl.dk

TO ALL NATIONAL DELEGATIONS

KINDLY COMPLETE THIS QUESTIONNAIRE AND RETURN IT TO THE UEMO SECRETARIAT AT YOUR EARLIEST CONVENIENCE AND HOPEFULLY NOT LATER THAN 28 FEBRUARY 2001.

Note concerning UEMO questionnaire on CME

Preamble

The current questionnaire aims to obtain a status regarding continuing medical education in the individual member organization countries of the UEMO.

As agreed in the CME working group, it was not considered sufficient to attempt to describe the status - there is a need for a more dynamic model by which the UEMO can continuously update its policy in order to keep apace of political developments and in order to facilitate the setting of political targets.

With the starting point in the information on national movements and targets concerning the themes identified in the questionnaire and the identification of national barriers against a desired development of conditions concerning CME, the need for change in the UEMO CME policy can be identified and initiated.

On the background of the above, it is important to request that all delegations respond to the various questions in the questionnaire as fully as possible.

Definition of terms employed

Accreditation - procedures by which an official organ confers formal recognition of the competence of a body or person to carry out specific tasks.

Certification - procedure by which a third party confers written assurance that a product, a system or a person fulfill certain specified ground requirements.

Recertification - procedure by which a third party certifies in writing that the individual doctor fulfills specified CME requirements.

Registration - systematic documentation concerning an individual doctor's CME activities.

Registration systems can involve the setting of quantitative norms. By deciding what can be registered, qualitative norms are incorporated into the process.

Comments:

- Is the current status (or direction) desirable from the point of view of the GP's?

yes X no

- Are there specific barriers to the attainment of the goals set?
(use extra sheet if necessary)

3. Does recertification take place?

If yes, who is responsible for recertification?

- Central authorities?

yes no X

- Medical organizations?

yes no X

- Other

yes no X

Please specify: _____

Does recertification take place on the background of quantitative CME registration?

yes no

Are qualitative CME factors taken into consideration?

yes no

- If yes, please give a brief summary of these qualitative factors:

Are special diplomas issued following completion of courses? yes no X

- If yes, does this diploma system result in a form of sub-specialization of general practitioners in your country? yes no X

Comments:

- Is the current status (or direction) desirable from the point of view of the GP's? yes X no

- Are there specific barriers to the attainment of the goals set? (use extra sheet if necessary)

4. Resources

Who finances CME?

- Doctors? yes X no

- The authorities? yes X no

- The industry? yes X no

(check one or more of the above)

Are there other inducements than economic ones? yes no X

- For example, collegial recognition in academic organizations? yes no X

- Other? yes no

Please specify: _____

Comments:

- Is the current status (or direction) desirable from the point of view of the GP's? yes no X

- Are there specific barriers to the attainment of the goals set?
(use extra sheet if necessary)

6. Influence on CME on practice

- Is there any collective method to measure the influence of CME on the individual practice?
(use extra sheets if necessary)

NO
